

<b>ISLE OF ANGLESEY COUNTY COUNCIL</b>	
<b>Report to:</b>	The Executive
<b>Date:</b>	19.02.18
<b>Subject:</b>	Children and Families Services Progress Report
<b>Portfolio Holder(s):</b>	Councillor Llinos Medi Huws
<b>Head of Service:</b>	Fon Roberts, Head of Children's Services
<b>Report Author:</b> Tel: E-mail:	Fon Roberts 01248 752708 <a href="mailto:fonroberts@anglesey.gov.uk">fonroberts@anglesey.gov.uk</a>
<b>Local Members:</b>	Relevant to all Members

<b>A –Recommendation/s and reason/s</b>
The Committee is requested to 1.1 confirm if they are satisfied with the steps taken to progress implementation of the Service Improvement Plan and that the pace of progress

<b>B – What other options did you consider and why did you reject them and/or opt for this option?</b>
<p>Ynys Mon Children's Services were inspected by CCSIW during October and November 2016. The inspection focused on how children and families are empowered to access help and care &amp; support services and on the quality of outcomes achieved for children in need of help, care &amp; support and/or protection, including children who have recently become looked after by the local authority. The inspection also evaluated the quality of leadership, management and governance arrangements in place to develop and support service delivery. The Final CCSIW report was published on 7th March 2017. The report had 14 recommendations, seven recommendations as a priority and seven to be implemented by March 2018.</p> <p>In response to the findings and recommendations, the authority has put the following arrangements in place:</p> <ul style="list-style-type: none"> <li>• A revised Service Improvement Plan (SIP), incorporating all of the Recommendations made in CCSIW's Inspection Report against the 5 themes.</li> <li>• Put new Project Management arrangements in place, with an internal Improvement Group of officials meeting on a monthly basis, and reporting to the Senior Management Team and to the Executive.</li> </ul>

- Establish a new Panel of Elected Members following the recent local authority elections, which will report to the Corporate Scrutiny Committee.

Focus of the work:

### **Restructure**

This Service Restructure was implemented on the 4th of October (SIP 4.2) were 8 Practice Leader's took responsibility for their Practice Groups. There is further work to be undertaken to complete the restructuring, including reviewing the arrangements for the Child Placement Team, making the best use of Support Workers to support families, as well as ensuring that administrative support is appropriate for Practice Groups to effectively carry out their statutory responsibilities.

### **Recruitment and Retention**

Being able to recruit and retain staff who are committed to making a difference to the lives of children and young people in Anglesey is crucial if we are to deliver on the obligations placed upon us by legislation. An unstable workforce in recent years, combined with a significant increase in the number of children and young people who are Looked After and who are on the Child Protection Register, has placed significant strain on our services.

As previously mentioned the Service Manager for Early Intervention and Prevention commenced in post in August and all the Practice Leaders started in September 2017. The Interim Head of Service returned to his substantive as a Service Manager Intensive Intervention post in December 2017. The department recruited a permanent Head of Service and he started in his role in December 2017.

During late 2017 and into 2018 we have recruited 8 new Social Worker's and we have continued in our efforts to recruit a further 5 social workers. Agency social work staff currently cover these 5 posts. 1 post is filled and that social worker will start with the authority mid-January 2018. Efforts to recruit continue with adverts being placed in The Guardian (on-line) and Community Care (which is a Social Work journal).

In 2017 and 2018 we appointed 5.5 Engagement officers for Teulu Môn and a further 1. FTE posts through Families First Grant has also been filled. Leave us with 0.5 of a post in the Teulu Môn team. We have also appointed to a further 3 additional posts within the Team Around the Family (TAF) and these staff have now joined the service.

The Resilient Families Team is now fully staffed and currently working with 8 families to prevent family breakdown, to support children living at home. The team are also working with some families on a reunification plan to return children out of care and to live safely with their families. An additional Family Support Worker will be recruited to this team using 'Edge of Care Grant funding.

We were successful in recruiting an additional Personal Advisor post funded with St David's Welsh Government Grant to provide practical and emotional support to young people who leave care when they are aged 15 to 24 years old.

As a Service, we have developed a Social Work Traineeship arrangements internally to enable 2 of our staff to train to become qualified Social Workers (2 year course). As we have seen a significant turnover of staff over the last 18 months the aim of this strategy of 'Grow your own' is to ensure we have qualified Social Workers who will be working for the Service for at least 2 years after the qualify (SIP 1.2).

The Service currently has 5 Social Work posts which are vacant and a proactive drive is in place to actively try and recruit experience Social Workers to these posts. These posts are currently filled by agency Social Workers which has a financial implication on the service.

### **Policies**

The Workforce Strategy, approved over the summer, now focuses on ensuring that staff have the skills, training and support to enable them to do their jobs effectively, and provide the support that children, young people and families in Anglesey need. We will continue to review this document in relation to not only recruitment, but also more importantly, retention.

Supervision - we launched the new Supervision Policy in March 2017, following consultation with staff and is being used to review cases on a monthly basis, and take early action if any change in decision-making is necessary. The frequency of supervision is being monitored and an audit is currently being undertaken so that we are assured that the policy is being implemented fully.

Five Multi Agency Practice Guidance have been developed by Children's Service as a direct response to the CSSIW Inspection with the aim of strengthening multi agency joint working. They focus on providing clear guidance on:

- How to make Referrals to Children's Services
- Child Protection Practice Guidance - Investigation Thresholds
- Child Protection Practice Guidance – Key Workers and Core Groups
- Child Protection Practice Guidance- Registration Thresholds.
- How to manage child protection allegations made against Professional Practice Guidance

### **Quality Assurance**

The Quality Assurance Framework has been approved within the Service. The aim of the framework is to the approach that Children's Services.

The service will use a wide range of evidence sources to underpin the quarterly Practice evaluation report such as:

- Monthly Case file Audits

- Monthly Casefile Audit – Safeguarding & Quality Improvement Unit
- Practice Observation
- Supervision Audits
- Learning from and with our partners
- Learning from people who use our services
- Oversight and Challenge
- Learning from our staff
- Ongoing Independent Reviewing Officer and Child Protection Co-ordinator

Practice Evaluation Report for quarter 2 showed that recording practice remains inconsistent, although there is evidence of improvement in some audits.

A Practice Improvement Plan is being developed in 2018 and this will focus on developing and strengthening Social Work practice and also the practice of other staff within the department.

Despite the inconsistency in practice, we have positive evidence of the workforce working directly with families leading to improved outcomes. Children's Services have adopted the Thornton/Gwynedd Risk Model to continue supporting social workers to work proactively with families to manage risk - spending much more time working alongside them helping them to change so that the family is a safe place for their children.

All staff continue to attend on-going training which includes Brief Solution Therapy, Motivational Interviewing, Risk Assessing to name a few. Practice Leaders will now support staff in putting their learning into practice.

The case loads of Social Workers are now in line with what is perceived as a 'good working' practice.

### **Partners**

The work of strengthening the Local Authority's role as a corporate parent for looked after children has been agreed by the Corporate Parenting Panel with the aim of ensuring that Isle of Anglesey County Council undertakes its duties fully to ensure that young people can achieve their full potential and a successful transition into adulthood.

The Service continued to strengthen its relationship with partner agencies at all levels. In January 2018 an operational multi agency group will meet to talk about issues for practitioners on the 'group level' and also build relationships and have a greater understanding of each other's roles and responsibilities.

Preventative Services is being reviewed, and a new strategy will be developed jointly with partners, to ensure more effective family support services and commissioning of Families First Grant, to reduce the number of children and young people who need to be placed on the Child Protection Register and who need to be Looked After.

The agenda for the Elected Members and Senior Leaders Panel's meeting has continued to focus on monitoring and challenging the implementation of the Service Improvement Plan, holding the Director and Service to account. Five meetings have been held to date.

Laming visits (which are routinely visits completed by elected members and Senior Officers of the Council) continue to take place for and feedback has been collated and has been positive to date with some useful and constructive views being put forward.

**C – Why is this a decision for the Executive?**

The Committee is requested to

1.1 confirm if they are satisfied with the steps taken to progress implementation of the Service Improvement Plan and that the pace of progress

**CH – Is this decision consistent with policy approved by the full Council?**

**D – Is this decision within the budget approved by the Council?**

The number of children and young people who are looked after increased significantly during 2015-16; this put additional pressure on the Services' budgets, and this pressure remains. The Service has put a number of measures in place in recent months to manage and reduce these pressures. The Finance Scrutiny Panel is currently looking at these cost pressures in detail, and will report to the Scrutiny Committee on its findings in due course.

<b>DD – Who did you consult?</b>		<b>What did they say?</b>
1	<b>Chief Executive / Strategic Leadership Team (SLT)</b> (mandatory)	Yes
2	<b>Finance / Section 151</b> (mandatory)	
3	<b>Legal / Monitoring Officer</b> (mandatory)	
4	<b>Human Resources (HR)</b>	
5	<b>Property</b>	
6	<b>Information Communication Technology (ICT)</b>	

7	<b>Scrutiny</b>	<p>The progress report on improvements in Children's Services over the past three months was submitted to a meeting of the Corporate Scrutiny Committee convened on 31st January, 2018.</p> <p>It was noted that progress continued to be made and that Care Inspectorate Wales (CIW) had very recently reviewed progress in implementing the improvement plan for children's services. CIW summarised that children's services now had good foundations in place and that there had been positive, incremental improvement.</p> <p>In light of its deliberations, the Corporate Scrutiny Committee resolved to note the steps taken thus far to implement the improvement plan in children's services and to recommend to the Executive that the pace of progress was adequate at this time.</p> <p>The progress report was presented to the Business meeting of the Executive on the 5<sup>th</sup> February 2018.</p> <p>No comments were made.</p>
8	<b>Local Members</b>	
9	<b>Any external bodies / other/s</b>	

<b>E – Risks and any mitigation (if relevant)</b>		
1	<b>Economic</b>	
2	<b>Anti-poverty</b>	
3	<b>Crime and Disorder</b>	
4	<b>Environmental</b>	
5	<b>Equalities</b>	
6	<b>Outcome Agreements</b>	
7	<b>Other</b>	

<b>F - Appendices:</b>
<p>Annex 1 – CSSIW Recommendations and link to the Service Improvement Plan</p> <p>Annex 2 – Service Improvement Plan</p> <p>Annex 3 – CSSIW – Self Assessment of Ynys Môn, Children and Families Services</p> <p>Annex 4 – Letter from CSSIW – dated 11.01.18</p>

**FF - Background papers (please contact the author of the Report for any further information):**

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## **Annex 1**

### **Argymhellion Adroddiad yr AGGCC – Gwasanaethau Plant [Mawrth, 2017] CSSIW Report Recommendations – Children’s Services [March, 2017]**

#### **As a priority:**

1. The authority should progress its commitment to developing a framework for the provision of preventive work with children and families that will deliver an integrated service and provide early help and support that effectively delays the need for care and support. SIP 4.4
2. Effective, multi-agency quality assurance systems and training arrangements should be established to ensure that thresholds for assessment to statutory children’s services are understood by staff and partners and are consistently applied; this should include the development of a multi-agency child protection thresholds protocol incorporating recent Welsh Government guidance. SIP 3.4
3. Senior leaders in social services and the police should continue to work proactively together to ensure improvements to the quality, consistency and timeliness of child protection enquiries. SIP 2.2
4. The council should continue to support senior leaders to improve their knowledge and understanding of the complexities and risks involved in delivering children’s services to assure themselves, partners, staff and communities that their responsibilities are discharged to maximum effect. SIP 1.5
5. A robust workforce strategy should urgently be developed to include short, medium and long term aims for recruitment and retention of social workers. SIP 1.1
6. Arrangements for team managers and senior practitioners should be reviewed to ensure capacity to effectively and consistently provide management oversight of decision making, challenge and direction for staff across the service; a leadership and development programme should be made available to build resilience. SIP 1.4
7. Senior leaders should take steps to improve the frequency, consistency and quality of front line staff supervision; an assurance mechanism must be implemented to ensure compliance and quality. SIP 1.3

#### **Over the next 12 months:**

8. Strong political and corporate support for children’s services must continue to ensure the service improvements needed are prioritised and the pace of improvement accelerated and sustained. SIP 1.5
9. Multi-agency arrangements should be established to strengthen operational plans to support effective co-ordination of statutory partners’ completion of Joint Assessment Frameworks. SIP 2.3
10. The quality of assessments and plans should be improved to ensure that they are consistently of a good quality, with a clear focus on the needs, risks and strengths of children and families, and that desired outcomes, timescales and accountabilities for actions are clear. SIP 2.1
11. The quality and consistency of record keeping should be improved; all staff and managers should ensure that their records are of good quality, are up to date and are systematically stored. SIP 2.1
12. The local authority and partners should work together to develop a cohesive approach to the collection and analysis of information about the needs of communities, that includes the voices of children and families. This should be used to inform



the shaping of strategic plans to achieve effective alignment of service delivery between information, advice and assistance services, the preventive sector and statutory services. SIP 4.4

13. Performance management and quality assurance arrangements, including scrutiny of service demand and routine auditing of the quality of practice, needs to be embedded so that managers at all levels have timely, relevant and accurate performance and quality assurance information to enable them to do their jobs effectively and to deliver improvements.

SIP 3.2

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<b>1. A confident and competent workforce with sufficient capacity to provide a consistent and effective service</b>							
1.1	<p>Develop the <b>Workforce Strategy</b> to include:</p> <ul style="list-style-type: none"> <li>Recruitment good practice</li> <li>Retention and support</li> <li>Clear induction arrangements</li> <li>Buddying</li> <li>Coaching and mentoring</li> <li>Shadowing</li> <li>Enhanced post qualification training and development opportunities</li> <li>First year in practice guidance (this is not needed as we are following the First Three Years in Practice Guidance produced by the Care Council for Wales).</li> </ul> <p><b>Links to CSSIW Recommendation 5:</b> A robust workforce strategy should urgently be developed to include short, medium and long term aims for recruitment and retention of social workers.</p>	<p><b>November 2017 – January 2018</b></p> <ul style="list-style-type: none"> <li>There are examples of Practice Leaders coaching/mentoring newly qualified Social Workers.</li> <li>Enhanced post qualification training and development opportunities – these needs will be identified in Appraisals and Supervision.</li> <li>Two trainee Social Workers have commenced in their roles.</li> <li>Continued to progress work in the Workforce Action Plan.</li> <li>Observation of practice – the Good Practice Group have been discussing how best to implement this.</li> <li>Social Care Ambassadors</li> <li>Denu Talent – we are progressing with this, an email has been issued to the Heads of Services asking for work experience opportunities</li> </ul> <p><b>September &amp; October 2017</b></p> <ul style="list-style-type: none"> <li>2 members of staff have successfully gained a 2 year traineeship to train to become qualified Social Workers, the aim of this strategy is that we ‘Grow our Own’ ensuring we have qualified Social Workers who will be working for the Service for at least 2 year after they qualify.</li> <li>Workforce Action plan being progressed to monitor progress against the short-term actions up until December 2017. Meetings held every 6-8weeks to monitor progress.</li> </ul>	<ul style="list-style-type: none"> <li>Corporate Induction session available on a monthly basis for new staff.</li> <li>Ensure progress with the Action plan, Meetings will be held every 6-8weeks to monitor progress plus to monitor other workforce issues.</li> <li>Further work to be undertaken to complete the restructuring, including reviewing the arrangements for the Child Placement Team, making the best use of Support Workers to support families, as well as ensuring that administrative support is appropriate for Practice Groups to effectively carry out their responsibilities.</li> <li>Review the Workforce Strategy late Summer 2018.</li> </ul>	<p><b>Yet to be done</b></p> <p>Newly qualified social workers report they have received clear guidance and expectations, support, and constructive feedback regarding their practice and on the quality of their work.</p> <p>Staff report positive satisfaction in the workplace and feel supported in carrying out their responsibilities.</p> <p><b>Commenced</b></p> <p>Audit of work providing evidence of a confident and competent workforce.</p> <p>Clear improvement in recruitment and retention rates with more staff recruited to permanent posts and reduction in staff leaving.</p>	Melanie Jones & Margaret Peters	Jan 2017	Ongoing

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		<ul style="list-style-type: none"> <li>• Service re-structure was implemented on the 4<sup>th</sup> of October. The 8 Practice Leaders took responsibility for their Practice Groups, managing smaller groups across Early Intervention and Intensive Intervention with each Practice Leader responsible for 3 or 4 Social Workers. This will mean that the Social Workers will have more access to their Practice Leaders, enabling them to have early advice on dealing with individual cases and adequate support and supervision.</li> </ul> <p><b><u>August 2017</u></b></p> <ul style="list-style-type: none"> <li>• A traineeship plan has been developed jointly with HR offering the opportunity for one member of staff to train to be a Social Worker over two years through the Bangor University with the possibility of securing a permanent post in the service post qualification.</li> <li>• Service Induction programme produced for new staff</li> <li>• Workforce Action plan being progressed to monitor progress against the short-term actions up until December 2017.</li> </ul> <p><b><u>June/July 2017</u></b></p> <ul style="list-style-type: none"> <li>• Workforce Strategy completed.</li> <li>• Action Plan in preparation</li> </ul> <p><b><u>May 2017</u></b></p> <ul style="list-style-type: none"> <li>• Draft Workforce Strategy produced in collaboration with HR that includes relevant sections on recruitment, retention and support, induction arrangements, buddying, coaching and mentoring, shadowing, enhanced post</li> </ul>		<p>Induction - all new staff receive a comprehensive induction and are fully aware of their roles and responsibilities.</p> <p>Evidence that induction meetings are being held and that new staff of the opinion that they are useful in relation to guidance and expectations, support, informing their practice and quality of work.</p>			

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		<p>qualification training and development opportunities, first year in practice guidance.</p> <ul style="list-style-type: none"> <li>• Strategy shared with staff for comments.</li> <li>• Induction expectations on Managers highlighted – this linked to advantages of new structure and increased number of practice leads.</li> <li>• HR related issues – weekly meetings established to address all related issues including recruitment.</li> <li>• 4 bilingual, newly qualified Social Workers recruited.</li> <li>• All social worker posts filled with temporary/permanent staff/recruitment in place.</li> <li>• Open advert for experienced social workers.</li> <li>• Session for induction guidance for Managers happened in March.</li> <li>• First year in practice guidance being reviewed by Practice Learning Co-ordinator</li> </ul>					
1.2	<p><b>Resolve Staffing matters to include:</b></p> <ul style="list-style-type: none"> <li>• Recruit to permanent posts</li> <li>• Exit strategy for agency staff</li> </ul>	<p><b>November 2017 – January 2018</b></p> <ul style="list-style-type: none"> <li>• One permanent Social Worker appointed early January</li> <li>• Fôn Roberts has been in post as Head of Service since early December.</li> <li>• We continue to reduce the number of Agency staff, 7 Agency staff are currently employed on a temporary basis covering 5 empty Social Worker Posts. One Agency Staff if funded through the Edge of Care Grant.</li> <li>• 2 members of staff have started their Traineeship.</li> <li>• A new recruitment initiative was put in place in November to try to attract permanent experienced Social Workers. Rolling adverts are included in the Guardian for a year.</li> <li>• 4 x additional Support Workers recruited within TAF funded from Families First</li> <li>• Additional Personal Advisor recruited funded with St. David's Day Welsh Government Grant</li> </ul>	<ul style="list-style-type: none"> <li>• Reduce the number of Agency staff.</li> </ul>	<p><b>Yet to be done</b></p> <p>A stable and permanent workforce which results in:</p> <ul style="list-style-type: none"> <li>• Consistency of practice across the service.</li> <li>• Improved quality of support to children and families.</li> <li>• Better relationships established between families and social workers leading to improved outcomes for children and families.</li> </ul> <p>Partners report an improvement in joint working with Children Services due to reduction in staff turnover.</p>	Senior Management Team and HR	Nov 2016	Ongoing

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		<p>to provide practical and emotional support to young people who leave care when they are 18years old.</p> <p><b><u>September &amp; October 2017</u></b></p> <ul style="list-style-type: none"> <li>• Head of Service has been appointed and will commence in post at the beginning of December.</li> <li>• We have recruited 8 new Social Workers over the last few months, all of whom are local and apart from one social worker are fluent Welsh speakers. This will ensure that we are able to meet the linguistic needs of children and families coming into contact with the service.</li> <li>• 7 Agency staff are currently employed on a temporary basis covering empty Social Work and Team Manager Posts.</li> <li>• We have developed Social Work Traineeship arrangements internally and 2 of our staff will now train to become qualified Social Workers over the next 2 years.</li> <li>• We have failed to appoint to the post of Quality Assurance Manager which has slowed our progress in relation to delivering on the Quality Assurance Framework.</li> </ul> <p><b><u>August 2017</u></b></p> <ul style="list-style-type: none"> <li>• Meetings are being held every two weeks between HR and Children's Services senior managers to ensure that recruitment and workforce development issues move on at pace. This to include regular updates on</li> </ul>					

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		<p>staffing levels, staffing chart and caseload.</p> <ul style="list-style-type: none"> <li>• Appointed the Resilient Families Team</li> <li>• Appointed 2.5 Engagement Officer in Teulu Môn</li> <li>• 8 Practice Leaders now appointed commencing on the 4<sup>th</sup> of September</li> <li>• Discussions to be held around extending Agency Staff contracts to be extended until end of December</li> </ul> <p><u>June/July 2017</u></p> <ul style="list-style-type: none"> <li>• Agency staff contracts extended until end of September 2017 to ensure workforce of sufficient numbers and experience. Aim to reduce agency social workers during September.</li> <li>• 1 qualified and 3 student social workers appointed to posts. 1 qualified and 1 student commencing in July. 5 vacant posts being advertised on a rolling basis</li> <li>• 7 Practice Leaders appointed. Further vacant post being advertised.</li> <li>• Appointed to vacant IRO post with commencement date of 10<sup>th</sup> of July.</li> <li>• Service Manager Early Intervention and Prevention appointed. Commencement middle of August.</li> <li>• Service Manager Intensive Intervention appointed. Agency Service Manager covering on a temporary basis.</li> <li>• Retaining permanent and temporary social workers continues to be a challenge for the service.</li> <li>• Providing sufficient support and guidance to staff remains a high priority.</li> </ul>					

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		<p><u>May 2017</u></p> <ul style="list-style-type: none"> <li>Weekly meetings established between HR and Children's Services senior managers to ensure that recruitment and workforce development issues move on at pace. This to include regular updates on staffing levels, staffing chart and caseload.</li> <li>We continue to lly for experienced social work posts on a rolling basis</li> <li>HR recruitment briefings have been held for Managers.</li> <li>HR to provide regular updates regarding recruitment and retention rates for the Service.</li> <li>Continued guidance from Finance on cost implications of agency staff.</li> <li>Exit strategy is in place for agency staff where posts have been filled by permanent workers.</li> </ul>					
1.3	<p>Review of <b>Supervision Policy</b>. This will include following:</p> <ul style="list-style-type: none"> <li>Code of Practice</li> <li>Formal and informal or ad-hoc Supervision</li> <li>Purpose of Supervision</li> <li>Benefits of Supervision</li> <li>Roles and Responsibilities</li> <li>Minimum Frequencies and Cancellation</li> <li>Planning for a Supervision Session</li> <li>Recording of Supervision</li> <li>Disputes</li> <li>Confidentiality and Access</li> </ul>	<p><u>November – January 2018</u></p> <ul style="list-style-type: none"> <li>An Audit of supervision arrangements commenced in October 2017 across Children's Services. This audit has not progressed as planned – as the relevant managers have not completed the work of auditing supervision records across teams. They have been asked to provide the reasons for this. Anecdotal evidence would suggest that this is an issue around recording of the supervision records. A staff survey has been completed: and this shows some positive results.</li> <li>Mentoring for managers on outcome-focused supervision workshops designed to develop reflective practice held in December for Practice Leaders.</li> </ul>		<p><b>Commenced</b></p> <p>Staff positively report that the quality of their assessments and plans have improved through regular and quality supervision. The Supervision Survey responses indicate a lack of consensus across the service on this: and the impact of supervision on the quality of practice needs further work. :</p> <p>The response to the impact of the new structure on the capacity to provide professional leadership to support the workforce through regular and quality supervision shows that this is still work in progress.</p>	Melanie Jones	Dec 2016	Ongoing tracking and auditing  QA June 2017

