

A good
start for
every child

Enabling our children and families
to lead happy, healthy lives.

Families and
communities looking
after themselves
and each other

London Borough of Havering Starting Well Ofsted Improvement Plan

31 May 2024

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Introduction

The outcome of our Ofsted inspection in December 2023 was the culmination of sustained challenges for Havering Council, and in particular Children's Services (Starting Well). We have been working within a challenging context of increasing demand linked to the unprecedented significant growth in Havering's population.

The 2021 census data evidenced that Havering has seen a 10.5% increase in the number of people living in the borough, compared to a 7.7% increase across London and a 6.6% increase across England. However, the number of children aged under 18 had increased by 15.2%, significantly outpacing the 4.8% and 3.9% increases in London and England, respectively. Havering now has a higher proportion of children aged 0-17 (22.3%) than 80% of local authorities in England. This increase has continued since 2021 and the Office for National Statistics (ONS) predicts that the 0-17 population in Havering will continue to grow to 61,350 by 2031. The growth is further evidenced by the allocation of the DfE Basic Needs Funding for new school places in 2023-2024, which shows Havering received 57% of the whole of London's 33 Borough allocation.

This increase in demand and population has been compounded by the on-going effects of the Covid-19 pandemic, which had a disproportional effect on the population in Northeast London and the cost-of-living crisis, both of which continue to have a profound impact on our residents. Significant investment has been made into Children's Services by the Local Authority, with an additional £20m invested during the period 2011 to 2023. However, this in the context that funding for Children's Social Care is still set using 2011 data which does not reflect our current population pressures. Despite the Council's challenging financial circumstances, which has resulted in a £54m capitalisation directive to address the current shortfall in funding to balance the budget, we have continued to prioritise funding to Children's Services.

In 2023-24 an additional £8m was put into Children's Services to address pressures including the development of two additional social work teams alongside growth required to cover the £4.6m overspend (caused by rising costs in accommodation for Children in Care and Home to School transport pressures).

A further £0.64m was also invested in 2023-2024 as an 'invest to save' to grow our own workforce by having an additional 10 ASYE Social workers per year over a 3-year period (total investment will be £1.92m). An additional £9.2m has been added in 2024 – 2025 to cover the 2023–24 overspend of £9.2m caused by workforce (use of agency), accommodation for children in our care and home to school transport pressures.

Despite the investment, we know we have not yet achieved our corporate ambition of enabling Havering children to live happy, healthy lives and as such we have let our children and families down, which cannot continue.

Our Starting Well Improvement Plan is focused on the journey we need to take towards better outcomes for our children, young people and families. Ofsted have told us that we are focused on the right actions to successfully deliver our improvement plan and we will increase the pace of change over the next six months.

This is the first version of the Starting Well Improvement Plan developed as part of our commitment to drive the changes highlighted in our self-evaluation alongside the recommendations and areas for improvement outlined in the Ofsted report. It is a fully costed

plan of c£5m that will require significant investment. The £2m additional money for social care awarded to Havering will be used entirely for children's services to offset this.

The Starting Well Improvement Plan is structured under four key themes;

- Embedding a **Stable and Able Workforce**
- **Improving Practice** to achieve consistently good outcomes for children and young people
- **Removing Barriers** to support improving Practice
- **Governance, Leadership and Management Oversight**

Whilst the Ofsted report is a judgement on the Local Authority Children's Services, improving outcomes for children is not something that can be achieved by the Local Authority alone. Our safeguarding partners are integral to delivering the necessary improvements and driving change at every level of their respective organisations. We also need to ensure that the voices of those who receive our services (children, young people and families) are central to helping us understand what difference we are making, and the changes required.

We are committed to investing in our workforce as our greatest asset, ensuring that Havering is a well led, supportive and progressive place to work. It is now more than ever that children need us to advocate for them, instigate and influence change on their behalf and ensure that we lay the foundations for them to thrive.

We are committed to being aspirational for every child and young person in Havering, particularly those in our care, and enabling them to enjoy the best opportunities in life, be encouraged and supported to aim high to achieve their ambitions.

We look forward to continuing our work across social care, education, and our wider partnership, building a culture of aspiration to achieve improved outcomes for children and families.

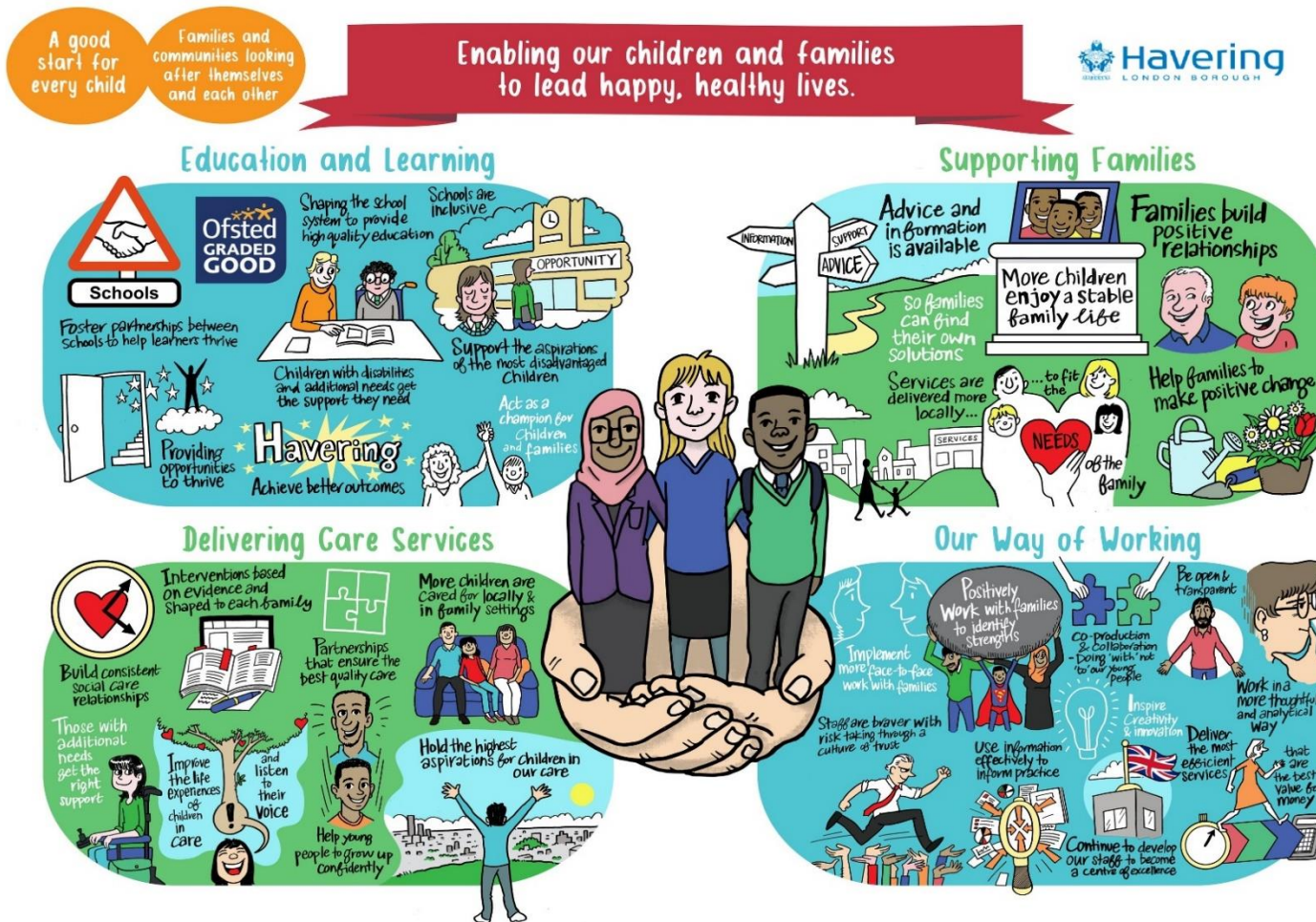
Governance and Oversight of the Improvement Plan

Our social work practice improvement plan in Havering is overseen through the independently chaired **Practice Improvement Board (PIB)**. The PIB is operationally responsible for implementing the plan and assessing its impact on social work practice by;

- Overseeing and driving continuous improvement, innovation and consistency of high quality, excellent practice delivery.
- Scrutinising and challenging the quality of practice to identify and prioritise where improvement is required. Alongside identifying and celebrating good performance.
- Aligning with other forums/governance to avoid duplication and to use reports presented to other groups to inform its oversight of practice improvement.
- Steering and influencing targeted audit activity.
- Influencing and determining appropriate finance and allocation of resources to meet key objectives.

The PIB will report into a strategic **Practice Improvement Oversight Board (POIB)** chaired by the Chief Executive of the Council, which includes a representative group of elected members, Safeguarding Partners and the Department for Education Improvement Advisor who will set the overall objectives and monitor and assess the effectiveness of the improvement plan.

Our Vision for Children and Young People



Hearing and responding to the voice and lived experiences of children and families in all that we do

1. Stable and Able Workforce	2.Improving Practice to Achieve Consistently Good Outcomes	3.Removing Barriers to Improving Practice	4.Governance, Leadership and Management Oversight
Deliver a social care structure that has sufficient capacity to meet the needs of children and families	Ensure that all cohorts of children are seen alone, where appropriate, and within suitable timescales, with recorded purposeful, planned and focused direct work	Develop a robust Starting Well Communications Plan for both internal staff and external partners	Secure further corporate and political investment to deliver improvement plan and necessary resources.
Improve recruitment, induction and retention of staff through delivering our workforce strategy with explicit career pathways	Improve the quality and timeliness of all assessments, plans and reviews with a focus on management oversight and achieving stability for the child	Review of all processes and forms within our Case Management System (Liquid Logic) to reduce inefficiencies, and secure investment to improve where required	Coordinate a cycle of quality assurance activity across the service to drive practice improvement and develop a 'high support - high challenge' culture
Review and update all training and development programmes for all staff in line with 10 days of training offer	Work with partners to develop consistency in application of thresholds, improve quality of referrals and raise awareness of early help and targeted support offer	Review use of technology and equipment to support practice e.g. 4G enabled laptops and AI apps pilot for supervision –	Improve quality and consistency of management oversight and supervision supported by training, coaching and practice modelling
Refocus our systemic model of practice and embed across all service areas	Review and update our response to cohorts of children (CiN, CP, CiC) including private fostering, children placed with parents and children living in supported accommodation	Review and relaunch of all tools for direct work and engaging children and young people e.g. Mind of My Own and Life Story App	Review and improve our corporate parenting approach, ensuring that we have an effective strategy and corporate parenting panel
Take annual health check of the workforce survey	Review and update our response to contextual safeguarding, vulnerable adolescents and transitional safeguarding	Improving the way we use our performance data to identify and respond to emerging needs	Review Starting Well governance structure, ensuring clear routes of escalation and decision making
Update and embed our Case Recording Standards, Practice Standards and our Staff Guide	Review processes for oversight and decision making across all areas of practice, including the independent reviewing service	Review of management systems (Fusion, LXP, Power BI) to give greater management oversight of practice	Ensure clarity on roles, responsibilities and expectations with regards to quality assurance – it is everyone's business

Equality, Diversity and The Social Graces are considered in all aspects of practice, and our support offer to staff

Havering Improvement Action Plan

Theme One; Embedding a ‘Stable and Able’ Workforce - **Strategic Lead**; Principal Social Worker for Children

1. Service Structure

Ref	Priority	Delivered through	Lead Person(s)	Target Completion Date	Dependencies and Key Stakeholders	Impact on Quality	Key Performance Indicators	Cost	Update May '24	RAG rated
1.1	Develop and embed a fit for purpose structure that enables best practice to thrive and delivers good social care services that improve outcomes for children and families	Launch and implement Phase One of the Social Care Reorganisation (Safeguarding and Corporate Parenting) Structure can be found at Appendix A	Tara Geere, Director of Starting Well	Consultation; May 2024 Implementation; July 2024	Assistant Directors and Service Managers HR Business Partner Finance Business Partner Trade Unions	Children and young people will be able to access the right service at the right time Improvements will be seen on the quality and timeliness of interventions Children and Families will be able to access specialist and early intervention services as required	Average and Maximum Caseloads – ASYE, SW and AP Average waiting time for EH Services and number of families waiting % permanent SWs and managers % and number of children in care experiencing more than 2+ SW's	£3.3m however given the use of agency staff this is likely to be closer to £4.m	Successful launch occurred in April 2024. HR and finance sign off being completed by the end of May for implementation by the end of July	Green
1.2	Once delivered, ensure that the new structures and the names of people in post are effectively communicated to our safeguarding partners	Launch and implement Phase Two of the Social Care Reorganisation (Early Help and Partnerships) Structure to be added as Appendix B when finalised		Consultation; September 2024 Implementation; November 2024		Evidence in quality assurance activity that increased stability is resulting in children building trusting relationships with their workers	% and number of children experiencing 3+ changes of SW in the last 12 months.	To be costed as part of Autumn restructure currently projecting c£0.51m	Work has commenced on developing structures	
1.3	Development of an improvement team to support the Improvement plan agenda	Recruitment of 1 x Independent Chair, 1x Improvement lead post, two times Improvement practitioners and 2 x additional auditors to support the improvement plan	Tara Geere, Director of Starting Well	April 2025	HR Business Partner Finance Business Partner	Improvement delivered to target completion dates Increased QA activities with increased challenge and oversight evidenced Including ongoing training	QA activity increases including Dip sampling Suite of QA monthly reports produced with improved Audit Compliance % children monitored through CIN/ CP / CIC panels	£0.44m Grant bid to DfE for x1 additional auditor post £0.121m	Recruitment and on-boarding has occurred and improvement activity started. These costs will be reviewed after the first year of the plan.	Green

2. Recruitment, Induction and Retention

Ref	Priority	Delivered through	Lead Person(s)	Target Completion Date	Dependencies and Key Stakeholders	Quality Assurance Indicators	Key Performance Indicators	Cost	Update	RAG rated
2.1	Review and implement consistent on-boarding process for all new staff.	Single point of contact in HR for permanent and agency staff recruitment	HR Talent Manager Head of Innovation and Improvement Principal Social Worker	July 2024	HR operational team HSCA Head of Service for Practice Starting Well Talent Consultant	Feedback from newly appointed staff on effectiveness of on-boarding Timely recruitment process measured by length of time for on-boarding.	Fusion reports on probation periods Time from application to commencement in role	G7 - £0.058m Talent Consultant within HR	Work has commenced and Starting Well Talent Consultant appointed	
2.2	Development of an induction and information pack for all staff, with specific information for managers and supervisors and information on systemic training.	Review and update current pack and the process for induction by Heads of Service / Service Managers Bespoke induction for specific teams, such as the Children in Care Team re the health / education pathways and transition planning, Leaving Care on transitional safeguarding etc. (see 3.1)	Principal Social Worker Children's Head of Service for Practice	July 2024	Assistant Directors and all Starting Well management team HR Talent Manager	Staff feedback identified good awareness of structures, resources and procedures as well as the offer by the HSCA. Probationary period meetings provide assurance that staff are fully inducted and understand their roles and responsibilities, including keeping their practice up to date.	All staff having completed induction (LXP reporting) Training uptake reports (LXP)	See 3.4	Induction materials in development	
2.3	Embed use of Learning Experience Platform (LXP) for training with data set evidencing staff uptake	Interface with the HSCA and corporate L&D team	HSCA L&D Manager	In use from May 2024 Data set from June 2024	Learning & Organisational Development Team	Uptake and impact of training Response to feedback in improving training offer	To be developed / in progress	£0.002m	Launch of LXP has started with regular meetings to ensure training programme is updated	
2.4	Ensure annual health check of the Starting Well workforce	Full council annual workforce survey to inform a workforce action plan to support improvements Alongside the LGA employer standards health check for social care staff	Principal Social Worker Children's HR Talent Manager	September 2024	Starting Well Management Team	Senior leaders have access to the data that identifies challenges facing the workforce and are able to respond accordingly	Proportion of staff completing survey Workforce satisfaction Workforce sickness days	N/A	Staff wellbeing survey planning has started linked to the council staff any comments to add	

3. Training, Development and Model of Practice

Ref	Priority	Delivered through	Lead Person(s)	Target Completion Date	Dependencies and Key Stakeholders	Quality Assurance Indicators	Key Performance Indicators	Cost	Update	RAG rated
3.1	Implementation of core, mandatory bite-size rolling training programme for all staff groups	Training programme with clear priorities for specific roles and service areas in core areas of training and development e.g. assessments, analysis, risk management, permanency, child protection processes, chairing meetings, case recording and pathways for accessing specialist advice / training	Principal Social Worker Children's Head of Service for Practice	September 2024	AD's /Service Managers / Heads of Service Improvement Leads	Training Evaluation / Feedback Quality assurance activities (including Audit findings) evidences positive impact on practice in identified areas Improved performance in supervision quality and timeliness	Training Attendance (numbers / percentages including data on perm vs agency training) Feedback / voice of staff (LGA Health Check 360 Skills for Care Tool / practice Week) % Staff satisfaction survey % of staff achieving 'performing well' or better in their PDR % Supervisions completed in timescales % of Leaving care staff trained in adult safeguarding	See 1.3	Training has commenced on assessments x 52 practitioners Further dates scheduled in June	
		Updated training brochure via LXP and HSCA learning dataset providing information of uptake	HSCA Business Manager	July 2024	Principal Social Worker's	Improved Audit compliance Case recording evidences timely management oversight and rationale for decision making which is improving outcomes for children and young people		See 2.3	Recruitment to the HSCA manager post taking place in May	
		Introduction of a programme of thematic training for managers and supervisors, initially focusing on team managers and the quality and impact of supervision and management oversight.	Head of Service for Practice	Roll out to start by July 2024				See 1.3	Training programme currently in development	
		Develop and roll out joint training for the new CIC / leaving care teams with the NELFT LAC health teams via the ICB and improvement team	Head of Service for Corporate Parenting	October 2024				See 1.3	HOS now meeting with the ICB and providers to commence planning	

Ref	Priority	Delivered through	Lead Person(s)	Target Completion Date	Dependencies and Key Stakeholders	Quality Assurance Indicators	Key Performance Indicators	Cost	Update	RAG rated
		Development of bespoke training for managers in leaving care and wider safeguarding partnership with regards to Care Act Assessment Section 42 Safeguarding and transitions planning	Principal Social Worker Children's / Principal Social Worker Adults	October 2024			See above	See 1.3	Meeting set for June to commence planning	
3.2	Development of career progression pathways (skills matrix)	ASYE programme of support (HSCA) and CSW support in practice, alongside performance reports	Principal Social Worker Children's	In Place; April 2024 Review; October 2024	Team managers Service Managers / Heads of Service	Direct feedback from NQSWs via Career Progression Panel and Skills for Care 360	Length of service / ASYE retention post qualification Number of management vacancies appointed to externally / internally Training uptake and impact	N/A	Embedded 3 monthly reports on ASYE career progression / feedback with tracking of caseloads by PSW now in place	
		Y2 PQ aimed at bespoke support / retention post Career progression panel	HSCA Professional Development Manager	June 2024	HR People Establishment Head of Service for Practice			N/A	PSW Children's and HSCA manager to update as part of work planned in July	
		Establishing set competencies for aspiring practitioners AP/ TM and embed into career progression panel framework, with links to CPD and PDR	HSCA	September 2024	CSW Manager & Team			N/A	Work to be developed as part of the new PSW – Children's role in September	
		Changes to supervision template to ensure career progression is discussed and actioned as part of supervision and PDR monitoring	Strategic Improvement Leads	June 2024	Principal Social Worker Children's			N/A	Template has been developed and currently being tested in the LCS test environment	

Ref	Priority	Delivered through	Lead Person(s)	Target Completion Date	Dependencies and Key Stakeholders	Quality Assurance Indicators	Key Performance Indicators	Cost	Update	RAG rated
3.3	Update, alignment and relaunch of; Practice Standards Case Recording Standards Staff Guide For all staff and managers	Improved access to information which supports staff, managers and supervisors on practice expectations within policies and procedures	Head of Service for Practice	End of July 2024	Principal Social Worker Service Managers / Heads of Service / Team Managers	Consistency in practice evidenced through routine audit activity Improvement / consistency in quality of case recording evidenced through audit activity	% visits and supervisions recorded with 72 hours % of management decisions recorded within 24 hours Proportion of all children with systemic interventions and group supervisions recorded (<i>New 2024/25</i>)	N/A	Practice Standards are in development with planned launch by the end of July 2024	Yellow
		Consistency in application of the practice model and thresholds across all service documents	Principal Family Therapist	October 2024	Head of Innovation & Improvement		Proportion of new staff who have undertaken induction % of supervisions undertaken within relevant timescales	N/A	Permanent Recruitment to post planned for July with work from SLIP to support model of practice to happen in the Autumn	Red
3.4	Mandatory Systemic Training to embed model of practice in all interventions especially supervision, assessments and visits	A programme of SLIP support through DfE including accredited year 1 & supervision training delivered by Centre for Systemic Social Work for permanent staff, including year 2 accreditation	Head of Service for Practice Principal Social Worker	September 2024	Recruitment to systemic roles Centre for Systemic Social Work	Evidence of systemic approach in practice recording seen through audit activity Quality assurance activity provides assurance of good quality children's assessments which take all significant needs into account and evidences application of systemic thinking.	Proportion of permanent staff who have a systemic training qualification Reduction in complaints Proportion of all staff who have undertaken systemic training Rate of CiN, CP and CiC who exit intervention successfully	£164,000 SLIP grant bid through the DfE	Meetings with CfSSW have occurred and bid submitted to DfE. Awaiting confirmation of DfE allocation panel	Red
		In-house training programme that promotes Face to Face model of practice	Principal Family Therapist	December 2024		Staff feedback evidences that systemic training is providing practitioners with confidence and clarity in their work with children and young people		Linked to train the trainer part of above	Permanent Recruitment to manager post planned for July with work from SLIP to support model of practice to happen in the Autumn	Red

Ref	Priority	Delivered through	Lead Person(s)	Target Completion Date	Dependencies and Key Stakeholders	Quality Assurance Indicators	Key Performance Indicators	Cost	Update	RAG rated
3.5	All relevant policies, procedures and processes are easily available and understood	Content review of Tri-X developing an options appraisal for continuation of use	Head of Service for Practice	April 2025	Sufficient recruitment / capacity to undertake necessary tasks	All relevant documents are available on Tri-X Quality assurance activity evidences that social work practice with children and families is informed and compliant with relevant policies and practice standards.	Confirm what data is available with regards to use of Tri-X % of audits rated Good or better	£0.0010m	TriX review of content has started and will continue during June and July	
		Defined roles and responsibilities for maintaining Tri-X established		April 2025	Improvement Leads and QA Team			N/A	Review to inform processes started to be completed by July	

4. Caseloads and Stability of Workforce

Ref	Priority	Delivered through	Lead Person(s)	Target Completion Date	Dependencies and Key Stakeholders	Quality Assurance Indicators	Key Performance Indicators	Cost	Update	RAG rated
4.1	Critically analyse and reduce caseloads via incremental targets, and set agreed capacity for case holding teams	CiN, CP and CiC Panels to identify children where it is recommended intervention can step down or close	Strategic Improvement Leads	Commence April 2024 All CIN / CP / CIC to have been reviewed by September Embed process of review by December	Performance & Business Intelligence Team Principal Social Worker Children's Starting Well Managers	Reduced Caseloads for staff QA undertaken by Improvement leads then embedded with routine manager activity Improved quality of practice as seen through audit activity with increased capacity	Average and maximum caseloads across assessment teams, safeguarding teams and corporate parenting teams against incrementally reducing targets as per the monthly data set	See 1.1	CIN / CP and CIC panels have commenced Average caseloads are reducing from December 2023	
		Reviewing Power BI to develop caseload reporting as part of the performance dataset	PSW Children's / Head of Innovation and Improvement	July 2024				N/A	PowerBI reports now being run daily and data now routinely available within the monthly performance dataset	
		Develop and implement caseload weighting tool	Principal Social Worker Children's	July 2024	HSCA Professional Development Manager	HSCA Professional Development Manager		N/A	Work has commenced and launch is due by Sept. to support new structures	

Ref	Priority	Delivered through	Lead Person(s)	Target Completion Date	Dependencies and Key Stakeholders	Quality Assurance Indicators	Key Performance Indicators	Cost	Update	RAG rated
4.2	Develop guidance in relation to protected caseloads and expert practitioner roles for NQSW and ASYE	Close monitoring of NQSW experience in ASYE to create targeted approach to wraparound support for year 2 post qualifying.	Principal Social Worker Children's HSCA Professional Development Manager	June 2024	Head of Service for Practice Starting Well Managers	Improved quality of practice as seen through audit activity with increased capacity Successful completion of ASYE seen through the Career progression panel and ASYE portfolio completion	% of retention of SWs in years 2, 3 and 4 post qualifying	N/A	Work has commenced as above	
4.3	Workforce stability ensures children, young people and families benefit from stable and meaningful relationships and engagement with social workers.	Relaunch of workforce strategy that promotes stability and retention of staff	Principal Social Worker Children's	October 2024	Re-org Phase One and Phase Two Recruitment / HR AD Safeguarding and Corporate Parenting AD Early Help and Partnerships	Retention of workforce A reduction in the changes of worker for children and young people seen through data and QA activity Planned handovers and appropriate endings seen in audit activity	% of CiC with 2 or more changes of SW within 12 months Feb 24; 9.1% Target; 25% % all children with 3 or more changes of SW within 12 months Feb 24; 10.4% Target; 10%	N/A	Workforce board to meet in June 2024 – strategy due to be completed by October	
4.4	Ensuring our staff feel supported, cared for and that their health and wellbeing is priority	Undertake review of our approach to understanding and improving staff morale and welfare, and the factors that are impacting upon this and make recommendations as required	Principal Social Worker Children's	November 2024	Starting Well Managers HR	Engagement and feedback from staff with regards to wellbeing Increased staff attendance at regular Director drop-ins	Responses from staff surveys and feedback mechanisms	N/A	Phase one restructure to deliver additional PSW capacity and recruitment to the PSW Children's service may delay some activity - Staff survey planned for October.	
		Introduction of monthly Starting Well Star Awards to recognise achievements and good practice across social care and education	Tara Geere, Director of Starting Well	June 2024	Starting Well Senior Leadership Team	Prevalence and consistency of award programme, and feedback from staff / managers	Number of awards given out, and the reasons for these	N/A	Commenced in May 2024 linked to Council Star Awards	