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	<ul style="list-style-type: none"> <li>Links with Other Policies and Procedures</li> </ul> <p>Links to CSSIW Recommendation 7:</p> <p>Senior leaders should take steps to improve the frequency, consistency and quality of front line staff supervision; an assurance mechanism must be implemented to ensure compliance and quality.</p>	<ul style="list-style-type: none"> <li>On-going advice and guidance provided to individual social workers on completing assessments, recording and assessing risk.</li> </ul> <p><b>September &amp; October 2017</b></p> <ul style="list-style-type: none"> <li>A feedback form has been developed by colleagues in Training to ask what staff have learnt from the training they have received, have they put what they've learnt into practice, what would they change about the course if anything. Staff completed these forms during the Staff Conference in October. We are currently analysing the information.</li> <li>A planning workshop was held for Senior Management Team with Rhonwyn Dobbing in preparation for the 3 outcome focused supervision workshops.</li> <li>We have continued to remind staff that supervision is a priority and that all staff need to have regular supervision in line with the Policy. Supervision continues to be tracked by the Head of Service to ensure compliance. Managers/Practice Leaders will be held accountable for non-compliance.</li> <li>Audit of supervision arrangements commenced in October 2017 across Children's Services, including staff perception of supervision through questionnaires and focus groups. Initial feedback from the auditor is that progress with the work is slow as managers are unable to provide all the records of supervision that were to have happened in the nominated period. It is unlikely that this review will provide evidence of systematic and consistent compliance with the policy.</li> <li>Practice Leaders are very new in post and have only been supervising their staff since the beginning of October. We will undertake a repeat audit in February 2018.</li> </ul>		<p>Clear guidance on standards and good practice clearly communicated and available to all through regular Supervision. 67% of responders agreed that supervision helped them better understand what they need to be doing. This needs building on.</p> <p>Managers complying with the Supervision Policy and Risk Model incorporated into Supervision sessions with staff. 83% agreed or strongly agreed that they were able to do this. This will be tested further during an evaluation of the recent coaching/mentoring of the Risk Model</p> <p>Regular audits across Children and Adult Services showing good quality and consistent Supervision. Regular audits are showing that improvement in management oversight and supervision remains inconsistent.</p> <p>Assurance mechanism established centrally to ensure compliance with Supervision policy.</p>			



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		<ul style="list-style-type: none"> <li>Mentoring by Bruce Thornton has started to work with each practice lead in terms of how they embed the Risk Model in their work including during supervision.</li> </ul> <p><b><u>August 2017</u></b></p> <ul style="list-style-type: none"> <li>Arrangements made with Rhonwyn Dobbing on undertaking outcome focused supervision training for Practice Leaders. Three workshops will be held and the purpose is to support supervisors in examining their role in outcome-focused supervision and to consider the value of outcome focused supervision for service users, workers, social work practice and for the organisation. It should also strengthen the role of supervisor, consider core skills and challenges for different practice groups.</li> </ul> <p><b><u>June/July 2017</u></b></p> <ul style="list-style-type: none"> <li>Training on the Supervision policy held and training on the risk model held in June.</li> <li>On-going tracking and monitoring of supervision arrangements to ensure compliance of the Policy.</li> </ul> <p><b><u>May 2017</u></b></p> <ul style="list-style-type: none"> <li>Supervision policy revised and shared with staff</li> </ul>		<p>Staff report that they are effectively supported to carry out their duties. – Circa 75% agreed or strongly agreed in the supervision survey that they are effectively supported to carry out their duties. 79% agreed or strongly agreed that they receiving supervision often enough.</p> <p>Managers’ report that they are enabled to support staff to the required standards. – 83% agreed or strongly agreed that they were able to do this.</p>			

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		<ul style="list-style-type: none"> <li>Tracking arrangements in place to monitor strict compliance with Supervision policy</li> <li>Supervision policy completed</li> <li>Training on the Risk Model and its link with staff Supervision has been provided to all staff in June.</li> <li>Supervision training provided to all staff and Managers.</li> </ul>					
1.4	<p>Provide <b>developmental opportunities for Practice Leaders to support the workforce</b> in carrying out their duties. Areas of focus:-</p> <ul style="list-style-type: none"> <li>Principles for making correct and safe case management decisions (management oversight of decision making)</li> <li>Improving and managing practice and performance including providing constructive challenge and direction to staff</li> <li>Managing difficult conversations</li> <li>Providing regular and quality Supervision</li> <li>Developing Practice leaders in coaching and mentoring skills</li> </ul> <p>Links to CSSIW Recommendation 6: Arrangements for team managers and senior practitioners should be</p>	<p><b>November – January 2018</b></p> <ul style="list-style-type: none"> <li>The office re-organisation has happened with Practice Leaders located with their Practice Groups.</li> </ul> <p><b>September &amp; October 2017</b></p> <ul style="list-style-type: none"> <li>The Service Induction Programme is continuing (see below)</li> <li>Practice Leaders took on responsibility of their Practice Groups at the beginning of October. Most had a 3 week induction period with no management responsibility for staff.</li> </ul> <p><b>August 2017</b></p> <ul style="list-style-type: none"> <li>A repeat audit was undertaken in May/June 2017 confirmed positive progress was being made in relation to referrals that proceeded to Strategy and Conference: Quality of Strategy Discussions/Meetings Quality of Assessment.</li> </ul> <p><b>Key Themes are as follows:</b></p> <ul style="list-style-type: none"> <li>Attendance and recording at Strategy Meetings has improved</li> <li>Increased use of Risk 2 tool</li> <li>Strategy meetings timely</li> </ul>	<ul style="list-style-type: none"> <li>HR to provide regular updates regarding recruitment and retention rates for the Service. (This could be part of what is discussed in the 6-8 weekly meetings with HR).</li> </ul>	<p><b>Commenced</b></p> <p>Managers' report enhanced confidence in their skills in making correct and safe case management decisions. <b>83% of staff who completed the Staff Questionnaire in November 2017 agreed.</b></p> <p>Staff report that they feel better supported by their line managers in carrying out their responsibilities leading to a reduction in staff turnover, improve staff retention and providing stability in the workforce. <b>74% of staff who completed the Staff Questionnaire in November 2017 strongly agreed or agreed.</b></p> <p>Increased confidence in workforce and organisational reputation in feedback from partners.</p>	Senior Management Team	Jan 2017	March 2018

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	<p>reviewed to ensure capacity to effectively and consistently provide management oversight of decision making, challenge and direction for staff across the service; a leadership and development programme should be made available to build resilience.</p>	<ul style="list-style-type: none"> <li>• Increased use of Chronologies evident</li> <li>• Improved quality of assessments evident.</li> <li>• Consistency of forms still a problem (S.W.report /Core/Risk2/ Care and Support Assessment and Eligibility tool all in use).</li> <li>• Conceptual shift from filtering risk to identifying strengths not fully embedded</li> <li>• An Away Morning was held on the 28<sup>th</sup> of July for Senior Staff Members to agree arrangements for the restructure of the service and to start discussing arrangements for Practice Leaders.</li> <li>• 8 Practice Leaders successfully appointed</li> <li>• Service induction programme is in place for September to include training sessions on: <ul style="list-style-type: none"> <li>• Vision for the Service, overarching organisation, SIP</li> <li>• Managing sickness absence &amp; Return to Work Interviews</li> <li>• Complaints and Flexi</li> <li>• Collaborative Communication</li> <li>• Supervision Workshops -3 x full days workshops on Outcome focused supervision</li> <li>• PLO and Court work</li> <li>• Time Management &amp; Diary Management, Prioritising Work and Expectations</li> <li>• Delivering ACE Parental Groupwork Sessions</li> <li>• Performance</li> <li>• Capability</li> <li>• Management Style Course</li> <li>• Quality Assurance and Audits</li> <li>• Thresholds &amp; Correct decision making and staff carrying out actions</li> <li>• Care planning &amp; Reviewing C &amp; S, CP &amp; LAC</li> <li>• Case recording</li> <li>• Assessments and Risk Model</li> <li>• Caseload Management – Allocation of cases, Step down to TAF and not closing cases to Children’s Services, reduced caseload for newly qualified – maximum 12 cases</li> </ul> </li> </ul>		<p>Regular case file audits showing an improvement in the quality of assessments and care and support plans.</p> <p>Regular audits across the Service showing correct and safe management decisions being made by Managers.</p>			

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		<ul style="list-style-type: none"> <li>Family Group Conferencing, Participation and Parenting Development Work</li> <li>North Wales Police Public Protection Unit</li> <li>CAFCASS</li> <li>Motivational Interviewing</li> </ul> <p><b><u>June/July 2017</u></b></p> <ul style="list-style-type: none"> <li>Audits started for Quarter 1: Case file audits, multi-agency audits, thematic audits, analysis available end of July</li> <li>Training held for Managers on Managing difficult conversations</li> <li>7 Practice Leaders appointed, 4 internal staff and 3 external.</li> <li>Training provided to Managers on Providing regular and quality Supervision</li> <li>4 Managers currently undertaking accredited Leadership and Development training.</li> <li>Service restructure and establishing smaller operational Teams is proceeding and will ensure increased capacity for Managers to provide consistent guidance, supervision and support to staff.</li> <li>Arrangements have been made for Adults Services Managers to support Children's Services Managers in their professional development.</li> </ul>					
1.5	<p><b>CSSIW Recommendation 4:</b></p> <p>Continue to support senior leaders to improve their knowledge and understanding of the complexities and risks involved in delivering children's services to assure themselves, partners, staff and communities</p>	<p><b><u>November – January 2018</u></b></p> <ul style="list-style-type: none"> <li>The Members Panel continues to meet on a monthly basis. Seven meetings have been held to date.</li> <li>3 Laming visits have happened since October 2017, with visits to the Early Intervention Service, Resilient Families Team and Specialist Children's Services</li> </ul>	<ul style="list-style-type: none"> <li>Continue to support senior leaders to improve their knowledge and understanding of the complexities and risks involved in delivering children's services.</li> </ul>	<p><b>Yet to be done</b></p> <p>Senior leaders' and elected members' report that their involvement in the Social Services panel has developed their understanding of the key underlying issues and risks associated with the service and their ability to scrutinise the effectiveness of the service.</p>	<p>Chief Executive</p> <p>Director of Social Services</p>	January 2017	On-going

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	<p>that their responsibilities are discharged to maximum effect.</p> <p><b>CSSIW Recommendation 8:</b> Strong political and corporate support for children's services must continue to ensure the service improvements needed are prioritised and the pace of improvement accelerated and sustained.</p>	<p><b><u>September &amp; October 2017</u></b></p> <ul style="list-style-type: none"> <li>• The Members Panel has continued to focus on monitoring and challenging the implementation of Children's Services Service Improvement Plan, holding the Director of Social Services and Head of Service to account. Four meetings have been held since the Local elections in May.</li> <li>• The purpose of Laming visits has been reviewed and the questions asked during visits are and will be linked to relevant outcomes in the SIP.</li> <li>• Laming visits for Members have been scheduled until May 2018. A recent Laming visit was undertaken to the Child Placement Team on 27.10.17 by the Assistant Chief Executive, Scrutiny Chair and an elected member of the Panel.</li> <li>• The Leader of the Council, is also the Portfolio Holder for Children's Services and she is very supportive and closely involved with the monitoring of the Service Improvement Plan through monthly meetings with the Head of Service to discuss progress and developments.</li> </ul> <p><b><u>August 2017</u></b></p> <ul style="list-style-type: none"> <li>• A schedule of monthly Laming visits between July 2017 and May 2018 has been presented and agreed by the Children Services Improvement Panel on 21/08/17. Laming visits have commenced.</li> <li>• Initial discussion held with Andrew Bennett, Public Health Research, Training and Consultancy about the possibility of running a session available for all Members/Senior Leaders around Adverse Childhood Experiences.</li> </ul>		<p>Senior managers within the service report that the support and challenge provided by senior leaders and elected members have continued to improve.</p> <p>Professional partners and communities report that the Council are effectively discharging their responsibilities in line with SS&amp;WB Act.</p> <p><b>Commenced</b> Senior leaders and elected members report that the Service Improvement Plan is delivered on time and to the required quality.</p>			

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		<ul style="list-style-type: none"> <li>• The Second Members Panel was held on the 21<sup>st</sup> of August and a tracking document has been produced for the work of the panel.</li> </ul> <p><b><u>June/July 2017</u></b></p> <ul style="list-style-type: none"> <li>• The new Council Leader/Director of Social Services the Interim Head of Children's Services and Interim Scrutiny Manager have reviewed the role of the SS&amp;WB Member panel in the creation of the ToR for the Children's Panel</li> <li>• Elected members and Senior Leaders to continue with regular Laming visits.</li> <li>• Children's Improvement Group held on a monthly basis chaired by the Director of Social Services to drive improvement and changes required.</li> </ul> <p><b><u>May 2017</u></b></p> <ul style="list-style-type: none"> <li>• SS&amp;WB Member panel to continue to monitor the completion of the Service Improvement Plan.</li> <li>• Elected members and Senior Leaders to continue with regular Laming visits.</li> <li>• Corporate Parenting work to be further developed (see.5.3).</li> <li>• Additional resources required to provide more insight regarding the complexities of Children Services</li> </ul>					

**2. Quality and timely assessments, interventions and decision making to protect, support and manage the risks for children: good quality chronologies, record keeping & research evidence and tools**

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2.1	<p>Improvement in the quality of practice.</p> <p><u>Areas of focus:</u></p> <ol style="list-style-type: none"> <li>1. Child protection, child protection and LAC social work visits</li> <li>2. Risk Model – improve analysis of risk</li> <li>3. Assessment - What matters, 5 areas of assessment.</li> <li>4. Outcomes focused plans</li> <li>5. Complete Care and Support plans under the SS&amp;WB Act</li> <li>6. Establish and maintain high quality relationships with children, young people and their families.</li> <li>7. Record keeping</li> <li>8. Collaborative Communications'</li> </ol>	<p><b>November – January 2018</b></p> <ul style="list-style-type: none"> <li>The Q3 analysis of practice quality has not yet been completed. A number of practice evaluations were held during the period – and the learning has been disseminated to the practice leads/managers. A summary conclusion is that practice remains inconsistent in many areas: and some of the basic requirements are not being met e.g. child protection plans, Care and Support Plans. Audits have shown that there are improvements in the standard of recording: however it is to the staffs credit that this is being maintained despite difficulties in familiarising themselves with a new system. There are some examples of Practice Leads seeking to work in a different way – to embed new ways of working: but this is not consistently applied across the service. However practice remains inconsistent: and that the service is yet to realise a number of its improvement objectives in terms of the quality of practice, assessment, analysis, risk</li> </ul>	<ul style="list-style-type: none"> <li>The Q1 2017/18 practice quality report – The Service must concentrate and ensure compliance with the basic requirements to improve performance data. The priority for the next reporting period is to improve assessing practice. Training is provided by Bruce Thornton on using the Risk Model in assessments. We will work with staff to define standards for assessments.</li> <li>Reflective Practice in Social Work <ol style="list-style-type: none"> <li>1. Child protection</li> <li>2. How to establish and maintain high quality relationships with children, young people and their families.</li> <li>3. Record keeping.</li> <li>4. Guidance to be developed on good practice around record keeping. Bruce Thornton commissioned to establish an operational model within the new system -WCCIS.</li> </ol> </li> </ul>	<p><b>Yet to be done</b></p> <p>Review the thresholds for a child becoming looked after as a consequence of evaluations that thresholds for CP registration and Part 4 meetings have been identified as poor practice</p> <p>Evidence in 'prevention' and 'supporting' with more children remaining at home.</p> <p>Regular audits undertaken confirming improvements in the quality of practice, assessing risk and record keeping.</p>	<p>Senior Management Team</p> <p>Training</p>	<p>Jan 2017</p>	<p>March 2018</p>

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	<p>course on strengths based conversations.</p> <p><b>Recommendation 10:</b> The quality of assessments and plans should be improved to ensure that they are consistently of a good quality, with a clear focus on the needs, risks and strengths of children and families, and that desired outcomes, timescales and accountabilities for actions are clear.</p>	<p>management and care and support planning</p> <ul style="list-style-type: none"> <li>An Interim Manager has been appointed to help drive practice improvements via coaching/mentoring, development of processes and procedures and establishing practice standards. This work is ongoing. The coaching and mentoring by Bruce Thornton on the Gwynedd/Thornton Risk Model is continuing and an evaluation is underway. Anecdotal evidence is that this is helpful.</li> <li>There has been less complaints to the service in Q3 compared to Q2, - 12 down to 3, and the positive comments increased from 24 to 31.</li> </ul> <p><b>September &amp; October 2017</b></p> <ul style="list-style-type: none"> <li>Collaborative Communications course held on the 28<sup>th</sup> and 29<sup>th</sup> of September and the shift to working under the SSWBA is still ongoing.</li> <li>The summary of quarter 2 performance does evidence a range of evaluation sources – management reviews, complaints, thematic audits, regular casefile audits. Main findings is that the practice remains inconsistent: and that the service is yet to realise a number of its improvement objectives in terms of the quality of practice, assessment, analysis, risk management and care and support planning. There are signs of some improvement in initial decision making and recording.</li> </ul>	<p>5. Practice guidance to be developed around CP and LAC social work visits.</p>	<p>Regular audits showing an improvement in the quality and consistency of record keeping and they are up to date and are systematically stored.</p> <p>Increase in positive feedback from service users on the progress they have achieved with the support of Children’s Services</p> <p><b>Commenced</b> An improvement in outcomes for children and young people with a reduction in children on CPR and looked after. This has been maintained and an evaluation undertaken of the reasons behind the reduction. This will need careful monitoring over the next period to ensure that the descalation has been maintained for individual families.</p> <p><b>Completed</b> Regional templates for ‘assessment’ / ‘care and support planning’ which clearly records needs, risks, strengths, outcomes, accountabilities for actions and their associated timescales are available for use within the service</p>			



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		<ul style="list-style-type: none"> <li>• Targeted interventions continue to be undertaken with individual Social Workers who have not improved the quality of their practice</li> <li>• A Court Action Plan has been developed to focus on improving the quality and analysis of all assessments undertaken to inform our decision making and will support arrangements for ‘front loading’ public law cases. Practice Leader’s now have oversight of the Court timeframe for cases within their Practice Groups and will support and guide Social Worker’s to ensure better preparation for Court and that documents are filed on time.</li> <li>• Children’s Services have adopted the Thornton/Gwynedd Risk Model to continue supporting social workers to work proactively with families to manage risk - spending much more time working alongside them helping them to change so that the family is a safe place for their children.</li> <li>• Bruce Thornton co-author of the model is undertaking a Practice Coach/Mentoring Development role for a period of 7 months to focus on: <ul style="list-style-type: none"> <li>• Providing coaching and mentoring to help develop the skills, knowledge and competence of practitioners and practice leaders.</li> <li>• Support Service Managers to implement, process, systems and procedures to ensure that the Risk Model is implemented within service processes</li> <li>• Support the development of the Risk Model within critical and reflective supervision.</li> </ul> </li> <li>• Despite the inconsistency in practice, we have positive evidence of the workforce working directly with</li> </ul>					

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		<p>families leading to improved outcomes.</p> <p>We have seen a significant reduction in the children on the Child Protection Register from 102 in March 2017 to 56 on the register on 31st of August, 2017 a 55% decrease.</p> <ul style="list-style-type: none"> <li>• The number of Looked After Children has remained consistent during the last 8 months because we are trying to support children to remain living at home when it is safe to do so.</li> <li>• Ongoing discussions regarding the requirements for Performance Monitoring Reports from the new Social Care System – WCCIS which was rolled out in August. We were only able to report on 4 out of the 6 corporate scorecard indicators due to further work being required to establish an accurate picture to current performance. This work has been ongoing and the Service has an action plan in place to improve the position and provide accurate and up to date data for consideration.</li> </ul> <p><b><u>August 2017</u></b></p> <ul style="list-style-type: none"> <li>• Audits – both case file and thematic – on a service and multi-agency basis - held during the month. Caseloads for frontline team remain higher than the service management team would wish for, evidence from audits suggests that practice remains inconsistent.</li> <li>• Draft Framework for Improving Quality of Practice developed for consultation</li> <li>• SMT considering findings of the Q1 quality report – recommend</li> </ul>					

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		<p>prioritising improvements in assessment practice</p> <ul style="list-style-type: none"> <li>• Challenged and supported individual workers to improve their practice</li> <li>• Practice evaluation Report Q1 2017/18 doc Case file auditing completed on the following practice areas: LAC step down audit, Report for placement panel, planned monthly case file audits by Team Managers, Responsive auditing (Stage 2 complaints) and Initial decision making, screening, strategy discussions and meetings and simple assessment. Service User views and evaluation of previously conducted management reviews. This report shows that practice remains inconsistent however; there are examples of good practice that have been confirmed by CSSIW as achieving the required outcome for the child/ren and their families.</li> <li>• CSSIW tracked two cases – ‘Case files were read, social workers, managers and families interviewed. The cases provided evidence of good outcomes for families. A good range of services were effectively used. The social workers interviewed were very motivated and committed to providing a high quality service. They achieved a very high level of engagement with the families. The families were motivated and supported to address and change deeply engrained patterns of behaviour related to substance misuse and domestic violence. Social workers were well supported although not always through formal supervision.’</li> </ul> <p><b>Case 2 provided evidence of :</b> ‘Good use of systems and services. A good range of services - LAC, Domestic Violence, FGC in planning,</p>					

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		<p>specialist service therapeutic assessment.</p> <p>Children's and family's needs have been met. Social worker was skilled able to maintain her relationship with mother and children and do direct work with children. From the discussions and file she had made a significant contribution in moving the mother's expectations, thanking and behaviour.'</p> <ul style="list-style-type: none"> <li>• A repeat audit was undertaken in May/June 2017 on the referrals that proceeded to Strategy and Conference: Quality of Strategy Discussions/Meetings Quality of Assessment.</li> </ul> <p><b>Key Themes are as follows:</b></p> <ul style="list-style-type: none"> <li>• Attendance and recording at Strategy Meetings has improved</li> <li>• Increased use of Risk 2 tool</li> <li>• Strategy meetings timely</li> <li>• Increased use of Chronologies evident</li> <li>• Improved quality of assessments evident.</li> <li>• Consistency of forms still a problem (S.W.report /Core/Risk2/ Care and Support Assessment and Eligibility tool all in use).</li> <li>• Conceptual shift from filtering risk to identifying strengths not fully embedded</li> <li>• Teulu Môn practice guidance being developed by the Early Intervention Service Manager</li> <li>• Bruce Thornton has been commissioned to produce Guidance on Record Keeping and Decision Making</li> <li>• The quality of practice continues to be inconsistent.</li> </ul>					

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		<ul style="list-style-type: none"> <li>• Draft Multi Agency practice guidances have been completed to be ratified at the next Local Delivery Safeguarding Group in October, areas covered are               <ul style="list-style-type: none"> <li>• Multi Agency Child Protection Practice Guidance Investigation Thresholds</li> <li>• Multi Agency Child Protection Practice Guidance – Key Workers and Core Groups</li> <li>• Multi Agency Child Protection Practice Guidance- Registration Thresholds.</li> <li>• Part 4 AWCPP2008</li> <li>• Making Referrals</li> </ul> </li> <li>• A draft document has been produced setting out the way of working for the service (Collaborative communication, co- production and assessment of risk). In preparing this document the service has considered the need to improve practice in relation to forming good quality assessments and respond to the requirements within the Social Services and Wellbeing Act (Wales) 2014 to work collaboratively with children and families. This document sets out the service’s vision in how we will assess risk, co-produce and conduct collaborative communication with children and families in Anglesey.</li> </ul> <p><b><u>June/July 2017</u></b></p> <ul style="list-style-type: none"> <li>• Audits started for Quarter 1: Case file audits, multi-agency audits, thematic audits, analysis available end of July.</li> <li>• Challenged and supported individual workers to improve their practice</li> <li>• The quality of practice continues to be inconsistent.</li> </ul>					

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		<ul style="list-style-type: none"> <li>• Staff session held for Social Workers to discuss practice standards and ask staff for ideas on what would help to improve the way of working</li>   <li><b><u>May 2017</u></b></li> <li>• Training Unit have arranged training for all social care staff on: <ul style="list-style-type: none"> <li>• Assessing Carers in the Long-term</li> <li>• Implementing the Induction Framework for Foster Carers</li> <li>• Changing Culture and Measuring Performance in line with Social Services and Well-being Act</li> <li>• Collaborative Communication / Outcome focused conversations</li> <li>• Regional Templates – Including Assessment, What matters, 5 areas of assessment, Care and Support plans which are Outcome focused</li> <li>• Making the Most of Supervision – for Managers</li> <li>• Providing Constructive Feedback and Managing difficult conversations</li> <li>• Making the Most of Supervision – for staff</li> <li>• IFSS Resilient Families training (including Brief Solution Focused Therapy and Motivational Interviewing)</li> <li>• Collaborative Communication - follow-up</li> <li>• General Safeguarding for Social Workers</li> <li>• Risk Model</li> <li>• Child Sexual Exploitation and Return Home Interviews</li> <li>• Motivational Interviewing</li> </ul> </li> </ul>					

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2.2	<p><b>CSSIW recommendation 3:</b> Senior leaders in social services and the police will work together to ensure improvements to the:</p> <ol style="list-style-type: none"> <li>1. quality,</li> <li>2. consistency and</li> <li>3. timeliness</li> </ol> <p>of child protection enquiries.</p> <p>Practice Guidance to be developed between Police and Children services around child protection referrals, strategy discussion/meetings and enquiries.</p>	<p><b>November – January 2018</b></p> <ul style="list-style-type: none"> <li>• Following analysis of CID 16 referrals work is on-going between the Police and Children’s Services.</li> <li>• Discussion around piloting arrangements in relation range of measures to improve the flow and quality of information shared between both agencies.</li> </ul> <p><b>September &amp; October 2017</b></p> <ul style="list-style-type: none"> <li>• Regular audits show that there is conflicting evidence in terms of the improvement in the quality, consistency and timeliness of child protection enquiries. A distance travelled audit concluded that attendance and recording at Strategy Meetings had improved and that the strategy meetings were timely. However the Case File Audit (July) and a management review concludes that in several cases auditors expressed concern about strategy discussions or meetings: <ul style="list-style-type: none"> <li>• Not always being held in a timely manner – e.g. one was not till 3 weeks after decision made to hold one</li> <li>• Minutes of discussions are insufficient – i.e. too brief</li> <li>• References are made for need for follow up strategy meetings and then there is no evidence that they have been held.</li> </ul> </li> <li>• This is reflected in the Thematic Audit Part 4, and a review of Children subject to Child Protection Plans –decision making, delays, and lack of clear plans and follow through being issues identified.</li> </ul>		<p><b>Yet to be done</b> Regular audits show an improvement in the quality, consistency and timeliness of child protection enquiries leading to improved outcomes for children and young people.</p> <p>Staff report clearer guidance and improved understanding of roles and responsibilities through the implementation of the Practice Guidance.</p>	Service Mangers	Jan 2017	Ongoing

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		<ul style="list-style-type: none"> <li>• High level discussions have been held between North Wales Police and Children’s Service around piloting a Multi-Agency Information Advice and Assistant hub. This will progress further in November.</li>   <li>• The Police are making progress with their analysis of CID 16’s, and is suggesting that the next step will be for both teams to meet to compare their conclusions.</li> <li>• Draft Multi Agency practice guidances have been completed including: <ul style="list-style-type: none"> <li>• Multi Agency Child Protection Practice Guidance Investigation Thresholds</li> <li>• Multi Agency Child Protection Practice Guidance – Key Workers and Core Groups</li> <li>• Multi Agency Child Protection Practice Guidance- Registration Thresholds.</li> <li>• Part 4 AWCPP2008</li> <li>• Making Referrals</li> </ul> </li> <li>• The Multi Agency guidance will be ratified by the Corporate Safeguarding Board in December, and will be used by Housing, Education and Partner Agencies in relation to the Safeguarding process. The guidance will also be discussed in the Regional Policies and Procedures Sub Group for them to be used regionally. A training plan will be developed to ensure arrangements are in place for staff to use the Practice Guidance.</li> </ul> <p><b><u>August 2017</u></b></p>					



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		<ul style="list-style-type: none"> <li>• We have met the IAA hub equivalent in both Conwy and Flintshire County Councils in order to explore options and share their experiences. The visit with both Conwy and Flintshire has assisted us in forming clearer mission for our own IAA.</li> <li>• Developed scope of work with the police on joint audit and improvement in terms of referrals, Strategy meetings and s47 investigations.</li> <li>• An audit was carried out on all 81 referrals which were received by Children's Services from the Public Protection Unit in the form of CID 16's between 1<sup>st</sup> and 14<sup>th</sup> of June 2017. 20 of the referrals were deemed to be not clear in the reason for sharing the information. Of the 81 only seven stated what the anticipated outcome for the referral would be. Only 15 referrals contained the voice of the child.</li> </ul> <p>The Public Protection Unit must ensure that they are more specific in why they are referring the information and must not refer simply because there are children linked to the adults involved.</p> <ul style="list-style-type: none"> <li>• CSE and Return Home Interviews for looked after children, work is being done to improve performance in these areas taking place with partners - Police and the 6 North Wales Local Authorities.</li> <li>• A repeat audit was undertaken in May/June 2017 on the referrals that proceeded to Strategy and Conference: Quality of Strategy Discussions/Meetings Quality of Assessment. See 2.1</li> </ul> <p><u>June/July 2017</u></p> <ul style="list-style-type: none"> <li>• Protocols currently drafted for:</li> </ul>					

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		<ul style="list-style-type: none"> <li>• Multi Agency Child Protection Practice Guidance Investigation Thresholds</li> <li>• Multi Agency Child Protection Practice Guidance – Key Workers and Core Groups</li> <li>• Multi Agency Child Protection Practice Guidance- Registration Thresholds.</li> </ul> <p>Set of protocols likely to be ready for October.</p> <ul style="list-style-type: none"> <li>• 2 week analysis started 10/07/17 in relation to all CID16's that are received at Teulu Môn in order to ensure that appropriate referrals are made to the Council and understand the data and to explore information sharing. A meeting was held on the 26<sup>th</sup> of June.</li> <li>• Monthly meetings arranged between Children Services and NWP to address operational matters and to develop a Practice Guidance around child protection referrals, strategy discussion/meetings and enquiries.</li> <li>• HOS is made aware of any on-going operational difficulties in relation to joint working with the Police to ensure they are urgently addressed and that children are not left in vulnerable positions.</li> <li>• Audit to be undertaken to monitor the quality, consistency and timeliness of child protection enquiries.</li> </ul> <p><b><u>May 2017</u></b></p> <ul style="list-style-type: none"> <li>• Positive discussion held with the Police regarding cooperation.</li> </ul>					

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2.3	<p><b>CSSIW recommendation 9:</b> Multi-agency arrangements should be established to strengthen operational plans to support effective co-ordination of statutory partners' completion of Joint Assessment Frameworks.</p> <p>Practice Guidance to be developed between Children Services, Health, Police and Education to ensure clarity in relation to operational arrangements – agreed referral threshold, improvement in the quality of referrals, attendance at strategy meetings, core group meetings and information sharing.</p>	<p><b>November – January 2018</b></p> <ul style="list-style-type: none"> <li>We have received permission from Welsh Government to amalgamate the current Joint Assessment Framework (JAF) to the care and support assessment form. Work on including the measures that the JAF collects has commenced. The Care and Support Assessment and Plan will be used instead of the JAF.</li> <li>Multi Agency operational meetings with Police, Health Board, CAMHS, Paediatrician and Education are taking place monthly to discuss joint working arrangements to improve and strengthen current arrangements e.g. the quality of referrals received by Children and Families Services.</li> </ul> <p><b>September &amp; October 2017</b></p> <ul style="list-style-type: none"> <li>Work progressed on improving the quality and our understanding of the care and support assessments (Part 1,2,3) this includes the core data set, the what matters conversation and care and support assessment.</li> <li>We have been working to improve our understanding of the national eligibility criteria and gain consistency in recording the eligibility criteria in our assessments. We have identified suitable methods of communication, prompts and tools to improve the quality of the what matters conversation, decision making process and recording.</li> </ul>		<p><b>Yet to be done</b> Improved multi agency safeguarding arrangements leading to improved outcomes and experiences for children and young people.</p> <p><b>Commenced</b> A multi-agency Practice Guidance clearly defines local roles and responsibilities and safeguarding arrangements.</p>	Early Intervention Service Manager	Jan 2017	Ongoing re multi agency arrangements

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		<p><u>August 2017</u></p> <ul style="list-style-type: none"> <li>Practice guidance completed see 2.2</li> <li>Meetings held with CAMHS and CAFCASS</li> </ul> <p><u>June/July 2017</u></p> <ul style="list-style-type: none"> <li>Arrangements have been made to hold a multi-agency task and finish group under the local delivery safeguarding group to develop the practice guidance.</li> </ul> <p><u>May 2017</u></p> <ul style="list-style-type: none"> <li>Local Delivery Safeguarding Group agreed on 16.2.17 that a Gwynedd and Ynys Mon multi-agency meeting should be held to discuss current working arrangements and difficulties and to bring them to the attention of the RSCB.</li> <li>Practice Guidance to be developed between Children Services, Health, Police and Education to ensure clarity in relation to operational arrangements – agreed referral threshold, improvement in the quality of referrals, attendance at strategy meetings, core group meetings and information sharing, see. 3.3(4)</li> </ul>					

3. Quality assurance and performance framework that supports the local authority in effectively managing its responsibilities towards children

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<p>3.1 Review all children who are looked after to ensure outcome based care and support plans are in place in securing permanence.</p> <p>A service and corporate understanding of the profile of looked after children and children on the CPR.</p> <p>Review all cases where the child's name has been on the CPR for 12months + to decide if cases should be discussed in Legal Gatekeeping Panel (care proceedings)</p>	<p><b>November – January 2018</b></p> <ul style="list-style-type: none"> <li>A review of residential placements is underway.</li> <li>A monthly meeting is held by a Service Manager to discuss the children on the CPR who have been on the register for at least 10 months with Practice Leaders to decide on any actions required for example discuss case in Legal Gatekeeping.</li> <li>The service is looking at developing local care provision to meet the growing demands of Looked After Children, such as: <ol style="list-style-type: none"> <li>Small Group Homes.</li> <li>Salaried foster Carers and a</li> <li>Overall of the Current fostering offer</li> </ol> </li> </ul> <p>This is favoured by the elected members not only in relation to cost but more importantly so we can keep Anglesey children within their locality, albeit not living with their birth family.</p> <p>The Services completed the Looked After Self-Assessment for Care Inspectorate Wales on the 26<sup>th</sup> January 2018. The Challenge Meeting is due to take place on 27<sup>th</sup> of March 2018.</p>	<ul style="list-style-type: none"> <li>Aim to reduce the number of Children becoming Looked After by: <ul style="list-style-type: none"> <li>Engaging family, friends and community earlier</li> <li>Being creative – additional support/provision</li> <li>Completing in-depth Care &amp; Support Assessments</li> <li>Engaging the child/young person in the Assessment process</li> <li>Listening to children and Young People</li> <li>SMART Care &amp; Support planning</li> <li>Resilient Families intervention</li> </ul> </li> <li>Need to move away from thinking the needs of Children and Young People can be best met by bringing them into care.</li> <li>When parents request for their child(ren) to be brought into care they must be told that the steps mentioned above* must be worked through.</li> </ul>	<p><b>Commenced</b></p> <p>Intensive work with those looked after children and young people who need 'step down' arrangements are successful leading to improved outcomes.</p> <p>Council is assured that placements are meeting the needs of looked after children and young people. Children rehabilitated safely home through placement with parents/discharge of Care Orders.</p> <p>LAC Review recommendations are prioritised by Social Workers and the pace for completing assessments and outstanding work is accelerated and sustained.</p> <p>Reduction in the number of children in residential placements by the end of March 2018 due to intensive work undertaken to move them to 'step down' arrangements.</p> <p>Costs and expenditure on costly placements have reduced significantly because of 'step down' arrangements for children and young people.</p>		Jan 2017	March 2018

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		<p>The Service also completed the Adoption Review on 25<sup>th</sup> January 2018 with Care Inspectorate Wales.</p> <p><b><u>September &amp; October 2017</u></b></p> <ul style="list-style-type: none"> <li>We are seeing evidence of the workforce working directly with families leading to improved outcomes – as we have seen a significant reduction in the children on the CP register from 102 in March 2017 to 56 on the register on 31<sup>st</sup> of August, 2017, 55% decrease.</li> <li>Work has continued in relation to stepping down arrangements from residential care, 3 young people have been identified to either return home or move to alternative care arrangements.</li> <li>Further work has been undertaken by the Resilient Families Team to ensure there is progression in preventing children becoming looked after and progressing with the stepping down arrangements for the 3 young people mentioned above.</li> <li>Recruitment to Social Work post to revoke care orders has commenced.</li> </ul> <p><b><u>August 2017</u></b></p> <ul style="list-style-type: none"> <li>Review undertaken of Case Conference minutes for 34 children – indicated that in a significant number of cases there was no evidence to justify the judgement of further significant harm. A Practice Leader is now reviewing the same minutes in an attempt to verify the findings.</li> </ul>		<p>Case file audit showing that care planning by Social Workers for looked after children is significantly improved through implementation of the Practice Guidance.</p> <p>Review of looked after children and children on the CPR provides detailed information and understanding of their needs. This will assist with the prevention strategy and the work of the Resilient Families Team.</p>			

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	<ul style="list-style-type: none"> <li>• One case referred for management attention as the children had been on the register for 4 years. This was positive and led to clearer decision making, direction and action.</li> <li>• The profile of children on the CP register has been completed, work has progressed to reduce the number of children on the register. The number of children on the register on the 31<sup>st</sup> of August 2017 was 56 compared to 102 at the end of March 2017, 55% decrease. Practice Leader identified to focus on improvements around the quality of work in relation to CP conferences and reducing the length of time that children remain on the register.</li> <li>• Work started to understand and challenge “notice periods” given by care providers.</li> <li>• Work started to challenge Quality of placements offered.</li> <li>• Resilient Families team appointed and we have started to work under the Resilient Families model with families.</li> </ul> <p><b><u>June/July 2017</u></b></p> <ul style="list-style-type: none"> <li>• A review all children who are looked after has happened and children who need to be ‘Stepped Down’ have been identified.</li> <li>• Head of Service chairs a group – Internal review panel for residential placements:</li> <li>• Ensure that care and support plans meet their wellbeing outcomes to ensure that the LAC review recommendations are actioned and to ensure value for money.</li> <li>• Resilient Families Team posts have now closed.</li> <li>• Care planning for looked after children to be strengthened through development of additional Practice Guidance.</li> <li>• Permanency policy currently under review</li> </ul>					

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	<ul style="list-style-type: none"> <li>We have started to practice differently and more intensively with a small number of families following a similar model to the work of the Intensive Family Support Services. This is the work the Resilient Families Team will be undertaking to support children living at home: both preventing the need for accommodation and supporting return home plans.</li> </ul> <p><b>May 2017</b></p> <ul style="list-style-type: none"> <li>Team Managers to confirm by May 2017 which children/young people will have 'step down' care and support plans.</li> <li>Agreement reached by May 2017 over the tasks required to achieve permanence and the intensive work required with looked after children /young people and their families to ensure 'step down' arrangements are successful.</li> <li>Posts within Resilient Families Team and appointments made by May 2017.</li> <li>Care planning for looked after children to be strengthened through development of additional Practice Guidance.</li> </ul>					
<p>3.2 Strengthen and embed the Quality Assurance Framework within the Service, through:</p> <ol style="list-style-type: none"> <li>IRO and CPC to report quarterly on their assessment of the operational performance through conference and review.</li> <li>IRO and CPC to draw out, on a thematic basis, issues regarding quality</li> </ol>	<p><b>November – January 2018</b></p> <ul style="list-style-type: none"> <li>There is less compliance by managers and Practice Leads with the requirements to complete audits on a planned way.</li> <li>The Safeguarding Unit have worked together on two thematic reports during this period – which will be fed into the Q3 report. This strengthens the oversight and overview of the independent officers and puts in place another element of the IQ Framework.</li> </ul>	<ul style="list-style-type: none"> <li>Guidance to be developed around caseload management to ensure there is sufficient capacity for workers to engage effectively with children and their families –</li> </ul> <p><b>Next steps</b></p> <ul style="list-style-type: none"> <li>Recommitment to systemic and planned audits</li> <li>Provide Tools, support and training to staff to implement the framework</li> </ul>	<p><b>Yet to be done</b></p> <p>WCCIS is supporting performance management and caseload management through easily accessible 'reporting' features made available to Managers.</p> <p>Workers have sufficient capacity to engage effectively with children and</p>	Safeguarding and Quality assurance Service Manager	Jan 2017	March 2018



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<p>and learning for the Service.</p> <p>3. Managers to undertake regular audits on focused areas:</p> <ul style="list-style-type: none"> <li>• Supervision</li> <li>• Recording</li> <li>• Assessment</li> <li>• Quality, consistency and timeliness of child protection enquiries</li> </ul> <p>Caseloads and reports regarding the quality of workers' performance to be continuously monitored.</p> <p>CSSIW Recommendation 13: Performance management and quality assurance arrangements, including scrutiny of service demand and routine auditing of the quality of practice, needs to be embedded so that managers at all levels have timely, relevant and accurate performance and quality assurance information to enable them to do their jobs effectively and to deliver improvements.</p> <p>CSSIW Recommendation 14: Caseloads and reports regarding the quality of workers' performance should be continuously monitored to ensure there is sufficient capacity for workers to</p>	<ul style="list-style-type: none"> <li>• An implementation plan for the remaining elements of the IQF has been developed in collaboration with managers and practice leads: and this will need approval by the SMT in its next meeting.</li> <li>• An interim manager has been brought in as additional capacity to continue in the development of the improvement in a planned and systemic way. The substantive Quality Assurance post currently advertised.</li> <li>• All cases that have been judged as inadequate in previous audits will be reviewed by the interim manager.</li> <li>• Guideline to support Practice Observation developed: currently with Practice Leads for consultation.</li> <li>• Continued provision of Risk Model Coaching and Mentoring</li> <li>• Good Practice Group established to take forward the drive improvement and changes to practice across the Service through learning from thematic and qualitative reports/ This needs time to embed and make an impact.</li> </ul> <p><b>September &amp; October 2017</b></p> <ul style="list-style-type: none"> <li>• Quality Improvement Framework approved by the Service Management Team following a period of development, consultation and collaboration. The aim of the framework is to the approach that Children's Services will take to ensure that it is</li> </ul>	<ul style="list-style-type: none"> <li>• Revise the Audit Plan in line with Q2 Summary Evaluation Report</li> <li>• Continued provision of Risk Model Coaching and Mentoring</li> <li>• Agreeing Practice Standards</li> </ul>	<p>their families through Manager's implementation of the caseload Guidance.</p> <p><b>Commenced</b></p> <p>Quality assurance reports and case file audits showing evidence of improvement in the quality of practice and learning and of safe decision making at all levels. See previous comments. practice remains inconsistent: and that the service is yet to realise a number of its improvement objectives in terms of the quality of practice, assessment, analysis, risk management and care and support planning</p> <p>IRO/CPC have an improved quality assurance role leading to learning and improvement in the quality of practice.</p> <p>Managers provide monthly highlight reports to Service Managers and HOS on the quality of workers' performance to ensure there is sufficient capacity for them to engage effectively with children and their families.</p>			

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<p>engage effectively with children and their families.</p>	<ul style="list-style-type: none"> <li>• Providing safe professional practice</li> <li>• Supporting the right children/adults, in the right way, at the right time</li> <li>• Evaluating whether it is making a difference to practice improvement</li> <li>• Providing a professional context that supports learning, reflection, openness and supportive challenge</li> <li>• Taking the improvement agenda beyond compliance with procedure to a commitment to improve the quality of the social work practice delivered to children, their families and carers.</li> </ul> <ul style="list-style-type: none"> <li>• A number of the key elements of the framework are in place – <ul style="list-style-type: none"> <li>• Communication and ensuring a shared dialog about quality</li> <li>• Practice improvement group: sharing disseminating: shared dialogue</li> <li>• Coproduce standards</li> <li>• Provide training and development opportunities</li> <li>• Provide practice guidance and procedures</li> <li>• Recruit and retain the right people</li> <li>• Supervision Expectations</li> <li>• Management Overview Expectations</li> </ul> </li> <li>• The process of casefile audits &amp; Multi Agency Audits are taking root within the service.</li> </ul>		<p>QA and Safeguarding Unit to drive improvement and changes to practice across the Service through learning from thematic and qualitative reports.</p> <p>Improvement in the quality, consistency and timeliness of child protection enquiries.</p> <p><b>In Place</b></p> <p><b>Regular and timely qualitative reports are submitted without delay to the leadership team, including members.</b></p> <p><b>Framework and tools for structured governance and scrutiny arrangements through regular case file audits.</b></p>			

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		<ul style="list-style-type: none"> <li>• The Head of Service has decided to set up a scrutiny panel within the service to maintain an overview in relation to permanency planning.</li> <li>• The Improving Quality Framework recommends setting up an IRO recommendations and challenge log. Audits have shown that in the cases where delay in progressing a child's care and support plan (under part 6) the IRO had been recommending steps to achieve permanency. Those recommendations had not been progressed.</li> <li>• Priority for the next reporting period is Social Work assessments: integrating the risk model into practice and ensuring that the assessment becomes the "currency" within the service.</li> <li>• Bruce Thornton has been commissioned to provide a mentoring/coaching role within the service to ensure that the Risk Model is embedded into practice.</li> <li>• Successful workshop held with staff committing to the vision in the Quality Assurance framework and beginning to work together to provide a different approach. Staff Morale was good and they found the new approach refreshing. The focus is on the officers to report quarterly on their assessment of the operational performance through conference and review, drawing out on a thematic basis, issues regarding quality and learning for the Service. They are currently working on a report on the lack of preparation, reports and plans for reviews and conferences. They will also suggest improvement actions.</li> </ul>					

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	<p><b><u>August 2017</u></b></p> <ul style="list-style-type: none"> <li>• Business Support Officer for Statutory Reviews and Case Conferences appointed</li> <li>• Improving Practice Co-ordinator post advertised previously titled 'Quality Assurance Manager'</li> <li>• Managers have been undertaking regular audits of the focused areas to monitor the quality of workers performance.</li> <li>• Repeat audits on decision making shows improvement in practice. See 2.1</li> <li>• Audits – both case file and thematic – on a service and multi-agency basis - held during the month</li> <li>• Draft Framework for Improving Quality of Practice developed for consultation</li> <li>• SMT considering findings of the Q1 quality report – recommend prioritising improvements in assessment practice</li> <li>• Challenged and supported individual workers to improve their practice</li> </ul> <p><b><u>June/July 2017</u></b></p> <ul style="list-style-type: none"> <li>• Quality assurance work in Quarter one has included: LAC profile analysis Case file audit Caseload analysis</li> <li>• Recruitment to the business support for Statutory Reviews and Case Conferences to happen by the end of July.</li> <li>• Appointments to vacant IRO post commenced in July.</li> <li>• Further developments have been made with regards to multi agency quality assurance audits with Education and the Health Board to improve on the quality</li> </ul>					

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	<p>of referrals and information shared with partner agencies.</p> <ul style="list-style-type: none"> <li>• Additional funding was agreed for re-establishing the Quality Assurance Manager, post was advertised however we failed to appoint.</li> <li>• Audit of PLO cases completed</li> </ul> <p><b>May 2017</b></p> <ul style="list-style-type: none"> <li>• Quality Assurance Framework has been revised and approved by Children Services.</li> <li>• Quality Assurance Action Plan agreed for the next 12 months focusing on regular audits on focused areas: <ul style="list-style-type: none"> <li>• Supervision</li> <li>• Recording</li> <li>• Assessment</li> </ul> </li> <li>• Quarterly Assurance reports to be discussed at Children Services Management meeting and a Practice Improvement Group to be established to take forward practice improvements.</li> <li>• Managers to provide monthly highlight reports to Service Managers and HoS on the quality of workers' performance to ensure there is sufficient capacity for them to engage effectively with children and their families.</li> </ul>						
3.3	<p>Develop the performance framework for Children and Adult Services to include:</p> <p>1. Outline Performance indicators split into National, Corporate and Service performance.</p>	<p><b>November – January 2018</b></p> <ul style="list-style-type: none"> <li>• Action plan continues to be in place as an interim measure to capture information and report on PIs.</li> <li>• We are still writing the scripts to access reports from WCCIS – this is a problem for most of the local authorities that have gone live on the new system, and we're working with Ceredigion Council in particular to enable us to do this. There</li> </ul>	<ul style="list-style-type: none"> <li>• External Project Manager will commence work with the Service to scope what is required from the System and look at the long term goals in terms of best use of technology for example.</li> <li>• A Project Board will be set up.</li> </ul>	<p><b>Yet to be done</b></p> <p>Overall, a continuous improvement in performance and outcomes for children/young people.</p> <p>Improvement in staff's level of understanding of performance</p>	Interim Head of Children Services	March 2017	Oct 2017

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<p>2. Governance arrangements to include reporting, accountability and mechanism in driving improvement.</p> <p>3. Continues improvement embedded within the framework.</p> <p>4. Framework to provide evidence on the quality of practice and experiences of service users</p> <p>5. Improvement required in priority areas of performance that is outside tolerance and targets:</p> <ul style="list-style-type: none"> <li>• Assessment</li> <li>• Lac Reviews</li> <li>• LAC visits</li> <li>• CP visits</li> <li>• Core group meetings</li> <li>• Pathway Plans</li> </ul> <p>These will be brought back into target</p>	<p>appears to be a national issue in relation to the consistency of interpretation and reporting for all Local Authorities against the new Performance Indicator's introduced by the Social Services and Well Being Act (Wales) 2014. A letter dated 25th of October was received from Glyn Jones, Chief Statistician, Welsh Government. This letter highlighted the temporary suspension of National Statistics designation for Social Service publications due to concerns about the quality of the data being reported following the introduction of the new Welsh Community Care Information System (WCCIS).</p> <p><b><u>September &amp; October 2017</u></b></p> <ul style="list-style-type: none"> <li>• Action Plan in place as an interim measure to report against Performance Indicators until these reports can be extracted from the WCCIS system. We have worked closely with the Corporate Transformation Team on this matter in relation to strengthening the reporting and monitoring arrangements.</li> <li>• We are writing the scripts to access reports from WCCIS – this is a problem for most of the local authorities that have gone live on the new system, and we're working with Ceredigion Council in particular to enable us to do this.</li> <li>• We have looked in detail at one of the indicators, % of looked after children seen within statutory time-scales, and suspect that our data collection and analysis may not have been correct, leading to performance that appear worse than they are in reality. Work is progressing to address these issues.</li> </ul>		<p>indicators and the clear link with the quality and timeliness of practice. This leading to a continuous improvement in performance and outcomes for children/young people – one indicator being a reduction in looked after children.</p> <p><b>Commenced</b></p> <p>Strengthening the reporting and monitoring arrangements in relation to Performance information.</p> <p>Performance information showing an improvement in performance and brought back into target:</p> <ul style="list-style-type: none"> <li>• Assessment</li> <li>• Lac Reviews</li> <li>• LAC visits</li> <li>• CP visits</li> <li>• Core group meetings</li> <li>• Pathway Plans</li> </ul>			

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**August 2017**

- We continue to challenge and support individual workers to improve their practice
- A significant improvement has been made in relation to LAC review visits for August after reviewing how the indicators were being measured. 86% of visits being held within timescale.
- We are now prioritising indicators relating to Lac Reviews, LAC visits, CP visits, Core group meetings. We will focus on Timescales, Purpose, Recording and Performance.