Theme Two; Improving Practice

Strategic Lead(s); Assistant Director for Early Help and Partnerships, Assistant Director Safeguarding and Corporate Parenting

5. Early Help, MASH and Partnerships

Ref	Priority	Delivered through	Lead Person(s)	Target Completion Date	Dependencies and Key Stakeholders	Quality Assurance Indicators	Key Performance Indicators	Cost	Update	RAG rated
5.1	Ensuring that children, young people and families are offered the right help and support at the right time	A review of wait times and associated processes for Early Help Services	Service Manager Early Help, MASH and Edge of Care	June 2024	Early Help Operational Board Early Help Partnership Board AD Early Help and partnerships / SM	Reduced waiting time and evidence of effective management oversight of any families on waiting lists Evidence through quality assurance activity of increased awareness and uptake of universal and early help services	Average wait time for EHS, and number of families waiting (New 2024/25 - Four weeks maximum) Number of children stepped up and stepped down to / from EHS to statutory social care Feb 24; 156 Usage of FIS website	N/A	Review has commenced and findings to be shared in June. Linked to phase two reorganisation to add capacity to teams as appropriate. Recruitment to AD EH has commenced interviews in June	
		Scrutiny of Power BI and KPIs at Performance Meetings	All Service Managers	April 2024	Head of communications			N/A	This is now routinely occurring at service level and monthly performance meetings	
		Review of structure within the Early Help Service to ensure we can meet demand in a timely way	Tara Geere, Director of Starting Well	November 2024	Director of customer Services / Customer services Operations Manager			See 1.2	Phase two has commenced with implementation due in the Autumn	
		Full review of the FIS / FSD content and website functionality, in conjunction with development of corporate website	Family Information Service Manager	December 2024				£0.0025m	Review of hosting has commenced linked to the corporate refresh of the corporate website	

Ref	Priority	Delivered through	Lead Person(s)	Target Completion Date	Dependencies and Key Stakeholders	Quality Assurance Indicators	Key Performance Indicators	Cost	Update	RAG rated
5.2	Review of transfer protocol and the processes and standards associated with case transfer at every point in the system, including step-up and step-down	Full review of allocations and all transfer decision making processes for children including; UASC Contextual Safeguarding CWD Early Help (Family Practitioners) OOB Transfers Targeted Youth Services Court Orders Unborn Children	Service Manager Early Help, MASH and Edge of Care Head of Service for Assessment and CWD	August 2024	Head of Service for Safeguarding Head of Service for Corporate Parenting Service Manager for Early Help and Targeted Family Support Performance and Business Intelligence Team	Timeliness of transfers and allocations Quality of decision making, and management oversight evidenced for step up and step down Audit activity evidences a comprehensive understanding of thresholds for intervention across the directorate. Targeted actions identified and completed from CIN, CP, and CiC panels The interface between early help and statutory work is clearly and effectively differentiated.	Number of children stepped down and stepped down from statutory to non-statutory intervention, via the correct pathway Feb 2023/24; 166 Proportion of transfers accepted and declined (<i>New 2024/25</i>) Step-up / step-down data set for all key transfer points within the service (<i>New 2024/25</i>) % of assessments with outcome of NFA Feb 2023/24; % of contacts with an outcome of NFA Feb 2023/24; 20.7% % of referrals with an outcome of NFA Feb 2023/24; 4.8% Target; 5%	See 10.2	Review of transfer protocol has taken place. Some changes are still required, and meetings are planned to finalise the protocol. Timeliness of transfers is improving and a formal escalation process is being developed, Ongoing HSCP multi-agency audit of children who moved into Havering from another borough spring/summer 2024- 1 child per month	Yellow
		Ensure Practice Standards includes transfers following review	Head of Service for Practice	October 2024				N/A	Practice standards work has commenced	Green
5.3	Ensure that children and young people in need of help and protection are identified by professionals, and appropriate referrals are made to relevant services	Implementation of multi-agency referral and threshold working group and MASH partnership meeting to review case decisions	Service Manager Early Help, MASH and Edge of Care	Review September 2024	Safeguarding Partnership Statutory Partners Schools, Education Providers and Designated	% of MASH multi-Agency audit outcomes that meet good criteria and evidence of practitioners responding to findings QA activity evidences that children and families are not subjected to unnecessary repeat interventions	Number of children with multiple contacts within the last six months Q4 ChAT; 910 % of contacts progressed to Early Help Services (including signposting) 2023/24; 37.7% Target; 35%	N/A	Monthly MASH audit partnership meeting re in place. MASH partnership meetings are taking place regularly. Regular MA audits commenced in May 2024	Green

Ref	Priority	Delivered through	Lead Person(s)	Target Completion Date	Dependencies and Key Stakeholders	Quality Assurance Indicators	Key Performance Indicators	Cost	Update	RAG rated
	Relaunch and embed aligned threshold criteria across safeguarding partnership and within service practice standards.	Embedding early help and preventative intervention offer within safeguarding partnership	Partnership and Learning Manager, HSCP	December 2024	Safeguarding Leads	Audit outcomes for cases with a re-referral show appropriate changes in circumstances, or new information Audit activity evidences use of the threshold document to articulate the support needs and risks to children in multi-agency referral forms.	% of referrals progressing to assessment 2023/24; 93.1% Target; 95% % of re-referrals within 12 months 2023/24; 18.6% Target; 18% % of contacts progressing to referral 2023/24; 26% Target; 30%	N/A	Early Help & Preventative intervention offer to be promoted through briefings Safeguarding Website and learning events	
		Rolling programme of training for partner agencies on the early help offer and MASH thresholds.	Head of Service for Practice	September 2024				N/A	Training programme in place with targeted work based on audits and referrals	
		Scrutiny of data and audits on repeat referrals to identify what action is needed to reduce these.	Head of Service for Practice	July 2024				N/A	Dip sampling has commenced on a monthly basis to understand threshold application	
		Monthly Performance Meeting and Power BI scrutiny alongside programme of multi-agency audits	Service Managers and QA Team	May 2024				N/A	Monthly performance meeting now in place with Power BI reports available	
		Multi-agency review of multi-agency referral form (MARF) to ensure it is succinct and enables all relevant information to be shared via the MASH Steering Group	Partnership and Learning Manager, HSCP AD Safeguarding and Corporate Parenting	October 2024				N/A	Regular multi-agency audits commenced in May 2024	
		Relaunch of Safe and Together training across EH, MASH, Assessment, Safeguarding, IRO's CIC and leaving Care - integrating DV informed practice	AD Safeguarding and Corporate Parenting	November 2024				TBC	All EH, MASH and some assessment staff have now undertaken safe and together training. Starting to see improvements in EH interventions	

Ref	Priority	Delivered through	Lead Person(s)	Target Completion Date	Dependencies and Key Stakeholders	Quality Assurance Indicators	Key Performance Indicators	Cost	Update	RAG rated
5.4	Children and young people are protected through effective multi-agency arrangements at Strategy Meetings	Review of recording of Strategy meetings on LCS to establish what can be reported on and amend where needed.	Head of Service for Assessment and CWD	July 2024	Police Schools / Education Providers NELFT	Quality of decision making, and case recording of strategy meetings improved Timeliness of follow up actions	Timeliness of strategy meetings, (held within one working day – serious risk of harm); Complex strategy meetings and extra familial risks – up to max of 5 days; preferably sooner – (London CP Procedures – 4.20). MASH – RED contacts completed within 4 hours. Partner agency attendance at strategy meetings (New 2024/25)	See 10.2	Review of recording of strategy meetings will commence in June 2024	
		Ensure there are clear processes, expectations and responsibilities for coordinating strategy meetings outlined in Practice Standards including invitations to school nursing and NELFT LAC health team	Head of Service for Practice	July 2024	Social Care Systems Team Performance and Business Intelligence Team	Quality of timely action plans for children at Strategy Meetings Quality assurance activity evidences high quality and impactful contributions from multi-agency partners		N/A	Strategy meeting chairs and attendees are now using the threshold document, London CP Procedures and Barnado's risk assessment to inform decision making.	
		Develop a safeguarding partnership data set for Strategy Meetings to include timeliness and attendance from partner agencies, to enable escalation of issues.	Partnership and Learning Manager, HSCP	November 2024				N/A	Working with Partners re improving the dataset Q&E working group planned on 9/7/24	
		Recruit 2 x Child protection coordinators to support Strategy Meeting minute taking	Head of Service for Practice	August 2024				See 1.1	Phase one reorganisation consultation launched in April	

Ref	Priority	Delivered through	Lead Person(s)	Target Completion Date	Dependencies and Key Stakeholders	Quality Assurance Indicators	Key Performance Indicators	Cost	Update	RAG rated
5.5	Review of Early Help Strategy to broaden scope and increase awareness of early help offer, particularly services offered within the Voluntary and Community Sector.	Engagement with partnership via Early Help Partnership board and relevant associated forums Addition of 6 th priority to focus on use of volunteers Alignment with SEND and AP Strategy and Adolescent Safeguarding Strategy	Service Manager for Early Help and Targeted Family Support AD Early Help and Partnerships	September 2024	Safeguarding Partnership Youth Justice Service SEND Service Schools and Education Providers	Increased involvement and engagement with VCS groups at operational forums Evaluation of referrals to ensure consistent application of threshold	Publication of refreshed Early Help Strategy Indicators as per EHS Strategy Action Plan	N/A	Recruitment to the AD for EH has commenced with interviews in June 2024. Service manager has started review of strategy.	
5.6	Increased awareness and uptake of Family Group Conferencing for all families that would benefit from them, at all stages of intervention including those working with the Youth Justice Service	Increase capacity in the FGC team to enable greater volume of FGCs to take place	Service Manager for Early Help and Targeted Family Support	November 2024	Phase 2 Re-Org Starting Well Service Managers	Quality assurance activity evidences that FGCs are considered and undertaken in all cases where they could be beneficial Audit activity provides assurance with regards to the quality and effectiveness of FGCs that take place	Number of FGCs undertaken, and the case status of the families involved	£0.046m	Phase two implementation has commenced	
		Increase awareness and understanding across all social care teams with regards to benefits and impact of FGC, and where they can be most effective		December 2024				N/A	Plans are in place to increase capacity in the service. The FGC team due to attend team meetings across CSC and Youth Justice Services to promote the FGC service and to increase referrals.	

6. Targeted Services and Interventions

Ref	Priority	Delivered through	Lead Person(s)	Target Completion Date	Dependencies and Key Stakeholders	Quality Assurance Indicators	Key Performance Indicators	Cost	Update	RAG rated
6.1	Adolescents and children facing risks including those outside the home receive well-coordinated responses that reduce harm or risk of harm.	A review/ update of governance and strategy for Adolescent / Contextual Safeguarding including improvements to the LCS pathway	AD for Early Help and Partnership AD for Safeguarding and Corporate Parenting	September 2024	Community Safety Safeguarding Partnership Schools / Education Providers	Scheduled auditing of children subject to contextual safeguarding risks	Number of children with contextual safeguarding recorded as a hazard (New 2024/25)	N/A	Phase two Reorganisation is now commencing with workshops to design new structures Appointment of AD roles started in May 2024 HSCP Exploitation multi-agency T&F group to begin chaired by AD	
		Review of roles, responsibilities and ownership of the Havering Adolescent Risk Management (HARM) Panel and MACE Panels		September 2024	Phase 2 Re-Org Head of Service for Safeguarding	Improved quality and effectiveness of risk assessments and safety plans presented to HARM Panel	Number of active contextual safeguarding plans (New 2024/25)	N/A	Review planned for July 2024; Advert out for HOS EH has not been successful - AD recruitment process as above	
		Improved identification of contextual safeguarding factors at CiN / CP and CiC reviews	Head of Service for Practice	September 2024	Head of Service for Corporate Parenting NELFT / ICB	Evidence of children discussed and management oversight at MACE and HARM Panels	Number of children with contextual safeguarding factors identified at CiN / CP and CiC reviews (New 2024/25)	N/A	Temporary IRO managers now recruited to. Adverts to go out as part of phase one implementation	
		Practice standards for response to contextual safeguarding, including implementation of safeguarding consultations	Head of Service for Practice	October 2024		Improved quality and timeliness of decision making and response to actions from HARM Panel	Number of children with a positive NRM (New 2024/25) Breakdown of child protection plans and assessment factors by category of abuse	N/A	HOS for practice has started work on the practice standards and this will include the new ADs once appointed to	
		Improvement in coordination of community response to identified concerns / issues with targeted disruption and prevention activity	Service Manager for YJS and	December 2024				N/A	Work commencing in July 2024	