**June/July 2017**

- Challenged and supported individual workers to improve their practice
- Practice Guidance currently drafted for:
  - Multi Agency Child Protection Practice Guidance Investigation Thresholds
  - Multi Agency Child Protection Practice Guidance – Key Workers and Core Groups
  - Multi Agency Child Protection Practice Guidance- Registration Thresholds.
  - Service standards are being developed to ensure good practice in relation to key performance that is outside tolerance and targets.

**May 2017**

- Commissioning external expertise in May 2017/June to develop the

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	<p>performance framework across both Children and Adult Services</p> <ul style="list-style-type: none"> <li>An enhanced tracker system will be developed, based on Best Practice elsewhere; combined with a new structure for Children's Services, this will enable Team Managers/Practice Leaders to ensure visits are completed when staff are absent from work (whether on annual leave or absent due to sickness absences).</li> </ul>					
<p>3.4 <b>CSSIW Recommendation 2:</b> Establish multi-agency quality assurance systems and training arrangements to ensure that thresholds for assessment to statutory children's services are understood by staff and partners and are consistently applied.</p> <p>Development of a multi-agency child protection thresholds protocol incorporating recent Welsh Government guidance.</p> <p>Practice Guidance to be developed between Children Services, Health, Police and Education to ensure clarity in relation to operational arrangements – agreed referral threshold, assessment threshold, improvement in the quality of referrals, attendance at strategy meetings, core</p>	<p><b>November – January 2018</b></p> <ul style="list-style-type: none"> <li>Service Manager has provided a paper to the Local Delivery Group of the North Wales Safeguarding Children's Board (NWSCB) – in terms of how it can develop its arrangements to establish multi-agency quality assurance systems. It is crucial that developments around this action happens within the governance of the board</li> <li>Undertaken 2 MAPF in the period – which has identified useful lessons learnt on a multi-agency basis. These will be presented to the Local Delivery Group of the NWSCB in this Quarter.</li> <li>Practice Guidance has been developed – but not approved by the Local Delivery Group of the NWSCB. They have been approved for use within IOACC.</li> <li>Audit CID 16 with Police – show matters that need to be resolved in terms of the difference between sharing information/safeguarding checks/ making a referral. Report with Police to agree before it is presented to SMT</li> </ul>	<p><b>Next steps</b></p> <ul style="list-style-type: none"> <li>Take forward the work of improvement in a planned and systemic way. Linked to the launch of the Practice Guidance</li> <li>Require capacity to maintain the progress of undertaking multi agency evaluations. This needs to be planned into the capacity of the safeguarding and quality unit.</li> </ul>	<p><b>Yet to be done</b></p> <p>Agreed multi-agency quality assurance system in place showing an improvement in the quality and timeliness of practice.</p> <p>All staff and key partners have undertaken the identified training and there is evidence of improvement in the level of understanding and application of thresholds for referrals, assessments and child protection. This is as a result of the Practice Guidance being implemented.</p> <p>Information/referrals from Police to Children Services are scrutinised beforehand including a summary providing reason for the referral and the action requested. This will lead to an improvement in the quality of referrals and decision making and significantly reduce the volume of</p>	Safeguarding and Quality assurance Service Manager	Dec 2016	Dec 2017



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<p>group meetings and information sharing.</p>	<ul style="list-style-type: none"> <li>• Multi Agency Practice Guidance approved by the Corporate Safeguarding Board on the 8<sup>th</sup> of December, 2017.</li> </ul> <p><b><u>September &amp; October 2017</u></b></p> <ul style="list-style-type: none"> <li>• Progressing with partners (Police, Health and Education) to implement the multi-agency quality assurance system referred to below.</li> <li>• Summary of Q2 report provided above – shows Regular audits show that there is conflicting evidence in terms of the improvement in the quality, consistency and timeliness of child protection enquiries. A distance travelled audit concluded that attendance and recording at Strategy Meetings had improved and that the strategy meetings were timely. However the Case File Audit (July) and a management review concludes that in several cases auditors expressed concern about strategy discussions or meetings: <ul style="list-style-type: none"> <li>• Not always being held in a timely manner – e.g. one was not till 3 weeks after decision made to hold one</li> <li>• Minutes of discussions are insufficient – i.e. too brief</li> <li>• References are made for need for follow up strategy meetings and then there is no evidence that they have been held.</li> </ul> </li> <li>• This is reflected in the Thematic Audit Part 4, and a review of Children subject to Child Protection Plans –decision making, delays, and lack of clear plans and follow through being issues identified.</li> </ul>		<p>referrals received by Children Services at the front door.</p> <p>The quality of referrals received by Children Services is vastly improved due to the improvement in the quality of information provided by partners. This will allow staff to focus on establishing positive relationships with families and provide quality interventions.</p>			

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	<ul style="list-style-type: none"> <li>• Work underway with Police and Health - multi agency professional forum regarding two management reviews of cases where review of practice was best done on a multi-agency basis – one completed: one in progress. The completed review shows poor information sharing: lack of focus on risk and missed opportunities to intervene at an earlier stage.</li> <li>• We have undertaken a critical friend review of a case on the CPR register with Gwynedd Council. The completed review shows lack of focus on risk, poor child protection plans and missed opportunities to intervene at an earlier stage to asses risk, engage the family and create change.</li> <li>• A Regional Referral Form has been approved and discussion will occur in the Safeguarding Children’s Board around North Wales Police also completing the referral form.</li> <li>• Practice Guidance referrals developed, there will be Regional Training to ensure that thresholds for assessments to statutory children’s services are understood by staff and partners and are consistently applied.</li> </ul> <p><b><u>August 2017</u></b></p> <ul style="list-style-type: none"> <li>• Practice evaluation Report Q1 2017/18 doc Case file auditing completed on the following practice areas: LAC step down audit, Report for placement panel, planned monthly case file audits by Team Managers, Responsive auditing (Stage 2 complaints) and Initial decision making, screening, strategy discussions and meetings and simple assessment.</li> </ul>					

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Service User views and evaluation of previously conducted management reviews. Quarter 1 results have been analysed see 2.1

- Progressing with partners (Police, Health and Education) to implement the multi-agency quality assurance system referred to below.

**June/July 2017**

- A multi-agency quality assurance framework has been developed for approval between the Service and the Police, Service and the Health Board and the Service and Education.
- The results of the audits undertaken in Quarter 1 will be analysed in quarter 1 and will be presented to the Local Delivery Group for quality assurance.
- Guidance currently drafted for:
  - Multi Agency Child Protection Practice Guidance Investigation Thresholds
  - Multi Agency Child Protection Practice Guidance – Key Workers and Core Groups
  - Multi Agency Child Protection Practice Guidance- Registration Thresholds.

Set of guidance likely to be ready for October.

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	<p><u>May 2017</u></p> <p>Agreement provided by partners to develop and support/prioritise:</p> <ul style="list-style-type: none"> <li>• Multi agency quality assurance systems</li> <li>• Training for Children Services staff and partners on thresholds for assessment and partners roles and responsibilities.</li> <li>• Development of a multi-agency child protection threshold</li> <li>• Practice Guidance to be developed between Children Services, Health, Police and Education to cover all the areas were development work is required.</li> </ul>					
<p>3.5 <b>CSSIW Recommendation 11:</b> The quality and consistency of record keeping should be improved; all staff and managers should ensure that their records are of good quality, are up to date and are systematically stored.</p> <p>Training to be provided to staff on expected standards of record keeping.</p> <p>Record keeping Practice guidance to be developed to</p>	<p><u>November – January 2018</u></p> <ul style="list-style-type: none"> <li>• This work has been redefined into a project to look at development of WCCIS</li> <li>• Record Keeping Standards will be agreed as part of the work of agreeing practice standards. A draft is available in terms of recording. Has been submitted for agenda at SMT</li> </ul> <p><u>September &amp; October 2017</u></p> <ul style="list-style-type: none"> <li>• This work has been developed into creating a Operational model within WCCIS (MP Project lead). We do have some useful products – glossary</li> </ul>	<ul style="list-style-type: none"> <li>• Training to be provided for staff around best practice in record keeping and the Practice Guidance.</li> </ul>	<p><b>Commenced</b></p> <p>Case file audits by Managers shows an improvement in the quality and consistency of record keeping.</p> <p>Support and guidance is being provided to staff through regular and quality supervision on how to improve the quality of record keeping.</p>	<p>Safeguarding Quality Assurance Manager and Service Managers</p>	<p>January 2017</p>	<p>September 2017</p>

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ensure consistency and quality.	<p>of terms, jargon free session, draft standards which could be developed</p> <ul style="list-style-type: none"> <li>Recording performance from Q2- The overall evaluation shows that recording practice remains inconsistent although there is evidence of improvements in some audits.</li> </ul> <p><b><u>August 2017</u></b></p> <ul style="list-style-type: none"> <li>As part of the registration as Social Workers; staff have the responsibility to ensure good quality timely recording.</li> <li>Regular case file audit to be undertaken to monitor the quality and timeliness of record keeping on individual cases.</li> </ul> <p><b><u>June/July 2017</u></b></p> <ul style="list-style-type: none"> <li>Record keeping continues to be inconsistent</li> <li>Repeat audit of case files in progress to establish if there is improvement in the quality of recording.</li> </ul>					

4. Social workers working proactively with families to manage risk- spending much more time working alongside families helping them to change so that the family is a safe place for their children.

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<p>4.1 Ensuring social work intervention is aligned with the different way of working with families under the new Act be focused on what matters, building on people's strengths and enabling their involvement in developing ways to address need and achieving outcomes.</p> <p>Training being provided focusing on:</p> <ol style="list-style-type: none"> <li>1. Collaborative Communications' course on strengths based conversations.</li> <li>2. IFSS interventions</li> <li>3. Culture change</li> <li>4. Measuring performance</li> <li>5. Motivational interviewing</li> </ol>	<p><b>November – January 2018</b></p> <ul style="list-style-type: none"> <li>• Feedback/learning received on the changes that have happened in Social Work practice following the training staff have had during the year (see 1.4 for a list of training courses held). The feedback received shows that staff are putting what they've learnt into practice in their day to day work.</li> </ul> <p><b>September &amp; October 2017</b></p> <ul style="list-style-type: none"> <li>• Collaborative Communications mop up course to be held on the 28<sup>th</sup> and 29<sup>th</sup> of September.</li> </ul> <p><b>August 2017</b></p> <ul style="list-style-type: none"> <li>• We have continued to support staff to work with families focusing on their strengths, having a 'What matter conversation', advocacy requirements and co-production.</li> <li>• We are seeing evidence of the workforce working directly with families leading to improved outcomes – as we have seen a significant reduction in the children on the CP register from 102 in March 2017 to 56 on the register on 31<sup>st</sup> of August, 2017, 55% decrease.</li> </ul> <p><b>June/July 2017</b></p> <ul style="list-style-type: none"> <li>• The training sessions below have been held.</li> <li>• We continue to focus on Social Work intervention being aligned with the different way of working with families under the new Act such as: What matter</li> </ul>		<p><b>Yet to be done</b></p> <p>Staff report that they feel they have the skills and knowledge and are able to undertake more direct interventions with families.</p> <p>Information that more children being supported to continue living at home with their families.</p> <p>Positive feedback from service users regarding the quality of intervention making a difference to their lives.</p> <p><b>Commenced</b></p> <p>Evidence that the workforce is skilled in working directly with families leading to improved outcomes - an example being a reduction in the children on the CP register.</p>	Senior Management Team	Ongoing	March 2018

		<p>conversation, advocacy requirements and co-production, all of which continues to be a challenge for children's services as families are reluctant to engage.</p> <p><b><u>May 2017</u></b></p> <ul style="list-style-type: none"> <li>• Delivery of Motivational interviewing training and Resilient Families approaches currently happening.</li> <li>• Collaborative communications training being held in March for all Managers.</li> <li>• IFSS interventions training provided on an annual basis.</li> <li>• Culture change measuring performance training for Managers being held in March</li> </ul>					
4.2	<p>Review the current service structure to address the need for improved preventative and intensive interventions.</p> <p>Establishing smaller Teams with Practice Leaders to provide effective support and supervision to staff.</p>	<p><b><u>November – January 2018</u></b></p> <ul style="list-style-type: none"> <li>• The new structure is in place with Practice Leaders located with their Practice Groups.</li> <li>• Early indication is that this is working well, staff report that they feel supported in the smaller groups.</li> <li>• Continued development of the support and embedding of this structure will continue.</li> </ul> <p><b><u>September &amp; October 2017</u></b></p> <ul style="list-style-type: none"> <li>• The new Service structure was implemented on the 4<sup>th</sup> of October were the 8 new Practice Leader's took responsibility for their Practice Groups.</li> <li>• There is further work to be undertaken to complete the restructure, including reviewing the arrangements for the Child Placement Team, making the best use of Support Workers to support families, as well as ensuring that administrative support is appropriate for Practice Groups to effectively carry out their statutory responsibilities.</li> </ul>	<ul style="list-style-type: none"> <li>• Review of Placement Team will commence in February in consultation with staff.</li> </ul>	<p><b>Yet to be done</b></p> <p>The new service structure will support and significantly strengthen the delivery of preventative services and intensive interventions an example being a reduction in children becoming looked after.</p> <p>Manager's report that the new service structure increases their capacity to provide professional leadership to support the workforce through regular and quality supervision.</p> <p>Staff report they are adequately supported and supervised by their Managers in carrying out their responsibilities.</p> <p>Case file audit shows a marked improvement in practice quality as result of clear pathways and systems within the Service and through regular supervision.</p>	<p>Senior Management Team</p>	<p>Jan 2017</p>	<p>May 2017</p>

		<p><b><u>August 2017</u></b></p> <ul style="list-style-type: none"> <li>• Two Senior Managers (Early Intervention and Intensive Intervention) in post</li> </ul> <p><b><u>June/July 2017</u></b></p> <ul style="list-style-type: none"> <li>• New service structure implemented.</li> <li>• We continue to appoint to posts to establish smaller teams with practice leads.</li> <li>• We have continued to review our prevention and early intervention services around the Families First programme.</li> </ul> <p><b><u>May 2017</u></b></p> <ul style="list-style-type: none"> <li>• Staff consultation period comes to an end on 24.2.17.</li> <li>• Analysis of comments and feedback and report provided by IHOS with recommendations.</li> <li>• Final decision and timescales to be agreed and shared in staff Conference on 27.3.17.</li> </ul>					
4.3	Implementation of an Information, Advice and Assistance (IAA) model for Anglesey	<p><b><u>November – January 2018</u></b></p> <ul style="list-style-type: none"> <li>• A Full Time Engagement Officer commenced with Teulu Môn in January, which has strengthened its capacity to 3.5 workers FTE in that team. Teulu Môn were visited on 29.01.18 by Jackie Drysdale of Social Care Wales in order to observe the team and consider the need for a Wales wide competency framework. Jackie was impressed by what she saw on commented that “the team was committed”; “showed great resilience against some of the frustrations”. Work will continue to develop that team in terms of skills and IT support.</li> </ul>		<p><b>Yet to be done</b></p> <p>Service users report ‘ease of access to services’ and good customer care.</p> <p>Improved coordination of services and strategies for early intervention and prevention is shown in a reduction in children being looked after.</p> <p>There is a reduction in duplication of effort through the current running of multiple ‘front doors’</p>	Service Manager	Dec 2016	April 2017



		<p><b><u>September &amp; October 2017</u></b></p> <ul style="list-style-type: none"> <li>• IAA service, known as Teulu Môn, is now managed since the beginning of October, by 3 Practice Leaders and a Service Manager for Early Intervention and Prevention.</li> <li>• Teulu Môn engagement officers are now able to provide an enhanced first point of contact – with the opportunity for a more structured conversation to support families to access solutions within their own circle of resources/community resources.</li> <li>• Funding from Families First will strengthen our IAA services with recruitment for additional 1.5 Engagement Officers post</li> <li>• Continued to support our staff to ensure they consistently have good quality conversations as some officers have more confidence and skills in this approach.</li> <li>• Arrangements for internal workshops for staff to practice the 'What Matters' with Jackie Drysdale, Improvement Development Manager for Social Care Wales.</li> </ul> <p><b><u>August 2017</u></b></p> <ul style="list-style-type: none"> <li>• Engagement Officers commenced in post</li> <li>• Permanent Early Intervention and Prevention Service Manager in post</li> </ul> <p><b><u>June/July 2017</u></b></p> <ul style="list-style-type: none"> <li>• Interim Engagement Manager in post</li> <li>• Adverts out for the Engagement Officers, closing date of 12/07/17</li> <li>• Promotional materials signed off</li> <li>• A number of information sharing events have been scheduled such as the</li> </ul>					
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		<p>Eisteddfod, Sioe Môn and a number of other community based fun days/carnivals etc.</p> <ul style="list-style-type: none"> <li>• Multi agency audits (Health, Education and Police) in relation to the quality of referrals received at Teulu Môn</li> <li>• Continued work with partner agencies in relation to information sharing and joint working with Teulu Môn</li> <li>• 2 week analysis started 10/07/17 in relation to all CID16's that are received at Teulu Môn in order to ensure that appropriate referrals are made to the Council and to explore information sharing.</li> <li>• Work will commence to establish an Information Sharing Protocol.</li> </ul> <p><b><u>May 2017</u></b></p> <ul style="list-style-type: none"> <li>• Creation, sign off and translation of all policies, protocols, thresholds and their associate templates required for service delivery.</li> <li>• Agreement of measures of success</li> <li>• Scoping of ICT needs</li> <li>• Agreement of training requirements.</li> <li>• Team name 'Teulu Mon' Social Media, telephone number agreed.</li> <li>• Training of staff commenced</li> <li>• FIS due to move over to HQ late January</li> <li>• Logo for the new service in design.</li> <li>• Project board meeting monthly</li> <li>• Marketing task and finish group meeting and developing marketing outputs for the service.</li> <li>• New team embarking on a period of 'team building'</li> <li>• Children Services staff and key partners are provided with regular updates on the changes within the Service and through Information Sessions.</li> </ul>				
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		<ul style="list-style-type: none"> <li>• Consultation on revised structure completed.</li> <li>• A single point of access for all child and family related enquiries established and live by 03.04.17</li> </ul>					
4.4	<p>Development of a Corporate Prevention Strategy; the LA must provide a range and level of preventative services across Children and Adult Services.</p> <p>Deliver an integrated service and provide early help and support that effectively delays the need for care and support.</p> <p>The population assessment will assist the local authority to identify preventative services required.</p> <p>Strengthen the commissioning function within Children and Adult Services to support us to deliver this agenda.</p> <p><b>CSSIW recommendation 1.</b></p> <p>Develop a framework for the provision of preventive work with children and</p>	<p><b>November – January 2018</b></p> <ul style="list-style-type: none"> <li>• The Assistant Chief Executive is responsible for driving work forward in terms of the Corporate Prevention Strategy.</li> <li>• The Resilient Families Team are working with eight families</li> <li>• Following the Population Needs Assessment, the Regional Plans will be available from April 2018 identifying what range of services will need to be provided.</li> </ul> <p><b>September &amp; October 2017</b></p> <ul style="list-style-type: none"> <li>• Local Authority’s Corporate Prevention Strategy group led by the Director for Social Services meets on a regular basis. The Group presented a paper to the Senior Leadership Team outlining what is required to ensure the successful delivery of a prevention strategy and work is continuing to move this forward.</li> <li>• The Local Authority has prioritized the development of corporate preventative services and support for families as part of its Plan for 2017 – 2022 in <i>“Providing robust early intervention and prevention services to ensure that children are safe and supported in order to minimize harmful childhood experiences.”</i></li> <li>• A clear vision established for early intervention and prevention services and a draft strategy has been developed and shared with CSSIW.</li> <li>• Consultation with staff and partner agencies has occurred and we have arranged further consultation sessions with community groups and with families, children and young people who will have</li> </ul>	<ul style="list-style-type: none"> <li>• Meaningful engagement and consultation with families, children, young people and service users.</li> <li>• We will consult with service users and citizens about the types of services they require.</li> </ul>	<p><b>Yet to be done</b></p> <p>We consulted with service users and citizens about the types of services they require.</p> <p>Re-commissioning of Services in line with WG guidance by using local data, views of service users and the Population Needs / Local Area Plans leads to improving outcomes for children and young people and their families (reduction in looked after children).</p> <p>Reduction in the number of children starting to become looked after and an increase in children being supported to live at home with their families.</p> <p><b>Commenced</b></p> <p>The Local Authority has a clear vision for early intervention and prevention services for Anglesey.</p> <p>‘Teulu Mon’ the new IAA service for Anglesey is operational and is a key</p>	<p>Dr Caroline Turner, Director of Social Services</p> <p>Interim Heads of Children Services</p> <p>Alwyn Jones, Head of Adult Services</p> <p>Dafydd Bulman, Strategic Transformation and Business Manager</p> <p>Melanie Jones, Service Manager</p>	Jan 2017	Oct 2017