		LIIA Contextual Safeguarding Self-Assessment linked to the YJS Service Plan	Specialist Safeguarding	September 2024		See above	See above	See 1.2	As above work to start in July 2024	
		Develop and embed our approach to Sexually Harmful Behaviour / Sexual Abuse including pathways for relevant services across the partnership	AD for Early Help and Partnerships AD Safeguarding and Corporate Parenting	November 2024				N/A	As above work to start in July 2024	
		Agree and implement contextual safeguarding model including pathways outside of child protection		September 2024				N/A	Creation of IRO and Child protection chairs and the appointment of a CINRO has begun	
6.2	Children who go missing from home or care receive help to reduce the risk of harm, and are helped to understand how to keep themselves safe	Audit of Return Home Interviews (RHIs)	Head of Service for Practice	July 2024	Safeguarding Partnership Schools / Education Providers	Review of the impact and learning of RHIs in reducing missing episodes and better understanding missing triggers for individual children Targeted auditing of children missing from home and care in the last twelve months Review of targeted disruption activity to understand impact Data and information from Mind of My Own Impact of mentoring on RHIs	Number of children missing from home 2023/24 YTD; 211 Number of children missing from care 2023/24; 123 % offered RHI with 72 hours, and those accepted 2023/24 YTD; Offered 29.8% (Target 85%) Accepted; 62.6% (Target 75%) Missing dataset including information from HARM and MACE panels (New 2024/25)	N/A	Audit is planned for July	
		Review processes and procedures to reduce risk when children go missing, ensuring these are understood across the partnership, including the timeliness of return home notification	AD Early Help & Partnerships	September 2024				N/A	Planned work as part of the Contextual Safeguarding process development	
		Missing from home and care guidance is current and has all partner agency contributions.	Head of Service for Practice	September 2024				N/A	Part of the TriX review and Contextual Safeguarding development	
		Introduce and embed the use of Mind of My Own for children returning from missing episodes	Service Manager for YJS and Specialist Safeguarding	September 2024				£0.0017m	Purchased module on Mind of My Own. implementation to commence in July	

		HARM Panel to regularly review and respond to push / pull factors identified in RHIs and target disruption activity	AD Early Help & Partnerships	September 2024		See above	See above	N/A	Planned work as part of the Contextual Safeguarding process development	
		Access to mentoring service for children who are regularly going missing	Service Manager for YJS and Specialist Safeguarding	July 2024				N/A	Planned work as part of the Contextual Safeguarding process development	
6.3	Social workers, managers and other professionals accurately assess factors that make children more vulnerable and tailor interventions appropriately	Ensure overview and pathways of early help and our prevention offer is included as part of induction for all new staff and is shared across the partnership	Head of Service for Practice	September 2024	Joint Commissioning Unit Head of Service for Safeguarding Head of Service for Corporate Parenting	Increase in children / families accessing support that is specific to their needs evidenced through QA activity Feedback from children / families with regards to outcomes	Use of referrals dataset at end of interventions (<i>New 2024/25 - developing</i>) % of children in care for more than a year with identified substance misuse problem, and how many were offered and received an intervention Feb 24 Identified; 4% (Target); 5% Intervention; 14.3% Offered but refused; 75%	N/A	Being developed as part of the practice standards and HSCP Multi – Agency training HSCP Conference Nov 24- Transitional Safeguarding theme, including workshop with Dez Holmes for Statutory Partners	
		Increased awareness, referrals to and uptake of services available for specific needs and concerns i.e. Child Sexual Abuse, substance misuse, mental ill-health, SEND	Adolescent Safeguarding Board Action Plan - AD EH	September 2024	Adolescent Safeguarding Board Safeguarding Partnership	Evaluation of the application and use of the threshold document through dip sampling		N/A	Planned work as part of the Contextual Safeguarding process development	
		Ensure processes are in place to support identification and response to new and emerging risks in relation to contextual safeguarding as part of Practice Standards	Head of Service for Practice	July 2024	Schools / Education Providers	Timeliness and quality of HARVAs and evaluation of the impact of the assessment in reducing risk	Proportion of CP, CiN and CiC with contextual risks identified at their last review (<i>New 2024/25</i>)	N/A	Being developed as part of the practice standards and HSCP Multi – agency training	
		Improved use of Havering Adolescent Risk and Vulnerability Assessment for all adolescents	Service Manager for YJS and Specialist Safeguarding	September 2024				N/A	Planned work as part of the Contextual Safeguarding development	

		Evaluation of our prevention offer to understand gaps and develop a tiered offer in response, including commissioned services	Service Manager for Early Help and Targeted Family Support	August 2024		See above	See above	N/A	Planned work as part of the Contextual Safeguarding process development	
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7. Safeguarding (Children in Need of Help and Protection)

Ref	Priority	Delivered through	Lead Person(s)	Target Completion Date	Dependencies and Key Stakeholders	Quality Assurance Indicators	Key Performance Indicators	Cost	Update	RAG rated
7.1	All assessments are timely and proportionate to risk; they are informed by research as well as the historical context and significant events for each child. Assessments are dynamic and updated in the light of emerging issues and risks Children are seen as part of all assessments and direct work is imaginative and informative. A systemic framework ensures practitioners exercise the use of curiosity and consideration of	Embedding the updated assessment template	Strategic Improvement Leads	July 2024	Heads of Service	Assurance through dip sampling that review assessments of children take place routinely following changing in circumstances	% of assessment completed within specified timescales (all bandings) 2023/24; 72. % within 45 days Target; 85% % children seen during an assessment Q4 ChAT; 92% Target; TBC % children seen more than once during an assessment (New 2024/25) Breakdown of assessment outcomes (New 2024/25) Early Help Assessments completed within 25 working days Feb 24; 89.1% Target; 95%	N/A	Assessment template has been developed and is in the LCS test system for launch in July	
		Ongoing auditing of assessments by QA team to evaluate performance and impact of training, coaching sessions.	Head of Service for Practice Improvement Lead	From April 2024	Service Managers Team Managers Social Care Systems Team Havering Social Care Academy	Use of research and direct work evidenced in assessments seen through QA activity Quality of decision making in assessments with an outcome of NFA Quality of analysis within assessments specifically risk and protective factors to be evaluated through dip sampling Targeted multi-agency audit activity to evaluate quality of assessments Routine auditing to provide assurance that practitioners are routinely enabling children and young people to engage effectively in assessments		N/A	Monthly audits are now embedded and April compliance by managers of audits was 81% completion with improvements seen in practice and grading profiles.	
		Best Practice Briefing on writing good quality assessments for children alongside assessment training to all staff and delivery of rolling programme	Head of Service for Practice	June 2024				N/A	Briefing shared with all staff and placed on SharePoint	
		Implement practice and management standards; ensure IRO & CP chair standards are in line with IRO Handbook & Working Together 2023/ LCPP and recirculate	Head of Service for Practice	July 2024				N/A	Being developed as part of the practice standards	

Ref	Priority	Delivered through	Lead Person(s)	Target Completion Date	Dependencies and Key Stakeholders	Quality Assurance Indicators	Key Performance Indicators	Cost	Update	RAG rated
	the lived experience of the child and their family. Ensure there is a clear exploration of difference, and factors of race, equality and equality as well as understanding any barriers to engagement	guidance to all staff regarding key elements in good quality assessments with clear focus on quality of analysis.				and their voices are consistently well reflected and acted upon				
		Practice standards to be included in staff induction processes.	Head of Service for Practice	July 2024			See above	N/A	Practice standards in development	
		Ensure as part of staff induction all staff have access to Care Knowledge and routinely use learning to inform best practice.	Principal Social Worker	May 2024				£0.0017m	Care Knowledge procured roll out has started	
7.2	Consistent and high quality management scrutiny and oversight and decision making when evaluating and signing off assessments	Coaching, mentoring and training to all Team Managers and APs aspiring to be future managers.	Head of Service for Practice	June 2024 and ongoing	Starting Well Managers	Feedback from managers and practitioners	% of core groups completed in time 2023/24; 64.8% Target; TBC	See 1.3	Improvement team are rolling out training and 1:1 mentoring with managers	
		Audit of assessments post sign off to evaluate quality of management oversight and scrutiny and level of challenge.	Improvement lead and auditors	June 2024	HSCA	Routine auditing to identify timely and effective supervision with clear time bound actions that are tracked from session to session	Time taken for managers to sign off assessments (New 2024/25)	N/A	Dip sampling of assessments has occurred as part of the PIB target on assessments this will continue as part of regular audits	
		Consistent use of systemic consultations and group supervision embedded within practice standards	Head of Service for Practice	July 2024	Quality Assurance Team	Increase in IRO and CPC escalations, and evidence of impact	Number of assessments with systemic supervision or consultation recorded. (New 2024/25)	See 3.4	Practice standards in development	
		Oversight through CiN, CP and CiC panels	Panel Chairs	Commence April 2024 Embed Sept 2024	Principal Systemic Family Therapist	Routine auditing to provide assurance that drift and delay for children is identified swiftly and remedial action taken and tracked	% of assessments with at least one supervision or management oversight recorded (New 2024/25)	N/A	Panels have commenced. Reviewed 168 children at CP panel, 430 children at CIN panel and 46 at CiC panel	

Ref	Priority	Delivered through	Lead Person(s)	Target Completion Date	Dependencies and Key Stakeholders	Quality Assurance Indicators	Key Performance Indicators	Cost	Update	RAG rated
7.3	Children in Need of Help and Protection are consistently seen , and seen alone Children are supported to share their wishes and feelings freely and independently from the views of parents, carers or other adults in their lives	Development of practice standards for each service on the expectations relating to purposeful visits to see children and young people.	Head of Service for Practice	July 2024	Service Managers for Safeguarding x2 Staff in Safeguarding Service	Routine audit activity to provide assurance of the timeliness and quality of visits to children with evidence of routine, purposeful visiting that result in a clear analysis by the social worker recorded on the child's file Supervision records evidence management oversight is ensuring that children are seen alone and that visits are purposeful, informed by the child's plan and reflect current circumstances	% of CIN visited within the last 4 weeks Target; 90% Feb 2024; 75.4% % of CP visits within the last 15 days Target; 90% Feb 2024; 92% <i>(changing to 10 days)</i> % of families with active early help assessments visited at least once a week <i>(new 2024/25)</i> % of children seen alone at their last visit <i>(New 2024/25)</i> % of supervisions undertaken within appropriate timescales	N/A	Practice standards in development	
		Ensure there is a robust QA approach to monitoring impact of visits.	Head of Service for Practice / Improvement Lead	July 2024				N/A	Monthly audits are now embedded with children seen as a key focus alongside timeliness of visits	
		All management meetings to consistently report on timeliness of visits for all children through use of Power BI reports and monthly datasets	Head of Service for Safeguarding	May 2024				N/A	Routine use of Power BI and monthly performance tracking now in place	
		Review of uptake and usage Mind of My Own training, and target those who are not routinely using the app to engage children and young people to understand barriers	Service Manager for Early Help and Targeted Family Support	September 2024				See 10.4	To be rolled out post Phase one implementation	
7.4	Children in need of help and/or protection have a plan clearly setting out how their needs will be met, how risk will be reduced within the timescales appropriate for	Delivery of core training to all staff on how to create and deliver high quality, SMART, well targeted plans for children that are purposeful and focused in line with the practice model.	Head of Service for Practice	Available from September 2024	AD Safeguarding and Corporate Parenting Virtual School	Feedback from parents, children and young people on the quality of their plan and outcomes achieved Assurance through audit activity and CiN/CP panels of the effectiveness and timeliness of CiN and CP Plans for children	Proportion of children with a CIN or CP plan; the duration of the plan and time since last review <i>(New 2024/25)</i> Proportion of CiN plans open for more than 9 months <i>(New 2024/25)</i> Proportion of CP plans closed within three months;	See 1.3	Improvement team are currently developing training for roll out post assessment training	