	<p>families that will deliver an integrated service and provide early help and support that effectively delays the need for care and support.</p> <p><b>CSSIW Recommendation 12:</b></p> <p>The local authority and partners should work together to develop a cohesive approach to the collection and analysis of information about the needs of communities, that includes the voices of children and families. This should be used to inform the shaping of strategic plans to achieve effective alignment of service delivery between information, advice and assistance services, the preventive sector and statutory services.</p>	<p>insight into what has and what has not worked in the past and what preventative services should be developed in the future.</p> <p><b>August 2017</b></p> <ul style="list-style-type: none"> <li>• Draft Service Prevention Strategy in place</li> <li>• Agreement given by WG to fund additional 3 family support staff within TAF and an additional 1.5 Engagement Officers for Teulu Môn. This will strengthen the preventative services to delay the need for care and support.</li> <li>• The Local Authority has a clear vision for early intervention and prevention services for Anglesey. A brief for consultation with the children and families and partner agencies community groups of Anglesey has been drafted. A draft strategy has been formed. This has been formed with the knowledge that we have knowledge around the needs of the families of Anglesey through the Local needs assessment, our own data and previously commissioned research by Cordis Bright. Work is being done on forming links with community groups such as Caru Amlwch. Discussions have taken place with current providers around how they may provide services in a different way in the future. The department's strategy for prevention will feed into the process of the wider prevention strategy for the Local Authority. Identifying ACE's will form a part of our strategy. Links have been made with Andrew Bennet (Public Health Research, Training and Consultancy) who has been commissioned by public health Wales to introduce ACE's aware practice in G.P surgeries on the island. Discussions have been held to include this field within schools in the hope that we can develop</li> </ul>		<p>part of the early intervention / prevention service.</p>	<p>Llyr Ap Rhisiart,  IFSS</p>		
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		<p>ACE aware schools in Anglesey. Links have been made with community groups who are interested in using ACE's in their approach.</p> <ul style="list-style-type: none"> <li>• Audit of TAF cases has commenced. This has been done to improve our understanding of the families we are working with. We need to ensure that the correct families are accessing the service. At this early stage of the audit it looks as if cases can be closed in TAF and sign posted for families to access specific targeted services.</li> </ul> <p><b><u>June/July 2017</u></b></p> <ul style="list-style-type: none"> <li>• All commissioned services under the Families First programme are being reviewed</li> <li>• Consultation with staff and partner agencies in relation to identifying the gap in service provision.</li> <li>• Application for redistribution of funding for Families First services sent to WG.</li> <li>• Application for additional Families First Parenting Grant submitted by 14/07/17.</li> <li>• Funding approved for a corporate Prevention Manager to ensure the prevention strategy is implemented across the Local Authority.</li> </ul> <p><b><u>May 2017</u></b></p> <ul style="list-style-type: none"> <li>• A review of current preventative service funded by the Welsh Government will be undertaken in early 2017.</li> <li>• Re-commissioning of Services in line with WG guidance by using local data and Population Needs Assessment leading to quality early intervention outcomes.</li> <li>• Families' First grant, commissioning, coordination and monitoring officer has</li> </ul>				
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		transferred to Children Services by April 2017. Review and redesign of 'Short Breaks' offered through the Specialist Children's Service to support families					
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**5 Enhancing family support services targeted towards providing intensive and speedy support at point of family breakdown aimed at keeping the family together.**

	ACTION TO BE TAKEN AND LINKS TO CSSIW RECOMMENDATIONS	ACTIONS TAKEN/TO TAKE TO ACHIEVE IMPROVEMENT	ACTIONS REQUIRED TO ACHIEVE IMPROVEMENT	EXPECTED OUTCOME / IMPROVEMENT & EVIDENCE	LEAD OFFICER	START	END
5.1	<p>Review Children Support Services to focus on:</p> <ol style="list-style-type: none"> <li>Supervised contact</li> <li>Freeing up capacity to undertake preventative work</li> <li>Role of Parenting Officer</li> </ol>	<p><b>November – January 2018</b></p> <ul style="list-style-type: none"> <li>Due to competing demands on Senior managers this review has been put back, however, it is envisaged that this review will be completed by end of March 2018.</li> </ul> <p><b>September &amp; October 2017</b></p> <ul style="list-style-type: none"> <li>Reviewing Support Services has commenced making the best use of Support Workers to support families.</li> </ul> <p><b>June/July 2017</b></p> <ul style="list-style-type: none"> <li>As part of the restructuring of the service initial 'Resilient Families' work has started to reduce the need of supervised contact by support workers this does free up capacity to undertake more intense work with children and families to ensure the children are being supported to live at home.</li> </ul> <p><b>May 2017</b></p> <ul style="list-style-type: none"> <li>Work has commenced on reviewing the cases where contact does not need to be supervised by the local authority. This will enable us to understand the available capacity that could be transferred to the Resilient Families Team.</li> </ul>	<p>We will be reviewing Children Support Services <b>in Feb 2018</b> to focus on:</p> <ul style="list-style-type: none"> <li>Supervised contact</li> <li>Freeing up capacity to undertake preventative work</li> <li>Role of Parenting Officer</li> <li>Work will start on this</li> </ul>	<p><b>Yet to be done</b></p> <p>The service is making better use of its resources and focusing on supporting children to remain living within their families.</p> <p>Provide 1:1 or/and Group parenting support to parents to strengthen the standard of care their children receive.</p> <p>More children being supported to live at home.</p> <p>Reduction in the number of children becoming looked after.</p>	<p>Intensive Intervention</p> <p>Service Manager</p>	<p>Jan 2017</p>	<p>March 2018</p>

5.2	Implement Resilient Families Team	<p><b>November – January 2018</b></p> <ul style="list-style-type: none"> <li>The Resilient Families Team is now operational and are currently working with 9 individual children from 8 families.</li> </ul> <p>The team are working with parents to support them in able to care for their children and avoid them potentially coming into care; but are also working with young people who are in care and a plan of intensive rehabilitation is in place for those young people. We are hoping to produce a report in May 2018 to highlight some of the work completed by this team.</p> <p><b>September &amp; October 2017</b></p> <ul style="list-style-type: none"> <li>The Resilient Families Team is now fully staffed and currently working with 8 families to prevent family breakdown and to support children living at home.</li> <li>Team has three core aims: <ul style="list-style-type: none"> <li>Prevent - preventing children becoming Looked After</li> <li>Reduce - reduction in the nature of care accommodation provided from residential care to foster care</li> <li>Reunify - reunifying looked after children with their families.</li> </ul> </li> <li>The Practice Leader for this Team has recently won a national award by the British Association of Social Worker's (BASW) on her work in developing support for care leavers and arrangements to support foster carers to prevent placement breakdown.</li> </ul>	<ul style="list-style-type: none"> <li>Training and skills development programme to be formulated for the new Team.</li> <li>Work to be done to establish how the Resilient Families grant will be used.</li> </ul>	<p><b>Yet to be done</b></p> <p>Performance information shows there is a direct link between the intervention of this team and the number of children and young people successfully re-habilitated back home.</p> <p>Performance information shows a direct link between the work of the team and the reduction of need for costly foster/residential placements.</p> <p>The team can evidence focused intervention based on prevention and de-escalation through quarterly reports.</p> <p>Case file audits shows that the services provided are tailored around the individual family's needs, leading to positive outcomes for children and young people.</p> <p><b>Commenced</b></p> <p>The new team is operational and providing intensive support to children, young people and their</p>	Alex Kaitell,  Service Manager	Jan 2017	May 2017

		<p><b><u>August 2017</u></b></p> <ul style="list-style-type: none"> <li>Resilient Families Team appointed and all will be in post by the beginning of September.</li> <li>Additional grant funding of £96,000 by WG has been provided to further support the establishment of the resilient families' team. Further guidance sought from WG in relation to how this grant can be used.</li> </ul> <p><b><u>June/July 2017</u></b></p> <ul style="list-style-type: none"> <li>Recruitment to practice leader, Social Work and Support Worker posts have been advertised, interviews will be held by the end of July.</li> <li>As part of the restructuring of the service initial 'Resilient Families' work has started to reduce the need of supervised contact by support workers this does free up capacity to undertake more intense work with children and families to ensure the children are being supported to live at home.</li> </ul> <p><b><u>May 2017</u></b></p> <ul style="list-style-type: none"> <li>Work has commenced on identifying the children and young people where intensive work can be undertaken to enable them to return home safely.</li> <li>New Job Descriptions have been created, with recruitment to posts starting late March 2017.</li> </ul>		families in order to remain living with their families.			
5.3	<p>Improve the local authority's responsibility as a Corporate Parent for looked after children. Areas of focus:</p> <ul style="list-style-type: none"> <li>Review the leaving care (after care) service</li> <li>Creation of a 'Supported Lodgings Policy'</li> </ul>	<p><b><u>November – January 2018</u></b></p> <ul style="list-style-type: none"> <li>One Corporate Parenting Panel meeting on the 11<sup>th</sup> of December has taken place since the agenda of the panel has been re-structured. This gives panel members the time to scrutinise data provided and have a meaningful discussion in relation to corporate panel issues.</li> </ul>	<ul style="list-style-type: none"> <li>Decision needs to be made regarding additional WG grant funding around work experience and apprenticeships</li> <li>The next Corporate Parenting Panel meeting will be held on the 18<sup>th</sup> of March.</li> </ul>	<p><b>Yet to be done</b></p> <p>Clear Pathway planning does provide goals on the plan into adulthood for the young person.</p> <p>Care leavers reporting that they feel they were listened to and supported</p>	Intensive Intervention Service Manager	Jan 2017	March 2018



	<ul style="list-style-type: none"> <li>• Agreement of a 'Leaving Care Financial Policy'</li> <li>• Work experience and apprentice arrangements within the Council and Health Board</li> <li>• Free/Discounted entry to leisure services and library services</li> <li>• Appoint a Local Member as a Looked after Children Champion</li> </ul>	<ul style="list-style-type: none"> <li>• The Children Looked After and Care Leaver Strategy continues to be work in progress and it is hoped a draft Strategy can be produced to go out to consultation during April 2018.</li> </ul> <p><b><u>September &amp; October 2017</u></b></p> <ul style="list-style-type: none"> <li>• Corporate Parenting Panel in September approved the action plan to develop a "Children Looked After and Care Leavers Strategy" for a three year period 2018 - 2020. This strategy would provide the framework to ensure we fulfil our duties and responsibilities, as corporate parents of Children Looked After.</li> <li>• By March 2018 we aim to re-launch the Isle of Anglesey County Councils vision in relation to Corporate Parenting.</li> <li>• Recruiting for an additional Personal Adviser post for Looked after Children that is funded by the St David's Day fund and the Support for Care Leavers grant. This will strengthen our service to provide timely support for care leavers to help them achieve their ambitions and make a successful transition to adulthood and independent living.</li> <li>• Children's Services will be involved in a new initiative within the Council to offer paid work experience to young people to prepare them for work; up to a 12 week paid period with the Council. Looked after young people will be prioritized with an opportunity for them to attend a formal induction, attend relevant in house courses and work on a specific projects within the service.</li> </ul> <p><b><u>August 2017</u></b></p> <ul style="list-style-type: none"> <li>• Service Manager for Intensive Intervention has prepared a report for the corporate parenting panel with options on</li> </ul>		<p>by the authority in their transition to leaving care.</p> <p>Children who are looked after report they feel they have influence on how services are provided for them.</p> <p><b>Commenced</b></p> <p>Clear guidance in place for Children Services staff and key partners through policies, procedures and training in relation to improving outcomes for looked after children.</p>			
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		<p>how to strengthen the role of the corporate parenting panel.</p> <ul style="list-style-type: none"> <li>• WG's St David's Day grant and the Support for Care Leavers grant received for £31,000. Work has progressed with HR colleagues to identify work placements opportunities within the Local Authority. Aftercare project group will drive this work forward.</li> </ul> <p><b><u>June/July 2017</u></b></p> <ul style="list-style-type: none"> <li>• Corporate Parenting Panel met on 10/07/17, the membership, agenda and ToR to be reviewed and to be inclusive of young people.</li> <li>• Corporate Parenting Event for local members and senior officers planned for 20/07/17</li> <li>• Appointment of a local Member as a Looked After Children Champion.</li> <li>• Work ongoing in preparation for the STARS Awards Ceremony in November for looked after children to celebrate their successes.</li> </ul> <p><b><u>May 2017</u></b></p> <ul style="list-style-type: none"> <li>• Aftercare project group established with an agreed action plan.</li> <li>• Aftercare and housing protocol approved in February 2017</li> <li>• Discussions with HR and Leisure have taken place regarding work experience and leisure services.</li> <li>• Early draft of the Aftercare financial policy.</li> <li>• Consideration in having a Corporate Parenting Event for local members and senior officers to agree on strengthening current arrangements.</li> <li>• Consultation group established with looked after children were they are able to provide their views on the development work required.</li> </ul>					
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**Annex 3****Isle of Anglesey Children's Services****Preface**

Over the period since the inspection we have been significantly involved in putting in place a series of important changes which we consider will better deliver in line with the legislation. In particular we would highlight the following:-

Restructuring the service so that it focusses its energy on the early intervention and prevention, and intensive intervention with service managers leading each of these service areas and holding the resources relevant to that service area i.e. fieldwork and service provision. It has substantially increased the level of supervisory resources, management oversight, case direction, improved care planning with small practice groups led by practice leaders, who are focussed on improving the quality of professional practice. We have been particularly successful in attracting experienced social workers to take on this role. The model also puts the Information Advice and Assistance hub, namely Teulu Môn, at the centre of the Early Intervention and Prevention service. The full complement of practice leaders came into position during September and the focus at this stage is to develop their understanding of their role and to begin the process of implementing new ways of working across all our services. This will require significant cultural change and will take time and energy to bring this about across all our services.

We have developed a prevention strategy focused on deescalating need at all levels, and reducing the need for intensive involvement, we are currently consulting on its content with relevant stakeholders. We are using Families First resources to enhance our Teulu Môn and TAF responses and to ensure other Families First investment is coherent with that objective. The council has invested resources to establish an intensive intervention resilient families' team so that we are able to respond proactively to children with high level/edge of care needs. The resilient families' team is also having an impact in working with the allocated social worker to assist in returning children and young people out of care either to friends or family or closer to home. These initiatives are now all operational and starting to deliver in line with these expectations, we are in the process of increasing the resourcing to further enhance this provision.

We have been paying significant attention to the systems in place to support intensive intervention outside of the professional aspects using intelligence to ensure the right cases are being dealt with at this level, and that our processes are as effective as

possible. We will over coming months be revisiting our strategic approach to looked after children to ensure that it is focused on delivering permanence, enhancing local provision and facilitating children only remaining looked after for the right period of time.

We recognise that the quality and consistency of practice has to be at the centre of what we do and have taken steps to improve the quality assurance/ improvement function. Fresh processes and guidance have been developed and additional resources have been committed to the function. This involves developing a close working relationship between the quality assurance and improvement manager and the three service managers with operational responsibility and direct and regular interaction between them will aim to ensure that there is immediately available information about how services are performing. Additionally, this will enable us to focus on identifying and implementing the improvement in practice that have been identified as necessary. All of these new structural arrangements and will be developed further over coming months.

We recognise that the steps taken are recent in their implementation, most coming to fruition since the inspection report was published in march 2017 and are dependent on the successful implementation of the practice leader role, this will take time to achieve what is expected of it and the benefits of doing so effectively will be seen in good quality of practice which is achieved across all our services.

The recently appointed Head of Service will focus his attention on ensuring that the drive to improve practice remains the top priority for the service

## Progress report

- 1.0 In response to the findings and recommendations of the CSSIW Inspection report, Children's Services has put the following arrangements in place:
- A revised Service Improvement Plan (SIP), incorporating all of the Recommendations made in CSSIW's Inspection Report
  - New Project Management arrangements in place, with an internal Improvement Group of officials meeting on a monthly basis, and reporting to the Senior Management Team and to the Executive.
  - Establish a new Panel of Elected Members following the recent Local Authority elections, which reports to the Corporate Scrutiny Committee.
- 1.1 In addition to this, the Chief Executive is holding meetings (initially weekly, currently every two weeks) with the Director of Social Services, the Head of Children's Services and the Head of Human Resources, to oversee the development and implementation of the Workforce Strategy, and to ensure that there is appropriate pace in making key appointments to posts.
- 1.2 When the Inspection was being held, the Head of Service had commenced a period of planned absence from work. The interim arrangement made from October 2016 was for:
- Llyr Bryn Roberts to oversee the day-to-day running of the Service as Head of Operations, and leading on the Service Improvement Plan and
  - Leighton Rees, previously Head of Children's Services at Denbighshire County Council and Merthyr Tydfil County Borough Council, steering the strategic direction of the Service as Head of Strategic Development, and leading on the restructuring of the Service.
- 1.3 When the Head of Service returned from her planned absence she was appointed the post of Service Manager, Safeguarding and Quality Assurance. The above interim arrangements to manage the Service has continued and a process of recruiting a substantive Head of Children and Families Service was undertaken. On 7<sup>th</sup> November 2017 the Local Authority appointed Fon Roberts to the post of Head of Service and he will be commencing in post on 1<sup>st</sup> December. He has been working as a Service Manager within the Service over the past six months and has a wealth of experience,

having worked in a variety of Local Authorities across England and Wales. Fon started his career as a Social Worker here in Anglesey nearly 20 years ago.

- 1.4 The Independent Support Team (IST) assisted the Authority during 2011 and 2012 to bring about improvement in the performance of children's social services in response to a Care and Social Services Inspectorate Report published in July 2011. The Team produced a final report at the end of 2012 which confirmed that considerable progress had been made in strengthening the performance of these services. The Team presented its findings to the Scrutiny Committee and to the Care and Social Services Inspectorate. Following receipt of the most recent Inspection Report at the beginning of 2017 and in view of its past experience of Children's Services in the Authority, the Director asked the IST to provide support during the implementation of the Service Improvement Programme.

The three members of the IST are:

**Graham Williams** who will act as team leader. He began his career in social services in Wales in 1972, was a Director of Social Services from 1990 until 1999 when he became Chief Inspector at the Social Services Inspectorate for Wales (SSIW) at the Welsh Assembly. He retired in 2009 from the post of Policy Director of Social Services at the Welsh Government. Since that time, he has worked with a number of local authorities in Wales to help them to bring about improvement in their Social Services for children.

**Rhonwyn Dobbing** who has been a member of the team following her retirement from the post of Inspector at the Welsh Government. Prior to her appointment to SSIW, Rhonwyn had extensive experience as a senior manager in Children's Social Services. She is recognised as a highly respected professional in this field, has worked as a fee paid Inspector for CSSIW and has used her expertise within the Team to assist a number of authorities to improve their performance.

**John Llewellyn Thomas** who was a member of the IST when it worked in Ynys Mon during 2011 and 2012. John has extensive experience of working in the field of Children's Social Services, was an Assistant Director and then became a Director of Social Services. Following retirement, he has been a fee paid member of a number of Inspection Teams within and outside Wales and has been used by authorities to provide a professional input to their work to strengthen their services.

## **The Team's Contribution**

The Director has asked that the Team acts as a "critical friend" to provide assistance in the following ways:

1. To provide the Director with an assessment of progress made with implementing the Service Improvement Plan adopted by the Authority in response to the CSSIW Inspection Report and, importantly, with implementing the requirements of the Social Services and Well-Being (Wales) Act 2014.
2. To provide direct assistance to the process of strengthening performance in Children's Social Services by directly promoting:
  - Work to improve the quality and focus of staff supervision arrangements within the Children's Services;
  - The implementation of a Quality Assurance Framework to ensure it is fully integrated throughout children's services and across adult services and is used to inform and drive the achievement of good practice and quality outcomes for people who need the help of Social Services.

## **The Work Programme**

- 13<sup>th</sup> – 17<sup>th</sup> of November – The Team has collected evidence from policy and guidance documents and other relevant written documentation and an Outcome Focused Supervision workshop for Practice Leaders was held on the 16<sup>th</sup> of November. Rhonwyn observed the Teulu Môn staff.
- 28<sup>th</sup> of November, Children's Service Improvement Panel – Graham Williams will report on how the Team will conduct that assessment and the projected timetable for that work and observe the Panel meeting
- 4<sup>th</sup> – 7<sup>th</sup> of December – The team will be conducting an assessment of progress made with the Service Improvement Plan; interviewing relevant members of staff which will include Panel Members, observing different groups within the Service. They will also carry out a sample audit of case files
- January or February – The team will present the findings of their assessment of progress made with the Service Improvement Plan to the Panel and share with CSSIW.



<b>CSSIW Recommendations</b>	<b>Service Improvement Plan</b>	<b>Update</b>
<p><b>Recommendation 1: The authority should progress its commitment to developing a framework for the provision of preventive work with children and families that will deliver an integrated service and provide early help and support that effectively delays the need for care and support (SIP 4.4)</b></p>	<p><b>SIP 4.4</b></p>	<p><b>1 Achievements</b></p> <p>1.1 In September 2017 the restructuring within Children’s Services was undertaken with the establishment of the Early Intervention and Prevention Service and the Intensive Intervention Service. The new service structure has significantly strengthened the delivery of preventative services as Families’ First program, the Family Information Service and Team Around the Family (TAF) have also transferred to Children Services. This has created an Information, Advice and Assistance Hub that provides a more coordinated approach to the provision of early help for families mitigating the need for statutory services.</p> <p>1.2 The new hub, known as Teulu Môn, is managed since the beginning of October, by 3 Practice Leaders and an experienced Service Manager for Early Intervention and Prevention. The additional permanent management arrangements has significantly strengthened our oversight to make informed and correct decision making when there is indication that children and families require help and support, leading to an assessment prior to deciding how and by whom support could most effectively be provided.</p> <p>1.3 Teulu Môn engagement officers are now able to provide an enhanced first point of contact – with the opportunity for a more structured conversation to support the citizen to access solutions within their own circle of resources/community resources. We continue to support our staff to ensure they consistently have good quality conversations as some officers have more confidence and skills in this approach. There are arrangements for internal workshops for staff to practice the ‘What Matters’ conversations and we have arranged for Jackie Drysdale, Improvement Development Manager for Social Care Wales to observe our practice in this area at the beginning of December.</p>

Jackie is developing a national training program for the Information Advice and Assistance hubs.

1.4 Recording the 'What Matters' conversations can be challenging as some staff prefer to write in the traditional case recording style and others in a more reflective manner. We are aiming to move practice into recording in a more reflective manner as this will serve two purposes:

- Provide a stronger evidence of the engagement of the child and the family members
- Provide an opportunity to check the details of the conversation with the family by including it in a reflective letter to the family.

1.5 We are aware that the 'What Matters' conversation takes time to complete to a good standard and the Engagement officers can take up to 45 minutes to complete a conversation. Engagement officers report that they have sufficient time resources at their disposal to conduct the conversations effectively.

1.6 Over the last few weeks we have been able to respond effectively in preventing the need for care and support by providing prompt advice and assistance. Over a two week period (end of October – beginning of November) we received:

- 37 referrals
- 24 of these were dealt with at the 'What Matters' conversation stage.
- 10 basic assessments and
- 3 complex assessments

1.7 Multi agency and our own audits indicate that the quality of the referrals received are generally inconsistent. Some can be very poor, with limited information and requires us to contact the person referring to request they talk to families to obtain consent, conduct a 'What matters' conversation themselves and consider other options and services. We aim to be proactive in the way that we deal with poor referrals, looking for improvement in the outcome rather than simply refusing the referral.

1.8 We have developed a draft Practice Guidance for Teulu Môn in accordance with the Social Services and Wellbeing (Wales) Act 2014. The intention of Teulu Môn is *“to support families in Anglesey in caring for children with an emphasis on helping parents develop their own ability to identify and manage issues and challenges and to keep families together in a safe, supportive and stable environment.”*

Teulu Môn does provide a range of resources and support that will:

- contribute towards preventing or delaying the development of children and young people’s care and support needs that require support from the Local Authority;
- change how the needs for care and support of children and young people are met;
- promote the upbringing of children by their families, where that is consistent with the well-being of the child(ren);
- minimise the effect on disabled children and young people of their disabilities;
- contribute towards preventing children and young people from suffering abuse or neglect.

1.9 A Multi agency Referral Practice Guidance has been developed with partners and will be ratified in the Corporate Safeguarding Board in December. The regional referral form has been agreed and will be incorporated into the Practice Guidance. We have started to work with partners on explaining the access arrangements to Children’s Services to ensure they are understood by partners and the people engaging with the service. The information sessions will increase over the coming months as we will continue to influence and shape other agencies roles, helping them in building relationships, better understanding of circumstances and vulnerability factors so they can accurately identify and engage rather than seek to refer on in circumstances of uncertainty and doubt.