Ref	Priority	Delivered through	Lead Person(s)	Target Completion Date	Dependencies and Key Stakeholders	Quality Assurance Indicators	Key Performance Indicators	Cost	Update	RAG rated
	<p>the child, with clear priorities and goals for all involved.</p> <p>Plans reflect the wishes and feelings of the individual children, are relevant to families, and are written in an accessible way, with clear measures of success.</p> <p>Families are engaged in the planning process, and interventions are more effective as a result, leading to better outcomes.</p>	Ongoing scrutiny and targeted action from both CIN and CP panels	Panel Chairs	Commencing by April 2024		Assurance through audit activity of the timeliness and effectiveness of CiN reviews and RCPCs for children	YTD 2023/24; 14.3% Target; 9%	N/A	Panels now in place and ongoing reviews are occurring with escalations to the AD as appropriate	
		Developing clear practice standards. Ensure there is an effective quality assurance loop to ensure consistency of practice.	Head of Service for Practice	July 2024		Routine auditing to provide assurance that practitioners are routinely enabling children and young people to engage effectively in planning and their voices are consistently well reflected and acted upon	Proportion of current CP plans open for more than 12 months; Q4 ChAT; 18% Target; 18% CiN plans updated in last six months YTD 2023/24; 95.8%	N/A	Practice standards in development	
		Quality assurance activity targets planning and plans to ensure they are routinely updated in response to changing circumstances and emerging risks	Head of Service for Practice	July 2024		Feedback from partners on the impact of interventions	Number of children with CiN and CP plans who are accessing advocacy services, those who have been offered, accepted (New 2024/25)	N/A	Improvement team is currently developing training for roll out post assessment training	
		Ensuring that clear processes and expectations are in place for CIN/CP plans that are shared with safeguarding partners in a proportionate way e.g. DSL in child's school	Head of Service for Safeguarding	July 2024		Feedback via Mind of my Own	% of school age children with CiN and CP plans that have an up to date Personal Education Plan (New 2024/25)	N/A	Practice standards in development	
		Ensuring that all school age children in need of help and protection have a Personal Education Plan and are provided with support, if needed, via the Virtual School	AD for Education	September 2024				N/A	Plans are in place further work to look at quality due in September 2024	
7.5	Neglect is effectively recognised and responded to.	Embedding the use of the neglect toolkit across the service and wider partnership	AD Safeguarding and Corporate Parenting	October 2024	Safeguarding Partnership	Monthly auditing and child protection panel to provide assurance that all relevant children have a robust assessment and neglect	% of children with neglect identified as a factor in their assessment or plan Q4 ChAT CP Plans; 52% Q3 Assessments; 11.2%	N/A	Training to be rolled out by September 2024	

Ref	Priority	Delivered through	Lead Person(s)	Target Completion Date	Dependencies and Key Stakeholders	Quality Assurance Indicators	Key Performance Indicators	Cost	Update	RAG rated
		Refresh of Partnership Neglect Strategy	Partnership and Learning Manager, HSCP	April 2025	Schools / Education Providers	toolkit completed and that this routinely updated, and actions tracked by practitioners and managers.	Number of contacts with neglect as the reason; YTD 2023/24; 1429 / 15.6%	N/A	Being developed	Red
		Targeted quality assurance activity focused on children where neglect is the primary reason for involvement	Head of Service for Practice	Planned for October 2024	NELFT - Designated Nurse for Safeguarding Children		Outcomes of contacts and assessments with neglect as a reason (New 2024/25)	N/A	Planned for October 2024	Green
7.6	All parents, carers and family members are supported, where appropriate, to be involved in providing support for the child, and keeping them safe, particularly family members or parents who are otherwise absent from child's life	Child Protection Chairs and IROs as well as SWs and TMs ensuring absent family members / parents are routinely included in assessment and planning for children, with theses expectations being clear within practice standards.	Head of Service for Practice	July 2024 and ongoing	Social Care Systems Team	Clear evidence that absent parents and family members are invited to attend conferences and are routinely and meaningfully included in assessments, plans and reviews. Targeted audit activity to capture involvement/contribution of absent family members at key points	Reduction in complaints regarding family members not involved in care planning	N/A	Roll out of assessment training now in place further work on planning and plans due by the Autumn. Majority of staff in the assessment service have completed the assessment training.	Yellow
		Review of LCS recording of regarding absent family members to ensure they can be identified	Service Manager for Standards	September 2024				See 10.2	Improvement team will audit in September cross referencing with CP chairs and IRO's on absent parents	Red
7.7	Effective and timely planning, support and decision-making takes place during pre-proceedings work .	Review of all cases in PLO and authoritative action being taken to bring children into care where appropriate	AD for Safeguarding and Corporate Parenting	September 2024	Court Progression Manager Head of Service for Corporate Parenting Performance and Business Intelligence Team	Oversight and scrutiny of PLO progression for children at CP Panel Oversight and scrutiny of PLO progression for children by Court Progression Manager and routine reporting to senior managers Routine audits to provide assurance of the	% of PLO completed within 12 weeks. % of PLO completed within 16 weeks (extended with the agreement of the Assistant Director, Safeguarding and Care Planning). Average time between LPM and getting to PLO	N/A	A review of all children in PLO commencing in June 2024. Tracker template being reviewed by improvement lead to strengthen oversight of timescales to ensure authoritative action is taken as necessary	Yellow

Ref	Priority	Delivered through	Lead Person(s)	Target Completion Date	Dependencies and Key Stakeholders	Quality Assurance Indicators	Key Performance Indicators	Cost	Update	RAG rated
		Review outcomes of all Supervision Orders to ensure quality, effectiveness and appropriateness of decision making	Head of Service for Safeguarding	July 2024		timeliness and quality of PLO letters to parents and reports to court	Reduction in number of children subject to long term CP plans (18 months+) Number of children with supervision orders	N/A	Audit to be undertaken in June 2024 by the improvement team	
		Permanent recruitment of Court Progression Manager	Head of Service for Safeguarding	July 2024				See 1.1	Due as part of phase one implementation	
		Review of the PLO and proceedings case tracker and development of an integrated systems tracker	Court Progression Manager Head of Innovation and Improvement	September 2024				See 1.3	Tracker template being reviewed by improvement lead to strengthen oversight of timescales to ensure authoritative action is taken as necessary	
		Development of PLO and proceedings data set with clear measures and targets		November 2024				N/A	As above	
7.8	Develop dataset, and review system processes, for homeless and NRPF families (including 16- and 17-year-old homelessness) to track outcomes, with a view to target audit and improvement activity	Addition of hazard on LCS for NRPF and 16 / 17 Homeless	Service Manager for Early Help, MASH and Edge of Care	September 2024	Housing Services (Living Well)	Routine audit activity to provide assurance of the timeliness and effectiveness of the identification and assessments of families with NRPF and homelessness	Assessments with housing / homelessness identified as a factor (<i>New 2024/25</i>) 16/17-year-old homelessness contact outcomes (<i>Under review</i>)	See 10.2	LCS pathway being developed. Improvement team have delivered training to the assessment team	
		Development of assessment pathways for NRPF and 16/17-year-old homeless		November 2024	Early Help Services (Universal Plus)			See 10.2	As above in LCS development work	
		Development NRPF and 16/17 year old homeless dataset		November 2024	Head of Service for Safeguarding	Dip sampling to provide assurance of the timeliness and effectiveness of the identification and support to 16- and 17-year-old homeless	Universal Plus referrals / outcomes (Quarterly Report) NRPF episodes triggered on LCS (<i>New 2024/25</i>)	See 10.2	As above in LCS development work	
		Refresh of Children's and Housing Joint Protocol for 16/17 year old homeless and families with NRPF	AD Early Help and Partnerships	January 2025	Performance and Business Intelligence Team			N/A	Protocol to be relaunched in June	

Ref	Priority	Delivered through	Lead Person(s)	Target Completion Date	Dependencies and Key Stakeholders	Quality Assurance Indicators	Key Performance Indicators	Cost	Update	RAG rated
7.9	End to end review of services provided to children with disabilities , including raising awareness across the partnership around the additional vulnerabilities of children with disabilities and SEND	Specific training programme for staff in the CWD services focusing on CiN / Short Breaks / CP / CiC pathways and communication models	Head of Service for Practice	Available from September 2024	AD for Education Services	Routine quality assurance activity (including audits) to provide assurance of the identification and quality of intervention across the partnership for children with disabilities and SEND	% of CWD assessment completed within specified timescales (all bandings) (New 2024/25) % of disabled children seen during an assessment, and those seen more than once (New 2024/25) Proportion of CWD assessments with an outcome of NFA, and those that progress to further intervention or step-down (New 2024/25) Proportion of assessments with disability factors identified (New 2024/25) Proportion of children with CiN or CP plans and with an EHCP or SEN Support (New 2024/25)	See 1.3	Training programme currently in development to be rolled out to team once phase one reorganisation has been implemented	
		Re-organisation of the CWD and SEND services (Phase one and two)	Tara Geere, Director of Starting Well	November 2024	Safeguarding Partnership			See 1.1	Launched in April 2024 due for implementation in July	
		Review of pathways for Short Breaks and commissioning arrangements	AD Safeguarding and Corporate Parenting	October 2024	Recruitment of all roles in CWD service			N/A	To be developed as part of LCS developments	
		Review of CWD cohort and targeted QA activity as part of review of service	Head of Service for Practice	November 2024	Schools / Education Providers			N/A	In Improvement schedule of Work CIN and CP panel reviewing	
		Development and implementation of SEND and AP Strategy	Head of SEND	September 2024	SEND Parent / Carer Forum			N/A	In development	
		Refresh of LAP SEND Self-Assessment		March 2025	Family Information Service Manager			N/A	Workshops and SEND board reviewing	
		Review and update of SEND Local Offer in conjunction with parents / carers, PCF and young people		December 2024	Virtual School			£0.002m	Workshops and SEND board reviewing	
		Coproduced workshop with parents on developments required within CWD services	Head of Service for Assessment and CWD	December 2024				N/A	Workshops being planned	
7.10	Improve quality and timeliness of child protection conferences	Re-organisation of the IRO service with adequate business support to meet demand	Tara Geere, Director of Starting Well	July 2024	Safeguarding Partnership Performance and Business	Feedback from children / families with regards to conference experience	% of ICPCs completed within 15 days (children) YTD 2023/24; 66.2% Target; 82%	See 1.1	Phase one reorganisation successfully launched due for implementation by July	

Ref	Priority	Delivered through	Lead Person(s)	Target Completion Date	Dependencies and Key Stakeholders	Quality Assurance Indicators	Key Performance Indicators	Cost	Update	RAG rated
	and reviews including role of the child protection chairs	Recruitment and retention of staff within the IRO service to meet demand.	Service Manager for Standards	September 2024	Intelligence Team Schools / Education Providers NELFT / BHRUT	Attendance and quality of input and analysis from professionals at conferences	% of S47's not resulting in an ICPC YTD 2023/24; 64.2% Target; 50%	See 1.1	Phase one reorganisation due for implementation by July	
		Review of current processes and pathways to ensure efficient, timely workflow and responses	Child Protection Business Manager	September 2024		Routine audit activity to provide assurance of the timeliness and effectiveness of the quality of child protection plans	% of ICPC that result in a CPP Q4 ChAT; 79% Target; % of RCPC completed within timescale YTD 2023/24; 98.6% Target; 95%	See 10.2	currently underway as part of the restructure for IRO's and CP chair split	
		Developing clear expectations and practice standards with regards to timeliness and quality of multi-agency contributions	Head of Service for Practice	July 2024		CP Panel to provide additional assurance to senior leaders with regards to quality of decision making, threshold application and effectiveness of child protection plans	% of child protection minutes shared with family within 21 days of conference (<i>New 2024/25</i>)	N/A	Practice standards in development	
		Training for all service areas on roles and responsibilities of the child protection chairs and business support.	Head of Service for Practice	July 2024		Child protection data set and Power BI reports	% Children who attend or contribute to their child protection conference or review (<i>New 2024/25</i>)	N/A	Review of Processes underway as part of the restructure for IRO's and CP chair split to be linked to the practice standards	
		Understand and make recommendations for actions to reduce the rate of S47 not requiring an ICPC	Head of Service for Practice	August 2024		Reduction in S47's not resulting in ICPC		N/A	Dip sampling and auditing completed in May. Practice observations being undertaken by Senior managers and improvement team.	
		Review of Designated Safeguarding Leads attendance at conferences and reviews as well as information sharing within MASH to support child protection processes	Service Manager for Standards	August 2024				N/A	LCS reports being developed and CP chair monitoring now in place	

Ref	Priority	Delivered through	Lead Person(s)	Target Completion Date	Dependencies and Key Stakeholders	Quality Assurance Indicators	Key Performance Indicators	Cost	Update	RAG rated
7.11	Improved response to children who are privately fostered , including better identification of those living in such circumstances and awareness raising within the partnership	Reviewed Statement of Purpose setting out how the authority discharges its duties in relation to the private fostering legislation.	Head of Service for Corporate Parenting	July 2024	Schools / Education Providers NELFT Early Help Partnership Board Corporate Communications Team	Audit activity targeted at children who are privately fostered Partners and practitioners identify children who are privately fostered swiftly and respond accordingly Annual Private Fostering Report to go to the HSCP for scrutiny. Annual reviews of PF carers to ensure they continue to meet PF regulations.	Numbers of children in private fostering arrangements, and length of time known (<i>New 2024/25</i>) % / number children in private fostering arrangements visited within last six weeks (<i>New 2024/25</i>) % / number of children who are privately fostered with an active CiN plan and an allocated SW (<i>New 2024/25</i>)	N/A	Being reviewed for July	
		Action plan with regards to raising public and professional's awareness about private fostering and, the requirements to notify the Local Authority of any actual or planned private fostering arrangements	Partnership and Learning Manager, HSCP	December 2024				£0.00075m (Design Costs)	7-minute briefings and awareness raising has commenced including out of school settings and health settings. Termly letters are going to Head teachers / DSLs in education and health settings as part of private fostering response. All private fostering arrangements have been reviewed and further oversight is being undertaken at CIN panel.	
		Action plan with regards to improving awareness, understanding and identification of children in private fostering arrangements within Starting Well and wider Council	Head of Service for Corporate Parenting	October 2024				As above Design Costs	In development	
		Termly response from schools and health partners on private fostering arrangements	Partnership and Learning Manager, HSCP	September 2024				N/A	Spring 2024: 42 schools responded; 6 children identified. MASH checking referrals	

Ref	Priority	Delivered through	Lead Person(s)	Target Completion Date	Dependencies and Key Stakeholders	Quality Assurance Indicators	Key Performance Indicators	Cost	Update	RAG rated
7.12	Develop and improve our Edge of Care response to support children, young people and families to stay together and get the help they need	Review of the Families Together Team to understand impact	AD for Early Help and Partnerships	November 2024	Permanency Panel	Quality assurance provides evidence of children in care, or at risk of coming into care, who are successfully reunified with their parents or family members	Rate of CiC per 10k Q3 2023/24; 44	N/A	To be undertaken once AD in place	
		Phase 2 of starting well reorganisation to align the Families Together Team and Family Practitioner offer	Tara Geere, Director of Starting Well	November 2024	CP / CiN Panel	Quality assurance activity evidence that children coming into care in a planned way	% of CIC aged under 16 who had been looked after continuously for at least 2.5 years who were living in the same placement for at least 2 years Feb 2024; 66.2% Target; 70%		Structures being developed and implementation due in Autumn	
		Introduction of Family Support Workers within our Safeguarding Teams, and reduction in use of PKS	AD Safeguarding and Corporate Parenting	August 2024	IROs and CP Chairs	Audit activity evidence that the stability of children in care placements is being prioritised and promoted	% of CIC with three or more placements during year Feb 2024; 10.4% Target; 11% Children returning home and then rate of repeat interventions		Phase one launch in April with implementation due in July	
7.13	Unborn Children at risk of harm are identified in a timely way, and appropriate action taken to safeguard them	Further development and relaunch of Pre-Birth Assessment Template and associated processes	Head of Service for Safeguarding	June 2024	BHRUT - Designated Midwife for Safeguarding	Audit activity targeted at unborn children evidences that processes are initiated earlier to allow improved quality of assessment / planning	Number of pre-birth assessments, and the outcomes of these (New 2024/25)	N/A	The draft pre-birth protocol is being revised for roll out in July.	
		Strengthening of the PLO tracker process for unborn children	Court Progression Manager	September 2024	Head of Service for Corporate Parenting		% of audits of pre-birth assessments rated Good or above	N/A	In process, PLO tracking developments being undertaken	
		Delivery of a parent and child commissioning Dynamic Purchasing System	Simon Brown, Commissioner and Project Manager	By April 2025	EHS – Parenting Offer		Number of parent and child placements (New 2024/25)	TBC	In process as part of sufficiency work within new commissioning team	

8. Children in Our Care

Ref	Priority	Delivered through	Lead Person(s)	Target Completion Date	Dependencies and Key Stakeholders	Quality Assurance Indicators	Key Performance Indicators	Cost	Update	RAG rated
8.1	Strengthen decision making for children in care to improve outcomes	Clear practice standards and expectations regarding decision making and quality of assessments including timescales	Head of Service for Practice	July 2024	Service Manager for Standards	Audits evidence impact of supervision and management oversight on progression of child in care plan	% of CiC records with supervision in the last two months Feb 2023/24; 57.5% Target; 90%	N/A	Practice standards in development	
		Development of a monthly legal tracking meeting to ensure authoritative action is taken to support planned entry to care where appropriate	AD for Safeguarding and Corporate Parenting	June 2024		Evidence of assessments informing care planning through audit activity Appropriate timeliness of decisions for children to come in to care and evidence of effective threshold application	% of CiC with 2+ changes of social worker within the last 12 months Feb 2023/24; 9.1% Target; 25% % of CiC with 3+ placements within the year Feb 2023/24; 10.4% Target; 11%	N/A	In development	
		Practice fundamentals training, including understanding and application of thresholds	Head of Service for Practice	July 2024			% children who cease to be looked after as a result of permanency (Adoption / SGO) Feb 2023/24; 4.2% Target; 12%	N/A	Roll out of training due after phase one implementation	
		Embedding consistent and timely reviews for child in care with clear SMART plans focused on permanence and regular updated assessments	Head of Service for Corporate Parenting	July 2024			Number of children who cease to be looked after because they returned home to live with parent / relative Q3 2023/24; 18/53	N/A	Roll out of training due after phase one implementation ; interim service manager to start in June 2024	

Ref	Priority	Delivered through	Lead Person(s)	Target Completion Date	Dependencies and Key Stakeholders	Quality Assurance Indicators	Key Performance Indicators	Cost	Update	RAG rated
8.2	Children and young people in care live in secure and stable homes that best meet their needs and where they feel safe	Comprehensive review of all children in care who are; -Living in foster homes to ensure matching -Living in regulation 24 or 25 placements -Returned home within the last six months -Living in residential children's homes to ensure home is meeting need -Living in supported accommodation	Head of Service for Corporate Parenting	Commenced May 2024 Embed by September 2024	All Age Brokerage Team	Targeted dip sampling of the outcomes for children returned home Targeted dip sampling of children subject to Regulation 24/25 placements Oversight and scrutiny at permanency panel Dip sampling of cases discussed at MARP and the impact of the decisions made at the panel	Proportion of CiC in specific placement types Number of children living in semi-independent accommodation Feb 2023/24 (16-year-olds); 5/30 Feb 2023/24 (17-year-olds); 19/48 Children matched long term fostering at panel (<i>New 2024/25</i>) Number of placement support / disruption meetings (<i>New 2024/25 - TBC</i>) Short-term and long-term placement stability % Number of family therapist interventions for CiC (<i>New 2024/25</i>) Number of IRO escalations specific to accommodation / stability (<i>New 2024/25 – TBC</i>)	N/A	Permanence Panel now in place and reviews of children occurring. Matching panels to be arranged once team is in place.	
		Ensure that the Multi-Agency Resource Panel (MARP) is effective in securing accommodation and support services that best meets the child's needs, and escalates concerns with regards to sufficiency of suitable accommodation	Panel Chair	October 2024	NELFT / BHRUT Schools / Education Providers			N/A	MARP in place with agreed TOR. Joint protocol with the ICB is in development	
8.3	Ensuring Children in Care placed with their parents , are safe and risk assessed with ongoing assessment and support	Review and update all current assessments and placement with parents plans	Head of Service for Corporate Parenting	June 2024	Permanency Panel Service Manager for Standards	Targeted dip sampling of children placed with parents to provide assurance with regards to quality of decision making and effectiveness of management oversight	Number of children in care who placed with parents Feb 2023/24; 9 / 279 % visits to children placed with parents within agreed timescales (<i>New 2024/25</i>)	N/A	Reviews and updated assessments taking place - Panel planned with DCS chairing in June.	
		Embed Children Placed with Parents review process and ensure appropriate management sign off with appropriate visiting and support arrangements	Head of Service for Corporate Parenting	June 2024				N/A	Improvement Team oversight and policy review as part of TriX review	

Ref	Priority	Delivered through	Lead Person(s)	Target Completion Date	Dependencies and Key Stakeholders	Quality Assurance Indicators	Key Performance Indicators	Cost	Update	RAG rated
		Ensure all children placed with their parents' decisions are ratified by the IRO, and presented at Permanency Panel and agreed by AD or DCS	AD Safeguarding and Corporate Parenting	June 2024				N/A	Panel set for June and then ongoing through Permanence panel	
8.4	Improving the effectiveness and impact of IRO's on outcomes for children in care	Implementation of ratification of plan for permanency and stability for the child at second CiC review	Service Manager for IRO's / Head of Service for Practice	September 2024	Head of Service for Corporate Parenting	Evidence of appropriate timeliness and quality of IRO escalations and the subsequent responses from managers Quality assurance activity evidences effective, SMART plans for children in care that are focused on securing permanence Timely preparation for independence for young people leaving care evidenced through auditing	Number / % of CiC with IRO escalations recorded (<i>New 2024/25</i>) Contribution by CiC to their statutory reviews (full breakdown) (<i>New 2024/25</i>)	N/A	Processes being reviewed, implementation as part of phase one reorg split of CP chairs and IRO's by September Policies to be reviewed as part of TriX review	
		Ensuring that IROs ratify transition planning and consideration within the pathway plan by 15 years 9 months	Service Manager for IRO's	September 2024				See 1.1	As above	
		Expectations and standards with regards to IRO escalation, and resolving disputes	Head of Service for Practice	June 2024				N/A	Practice standards in development – Escalation policy being reviewed.	
		Add additional capacity to the IRO management to support improvements	Head of Service for Practice	June 2024				£0.130m	Interim Service manager appointed	
		Clarifying and developing QA role of IRO within practice standards	Head of Service for Practice	July 2024				N/A	Practice standards in development	
8.5	Plans for children in care are thoroughly and independently reviewed with the involvement,	Review of CiC LCS process and expectations with regards to practice standards	Head of Service for Practice Head of Service for Corporate Parenting	October 2024	Schools / Education Providers NELFT Head of Service for Practice	The timeliness and quality of CiC review minutes to practitioners and family members	% of minutes being recorded on the system within 20 days of CiC review (<i>New 2024/25</i>)	See 10.2	In development as part of phase one development of corporate parenting service	

Ref	Priority	Delivered through	Lead Person(s)	Target Completion Date	Dependencies and Key Stakeholders	Quality Assurance Indicators	Key Performance Indicators	Cost	Update	RAG rated
	as appropriate, of parents, carers and other adults who know them well	Improve quality and timeliness of child in care review minutes through supervision; audit and training.	Senior Corporate Parenting Coordinator	October 2024		Consistency in the presentation and content of CiC review minutes	% of review minutes shared with family within 20 days of review (New 2024/25)	N/A	Development with IRO service taking place as part of the phase one changes to the service	
		IRO's make effective use of Dispute Resolution Process where plans are not being effectively and timely progressed for children in care.	Service Manager for IRO's	September 2024				N/A	Practice standards in development – Escalation policy being reviewed.	
8.6	Permanency planning is appropriate, ambitious and focused on ensuring that all children in care have stable, loving homes	Re-establish Permanency Panel to thematically review all children in care, ensuring effective planning to avoid drift and delay.	AD for Safeguarding and Corporate Parenting	April 2024	Business Support Team Managers	SWs, TMs and IROs are consistently focused on achieving and securing permanence planning for children and young people	Proportion of children returning to family home or to live with relatives, in line with permanency plan (New 2024/25)	N/A	Panel now in place	
		Establish practice standards for early permanence, including ensuring all children have a clear plan for permanence by week five of their care journey.	Head of Service for Practice	July 2024		SWs, TMs and IROs are consistently considering and evaluating whether children can return home	Proportion of children with a permanency plan for adoption or SGO Q3; 4% Target; TBC	N/A	Practice standards in development linked to development of Corporate Parenting service as part of phase one restructure	
		Improving quality and frequency of supervision for social workers in children in care teams	Strategic Improvement Leads	December 2024		Quality and effectiveness of assessments of connected and kinship carers	Number of children with repeat care episodes Q4 ChAT; 10% Target; TBC Proportion of children in care who remain in care until their 18 th birthday Feb 2023/24; 90.6% Target; 80% % of children achieving long-term stability	N/A	Mentoring to team managers has commenced. Training roll out for supervision planned as part of SLIP practice model training Supervision templates have been revised. Roll out of LXP for personal supervision has also taken place.	