		<p>1.10 With funding from Families First we are also strengthening our Information, Advice and Assistance services with enhanced investment in Teulu Môn and Team Around the Family. We are currently recruiting for additional posts (Engagement Officers, 1.5 FTE and TAF Support Workers, 3 FTE) which will further strengthen our capacity to respond effectively to children and families who require support and to prevent the need for care and support.</p> <p>1.11 All commissioned services under the Families First program are currently being reviewed and discussions have taken place with current providers around how they may provide services in a different way in the future.</p> <p>1.12 One option is to commission a locally accessible support service to complement and support the delivery of services for children and families, and provide a destination for step out arrangements for vulnerable families. If approved, the stepping forward service will work with the children and families who have been known to the Children's Services and specifically, but not exhaustively, the service would work with;</p> <ul style="list-style-type: none"><li>• The families of those children who had been identified of suffering significant harm and have now been de registered,</li><li>• Children who have been identified to have several unmet needs and have been in receipt of a care and support plan,</li><li>• Children who have shown some early indicators of harmful sexualized behaviour,</li><li>• Families who may have low level issues with substance misuse.</li><li>• Families who may have low level mental health problems such as anxiety and low mood.</li><li>• Assisting children with disabilities to access activities within their communities, assisting in their social inclusion and normalizing their lives.</li><li>• Families who may need some additional input to fully achieve their goals and sustain change.</li></ul>
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The involvement would be intended to be relatively short term to offer low level assistance to identified vulnerable families to prevent escalation. Initial discussions have taken place with Barnados in relation to this work.

1.13 Children's Services has a clear vision for early intervention and prevention services and a draft strategy has been shared with CSSIW. We have consulted with staff and partner agencies and we have arranged further consultation sessions with community groups and with families, children and young people who will have insight into what has and what has not worked in the past and what should be developed in the future. The draft strategy will be presented to the Executive Committee.

1.14 The strategy will be formed with the knowledge that we already have information around the needs of the families of Anglesey through the Population Needs Assessment, our own data and previously commissioned research by Cordis Bright.

Work is being done on forming links with community groups such as Caru Amlwch which will strengthen children and families connections to their own community and build the resilience not only within the individual but within the family and community.

1.15 Overall our aim is to enable vulnerable families to be better able to manage their problems and provide a suitable, safe and secure environment for their children. This would involve:-

- BUILD resilience in children, young people, parents, carers and the community so that they become more self-sustaining.
- PREVENT need escalating by the early identification and prioritization of families in need, proactively addressing need with effective intervention.
- PROTECT from significant harm by offering intensive and effective intervention

		<p>1.16 Our model of intervention would seek wherever possible and appropriate to deal with matters at the pre-statutory services level. In that context all circumstances that do not involve S47 investigation or removal to care will be dealt with by the Early Intervention and Prevention Service in that way. That may be by staff designated as Team Around the Family or the social worker practice groups. They will use the vulnerability indicators available in Cordis Bright to establish eligibility. The investigation of S47 or removal to care will be led by the Social Work practice groups.</p> <p>1.17 The interventions available at this stage will be:-</p> <ul style="list-style-type: none"><li>• Parenting Programs</li><li>• Practical Skills development at home</li><li>• Motivational Interviewing</li><li>• Solution Focused Brief Intervention</li><li>• Relationship Mediation and Management</li><li>• Intervention to deal with challenging behaviour</li><li>• Access to broader service provision to respond to particular needs-information available via Teulu Môn.</li></ul> <p>1.16 This would create the following objectives:-</p> <ul style="list-style-type: none"><li>• To ensure the TAF provision is suitably resourced</li><li>• That a skills development program is developed and implemented</li><li>• Intervention, Supervision and support via Practice Leaders.</li></ul> <p>1.17 The Children's Services prevention strategy will feed into the process of the wider Corporate prevention strategy for the Local Authority.</p>
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<p><b>Recommendation 1: The authority should progress its commitment to developing a framework for the provision of preventive work with children and families that will deliver an integrated service and provide early help and support that effectively delays the need for care and support (SIP 4.4)</b></p>	<p><b>SIP 4.4</b></p>	<p><b>2 Strengths</b></p> <ul style="list-style-type: none"> <li>a. We have developed a strong vision to develop services focused on preventative work with children and families.</li> <li>b. The new service structure has enabled us to focus on strengthening the integration of our preventative services by increasing our staffing capacity.</li> <li>c. The establishment of smaller Practice Groups enables the Practice Leaders to provide the required support, guidance and supervision to staff to deliver effective services.</li> <li>d. The Teulu Môn Practice guidance provides a clear working framework for staff with the aim of providing prompt and effective information, advice and assistance to children and families requiring support.</li> <li>e. The Local Authority has placed the objective of developing preventative services and support for families as one of the main objectives for the Council. It is incorporated in the Council Plan for 2017 - 2022 setting out the wider corporate aim of providing <i>“robust early intervention and prevention services to ensure that children are safe and supported in order to minimize harmful childhood experiences.”</i></li> <li>f. The work on Adverse Childhood Experiences on Anglesey has great potential to raise awareness of the ill effect of childhood trauma and the subsequent consequences into adult life.</li> </ul>
<p><b>Recommendation 1: The authority should progress its commitment to developing a framework for the provision of preventive work with children and</b></p>	<p><b>SIP 4.4</b></p>	<p><b>3 Continued areas for improvement</b></p> <ul style="list-style-type: none"> <li>a. Updating the Information available for families on the Family Information Service website.</li> <li>b. Establishing the post of Corporate Preventative Manager focusing on developing a corporate prevention strategy by integrating the Welsh</li> </ul>

<p><b>families that will deliver an integrated service and provide early help and support that effectively delays the need for care and support (SIP 4.4)</b></p>		<p>Government grants available to the Local Authority which will allow us to be more flexible with our commissioning arrangements to meet the needs of our families and communities.</p> <p>c. Continue to influence and shape other agencies roles in the work being developed by Children’s Services helping them in building relationships with families, better understanding circumstances and vulnerability factors. This will assist them to accurately identify families and engage effectively with them rather than seek to refer on in circumstances of uncertainty and doubt.</p> <p>d. It is acknowledged that this is a significant development journey at all levels within the Local Authority and partner agencies.</p>
<ul style="list-style-type: none"> <li>• <b>Recommendation 2:</b></li> <li>• <b>Effective, multi-agency quality assurance systems and training arrangements should be established to ensure that thresholds for assessment to statutory children’s services are understood by staff and partners and are consistently applied; this</b></li> </ul>	<p><b>SIP 3.4</b></p>	<p><b>2.0 Achievements</b></p> <p>2.1 We have been developing Multi Agency practice guidance as a direct response to the CSSIW Inspection with the aim of strengthening multi agency joint working. The Practice Guidance has been designed to be read and used by the range of practitioners and professionals working across children’s services.</p> <p>They do not replace, provide the detail of or interpret legislation, policy, frameworks and procedures, which are all subject to change, but focuses more on the ‘<i>how to</i>’, offering advice, suggesting ideas and providing signposts to sources of information and further reading.</p> <p>The Practice Guidance focus on:</p> <ul style="list-style-type: none"> <li>• How to make Referrals to Children’s Services</li> <li>• Child Protection Practice Guidance - Investigation Thresholds</li> <li>• Child Protection Practice Guidance – Key Workers and Core Groups</li> <li>• Child Protection Practice Guidance- Registration Thresholds.</li> <li>• How to manage child protection allegations made against Professionals Practice Guidance</li> </ul>



<p><b>should include the development of a multi-agency child protection thresholds protocol incorporating recent Welsh Government guidance.</b></p>	<p>2.3 The Gwynedd and Anglesey Local Safeguarding Delivery Group did not endorse the guidance at their last meeting in October. The police explained that this needs to be approved regionally and Gwynedd did not want to implement any new guidance as the All Wales Child Protection Procedures were currently being reviewed. The Practice Guidance which has been endorsed by Betsi Cadwaladr University Health Board and Education will now be endorsed at the Corporate Safeguarding Board and training plan for staff will be developed for the period from January to March 2018.</p> <p>2.4 We have already strengthened our arrangements around the threshold arrangements in relation to referrals made to Children’s Services to ensure consistency in decision making. The increase from one Duty Team Manager to three Practice Leaders will have a significant difference in the consistency and capacity for our decision making in the ‘front door’ i.e. Teulu Môn. The record of decision making now contains more analysis of risk and the wishes of the child and the family. The multi-agency Practice Guidance and training arrangements will further progress this work.</p> <p>2.5 We have been discussing with other agencies such as CAMHS, Schools, CAFCASS and Flying Start to explain the work being developed to strengthen referral arrangements and an improved understanding of thresholds for assessments. The regional work around referral processes recently approved will provide additional clarity and guidance.</p> <p>2.6 We have developed and started to embed into practice a Quality Assurance Framework for Children’s Services. Multi agency quality assurance arrangements have also now commenced with our main partners, Health, Education and the Police as we recognize the value of not only understanding for ourselves, but also learning from understanding partner’s perspectives. Our partners share this view that when agencies and individual professionals engage in assuring practice, it helps us understand the effectiveness of front-line practice in protecting children and young people.</p>
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It allows us to identify good practice and ask questions about whether things could be done differently to improve the safeguarding system.

2.7 In order that we are able to better understand the information being received by the Service we undertook an audit of all referrals received by Children's Services from North Wales Police in the form of CID6's over a 2 week period (1<sup>st</sup>-14<sup>th</sup> June 2017). The audit comprised an analysis of referral information:

- Recording of key information such as date of birth, language, disability etc.;
- Whether the reason for the referral was clear;
- Whether an anticipated outcome of the referral was stated
- Information as to whether children and parents had been spoken to as part of the referral process;
- Whether there was an analysis of the risks and needs of the children or family.
- Whether there was a relevant chronology.
- Whether the child's opinion had been sought.
- Finally, it was judged based on the information provided and the managers decision whether the referral was made appropriately.

2.8 The audit concluded that:

- Children should only be referred either when the child is already open to Social Services, with the consent of the family or when there is clear safeguarding concerns.
- Data protection being breached in a significant number of the referrals audited as consent had not been provided by the family.
- Information could be more specific in explaining why they are referring and a referral should not be made simply because there are children linked to the adults involved.
- The quality of the information provided and the way in which the CID16 form is completed could be improved.

		<p>2.9 The next step is for the Police to undertake a similar audit and analysis and to meet with Children’s Services to discuss their conclusions and to agree on how the work can be progressed. The aim of this work is that it will support and further strengthen more effective working.</p> <p>2.10 Initial discussion has been held to pilot a range of measures to improve the flow and quality of information shared between North Wales Police and Children’s Services in Anglesey and further discussion will occur in November. One option being considered is establishing a joint Early Intervention and Prevention information process that could be one way of addressing some of the issues identified in our recent audit.</p>
<ul style="list-style-type: none"> <li>• <b>Recommendation 2:</b></li> <li>• <b>Effective, multi-agency quality assurance systems and training arrangements should be established to ensure that thresholds for assessment to statutory children’s services are understood by staff and partners and are consistently applied; this should include the</b></li> </ul>	<p><b>SIP 3.4</b></p>	<p><b>Strengths</b></p> <ul style="list-style-type: none"> <li>a) Multi agency Practice Guidance being developed to include training arrangements around: <ul style="list-style-type: none"> <li>• How to make Referrals to Children’s Services</li> <li>• Child Protection Practice Guidance - Investigation Thresholds</li> <li>• Child Protection Practice Guidance – Key Workers and Core Groups</li> <li>• Child Protection Practice Guidance- Registration Thresholds.</li> <li>• How to manage child protection allegations made against Professionals Practice Guidance</li> </ul> </li> <li>b) Children’s Services have a robust Quality Assurance Framework in place that is now being implemented across the Service.</li> <li>c) Monthly Case file audits and thematic audits are embedding in the service.</li> <li>d) Routine auditing of cases by Practice Leaders now happening across Children’s Services.</li> <li>e) A draft multi agency Quality Assurance Framework has been developed and work around auditing the quality of multi practice has commenced.</li> </ul>

<p><b>development of a multi-agency child protection thresholds protocol incorporating recent Welsh Government guidance</b></p> <ul style="list-style-type: none"> <li>•</li> </ul>		<p>f) There is a strong willingness by Children’s Services and partner agencies, Health, Education and the Police, to continue to undertake audits and analysis to improve practice and to strengthen arrangements to safeguard children and young people.</p>
<ul style="list-style-type: none"> <li>• <b>Recommendation 2:</b></li> <li>• <b>Effective, multi-agency quality assurance systems and training arrangements should be established to ensure that thresholds for assessment to statutory children’s services are understood by staff and partners and are consistently applied; this should include the development of a multi-agency child</b></li> </ul>	<p><b>SIP 3.4</b></p>	<p><b>Continued areas for improvement</b></p> <ul style="list-style-type: none"> <li>a. Work around improving information shared by the Police with Children’s Services need to be progressed further.</li> <li>b. Multi agency Quality Assurance Group to be established to proceed with the work of understanding the effectiveness of front-line practice.</li> </ul>

<p>protection thresholds protocol incorporating recent Welsh Government guidance</p>		
<p><b>Recommendation 3: Senior leaders in social services and the police should continue to work proactively together to ensure improvements to the quality, consistency and timeliness of child protection enquiries.</b></p>	<p><b>SIP 2.2</b></p>	<p><b>3 Achievements</b></p> <p>3.1 The decision making process at the point of referral at Teulu Môn has improved significantly over the last few months due to the increase in management capacity (from one manager to three Practice Leaders). This has made a difference in time allocated to decision making and the Practice Leaders now are able to have reflective conversations. Our aim now is that the consistency of decision making in relation to referral threshold arrangements will also improve.</p> <p>3.2 Decision making at the point of assessment is made in 24 hours and after 10 days when the assessment is reviewed by the Practice Leader and again at the end of the 42 days.</p> <p>If the family are to receive a service from either the Intensive Intervention Service or are stepped down to the TAF or any other services commissioned we have created a transfer document that consider the following three elements:</p> <ul style="list-style-type: none"> <li>• Risk</li> <li>• ACE's identified and</li> <li>• Resilience within the individual, family and within the community.</li> </ul> <p>3.3 The quality of CID16 referrals continue to vary in quality. If Teulu Môn are presented with a poor quality referral they make contact with the Police and share with them the difficulties that we may have in processing that particular referral. We aim to be pro-active when receiving referrals rather than closing or refusing referrals immediately.</p>

		<p>3.4 Children’s Services have undertaken a repeat case file audit in May and June, with the assistance of commissioned external assistance to revisit an earlier audit to assess distance travelled. The small sample audit focused on:</p> <ul style="list-style-type: none"><li>• Initial Decision making</li><li>• Screening</li><li>• Strategy discussions</li><li>• Strategy meetings and</li><li>• Simple assessments</li></ul> <p>The auditor formed a view that:</p> <ul style="list-style-type: none"><li>• Attendance and recording at Strategy Meetings had improved</li><li>• Increased use of Risk 2 tool</li><li>• Strategy meetings were being held on time</li><li>• Increased use of Chronologies</li><li>• Improved quality of assessments</li><li>• Consistency of documents remaining a problem</li><li>• Conceptual shift from filtering risk to identifying strengths not fully embedded</li></ul> <p>3.5 A draft Multi Agency practice guidance (Investigation Threshold) has been completed focusing on improving the quality, consistency, efficiency and effectiveness of both the Police and Children’s Services in responding to safeguarding issues for children and young people. It is intended to make the best use of the respective skills of both Police officers and Social Workers in:</p> <ul style="list-style-type: none"><li>• The investigation of allegations or suspicions of child abuse;</li><li>• Information sharing;</li><li>• Safeguarding Children</li></ul> <p>3.6 The Practice Guidance has been developed to help all agencies involved with the investigation of allegations of abuse of children to work together for the best interests of the child and criminal justice. It offers an agreed way of working which should ensure:</p>
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		<ul style="list-style-type: none"> <li>• the development of strong and effective professional partnerships that will enhance the investigative process for all children and young people</li> <li>• that all investigations are carefully planned to ensure that proper assessment, language needs and welfare issues are met</li> <li>• an opportunity for professionals to make informed assessments whether the child has or is likely to suffer significant harm and plan appropriate action.</li> <li>• that the process of investigation causes minimum distress to the child and allows them to receive the best protection and support through the criminal and civil channels.</li> <li>• that it will build on the safe foundations set down in the All Wales Child Protection Procedure</li> <li>• that mechanisms are available to resolve differences of opinion and,</li> <li>• that the processes can be monitored and recorded.</li> </ul> <p>3.7 The Investigations Threshold Practice Guidance will be discussed in the North Wales Policy and Protocol Sub Group on 5<sup>th</sup> December where it will hopefully be endorsed and implemented across the region with the aim of strengthening our current joint working arrangements.</p>
<p><b>Recommendation 3: Senior leaders in social services and the police should continue to work proactively together to ensure improvements to the quality, consistency and timeliness of child protection enquiries.</b></p>	<p><b>SIP 2.2</b></p>	<p><b>3.0 Strengths</b></p> <p>a. The increase in managerial capacity within the new Service structure does enable Practice Leaders to have greater capacity with smaller Practice Groups to focus on the quality of practice of individual Social Workers in relation to child protection investigations.</p> <p>b. The increase in Practice Leaders has strengthened our capacity to make timely and appropriate decisions on referrals received by Teulu Môn.</p> <p>c. There is a strong willingness from Senior Managers and operation groups across both Children’s Services and the Police to work together to continue to strengthen joint working. Discussion will progress in November on establishing</p>

		<p>an Early Intervention process to improve decision making and the sharing of information.</p> <p>d. We have continued to work closely with the Police and operational discussions occur on a daily basis to jointly respond to safeguarding matters. We can have open and honest discussions with the Police about the quality of referrals if it's required.</p> <p>e. There is a readiness by Children's Services and the Police to address poor practice in relation to the quality, consistency and timeliness of child protection enquiries through daily Management discussions (by Skype or telephone) in relation to the standard of CID16's received.</p>
<p><b>Recommendation 3: Senior leaders in social services and the police should continue to work proactively together to ensure improvements to the quality, consistency and timeliness of child protection enquiries.</b></p>	<p><b>SIP 2.2</b></p>	<p><b>3.0 Continued areas for improvement</b></p> <p>a. Summary of Quarter 2 Evaluation report shows that there is conflicting evidence in terms of the improvement in the quality, consistency and timeliness of child protection enquiries. A distance travelled audit concluded that attendance and recording at Strategy Meetings had improved and that the strategy meetings were timely.</p> <p>However the Case File Audit (July) and a management review concludes that in several cases auditors expressed concern about strategy discussions or meetings:</p> <ul style="list-style-type: none"> <li>• Not always being held in a timely manner</li> <li>• Minutes of discussions are insufficient</li> <li>• References are made for need for follow up strategy meetings and then there is no evidence that they have been held.</li> </ul>



		<p>b. This is reflected in the Thematic Audit Part 4, and a review of Children subject to Child Protection Plans – decision making, delays, and lack of clear plans and follow through being issues identified.</p> <p>c. Work is underway with Police and Health - multi agency professional forum regarding two management reviews of cases where review of practice was best done on a multi-agency basis – one completed: one in progress. The completed review shows poor information sharing: lack of focus on risk and missed opportunities to intervene at an earlier stage.</p>
<ul style="list-style-type: none"> <li>• <b>Recommendation 4:</b></li> <li>• <b>The council should continue to support senior leaders to improve their knowledge and understanding of the complexities and risks involved in delivering children’s services to assure themselves, partners, staff and communities that their responsibilities are discharged to maximum effect.</b></li> </ul>	<p><b>SIP 1.8</b></p>	<p><b>4.0 Achievements</b></p> <p>4.1 The Local Authority has established an Elected Members and Senior Leaders Panel, Chaired by the Leader of the Council set up in April 2016, formalized in March 2017 as part of Scrutiny arrangements. The arrangements around the cross-party panel have enabled us to develop a number of important principles that will form a strong foundation going forward as we develop a model for the scrutiny of Children's Services:</p> <p>4.2 The Panel is a sub-group of the Corporate Scrutiny Committee. This will ensure the following benefits:</p> <ul style="list-style-type: none"> <li>• Develop a model of working in Children’s Services which focuses on a smaller group to enable Members to be more involved, to develop a level of subject expertise and to encourage good attendance and teamwork</li> <li>• Strengthen the capacity of Members to challenge performance by improving the quality of information regarding services and experiences of children and families who receive support and/or services</li> <li>• Forum to discuss information regarding Service risks, as a basis to inform the forward work program of the Corporate Scrutiny Committee.</li> <li>• Forum to develop a group of members with the expertise and ownership to lead discussions with regard to children and young people matters in the Corporate Scrutiny Committee.</li> <li>• Offer support to the looked after children Member’s Champion.</li> </ul>

4.3 The main role of the Children's Services Improvement Panel is to:

- a) Monitor and scrutinize in a meaningful and robust way:
  - progress and distance travelled against the service improvement plan published in response to the CSSIW inspection.
  - quantitative and qualitative performance of the children's services. This to include developing a specific scorecard for children's services
- b) Ensure that the voices of children and young people are heard when considering the effectiveness and impact of services.
- c) Provide assurance to the Corporate Scrutiny Committee on the following elements:
  - adequate, timely progress in delivering the improvement plan
  - quantitative and qualitative performance of support and care services available for children and young people.

4.4 The Panel has continued to focus on monitoring and challenging the implementation of Children's Services Service Improvement Plan, holding the Director of Social Services and Head of Service to account. Four meetings have been held since the Local elections in May.

The following agenda items have been discussed by the Panel:

- Terms of Reference, Project Plan & setting the scene
- Service Improvement Plan – high level overview
- Overview: Laming Visits – rolling program of visits and reporting back
- % of statutory visits to Looked After children due in the year that took place in accordance with regulations [SCC/025]

- Theme 3: Quality Assurance closer look at Recommendations 2, 11, 13 & 14 – CSSIW Report
- Presentation: “Day in the life of a children’s services social worker”
- Theme 2:

4.5 The purpose of Laming visits to front line staff by elected members has been reviewed to ensure that there is a link between their work as Panel members and the Service Improvement Plan. Lord Laming, The Victoria Climbié Inquiry (2003), was absolutely clear that *"senior managers and elected members within organisations are accountable for the quality, efficiency and effectiveness of local services"* and *"must be required to account for any failure to protect vulnerable children from deliberate harm or exploitation."*

4.6 Laming visits for Members have been scheduled until May 2018. A recent Laming visit was undertaken to the Child Placement Team on 27.10.17 by the Assistant Chief Executive, Scrutiny Chair and the Elected Member which is the Champion for Looked After Children.

The report completed after the visit noted:

- Staff confirmed that they received regular Supervision, which is very effective. The Social Workers noted that Supervision has always taken place regularly within the Placement Team.
- All present were experienced in their role and their confidence was clear from the way they engaged in the meeting.
- It was noted during the meeting that the staff’s enthusiasm for working with children, families and Foster Carers was clear.
- Those present were thanked for their hard work and commitment, which was clear to see and noted.

A further Laming visit was also held on the 16<sup>th</sup> of November with Teulu Môn in the Early Intervention Service.