Ref	Priority	Delivered through	Lead Person(s)	Target Completion Date	Dependencies and Key Stakeholders	Quality Assurance Indicators	Key Performance Indicators	Cost	Update	RAG rated
		Develop practice standards and expectations for achieving long term permanency, role of Fostering Panel and ADM ratification	Head of Service for Practice	July 2024				N/A	Practice standards in development linked to development of Corporate Parenting service as part of phase one restructure	
8.7	Children in care are supported to make good educational progress , and their achievements are celebrated	IRO input into PEPs prior to agreement and to be reviewed as part of CiC review	Service Manager for IRO's	October 2024	Education Services - Admissions and Inclusions Team	Quality of PEPs to be subject of targeted audit activity Evidence of appropriate use of Pupil Premium Grant	Proportion of CiC with an up to date PEP Feb 24; 100% Target; 100% Number of CiC subject to exclusions or managed moves (TBC VS)	N/A	PEP compliance is 100% - audit of quality of PEP's to take place in September 2024	
		Annual celebration event by Virtual School; Children in Care Awards	Assistant Head Teacher of Virtual School	December 2024	Schools / Education Providers Education Strategic Partnership	Targeted audit activity providing assurance that our CiC are consistently well supported with swift access to educational provision	Number of Children in Care with EHCPs March 2024; 13/280 (LCS data)	£0.002m	Scheduled for later in Autumn	
8.8	Children in care have their physical and mental health needs identified and met	Improve timeliness of initial health assessments / review health assessments by improving process by which health colleagues are notified of a child coming into care	Head of Service for Corporate Parenting	September 2024	Integrated Care Board NELFT leaders	Targeted audit activity providing assurance that our children in care and care leavers receive timely and well targeted response to their identified health needs	Proportion of all CiC with up-to-date health assessments and reviews Feb 24; IHA's 94.9% RHA's; 92.5% Target 90%	N/A	New health posts created as part of Phase one reorganisation to be implemented by July 2024	
		Improve timeliness of completion of SDQs, and embed practice standards with regards to response when scores are concerning	Head of Service for Corporate Parenting	September 2024	Talent Team / HR Re-org Phase One	Assurance through IRO scrutiny at child in care reviews that health needs are being identified and met	CiC below school age with an up-to-date medical assessment Feb 24; 79.1% Target; 90% % of CiC aged 4-17 with an SDQ completed within the last year Feb 24; 70% Target; 85%	N/A		
		Ensure that the practice standards give clear guidance with regards to the processes and timescales for children receiving medical assessments and reviews	Head of Service for Practice	July 2024	NELFT LAC Health Team		% of above with a score that is concerning, and how many received a CAMHS referral (New 2024/25)	N/A	Practice standards in development linked to development of Corporate Parenting service as part of phase one restructure	

Ref	Priority	Delivered through	Lead Person(s)	Target Completion Date	Dependencies and Key Stakeholders	Quality Assurance Indicators	Key Performance Indicators	Cost	Update	RAG rated
		Recruitment to 2x Health Coordinator posts in the corporate parenting service	Head of Service for Corporate Parenting	July 2024				See 1.1	Developed as part of Phase one to be implemented by July 2024	
8.9	All children in care are offered access to mentors, advocates and independent visitors (IV)	Volunteer, Advocacy and IV Lead to work with CiC teams, and directly with children and young people in care, to promote our offer, with a view to increasing uptake	Service Manager for Early Help and Targeted Family Support	December 2024	Service Manager, Children in Care Team Managers, Children in Care Head of SEND	Evidence of input and impact of mentors and IVs in raising the profile of child's voice, wishes and feelings in assessments, plans and reviews Quality assurance activity to provide assurance that the voices of children in care are consistently reflected in assessments and plans and they have access to advocates and IVs	Proportion of children in care who have been offered, and then those who have been allocated a mentor or IV Feb 24; 6.7% Target 10% Advocacy Service Report Annual Report	N/A	Developed as part of Phase Two implementation by December 2024	
		Independent reviewing service to ensure advocacy offer is considered for all children in care	Service Manager for Standards	September 2024				N/A	Developed as part of Phase one implementation of split between IRO's and CO chairs	
		Improved access to Short Breaks for those children and families who would benefit from them	Head of Service for Assessment and CWD	March 2025				N/A	Being developed as part of the review of short breaks in the CWD team	
8.10	Children in Care are seen regularly and seen alone by their social worker. Children understand the reasons why they are in care and their plans in an age appropriate manner.	On-going scrutiny of data on timeliness and frequency of visits	Head of Service for Corporate Parenting	April 2024	Service Manager, Children in Care Team Managers, Children in Care	Evidence of IRO scrutiny at child in care reviews Audit activity to evaluate the timeliness and quality of social work visits to children in care	% of Children in Care visited within the last six weeks March 24; 74% Target; TBC	N/A	Power BI and monthly performance meeting in place	
		Setting practice standards with regards to frequency of visits in relation to risks and needs	Head of Service for Practice	July 2024				N/A	Practice standards in development alongside development of Corporate Parenting Service as part of phase one restructure	

Ref	Priority	Delivered through	Lead Person(s)	Target Completion Date	Dependencies and Key Stakeholders	Quality Assurance Indicators	Key Performance Indicators	Cost	Update	RAG rated
		Improving quality of management oversight / supervision in informing frequency and quality of visits	Strategic Improvement Leads	December 2024				N/A	Planned delivery of training to managers and regular reporting on performance in place	
		Briefings, learning programmes, mentoring and exemplars with regards to quality of visits, and good case recording	Head of Service for Practice	July 2024				N/A	Improvement team are developing training linked to the development of the Corporate Parenting service as part of phase one restructure	
8.11	Recruitment, assessment, training and support of Foster Carers is effective and robust	Improved quality of support plans for Foster Carers, ensuring they are informed by recommendations shared by Fostering Panel	Head of Service for Corporate Parenting	October 2024	Fostering Panel Service Manager, Fostering	Quality assurance activity evidences that support plans for foster carers are enabling stability and supporting retention	Number of In-House Foster Carers Feb 2023/24; 89 Number of new In-House Foster Carers Feb 2023/24; 6	N/A	Improvement team to work with the Fostering teams and develop training to be delivered in October 2024	
		Review of practice standards with regards to quality and frequency of visits to foster carers	Head of Service for Practice	July 2024	Innovation and Improvement Team		Number of established Foster Carer Constellations via Mockingbird Programme	N/A	Practice standards in development	
		Review of foster carers to ensure maximum utilisation of available approved carers	Head of Service for Corporate Parenting	July 2024			% of children in care living with in-house foster carers Feb 2023/24; 51.3% Target; 50%	N/A	Review has commenced and report will be completed by July 2024	
		Launch of Mockingbird Programme to support stability and foster carer retention	Head of Service for Corporate Parenting	March 2025				£0.155m (DfE grant)	Currently in development with the Fostering Network as part of the DfE North London Fostering Pathfinder	

Ref	Priority	Delivered through	Lead Person(s)	Target Completion Date	Dependencies and Key Stakeholders	Quality Assurance Indicators	Key Performance Indicators	Cost	Update	RAG rated
8.12	Improved co-production and engagement with Children in Care to improve their participation and contribution in their own journey as well as inform service delivery and aid improvements	Review of Children in Care Council to increase participation and impact	Service Manager for Early Help and Targeted Family Support	December 2024	Youth Influence and Participation Team	QA activity to evaluate the quality and impact of life story work with our Children in Care	Proportion of staff trained in use of Mind of My Own App	See 10.4	Linked to Phase one development of the Corporate Parenting service and phase two engagement service	
		Review and re-launch our pledge to Children in Care	Head of Service for Corporate Parenting	March 2025	Innovation and Improvement Team	Evidence of children and young people's awareness and understanding of life story work, children in care council and our pledge	Number of Children in Care with Mind of My Own accounts, and those that have submitted statements	£0.00075 (Design Costs)	Dependent on Phase one development of the Corporate Parenting service and phase two engagement service	
		Improve Life Story Work via implementation of Care Life App	Head of Service for Corporate Parenting	March 2025			% of CIC engaged with the CICC say it Louder	£0.004m	Development of the Corporate Parenting service and procurement.	

9. Care Experienced Young People

Ref	Priority	Delivered through	Lead Person(s)	Target Completion Date	Dependencies and Key Stakeholders	Quality Assurance Indicators	Key Performance Indicators	Cost	Update	RAG
9.1	Ensuring that young people living in supported accommodation, are doing so appropriately and that risks to their safety or welfare are assessed and managed well.	Review of all 16/17 and 18+ placed in supported accommodation to assess appropriateness and ensure updated risk assessments and visiting schedule to meet assessed needs	Head of Service for Corporate Parenting	September 2024	All Age Brokerage Team Placement Providers	Targeted audit activity focusing on the quality of visits and risk assessments for children and young people living in supported accommodation	Proportion of children and young people in semi-independent accommodation with an up-to-date risk assessment, that is reviewed in line with any change in circumstances (New 2024/25)	N/A	Review has taken place and will be ongoing at the Permanence and Transition panels Audit to take place in August 2024	
		Embed practice standards with regards to visits to those in supported accommodation and improving the quality of risk assessments	Head of Service for Practice	July 2024	Assistant Director of Housing Demand Innovation and Improvement Team	Contract monitoring activity provides assurance with regards to the quality of service being provided by placement providers (Commissioning Service)		N/A	Practice standards in development	

Ref	Priority	Delivered through	Lead Person(s)	Target Completion Date	Dependencies and Key Stakeholders	Quality Assurance Indicators	Key Performance Indicators	Cost	Update	RAG
		Re-launch and embed Joint Starting Well and Living Well Housing Protocol for Care Leavers	Head of Service for Corporate Parenting	November 2024				N/A	Protocol has been revisited and is due for relaunch following the implementation of the Corporate Parenting service - Development of LCS pathways being developed.	
		Review of Dynamic Purchasing System for supported accommodation providers	Independent Commissioner and Project Manager	By December 2024				TBC	In progress. Meetings with providers being set up by the Integrated all Age Brokerage placements team	
9.2	Improve engagement with care experienced young people, ensuring that the level of engagement with individual young people leaving care reflects their known needs and preferences	All care experienced young people are given opportunity to access mentors via Future Choices Programme	Head of Service for Corporate Parenting	October 2024	Service Manager for Early Help and Targeted Family Support Service Manager for Leaving Care	Audit activity to evaluate the quality and timeliness of visits or engagement with care experienced young people Ongoing tracking of care experienced young people who are not in touch, and the reasons for this	% of care leavers aged 17-18 who are in touch; Q4 ChAT; 86% Target; TBC % of care leavers aged 19-21 who are in touch Q4 ChAT; 95% Target; TBC Number of care experienced young people who are active participants of The Cocoon Management Board	N/A	Relaunch following the implementation of the Corporate Parenting Service	
		Establish practice standards with regards to effective engagement with young people, and the expectations with regards to keeping in touch	Head of Service for Practice	July 2024				N/A	Practice standards in development	
		Review of The Cocoon Management Board to improve uptake and impact	Head of Service for Corporate Parenting	October 2024				N/A	Work as part of the implementation of the Corporate Parenting service	

Ref	Priority	Delivered through	Lead Person(s)	Target Completion Date	Dependencies and Key Stakeholders	Quality Assurance Indicators	Key Performance Indicators	Cost	Update	RAG
9.3	Ensuring all young people in care and leaving care have effective pathway plans that are dynamic and reviewed regularly	Identifying all children without a pathway plan and prioritising action to have this in place	Head of Service for Corporate Parenting	Starting from May 2024	Service Manager for Leaving Care Social Care Systems Team	<p>Quality assurance activity to evaluate the quality and impact of pathway plans and the timely review of pathway plans.</p> <p>To ensure that young people are routinely engaged and actively encouraged to participate in the development and review of their plan</p>	% of young people who participated in the development of their pathway plans. (New 2024/25)	N/A	Improvement team are targeting work with managers and practitioners to focus on care and pathway planning. Training being developed to roll out in Autumn 2024	
	Young people are fully involved in co-producing, developing and reviewing their plan	Understanding and resolving system issues that are causing delay in progressing the plans		June 2024				See 10.2 and SLIP costs to be advised	LCS review to take place as part of SLIP support from Hertfordshire Council	
		Establish practice standards with regards to effective engagement with young people in developing and owning their plan	Head of Service for Practice	July 2024				N/A	Practice standards in development	
9.4	Young people leaving care are helped to understand their rights, entitlements and responsibilities	Compliance with all elements of the London Innovation and Improvement Alliance Care Leaver Compact	Head of Service for Corporate Parenting	October 2024	Service Manager for Leaving Care Innovation and Improvement Team	Impact of complaints to be evaluated through quality assurance activity	Quarterly reports for PIB evidencing increased uptake of local offer.	N/A	Work to be developed as part of the implementation of the Corporate Parenting service new Leaving Care teams	
		Increase awareness, understanding and uptake of local offer , with our care experienced young people and staff groups with a plan in place to ensure all the information provided is kept current	Head of Service for Corporate Parenting Family Information Service Manager	October 2024	Service Manager for Early Help and Targeted Family Support	Quality assurance activity provides evidence of awareness and understanding of leaving care local offer		N/A	Work to be developed as part of the implementation of the Corporate Parenting service new Leaving Care teams	

Ref	Priority	Delivered through	Lead Person(s)	Target Completion Date	Dependencies and Key Stakeholders	Quality Assurance Indicators	Key Performance Indicators	Cost	Update	RAG
9.5	Care experienced young people have their physical and mental health needs identified and met	Improve understanding of mental health needs for our care experienced young people , and develop a response to deliver what they tell us they need	Head of Service for Corporate Parenting	October 2024	NELFT – Clinical lead LAC health team and Designated Nurse for Safeguarding Children	Care experienced young people have individual health passports tailored to their needs.	% of care experienced young people who have access to their health passport (<i>New 2024/25</i>)	N/A	Work to be developed as part of the implementation of the Corporate Parenting service new Leaving Care teams	
		Ensuring all care experienced young people have access to, and understanding of, their health passports	Senior Corporate Parenting Coordinator	October 2024	Director of Ageing Well (DASS)	Timely access to adult mental health services, for those who need it, and referrals are made to relevant services which meet their needs	% of care experienced young people accessing mental health services (<i>New 2024/25</i>)	N/A	Work being developed as part of the phase one restructure to add health posts	
		Review of process for the transfer from children's services to adult services , for both social care and health services, including Transitions Panel and develop an action plan to respond to any improvements	Head of Service for Corporate Parenting	December 2024	Head of Service for Assessment and CWD	Impact and oversight of Leaving Care Transitions Panel	% of care experienced young people aged 18-25 who have EHCPs (<i>New 2024/25</i>)	N/A	Workshops being developed and restructure to a transitions team being developed	
		Health zoning meeting to address and escalation processes and recording alongside CIC health Pathways	Head of Service for Corporate Parenting	October 2024	Head of SEND			N/A	Work with the LAC health teams planned for September alongside the implementation of the Corporate Parenting service	
9.6	Young people leaving care are supported to be ambitious and aspirational about their education and employment choices	Introduce a Council offer of apprenticeships for young people leaving care	HR Talent Team Innovation & Improvement Team	September 2024	Schools / Education Providers Prospects Virtual School	Targeted audit activity providing assurance that our care leavers are consistently well supported with swift access to educational, employment and training opportunities	Number of care experienced young people employed in Havering Council Apprentice roles Target; 5	N/A	Work being undertaken both within the council and with partners such as the NHS	
		Engagement work with young people to understand what barriers there are to	Head of Service for Corporate Parenting	July 2024	Corporate Parenting Service Managers		% of care experienced young people aged 19-21 who are engaged in education, employment or training Target; 60%	N/A	planned work for September in line with the implementation of	