		<p>4.7 The Leader of the Council, Cllr Llinos Medi is also the Portfolio Holder for Children’s Services and she has been very supportive and closely involved with the monitoring of the Service Improvement Plan through monthly meetings with the Head of Service to discuss progress and developments.</p>
<p>5 Recommendation 4: 6 The council should continue to support senior leaders to improve their knowledge and understanding of the complexities and risks involved in delivering children’s services to assure themselves, partners, staff and communities that their responsibilities are discharged to maximum effect.</p>	<p>SIP 1.5</p>	<p><b>4.0 Strengths</b></p> <ul style="list-style-type: none"> <li>a. Elected members and Senior Leaders have shown a real desire and willingness to improve their understanding of the work undertaken by Children’s Services staff through the work of the Members Panel.</li> <li>▪ The regular meetings held with the Chief Executive, Director of Social Services, Head of Human Resources and Head of Children’s Services has ensured prompt implementation of the new service structure, recruitment to posts and the development of the Workforce Strategy and Action Plan.</li> </ul>
<p>7 Recommendation 4: 8 The council should continue to support senior leaders to improve their knowledge and understanding of the complexities and risks involved in delivering children’s</p>	<p>SIP 1.5</p>	<p><b>4.0 Continued areas for improvement</b></p> <ul style="list-style-type: none"> <li>a. Further training on topics such as IFSS and ACE’s and Intensive Intervention will be provided to members and visits to support senior leaders and members to improve their knowledge and understanding.</li> </ul>

<p><b>services to assure themselves, partners, staff and communities that their responsibilities are discharged to maximum effect.</b></p>		
<p><b>9 Recommendation 5: 10 A robust workforce strategy should urgently be developed to include short, medium and long term aims for recruitment and retention of social workers.</b></p>	<p><b>SIP 1.5</b></p>	<p><b>5.0 Achievements</b></p> <p>5.1 The Workforce Strategy, approved over the summer, now focuses on ensuring that staff have the skills, training and support to enable them to do their jobs effectively, and provide the support that children, young people and families in Anglesey need.</p> <p>An Action Plan has been developed with the full support of HR and meetings are being held every 6 – 8 weeks, Chaired by the Head of Service to ensure the effective implementation of the Workforce Strategy Action Plan with the main elements being:</p> <ul style="list-style-type: none"> <li>• Developing a set of marketing materials detailing the benefits of working for the Authority presented on all media platforms.</li> <li>• Develop a recruitment plan for each vacancy immediately on resignation, jointly with Human Resources.</li> <li>• Establish effective methods of selection.</li> <li>• Ensure processes are focused on safe recruitment</li> <li>• Minimise delay in the various stages in the recruitment process.</li> <li>• Development of a consistent and effective induction programme.</li> <li>• Creating a supportive culture, challenging poor performance by providing a clear direction, regular supervision, and developmental support to enable all of our employees to perform effectively.</li> </ul>

		<ul style="list-style-type: none"><li>• Developing existing staff, and provide a safe working environment for all, combined with opportunities for developing new skills and progressing.</li></ul> <p>5.2 We have very recently made an appointment to the post of Head of Children's Services. Fon Roberts, will provide the Service with stability. He has nearly 20 years' experience and has been a Service Manager with us for the last 6 months.</p> <p>5.3 Two experienced Service Managers for Early Intervention and Prevention and Intensive Intervention have also been appointed and commenced in post.</p> <p>5.4 The new Service structure was implemented on the 4<sup>th</sup> of October where the eight new Practice Leaders took responsibility for their Practice Groups. They manage smaller Groups across Early Intervention and Prevention and Intensive Intervention, with each Practice Leader responsible for three or four Social Workers. This will mean that each Social Worker will have more access to their manager, enabling them to have early advice on dealing with individual cases and adequate support and supervision.</p> <p>There is further work to be undertaken to complete the restructuring, including reviewing the arrangements for the Child Placement Team, making the best use of Support Workers to support families, as well as ensuring that administrative support is appropriate for Practice Groups to effectively carry out their statutory responsibilities.</p> <p>5.5 Four of the Practice Leaders were recruited from outside the organization and they bring high level of knowledge and skills in the areas noted in the Service Improvement Plan that require further development. The other four Practice Leaders appointed were experienced practitioners working within Children's Services who were ready for promotion.</p> <p>5.6 We have recruited eight new Social Worker's over the last few months who are all local, and apart from one Social Worker all are fluent Welsh speakers, which will ensure we are able to meet the linguistic needs of children and</p>
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		<p>families coming into contact with the Service. We continue to have six experienced temporary agency Social Workers staff covering vacant Social Work posts. Most of these vacancies are due to promotions as a result of the new structure. A new recruitment initiative is in place to attract permanent experienced Social Workers will commence in November, outlining the benefits of working for Anglesey.</p> <p>5.7 We have significantly strengthened the staffing capacity of our Information, Advice and Assistance arrangements with the appointments of 2.5 Engagement officers for Teulu Mon and a further 1.5 additional posts through Families First Grant will be filled over the coming weeks.</p> <p>5.8 The Resilient Families Team is now fully staffed and currently working with 8 families to prevent family breakdown, to support children living at home. The Practice Leader for this Team has recently won a national award by the British Association of Social Worker's (BASW) on her work in developing support for care leavers and arrangements to support foster carers to prevent placement breakdown.</p> <p>5.9 We are currently recruiting for a number of other additional posts within the Service which will continue to strengthen our family support services. They include recruiting:</p> <ul style="list-style-type: none"><li>• 3 x additional Support Workers posts within the TAF funded from Families First Grant</li><li>• Additional Personal Advisor post funded by the St David's Day Welsh Government Grant to provide practical and emotional support to young people who leave care when they are 18 years old.</li></ul> <p>5.10 As a Service, we have developed a Social Work Traineeship arrangements internally that will enable two of our staff to train to become qualified Social Workers (2 year course). As we have seen a significant turnover of staff over the last 18 months, the aim of this strategy of 'Grow your own' is to ensure we have qualified Social Workers who will be working for the Service for at least 2 years after the qualify.</p>
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<p><b>11 Recommendation 5: 12 A robust workforce strategy should urgently be developed to include short, medium and long term aims for recruitment and retention of social workers.</b></p>	<p><b>SIP 1.1</b></p>	<p><b>5 Strengths</b></p> <ul style="list-style-type: none"> <li>• We have recruited a significant amount of permanent staff over the last 12 months to ensure we are able to deliver on the improvements required (Head of Service, Service Managers, 8 Practice Leaders and 8 Social Workers). This is one of the main priorities in our Service Improvement Plan.</li> <li>• There has been an increase in the number of staff working in Children’s Services from 85 in 2015/16 to 116 by the end of Quarter 2, 2017/18 (this includes transfer of TAF and the Family Information Service (7 staff members in total) from Lifelong Learning Service.</li> <li>• We have a very committed and skilled workforce focused on providing the best services for children and families on the Island. The new structure, and strengthened policies and procedures, should enable the Service to continue to recruit, develop and retain staff, thereby stabilizing the Service following a difficult few years.</li> </ul>
<p><b>6 Recommendation 5: 7 A robust workforce strategy should urgently be developed to include short, medium and long term aims for recruitment and retention of social workers.</b></p> <p><b>8</b></p>	<p><b>SIP 1.1</b></p>	<p><b>5.0 Continued areas for improvement</b></p> <ol style="list-style-type: none"> <li>a. Appoint permanent staff to the vacant Social Work posts and posts within the Safeguarding and Quality Assurance Unit.</li> <li>b. Being able to retain permanent staff who are committed to making a difference to the lives of children and young people in Anglesey is crucial if we are to deliver on the Service Improvement Plan.</li> <li>c. Through our Workforce Strategy and working with colleagues in HR we will provide all our staff with regular supervision, guidance and support to carry out their duties effectively. We aim to ensure that these arrangements will greatly assist with staff retention.</li> </ol>



<p><b>9 Recommendation 6: 10 Arrangements for team managers and senior practitioners should be reviewed to ensure capacity to effectively and consistently provide management oversight of decision making, challenge and direction for staff across the service; a leadership and development programme should be made available to build resilience.</b></p>	<p><b>SIP 1.4</b></p>	<p><b>6.0 Achievements</b></p> <p>6.1 The new Service structure was implemented on the 4<sup>th</sup> of October (SIP 4.2), and has led to an increase in staff (from three to eight) of who have management responsibilities for Social Worker's. The new Practice Leader role has responsibility for smaller Practice Groups of three or four Social Workers. Before we undertook a Service re-structure the three operational Teams – Duty, FIT and LAC – had between eight-ten staff each. Managing smaller Practice Groups will ensure Practice Leaders have greater capacity to provide management oversight, being more accessible to their staff, providing them with early advice on managing individual cases and providing support and supervision to ensure they carry out their responsibilities effectively.</p> <p>6.2 We have provided our Practice Leaders with a comprehensive Service Induction Program over the last few months to ensure they are fully aware of their roles and responsibilities, and to ensure that they are properly introduced by the Local Authority as new employees. The induction program and training sessions have covered the:</p> <ul style="list-style-type: none"> <li>• Vision for the Service</li> <li>• Service Improvement Plan</li> <li>• Managing sickness absence &amp; Return to Work Interviews</li> <li>• Customer care</li> <li>• Mangling complaints effectively</li> <li>• Flexi system</li> <li>• Collaborative Communication training</li> <li>• Performance, Quality Assurance Framework and Case File Audits</li> </ul> <p>And will cover:</p> <ul style="list-style-type: none"> <li>• Supervision Workshops -3 x full days workshops on Outcome focused supervision</li> </ul>
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<p><b>11 Recommendation 6: 12 Arrangements for team managers and senior practitioners should be reviewed to ensure capacity to effectively and consistently provide management oversight of decision making, challenge and direction for staff across the service; a leadership and development programme should be made available to build resilience.</b></p>	<p><b>SIP 1.4</b></p>	<p><b>7 Strengths</b></p> <p>a. The establishment of the new Resilient Families Team in supporting children to remain at home safely and assisting with rehabilitation plans for Looked After children is showing initial signs of progress. There is evidence of positive involvement from the Team in supporting 2 vulnerable teenagers to live with their families, preventing them from having to reside in out of county residential placements, a support worker has carried out excellent work to support a young person to remain at home with her family.</p> <p>b. The focus of the new structure on early intervention and preventative work with families, and the way the new Practice Leaders are asking their staff to work with families is also showing positive progress. An example being the 55% reduction over the last 6 months in the number of children on the Child Protection Register.</p>

		<p>c. The Local Authority is investing heavily in opportunities for Service Managers and Practice Leaders to develop their leadership and managerial skills. Staff who have received post qualifying awards of the last few years include:</p> <ul style="list-style-type: none"> <li>• Dawn Owen, Placement Team Manager – Team Management Development Programme (TMDP)</li> <li>• Hayley Ennis – Placement Team Manager – TMDP</li> <li>• Ceri Jones – Practice Leader, Teulu Mon – TMDP</li> <li>• Huw Owen – Independent Safeguarding Officer – TMDP</li> <li>• Michelle Evans – Practice Leader - TMDP</li> <li>• Another two Service Managers are currently undertaking the Middle Management Development Program.</li> </ul>
<p><b>13 Recommendation 6: 14 Arrangements for team managers and senior practitioners should be reviewed to ensure capacity to effectively and consistently provide management oversight of decision making, challenge and direction for staff across the service; a leadership and development programme should be made available to</b></p>	<p><b>SIP 1.4</b></p>	<p><b>6 Continued areas for improvement</b></p> <p>Over the last two years, our retention level for Managers/Practice Leaders has been poor, with four permanent Managers leaving the Service. This has had a significant impact on us being able to provide consistent Social Work practice and being able to support our staff to the required level. With the permanent appointments of Head of Service, Service Managers and Practice Leaders and the new Service structure we now have more stability and capacity to support our staff. The Workforce Strategy we have developed and the revised Supervision Policy will ensure we continue to focus on providing the best support possible.</p>

<b>build resilience.</b>		
<p><b>15 Recommendation 7: 16 Senior leaders should take steps to improve the frequency, consistency and quality of front line staff supervision; an assurance mechanism must be implemented to ensure compliance and quality.</b></p>	<p><b>SIP 1.3</b></p>	<p><b>7. 0 Achievements</b></p> <p>7.1 A revised Supervision Policy became operational in March 2017. This policy outlines what staff should expect from supervision and provides guidance to managers on how to deliver effective supervision. The main aim of this policy is to support staff as part of the performance management framework. It is critical for setting standards, fulfilling the Services aims and objectives, staff retention and welfare and ensuring the best quality of service for vulnerable groups. It is also crucial for staff support and development.</p> <p>7.2 Through Staff Conferences held every 6 weeks we have reminded all staff that they all have a responsibility to ensure they are provided with and receive regular supervision. The new Practice Leaders are fully aware of the requirements that supervision should be rigorously carried out within their Practice Groups. The policy provides guidance on the frequency of supervision for all groups of staff. Implications of inadequate or poor supervision can be very serious, impacting upon individual case management, staff development and welfare, and the culture of the organization.</p> <p>7.3 Supervision training for all staff has been provided by Dr Neil Thompson during the Spring, and in addition he provided guidance on the revised Supervision policy.</p> <p>7.4 As most of the Practice Leaders are relatively new in post, arrangements have been made with Rhonwyn Dobbing to provide outcome focused supervision training. Three workshops will be held over the next few weeks with the purpose of supporting supervisors in examining their role in outcome-focused supervision and to consider the value of outcome focused supervision for service users, workers, social work practice and for the organization. It should</p>

		also strengthen the role of supervisor, consider core skills and challenges for different practice groups.
<p><b>17 Recommendation 7: 18 Senior leaders should take steps to improve the frequency, consistency and quality of front line staff supervision; an assurance mechanism must be implemented to ensure compliance and quality.</b></p> <p>19</p>	SIP 1.3	<p><b>7.0 Strengths</b></p> <p>a. We have seen a significant reduction in the children on the Child Protection Register from 102 in March 2017 to 56 on 31<sup>st</sup> of August, a decrease of 55%. The names of 60 children were removed from the Register during this period and we have undertaken an analysis of the reasons behind the reduction. Huw Owen, Independent Safeguarding Officer undertook the analysis and formed a view that the new revised Supervision Policy (operational since March 2017) has provided greater clarity and opportunity for Social Workers to discuss risk within supervision whilst reflecting on the quality of the intervention and how the work is progressing with the family.</p> <p>b. We are currently undertaking an evaluation into the quality of supervision. Evidence will be obtained from the Supervision File, observations of supervision, Case Supervision Records, and feedback from staff.</p>
<p><b>20 Recommendation 7: 21 Senior leaders should take steps to improve the frequency, consistency and quality of front line staff supervision; an assurance mechanism must be implemented to ensure compliance and quality.</b></p>	SIP 1.3	<p><b>7 Continued areas for improvement</b></p> <p>Implement the Protocol of the Risk Model which includes Supervision sessions to ensure that levels of risk are considered for all Care and Support cases.</p>

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<p><b>Recommendation 8: Strong political and corporate support for children’s services must continue to ensure the service improvements needed are prioritized and the pace of improvement accelerated and sustained.</b></p>	<p><b>SIP 1.5</b></p>	<p><b>8.0 Achievements</b></p> <p>8.1 In response to the findings and recommendations of the CSSIW Inspection, the Local Authority’s Chief Executive has been holding weekly meetings (currently every two weeks) with the Director of Social Services, the Head of Children’s Services and the Head of Human Resources, to oversee the delivery of the new structure, development and implementation of the Workforce Strategy, and to ensure that there is appropriate pace in making key appointments to the posts of Head of Service, Service Managers and Practice Leaders.</p> <p>8.2 An Improvement Group of Senior officers, Chaired by the Director for Social Services, meet on a monthly basis to ensure progress is made on the Service Improvement Plan, and reporting to the Local Authority’s Senior Management Team and to the Executive.</p> <p>8.3 A Children’s Services Panel of Elected Members, Chaired by the Leader of the Council, has been formalised following the recent Local Authority elections, which reports to the Corporate Scrutiny Committee. The Leader of the Council, Cllr Llinos Medi is also the portfolio holder for Children’s Services and she has been very supportive of the progress and developments required by the Service.</p> <p>8.4 Staff Conferences held every 6 weeks have been attended by the Leader of the Council, the Chief Executive and Director for Social Services to ensure that staff have their full support and backing and they always share their gratitude to staff for working in such a challenging work environment.</p>
<p><b>Recommendation 8:</b></p>	<p><b>SIP 1.5</b></p>	<p><b>8.0 Strengths</b></p>

<p><b>Strong political and corporate support for children's services must continue to ensure the service improvements needed are prioritized and the pace of improvement accelerated and sustained.</b></p>		<p>a. The Local Authority has decided that Children's Services are exempt from having to identify financial savings for 2 years (2017-18 and, 2018-19). This is evidence that the Local Authority is prioritizing Children's Services as all the other Services have to identify savings.</p> <p>b. Additional funding for Children's Services was also approved by the Local Authority following the Inspection to strengthen the capacity of the Service to make the necessary improvements. A post of Quality Assurance Manager has been created to focus on implementing the Quality Assurance Framework. We have, however, failed to appoint to the post which has slowed the progress we had hoped. Temporary arrangements to fund Independent social care consultants to undertake specific pieces of work was also agreed.</p> <p>c. Further funding was approved for Bruce Thornton, co-author of the Risk Model, to undertake a Practice Coaching Development role for a period of 7 months to focus on:</p> <ul style="list-style-type: none"> <li>• Providing coaching and mentoring to help develop the skills, knowledge and competence of practitioners and Practice Leaders.</li> <li>• Support Service Managers to implement, process, systems and procedures to ensure that the Risk Model is implemented within service processes</li> <li>• Support the development of the Risk Model within critical and reflective supervision.</li> <li>• Maintaining current Social Work capacity by employing Agency Staff.</li> </ul>
<p><b>Recommendation 8: Strong political and corporate support for</b></p>	<p><b>SIP 1.5</b></p>	<p><b>8.0 Continued areas for improvement</b></p>

<p><b>children’s services must continue to ensure the service improvements needed are prioritized and the pace of improvement accelerated and sustained.</b></p>		<p>a. The Members Panel should continue to focus and challenge officers on the improvements required within Children’s Services.</p>
<p><b>Recommendation 9: Multi-agency arrangements should be established to strengthen operational plans to support effective co-ordination of statutory partners’ completion of Joint Assessment Frameworks.</b></p>	<p><b>SIP 2.3</b></p>	<p><b>9.0 Achievements</b></p> <p>9.1 We have received permission from Welsh Government to amalgamate the current Joint Assessment Framework (JAF) with the Care and Support assessment form. Work on including the measures that the JAF collects has started and will be implemented later this calendar year. The TAF still use the JAF in the intervening period.</p> <p>9.2 Enquiry or referral into the IAA Hub that requires preventative support requires a proportionate Care and Support assessment and JAFF.</p>
<p><b>Recommendation 9: Multi-agency arrangements should be established to strengthen operational plans to support effective co-ordination of statutory partners’ completion of Joint Assessment Frameworks</b></p>	<p><b>SIP 2.3</b></p>	<p><b>9.0 Strengths</b></p> <p>a. We have worked on improving the quality and our understanding of the Care and Support assessments (Part 1,2,3) this includes the core data set, the ‘What Matters’ conversation and care and support assessment. We have been working to improve our understanding of the national eligibility criteria and gain consistency in recording the eligibility criteria in our assessments. We have identified suitable methods of communication, prompts and tools to improve the quality of the ‘What Matters’ conversation, decision making process and recording.</p>
<p><b>Recommendation 9: Multi-agency arrangements should be</b></p>	<p><b>SIP 2.3</b></p>	<p><b>Continued areas for improvement</b></p>



<p><b>established to strengthen operational plans to support effective co-ordination of statutory partners' completion of Joint Assessment Frameworks</b></p>		<p>a. The part 4 Care and Support Plans are beginning to be utilized to record the care and support plans. We have identified how we will complete this care plan to a good standard and what tools are required to complete the care plan collaboratively with the family. This will include the use of the miracle question – a Motivational Interviewing tool used to establish a baseline score (establish what a 10 looks like), goal sheets to measure the distance travelled, crisis card to record the contingency plan and safety plan. These tools are all designed to co-produce work <b>with</b> families and not for them. Training has been arranged for the new year including Motivational Interviewing, Brief Solution Focused Solution Therapy and Collaborative Communication. This will strengthen the progress made thus far and reinforce the new methods of working promoted by the Act.</p>
<p><b>Recommendation 10: The quality of assessments and plans should be improved to ensure that they are consistently of a good quality, with a clear focus on the needs, risks and strengths of children and families, and that desired outcomes, timescales and accountabilities for actions are clear.</b></p>	<p><b>SIP 2.1</b></p>	<p><b>10 Achievements</b></p> <p>10.1 The new Practice Leaders have been focusing on reducing Social Workers caseloads by stepping up and stepping down and closing cases when this is appropriate. There is early indication that there are less cases moving on to assessment due to the increase in 'What Matters' conversations occurring at Teulu Môn, providing a more prompt and appropriate response for families.</p> <p>10.2 A follow up audit undertaken in May/June2017 noted the following:-</p> <ul style="list-style-type: none"> <li>• Significant improvement in the quality of Initial/Simple assessments</li> <li>• On the whole assessments were comprehensive and appropriate (proportionate)</li> <li>• Increased use of Case Closure Summaries</li> <li>• Generally much improved recording with only one case found to be below standard</li> <li>• Initial decision within 24 hours made in all cases</li> <li>• Increased involvement of other agencies in the assessment process evident</li> <li>• Assessment formats used remains mixed (Initial Assessment/S47 assessment / Care and Support assessment framework) but there was an increased use of the new Care and Support Assessment Framework</li> </ul>

		<ul style="list-style-type: none"> <li>• Limited use of the ‘What Matters’ section of the Care and Support assessment</li> <li>• The ten audited cases had produced 22 previous referrals – only three of the audited cases were “unknown families”. Decisions to close were appropriate in respect of presenting problems. However the decisions were not always based on a holistic and historical view of the family.</li> </ul> <p>10.3 A Court Action Plan has been developed to focus on improving the quality and analysis of all assessments undertaken to inform our decision making and will support arrangements for ‘front loading’ public law cases. Practice Leaders now have oversight of the Court timeframe for cases within their Practice Groups and will support and guide Social Workers to ensure better preparation for Court and that documents are filed on time.</p> <p>10.4 Children’s Services has agreed to prioritize improvements in Social Work assessment practice, based on the basis that the Service needs to focus on incremental steps, building sustainability and longevity.</p>
<p><b>Recommendation 10: The quality of assessments and plans should be improved to ensure that they are consistently of a good quality, with a clear focus on the needs, risks and strengths of children and families, and that desired outcomes, timescales and</b></p>	<p><b>SIP 2.1</b></p>	<p><b>Strengths</b></p> <p>a. The transition from assessments under the Children Act 1989 to the requirement of the Social Services and Wellbeing (Wales) Act 2014 is ongoing. There is some positive work happening in the service to support this conceptual and practical shift in assessment practice:</p> <ul style="list-style-type: none"> <li>• Practitioners have been involved in setting standards for assessment practice: upon which we can measure its quality. Bruce Thornton, Author of the Gwynedd/Thornton Risk Model is currently providing coaching &amp; mentoring to staff on the application of the model to inform assessments. The service has agreed its Protocol for the consistent use of the Risk Model within practice.</li> </ul>

<p><b>accountabilities for actions are clear.</b></p>		<ul style="list-style-type: none"> <li>• There are examples of good social work practice, including effective use of the Gwynedd/Thornton Risk Model, reflected in the content of some assessments; and some assessments underpinning applications to court providing clear direction. Most of the initial assessments reviewed had been completed in a timely manner.</li> <li>• Some examples of good assessments showed analysis, clarity on risks and family capability and dynamics. One distance travelled audit showed improvement in the quality of Initial/Simple assessments: and that on the whole assessments were comprehensive and appropriate (proportionate).</li> </ul> <p>b. A number of the Practice Leaders have attended a Collaborative Communication training course which will underpin assessments under the Social Services and Wellbeing (Wales) Act 2014.</p> <p>c. Bruce Thornton has been commissioned to provide a mentoring/coaching role within the service to ensure that the Risk Model is embedded into practice.</p> <p>d. The establishment of smaller Practice Groups within the new structure will provide greater capacity for Practice Leaders to focus on improving Social Work practice.</p>
<ul style="list-style-type: none"> <li>• <b>Recommendation 10:</b></li> <li>• <b>The quality of assessments and plans should be improved to ensure that they are consistently of a good quality, with a clear focus on the needs, risks and strengths of</b></li> </ul>	<p><b>SIP 2.1</b></p>	<p><b>10 Continued areas for improvement</b></p> <p>a. The analysis of practice for quarter 2 (pre implementation of the new structure) has highlighted the following areas for priority:</p> <ul style="list-style-type: none"> <li>• Managing caseloads</li> <li>• Stepping down/stepping up cases effectively</li> <li>• Regain our professional reputation within the Court</li> <li>• Making sure management oversight is recorded – what decision was made, by whom and the rationale behind the decision – and ensure decisions are followed up</li> </ul>

<p><b>children and families, and that desired outcomes, timescales and accountabilities for actions are clear.</b></p>		<ul style="list-style-type: none"> <li>• Providing an operational recording model that spans from early intervention through to intensive intervention that provides the minimum templates within a consistent work flow</li> <li>• Ensuring that each open case has an up to date assessment.</li> <li>• Ensure that the assessments are thorough – not focusing simply on the presenting problem, but considering the issues in the family’s history</li> <li>• Social workers need to be more robust and confident in setting out their professional analysis of risk and needs.</li> </ul> <p>b. The eligibility criteria within the Care and Support assessments are currently not consistently recorded. We are aiming to gain a greater consistency and have arranged additional training for staff at the end of November coordinated by Vicky Allen, who has been leading on developing the Social Services and Well Being (Wales) Act 2014 regional templates.</p> <p>c. The Risk Model needs to be embedded within practice and we aim to support practitioners and Practice Leaders to further develop their skill in implementing the model to support effective risk decisions.</p>
<ul style="list-style-type: none"> <li>• <b>Recommendation 11:</b></li> <li>• <b>The quality and consistency of record keeping should be improved; all staff and managers should ensure that their records are of good quality, are up to</b></li> </ul>	<p><b>SIP 3.5</b></p>	<p><b>11.0 Achievements</b></p> <p>11.1 We are disappointed that the overall evaluation for Quarter 2 shows that recording practice remains inconsistent, although there is evidence of improvement in some audits.</p> <p>11.2 We are working on providing an operational model for staff that spans from Early Intervention through to Intensive Intervention that provides the minimum recording templates within a consistent work flow. We aim to:</p> <ul style="list-style-type: none"> <li>• Re-affirm the need for and standards expected of good case recording</li> </ul>