Ref	Priority	Delivered through	Lead Person(s)	Target Completion Date	Dependencies and Key Stakeholders	Quality Assurance Indicators	Key Performance Indicators	Cost	Update	RAG
		accessing education and employment, and what they need to overcome these					% of care experienced young people aged 19-21 who are in higher education Target; 10%		the Corporate Parenting service new Leaving Care teams	

Theme Three; Removing Barriers Strategic Lead (s); Head of Innovation and Improvement

10. Use of performance Data

Ref	Priority	Delivered through	Lead Person(s)	Target Completion Date	Dependencies and Key Stakeholders	Quality Assurance Indicators	Key Performance Indicators	Cost	Update	RAG
10.1	Enhance understanding of performance data in day-to-day practice conversations, and the understanding of the role this plays in improving outcomes, Improve the way we use data to understand and respond to emerging needs	Training for managers and supervisors in accessing, analysing and understanding performance data in day-to-day practice	Performance and Business Intelligence Team Manager	November 2024	Performance and Business Intelligence Team	Early identification and rectifying of potential areas of concern	Proportion of starting well managers who have undertaken initial and refresher training	N/A	Training being developed for roll out in September	
		Ensuring routine narrative is provided against monthly data set and that any gaps or issues in data are identified and rectified	Head of Service for Safeguarding Head of Service for Corporate Parenting	April 2024	Assistant Directors and Heads of Service Head of Service for Practice	Greater use of performance data in management discussions and supervision leads to reduction in drift and delay for individual children		N/A	Updated performance report has been developed and routine monthly meetings are in place chaired by the DCS	
		Develop heat map within Power BI of known needs across SEND and Social Care to enable better targeting of services and forward planning	Head of Innovation and Improvement	December 2024				N/A	Developments being scoped as part of the SEND action plan	
10.2	Review of all processes and forms within our Case Management System (Liquid Logic) to reduce	Partnering with Hertfordshire CYPS to learn from best practice	Tara Geere, Director of Starting Well	Audit October 2024	Social Care Systems Team Business Intelligence and Performance Team	TBC based on identified work required	TBC based on identified work required	£0.055m LCS costs alongside Hertfordshire SLIP request	Meeting with SLIP partners has been arranged and awaiting confirmation of support and costs	

Ref	Priority	Delivered through	Lead Person(s)	Target Completion Date	Dependencies and Key Stakeholders	Quality Assurance Indicators	Key Performance Indicators	Cost	Update	RAG
	inefficiencies, securing investment to do so where necessary.	Review and update approach for selected safeguarding partners to have read-only access to our case management system, thus improving information sharing		Implementati on March 2025	Partnership and Learning Manager, HSCP GDPR and IG team			SLIP work being developed costs to be Advised	GDPR and IG to be consulted and work regarding access to be put in place by the Autumn.	
10.3	Review use of technology, equipment and management systems to support practice and oversight of practice	Review allocation of 4G laptops for case holding staff and managers	Tara Geere, Director of Starting Well	March 2025	Mark Duff, ICT Director	Feedback from staff and managers with regards to impact of changes made	TBC based on identified work required	LXP see 3.3 Further costs TBC	Pilots being developed	
		Review / audit of technology and identify gaps	Head of Innovation and Improvement		HR Business Partner				Audit of technology to be developed	
		Review of management systems (Fusion, LXP) to give greater management oversight of practice			L&OD Team				Training to staff to support understanding of systems to be rolled out in October	
10.4	Review of tools and methodologies for engaging with children and young people	Audit of Mind of My Own usage and impact, and make recommendations for improvement as required	Service Manager for Early Help and Targeted Family Support	October 2024	Youth Influence and Participation Team Quality Assurance Team	Systematic evaluation and scrutiny of social work and management direct work tools Evidence of practitioners understanding and use of a range of direct work tools	Proportion of staff / managers who are actively using Mind of My Own with children they are working with	See 6.2	Review to take place in September and training roll out to staff re Mind of My Own	
		Introduction of Direct Work Boxes for all case holding teams	AD for Safeguarding and Corporate Parenting	June 2024	Head of Service for Practice			£0.003m	Direct work champions being identified to roll out tools	
10.5	Develop a robust Starting Well Communications Plan for both internal staff and external partners	Monthly Directors Briefings / Vlog	Tara Geere, Director of Starting Well	April 2024	AD for Education	Internal staff and external partners are informed of service updates and developments	Number of people accessing the briefings, vlogs and newsletters	N/A	Now in place	
		AD Let's Talk about Children Weekly Briefing	AD for Safeguarding and Corporate Parenting AD Early Help and Partnerships	June 2024	Partnership and Learning Manager, HSCP	Mechanisms are in place to receive and respond to feedback (you said, we did)		N/A	In development for roll out in June 2024 Regular all Council and Starting Well staff briefings have	

Ref	Priority	Delivered through	Lead Person(s)	Target Completion Date	Dependencies and Key Stakeholders	Quality Assurance Indicators	Key Performance Indicators	Cost	Update	RAG
		Quarterly Starting Well newsletter to all safeguarding partners with service updates and developments	Tara Geere, Director of Starting Well HSCP Business Manager	October 2024		Open and transparent communications increases levels of trust, leading to high support, high challenge across the professional network		N/A	In development with the HSCP	
10.6	Ensure sufficient administrative support is in place to facilitate the smooth running of meetings and meeting of timeframes for information to be shared	Implementation of service specific administrator and coordinator roles as part of Phase One and Phase Two of Starting Well reorganisation, followed by successful permanent recruitment to these roles	Tara Geere, Director of Starting Well	October 2024	HR / Recruitment Innovation and Improvement Team	Improved efficiency with regards to the organisation and minute taking of meetings within the service e.g. strategy meetings and child protection conferences, and improved quality of minutes Social Workers and Managers report that they are spending less time on administrative tasks, enabling more space to focus on social work practice	Proportion of administrative and support roles that are recruited to permanently	See 1.1	Being developed as part of phase two restructure	
10.7	Development of AI apps to support managers and staff	Creation of a People Directorate AI board and development of AI apps to support managers and staff with recording	Barbara Nicholls, Strategic Director of People Tara Geere, Director of Starting Well	June 2024	ICT GDPR / IG team	Supervisions evidenced in case recording Improved case recording in audits	% of supervisions completed within appropriate timescales	TBC; AI costs including Co-pilot licence costs (See 10.3)	Development of an AI board being scoped. Pilot of Co-pilot launched with Director use in May	
10.8	Embed use of workforce planning tools	Robust use of quarterly workforce planning cycle with HR to produce workforce data that supports the Starting Well workforce strategy System generated staffing dataset	PSW Children's Talent Manager HR operations	Implement and embed by October 2024	AD/ HOS/ Service managers and Team Managers in Starting Well	Future Vacancies HR Workforce Succession plans	Future Vacancy dataset	£0.0007m	Foresight workforce planning platform has been commissioned and training to staff planned in September r	

Theme Four; Governance, Leadership and Management Oversight
Strategic Lead; Tara Geere, Director of Starting Well

Ref	Action	Delivered through	Lead Person(s)	Target Completion Date	Dependencies and Key Stakeholders	Quality Assurance Indicators	Key Performance Indicators	Cost	Update	RAG
11.1	Ensure there is sufficient financial support to enable the delivery of the improvement plan and changes required	Growth money added by Havering Council - £11.2M	Tara Geere. Director of Starting Well	April 2024	Elected members and corporate centre	Growth in teams will reduce caseloads and improve quality of practice and management oversight	As above re caseloads % Supervisions in timescales Reduction in overspend	£5.011m improvement cost Offset by DfE Improvement Grant – in total of £0.671m Leaving £4.3m costs to Havering	2024- 2025 growth money allocated Fully costed improvement plan developed. Full Council sign off re costs in July 2024. Monitoring of agency costs against budget ongoing.	
		Government grant funding – social care - £2m	Andrew Blake-Herbert, Chief Executive	April 2024	S151 officer					
		Improvement Plan additional corporate funding circa £2.3m - request to DLUC		July 2024						
		DfE Improvement Grant - £0.352m Mockingbird contribution £0.155m And SLIP contribution £0.164m		June 2024						
11.2	Improve engagement with and impact of quality assurance activity across all service areas	Refresh and relaunch Quality Assurance Framework, and ensure this is shared with our partners	Head of Service for Practice	October 2024	Starting Well Management Team	Increased participation of social workers and managers in audit activity.	Reduction in number of repeat inadequate audit outcomes	N/A	Completed – and further revision due in October 2024	
		Develop clear guidance within practice standards on roles and responsibilities with regards to Quality Assurance	Head of Service for Practice	June 2024		Increased participation of children, young people and families in audit activity	Increase in the number of audits that are moderated by senior managers	N/A	Practice standards in development	
						Moderation to reflect increased understanding of audit grade descriptors	Reduction in the number of audits where the			

Ref	Action	Delivered through	Lead Person(s)	Target Completion Date	Dependencies and Key Stakeholders	Quality Assurance Indicators	Key Performance Indicators	Cost	Update	RAG
		Embed routine training programme with regards to undertaking quality assurance for current, new and aspiring managers and supervisors	Head of Service for Practice	September 2024		demonstrated by a decreasing number of audit judgements being changed at moderation	grade is changed following moderation	N/A	Training in development for roll out in September	
11.3	Review and improve our corporate parenting approach, ensuring that we have an effective strategy and corporate parenting panel which raises awareness of corporate parenting responsibilities across safeguarding partnership and wider Council	Co-produce our updated Corporate Parenting Strategy with care experienced children and young people, wider council and safeguarding partnership	Head of Service for Corporate Parenting	March 2025	Say it Louder Forum (CICC) The Cocoon Management Group	Annual Corporate Parenting Report evaluates effectiveness of the Council and partner's delivery of services for children in care and care experienced young people.	Publication of Corporate Parenting Strategy	N/A	LGA audit to take place followed by restructure of the CIC teams and EH participation team. By November	
		Engage with LGA support programme to improve the effectiveness of our corporate parenting offer, including the undertaking of the corporate parenting self-assessment	AD for Safeguarding and Corporate Parenting	July 2024	Corporate Parenting Panel Innovation and Improvement Team	Corporate Parenting Panel oversees the Corporate Parenting Strategy and promotes our pledges for children in care.		N/A	DCS and AD have met with the LGA and self-evaluation has started	
11.4	Improve quality and consistency of management oversight and supervision	Embed improved template for supervision in case management system	Strategic Improvement Leads	June 2024	Social Care Systems Team	Quality of reports to permanence panel, child protection panel, child in need panel and HARM Panel	% of supervisions completed within expected timescales (all case types) Feb 2023/24 CP (1 Month); 55.1% CiC (2 Months); 57.5% CiN (2 Months); 71.2% LC (3 Months); 50.9%	N/A	Developed and currently in the LCS test system	
		Training for all managers on the use of LXP for monthly personal supervision	Learning & Organisational Development Manager	September 2024	Starting Well Senior Management Team Starting Well Team Managers	Dip sampling to provide assurance of effective use of thresholds and escalation for children when existing plans are not improving outcomes, and the tracking of actions to ensure timely progress		See 3.3	Training due as part of the Improvement team and Systemic training roll out from July	
		Review and relaunch Supervision Policy/Strategy	Head of Service for Practice	July 2024				N/A	Template developed and policy reviewed ready for relaunch	

Ref	Action	Delivered through	Lead Person(s)	Target Completion Date	Dependencies and Key Stakeholders	Quality Assurance Indicators	Key Performance Indicators	Cost	Update	RAG
11.5	Review Starting Well Governance structure, ensuring clear routes of escalation and decision making points	Develop new Scheme of Delegation and Delegated Authority	Tara Geere, Director of Starting Well	September 2024	Safeguarding Partnership	Quality assurance activity evidences clear understanding of decision making and escalation routes, and that every effort is made to reduce drift and delay for the child		N/A	New Head of Innovation and Improvement starts in June and will lead on this work	
		Review of all operational panels and boards and interface with wider governance structure	Head of Innovation & Improvement	July 2024	NELFT / ICB			N/A	As above for new Head of Innovation and Improvement	
		Refresh and relaunch CAMHS Strategy across the Safeguarding Partnership	Tara Geere, Director of Starting Well Luke Burton, Director of Place Based Partnership	March 2025				N/A	Work has started with the NEL ICB	