<p><b>date and are systematically stored.</b></p>		<ul style="list-style-type: none"> <li>• Ensure a Recording Framework that “maintains a systemic and family narrative, which describes all the events associated with the interaction between a social worker, other professionals and the child and their family” (Munro)</li> <li>• Ensure that the use of the Risk Model is embedded within Key stages of Recording and Decision Making.</li> <li>• Develop an approach that allows an individual, particularly a child, to look back at their life and recall clearly or where they may not have known all the facts.</li> <li>• Develop an approach that aids reflection enabling staff to be able to reflect back on work undertaken and plan any future intervention</li> <li>• The production of accurate business information for performance management and quality assurance purposes.</li> </ul>
<ul style="list-style-type: none"> <li>• <b>Recommendation 11:</b></li> <li>• <b>The quality and consistency of record keeping should be improved; all staff and managers should ensure that their records are of good quality, are up to date and are systematically stored.</b></li> </ul>	<p><b>SIP 3.5</b></p>	<p><b>11.0 Strengths</b></p> <ol style="list-style-type: none"> <li>a. We have continued to constructively challenge and support individual workers to improve their practice in relation to timely recording and assessments.</li> <li>b. Practice Leaders have been focusing on managing staffs caseloads with the aim of stepping up and stepping down cases and closing when this is considered appropriate. This will lead to an increase in staff capacity to ensure their record keeping is up to date and of good quality.</li> </ol>
<ul style="list-style-type: none"> <li>• <b>Recommendation 11:</b></li> <li>• <b>The quality and consistency of record keeping</b></li> </ul>	<p><b>SIP 3.5</b></p>	<p><b>11.0 Continued areas for improvement</b></p> <ol style="list-style-type: none"> <li>a. The analysis of practice for Quarter 2 has highlighted the following areas for priority:</li> </ol>

<p><b>should be improved; all staff and managers should ensure that their records are of good quality, are up to date and are systematically stored.</b></p> <ul style="list-style-type: none"> <li>•</li> </ul>		<ul style="list-style-type: none"> <li>• Providing an operational model that spans from early intervention through to intensive intervention that provides the minimum templates within a consistent work flow.</li> <li>• Ensure that the development of WCCIS within Children Services supports practice.</li> <li>• Recording – accurate, clear language, useful records of meeting, clear reasons for involvement, full names and titles, summary tabs, transfer summaries, good version control.</li> <li>• Parents/carers should always be informed when a case is closed and evidence for this clearly recorded on file.</li> </ul>
<ul style="list-style-type: none"> <li>• <b>Recommendation 12:</b></li> <li>• <b>The Local Authority and partners should work together to develop a cohesive approach to the collection and analysis of information about the needs of communities, that includes the voices of children and families. This should be used to inform the shaping of strategic plans to achieve effective alignment of service delivery between information, advice and assistance</b></li> </ul>	<p><b>SIP 4.4</b></p>	<p><b>12.0 Achievements</b></p> <p>12.1 Over the last 12 months we have focused on developing and implementing our Information, Advice and Assistance arrangements to meet the requirements of the Social Services and Wellbeing (Wales) Act 2014.</p> <p>12.2 The Population Needs Assessment for the North Wales region has been published and the Local Action Plan is currently out for consultation. Officers from Anglesey have been part of both projects and have contributed towards forming the Plan. The Local Action Plan will be published in March 2018.</p> <p>12.3 The Local Authority’s Corporate Prevention Strategy group led by the Director for Social Services meets on a regular basis. The Group presented a paper to the Senior Leadership Team outlining what is required to ensure the successful delivery of a prevention strategy and work is continuing to move this forward.</p> <p>12.4 The Group has established links with the work of the Public Services Board which is looking at how partners can work more collaboratively and will be receiving the findings of the consultation held over the summer months with partners, third sector and community groups.</p>

<p>services, the preventive sector and statutory services.</p>		
<ul style="list-style-type: none"> <li>• Recommendation 12:</li> <li>• The Local Authority and partners should work together to develop a cohesive approach to the collection and analysis of information about the needs of communities, that includes the voices of children and families. This should be used to inform the shaping of strategic plans to achieve effective alignment of service delivery between information, advice and assistance services, the preventive sector and statutory services.</li> <li>•</li> </ul>	<p>SIP 4.4</p>	<p><b>12.0 Strengths</b></p> <p>a. The Local Authority has prioritized the development of <b>Corporate Preventative Services</b> and support for families as part of its Corporate Plan for 2017 – 2022 in “<i>Providing robust early intervention and prevention services to ensure that children are safe and supported in order to minimize harmful childhood experiences.</i>”</p> <p>b. On the 3<sup>rd</sup> of November, Children’s Services held its second bi-annual <b>STARS Awards Ceremony</b> for our Looked After children in Tre Ysgawen Hall. Many of these children and young people have been through difficult times, but the STARS Awards celebrate that it is possible to achieve with courage, determination and support. These awards demonstrates the Authority’s pride as a Corporate Parent and has facilitated a feeling of being valued for both Looked After Children and their carers, boost young people’s self-esteem and encourage them to continue to achieve and develop in the future.</p> <p>It was a pleasure to welcome the Children’s Commissioner to this event.</p> <p>Six young people worked jointly with workers to plan and organise the event, the young people were the main decision makers on choosing the venue, food and entertainment. The event was split into two parts, one for the younger children of primary school age which involved a Disney/super-heroes themed tea party, while the older children of secondary school aged had a Oscars themed event. This was an extremely successful event where we celebrated the successes of our young people and rewarded them for their hard work. The event enabled us to listen to the wishes and feelings of the children and their families in relation to the support they require from the Local Authority. Feedback from Foster Carers following the event include:</p>

*"I would like to congratulate you personally, and everyone else involved in the organization of Fridays Star awards celebrations.*

*It was a really well organized event, and an undoubted success which I am sure will remain in the memories of the children for many years to come. I think it was a great idea to involve the children in the organization, and also to recognize their involvement in the organization on the night. Well done to everyone."*

- c. As part of our response to the **Children's Commissioner's Hidden Ambitions report** we have spoken directly to the young people Looked After and created the following 'Powtoon' animation clip  
<https://www.powtoon.com/m/cGN6QoOF4vb/1/m>

The aim of this interactive clip is to explain the support available to them through the pathway planning stage up to when young people leave care. We consulted with 8 young people aged between 16-24 who have given their opinions on the animation. The comments we received was very positive and they included:

- That it is relevant for their age range
- It caught their eye and contains everything – with the correct information
- Good mix of animation and information, Short & Snappy
- The voiceover and music used drew their attention to what information was being shared with them
- Information and examples of support that's available is useful

One young person said "If I'd have seen this animation last year, it would have been a great help to me" and they all thought it would be a good idea to show the clip in schools.



The animation will now be available on the Council's website, Youtube and Facebook pages and shown on screen in the main Council Office reception in Llangefni.

It will also be played during the Looked After Children Reviews for when the young people are nearing their 16<sup>th</sup> birthday, which will provide them with helpful guidance on the support available to them as they reach adulthood.

d. **The Anglesey Foster Care Forum** continues to meet quarterly, this forum was launched in February 2014, it was established to improve and develop the fostering service on Anglesey with Social Workers, Foster Carers and Senior Management all working together. All approved general and kinship Anglesey Foster Carers are invited to attend. The vision is:

*“To improve and develop the fostering service on Anglesey by working together as a team, in order to improve the quality of life of Looked After Children on Anglesey.”*

The Placement Team continue to produce quarterly newsletters for Foster Carers including Foster Carers contribution to the content.

Coffee and Cake support groups provide an opportunity for foster carers to meet, network and share experiences with peers and staff in a supportive, informal environment. They also provide a learning opportunity in addition to the rolling programme of formal training – our guest speakers have been varied and have covered topics such as advocacy, internet safety, self-care and stress management for foster carers, modern slavery, parenting, and Child Sexual Exploitation. A new group has been set up specifically for Foster Carers who are family/friends.

A handbook for Anglesey Foster Carers is about to be shared. Two 'Incredible Years' courses have been held this year for our Foster Carers. They will also be offered a place on the 'Fostering Changes' 12 week course from January 2018 as part of the National project: Confidence in Care in Wales.

Anglesey are one of four Local Authorities in Wales taking part in the National Fostering Network project 'Recruitment and Retention Project in Wales' 2017/18 to understand local fostering needs and implement findings from the research.

e. **Anglesey Kinship Carer Support Group**

The first Anglesey Kinship Carer Support Group was held in April this year as an opportunity for the carers to mix in an informal environment and have the chance to offer each other emotional and practical support and help alleviate some of the isolation they may feel. The main organisational role for this group has been commissioned from 'Y Bont' educational centre. Social Workers from the Child Placement Team attend the group in a supportive role, in order to provide advice where possible, to gain insight to the issues the kinship carers raise and to help feed back to management when areas for further development are identified.

Attendance at the group has been consistent and verbal feedback has highlighted that the carers value the opportunity for a chat or "something for themselves". Two carers who didn't know each other before attending the group have developed such a rapport that they missed the turnoff for Llangefni on the way to the last meeting because they were so involved in conversation! One of the issues which has been flagged up by group members is that, with hindsight, they wished they had more information at the beginning of the process of becoming kinship carers.

Future plans include looking at group members contributing to an information leaflet for new kinship carers and a "buddying" scheme for newly approved carers.

f. **Forest School 2017**

Forest School is an opportunity for children and young people to experience life and learning in the outdoors. From May to July, this year's group of 16 Looked After children were able to get outside and spend ten Saturdays in the woods at Treborth Botanical Gardens, learning about the local environment and its habitats. Making the most of the natural environment, we were lucky enough to discover the site and explore the area and its surrounding forest through making dens, climbing trees, creating wildlife habitats, carrying out bug surveys and cooking on an open fire. All while learning about the inspirational and eventful life of John Muir, the Scottish-American father of modern day conservation. Many of the group were working towards the John Muir Award at Discovery level, which incorporates four elements - *Discover, Explore, Conserve, Share*.

This year we took a new approach with a small group of young people, who have previously attained the John Muir award returning as 'mentors' for the younger children, with the added leadership and responsibility helping them work towards the next level, Explorer award. Excitingly, this year the group were also able to record and edit their own short film of the experience, with the help and support of TAPE Community Music & Film ([tapemusicandfilm.co.uk](http://tapemusicandfilm.co.uk)).

- g. A **Fun Day** for Looked After Children was arranged for the 9th of September in Tyddyn Môn (a smallholding that was founded by parents of adults with learning disabilities who wanted a more constructive and rewarding occupation for their sons and daughters). They provide day care, training and support. But, unfortunately due to adverse weather conditions the day had to be postponed until the new year. The plan was to take a tour around the farm and feed the animals, go to the playgrounds and soft play area. Then they were going to have a barbeque before making the most of the rest of the facilities: woodland trails, Dragon Trailer ride, bouncy castle, games and indoor arts and crafts.

<p><b>Recommendation 12: The Local Authority and partners should work together to develop a cohesive approach to the collection and analysis of information about the needs of communities, that includes the voices of children and families. This should be used to inform the shaping of strategic plans to achieve effective alignment of service delivery between information, advice and assistance services, the preventive sector and statutory services.</b></p>	<p><b>SIP 4.4</b></p>	<p><b>Continued areas for improvement</b></p> <p>a. We aim to develop better ways of listening to the collective views of our Looked After Children and care leavers which would assist us further in the development of Family Support Services.</p>
<p><b>Recommendation 13: Performance management and quality assurance arrangements, including scrutiny of service demand and routine auditing of the quality of practice, needs to be embedded so that managers at all levels have timely, relevant and</b></p>	<p><b>SIP 3.2</b></p>	<p><b>13.0 Achievements</b></p> <p>13.1 Children's Services have approved their revised Quality Assurance Framework which sets out the approach the Service will take to ensure that it is:</p> <ul style="list-style-type: none"> <li>• Providing safe professional practice</li> <li>• Supporting the right children/adults, in the right way, at the right time</li> <li>• Evaluating whether it is making a difference to practice improvement</li> <li>• Providing a professional context that supports learning, reflection, openness and supportive challenge</li> </ul>

<p><b>accurate performance and quality assurance information to enable them to do their jobs effectively and to deliver improvements.</b></p>		<ul style="list-style-type: none"><li>• Taking the improvement agenda beyond compliance with procedure to a commitment to improve the quality of the social work practice delivered to children, their families and carers.</li></ul> <p>13.2 It provides a set of planned and systematic assurance processes that can be used to shape learning and improvement. In essence moving along the spectrum from quality control to quality improvement based on an approach of evaluation, learning and improvement.</p> <p>13.3 The service will use a wide range of evidence sources to underpin the quarterly Practice evaluation report such as:</p> <ul style="list-style-type: none"><li>• Monthly Case file Audits</li><li>• Monthly Casefile Audit – Safeguarding &amp; Quality Improvement Unit</li><li>• Practice Observation</li><li>• Supervision Audits</li><li>• Learning from and with our partners</li><li>• Learning from people who use our services</li><li>• Oversight and Challenge</li><li>• Learning from our staff</li><li>• Ongoing Independent Reviewing Officer and Child Protection Co-ordinator</li></ul> <p>A number of the individual elements of the framework are in place.</p> <p>13.4 The service is in the process of setting standards for areas of practice: upon which it will evaluate practice. These are set in collaboration with practitioners – so that they are owned by them. The process of casefile audits &amp; Multi Agency Audits are taking root within the service. Whilst not all managers/practice leads consistently comply with the requirements, there is some excellent analysis by them as part of the audit process.</p>
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|  |  | <p>13.5 A wide range of planned and systemic evaluations have been undertaken to date. There is a risk that we focus on evaluation at the cost of improving. To mitigate this risk we must appoint to the vacant posts within the Safeguarding and Quality Assurance Unit, and shape the roles of the Practice Leaders in terms of taking forward the improvement actions.</p> <p>13.6 On a monthly basis the service holds a Quality and Performance meeting. The focus of this meeting is to understand the data and evidence from evaluations of practice, to provide an opportunity to analyze and identify solutions to improve performance and quality of practice. This meeting has a role in ensuring a clear oversight of the quality of practice within the service and to develop clear action plans to address improvement requirements. The meeting also has a clear role in recognizing what is working well within the Service and to ensure that learning is shared across the whole system. The meeting will also evaluate the impact of the learning and improvement.</p> <p>13.7 Case file audits undertaken in September has shown a general positive trend of improvement in practice over the last three months. Seven Team Managers / Practice Leaders were tasked with undertaking casefile audits of a range of cases. As this is a time of transition and restructure for the service, this was the first time that several of the Practice Leaders had undertaken these audits. In general this audit consisted of new Practice Leaders auditing cases managed under the previous structure. The same audit tool was used as for the similar audits undertaken earlier in 2017. Completed audit tools were returned by five of the 7 seven Managers – nine cases returned out of a total of 16 allocated. The sample therefore contained a variety of cases at different stages and varying levels of complexity. It should be noted that some Practice Leaders were new to the Service, whilst others continued to have day to day responsibilities as Team Managers or Social Workers during September.</p> |
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<p><b>Recommendation 13: Performance management and quality assurance arrangements, including scrutiny of service demand and routine auditing of the quality of practice, needs to be embedded so that managers at all levels have timely, relevant and accurate performance and quality assurance information to enable them to do their jobs effectively and to deliver improvements.</b></p>	<p><b>SIP 3.2</b></p>	<p><b>13.0 Strengths</b></p> <ol style="list-style-type: none"> <li>a. We have developed a detailed Quality Assurance Framework that is being implemented across Children’s Services to highlight good practice and areas requiring improvements.</li> <li>b. The process of casefile audits, thematic audits &amp; Multi Agency Audits are taking root within the service. The Multi Agency Audits have involved working closely with Partner Agencies such as Education, Health and the Police to look at areas such as quality of referrals with the Police.</li> <li>c. Case file audit undertaken in September has shown a general positive trend of improvement over the last 3 months.</li> </ol>
<p><b>Recommendation 13: Performance management and quality assurance arrangements, including scrutiny of service demand and routine auditing of the quality of practice, needs to be embedded so that managers at all levels have timely, relevant and accurate performance</b></p>	<p><b>SIP 3.2</b></p>	<p><b>13.0 Continued areas for improvement</b></p> <ol style="list-style-type: none"> <li>a. The main areas for practice improvement from an analysis of a recent Case file audit: <ul style="list-style-type: none"> <li>• Management oversight and supervision (and how this is evidenced on file);</li> <li>• Quality of assessment and analysis;</li> <li>• Planning, in particular the need for clear, purposeful periods of intervention during times on the CP Register, and the embedding of the Care and Support Plan as a working document for the Service.</li> </ul> </li> <li>b. Case file auditing to continue to be undertaken by all Managers/Practice Leaders to evaluate the quality of practice across the Service.</li> </ol>

<p><b>and quality assurance information to enable them to do their jobs effectively and to deliver improvements.</b></p>		<ul style="list-style-type: none"> <li>c. Appoint to the vacant posts within the Safeguarding and Quality Assurance Unit, and shape the roles of the Practice Leads in terms of taking forward the improvement actions.</li> <li>d. We are still writing the scripts to access reports from WCCIS – this is a problem for most of the local authorities that have gone live on the new system, and we’re working with Ceredigion Council in particular to enable us to do this.</li> <li>e. We have looked in detail at one of the local indicators, % of Looked After Children seen within statutory time-scales, and suspect that our data collection and analysis may not have been correct, leading to performance that appear worse than they are in reality. Work is progressing to address these issues.</li> <li>f. There appears to be a national issue in relation to the consistency of interpretation and reporting for all Local Authorities against the new Performance Indicator’s introduced by the Social Services and Well Being Act (Wales) 2014. A letter dated 25<sup>th</sup> of October was received from Glyn Jones, Chief Statistician, Welsh Government. This letter highlighted the temporary suspension of National Statistics designation for Social Service publications due to concerns about the quality of the data being reported following the introduction of the new Welsh Community Care Information System (WCCIS).</li> </ul>
<p><b>Recommendation 14: Caseloads and reports regarding the quality of workers’ performance should be continuously monitored to ensure there is sufficient capacity for workers to engage effectively with</b></p>	<p><b>SIP 3.2</b></p>	<p><b>14.0 Achievements</b></p> <p>14.1 There has been a significant reduction in the numbers of children subject of a Child Protection Plan between 1<sup>st</sup> March 2017 and 30<sup>th</sup> August 2017. During this period, the names of 60 children were removed from the Child Protection Register. A study of the Child Protection Register during this time identified several matters to be taken forward on a multi-agency basis regarding the understanding of, and the practice within the Case Conference process.</p>



<p><b>children and their families.</b></p>		<p>In many cases it concluded that there was a lack of evidence to substantiate that thresholds for significant harm and registration were met: lack of child protection plans and implementation. There seemed to be an approach of monitoring and waiting in a number of cases. In some instances, the goal posts were changed, so having got to one point and issues addressed preconditions for de-registration, other different areas for concern which are not necessarily child protection were identified. A further study to look at the reasons behind the reduction in the numbers of children subject to a child protection plan shows that in 35% of cases (21 children) this was as a consequence of supporting the family to make improvements and in 22% of cases (13 children) this was a consequence of stepping up the case and the children becoming looked after.</p> <p>14.2 Some of the successful interventions were considered to be Parenting Officer support, wider family support, Child Directed Play intervention, motivated parties, and IFSS support, helping parents to identify solutions, family group conferencing, and support from Adult Services to the parent. This would suggest that the service is on track in terms of delivering a different approach to social work practice. The work of the Resilient Families Team and Teulu Môn, have considerable potential to impact positively on this area.</p> <p>14.3 The new social care electronic recording system, WCCIS, was rolled out within Children's Services in August. We have continued to work with our IT colleagues on our requirements for Performance Monitoring reports from the new system. Further work is required to establish an accurate picture of current performance across the Service. This work has been ongoing and the Service has an action plan in place to improve the position and provide accurate and up to date data. Anglesey is in a similar position to most of the other Local Authorities who have gone live with WCCIS in 2017.</p>
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		<p>14.4 The Quality Assurance Framework approved within the Service aims to ensure that staff provide safe professional practice. We use a number of evidence source to evaluate Social Workers performance, such as Case file Audits and we hold monthly Quality and Performance meetings to focus on understanding the data and evidence from evaluations of practice, to provide an opportunity to analyze and identify solutions to improve performance and quality of practice. This meeting has a role in ensuring a clear oversight of the quality of practice within the Service and to develop clear action plans to address improvement requirements.</p> <p>14.5 Timely and quality Supervision arrangements for staff also provides Practice Leaders with an opportunity to support and challenge the practice and performance of individual worker's and to agree on action plans to address issues of concern.</p> <p>14.6 The new Service structure now enables the Practice Leaders to focus on improving the practice within their smaller Practice Groups. They will have oversight of their staffs' caseloads to ensure they have capacity to establish a positive relationships with families to engage effectively.</p>
<p><b>Recommendation 14: Caseloads and reports regarding the quality of workers' performance should be continuously monitored to ensure there is sufficient capacity for workers to engage effectively with children and their families.</b></p>		<p><b>14.0 Strengths</b></p> <ul style="list-style-type: none"> <li>a. Staff have continued to access training and development opportunities, taking responsibility for their own development</li> <li>b. All Managers/Practice Leaders are being reminded of their responsibility to support and challenge the practice and performance of individual workers and to agree on action plans to address issues of concern.</li> </ul>

<p><b>Recommendation 14: Caseloads and reports regarding the quality of workers' performance should be continuously monitored to ensure there is sufficient capacity for workers to engage effectively with children and their families.</b></p>	<p><b>SIP 3.2</b></p>	<p><b>14.0 Continued areas for improvement</b></p> <ul style="list-style-type: none"><li>a. Continue to develop Performance Managements reports within WCCIS focusing on staff caseloads and local and national performance indicators.</li><li>b. Case file auditing to continue to be completed by all Managers/Practice Leaders to evaluate the quality of practice across the Service.</li><li>c. Appoint to the post of Quality Assurance officer within the Safeguarding and Quality Assurance Unit.</li></ul>
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## Annex 4



Caroline Turner

Council Offices

Llangefni

Anglesey

LL77 7TW

Dyddiad/Date:11/01/18

Dear Caroline

### **Re: Review of progress in implementation of Children's Services Improvement Plan**

Thank you for meeting with us on December 18 to review the progress made in implementing Isle of Anglesey Council Council's improvement plan for children's services.

Thank you also for the detailed written review you submitted to us.

We have been meeting with you on a regular basis since the inspection in November 2016 to monitor the actions the local authority has been taking to improve outcomes for vulnerable children and families in Anglesey. As you have explained the local authority continues to be on a journey but now has good foundations in place. The pace of change has been slow and but we recognise there has been positive, incremental improvement.

We are pleased to note significant progress has now been achieved in the implementation of a new structure for children's services. This has been to ensure children and families get help and support when they need it and to provide better support for, and oversight of, frontline practitioners. Having recruited to a number of key posts, operationalising the new structure is now at a critical, early stage.

The new structure has been underpinned by the development of policies and practice guidance to provide a clear framework for staff. Continued improvement in practice must remain a priority. Given these have only recently been introduced it is too soon for us to judge whether they are improving practice and in turn outcomes for children and families.

We look forward to reading the results of the review you have commissioned to provide an independent assessment of social work practice.

We also note the focus on working with partners both within the local authority and externally. Further work is required to ensure partners engage meaningfully to deliver improved outcomes for children and their families.

We recognise the continued corporate commitment provided to ensure that children's services improve and the willingness to reach a shared understanding of the challenges being faced. Similarly the increased scrutiny and challenge from elected members has been a positive development.

Given the significant concerns identified during the inspection, there remains substantial work for the local authority to carry out to fully implement the improvement plan and ensure that improvements are sustained. We will continue to monitor progress over the coming months with a more formal review by way of a re-inspection later in 2018.

Yours sincerely

Vicky Poole

Head of Local Authority Inspection