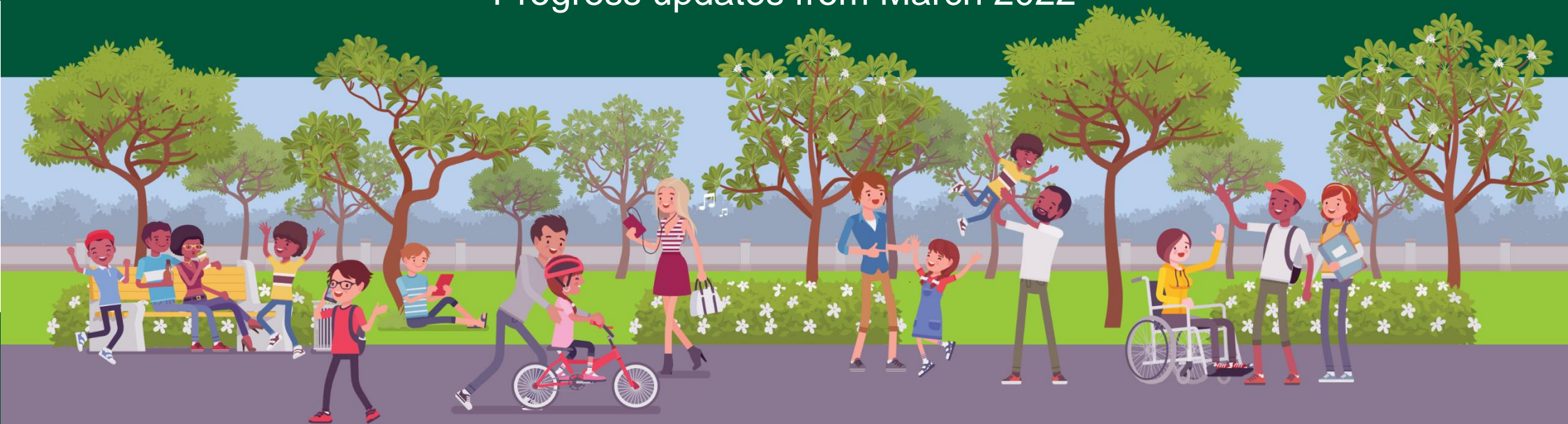


Together we will make Cheshire East a great place to be young

Action Plan to address the ILACS Recommendations

April 2021 – 2023

Progress updates from March 2022



Introduction

This is our action plan which began in 2021 and continues to address the recommendations from the Ofsted Inspection of Local Authority Children's Services (ILACS) in November 2019 and focused visit into children in need of help and protection in November 2021. This plan is reviewed on a 6 monthly basis and will continue to be a tool to drive practice improvement forward. The full inspection report and focused visit report are available on the [Ofsted website](#).

The **ILACS inspection** found that significant progress had been made since our previous inspections in 2018 and 2015. Clear strengths were identified including our early help offer, a strengthened front door, our edge of care support, management of risk to children exposed to exploitation, the creativity of frontline practitioners in direct work with children and young people, and crucially **the voice of the child being at the centre of everything we do**.

However, overall, the quality of our practice was too variable, and required further improvement to be consistently good. Some vulnerable groups, such as children experiencing chronic long-term neglect, children who were privately fostered, and homeless 16 and 17 years olds, were not always receiving the right support.

The **focused visit** in November 2021 found that since the ILACS inspection in 2019, there has **been improvement in the overall quality of work** with children who are in need of help or protection.

Three specific areas were recommended to further improve the quality of social work practice in this area, the identification of contingency arrangements in child in need plans, the consistency and effectiveness

of management oversight for disabled children, and the completion of audit recommendations to further improve experiences for children.

We are committed to addressing the recommendations from the inspection activity to further improve the support we offer to children, young people, families and carers. Our continued focus is on achieving excellent outcomes for children and young people through **establishing consistently good practice**.

Progress so far

It's been over two years since the full inspection, and since then we have experienced a focused visit, a [SEND re-inspection](#), a [pan-Cheshire Youth Justice Inspection](#) and the uncertainty of a global pandemic. However, during this time, we have made progress and demonstrated this within each inspection.

We successfully launched our second Mockingbird Hub in January 2022, **resulting in increased support to carers and children**. We have responded to our sufficiency challenges and have future plans to create additional residential provision and increased internal fostering and residential provision.

Our Cared for Service had a successful visit from Mark Riddell, National Advisor for Care Leaver's (DFE), he was impressed with the work that is being undertaken. Mark stated that he regards Cheshire East as one of his top half dozen 'go to' authorities.

The recruitment and retention of frontline teams means that we have been resourced to be able to **stay connected to children and young people and communities**.

As leaders, we have developed a clear vision for children, young people, and care experienced adults in Cheshire East, **Together for Children and Young People**. We want to ensure that across the Council and the partnership, everyone is clear on our shared ambition for children and young people, and we work together to achieve the best outcomes.


To support children and young people, the council has boosted investment in Children's Social Care Services by an additional £1.5m for 2021/22 and continues to review financial sustainability as part of a Medium Term Financial Strategy and has protected our early help offer despite a challenging financial climate. To enhance our offer to families we have increased caseworkers, strengthened front door delivery, mainstreamed our edge of care support and improved risk tracking and planning for children exposed to exploitation.

The progress we have achieved against each of the recommendations is outlined in detail within our January 2022 self-evaluation.

Action Plan





Date of progress updates: March 2022

Recommendation	Improve the quality, consistency and analysis of assessments, and the child focus of plans (Nov 2019).		
What inspectors found	<p>Inspectors found good quality practice, however overall, the quality of practice was not consistent, which meant some children and young people’s needs were not fully identified or effectively met:</p> <ul style="list-style-type: none"> • Some assessments did not contain enough analysis. • Assessments were not consistently updated when children and young people’s needs changed. • Some plans were not SMART enough – they were not always clear about the outcome or timescales, and some were too focused on adult needs. <p>Recording on children’s files did not always capture the extent of the work that was taking place, including the rationale for decisions so children could understand why decisions were made for them. Sometimes there was not enough analysis of children and young people’s experiences and the impact on them (for example in recording home visits).</p> <p>Findings from the Focused Visit - November 2021</p> <p>Assessments and plans are mainly thorough and focused on improving outcomes for children...timely assessments of children’s needs include careful consideration of family history and children’s experiences to appropriately identify strengths and risks for children. The views and opinions of children, parents and relevant professionals are sought effectively to inform assessment conclusions.</p> <p>Children who need help or protection are identified as a result of effective assessments of risk and need...however, some assessments do not fully consider children’s identities when reaching decisions and assessments are not always updated promptly when children’s circumstances change.</p>		
Baseline from 2020/21	Target for September 2021	Target for March 2022	
45% audited cases were good or better quality in November 2020.	60% audited cases will be good or outstanding.	70% audited cases will be good or outstanding.	

Position in March 2022 in relation to targets				Progress relative to targets
Quarter 4 quality assurance activity found that 54% audited cases were good.				 Below target
Ref	What we will do to achieve consistently good practice	Lead person	Timescale	Progress to date
1a	Continue to deliver our 'doing the basics well' training programme for practitioners to support consistently good practice across all services.	Sarah Flint, Principal Social Worker	March 2022	Additional masterclasses and practitioner clinics were facilitated by our commissioned social work service and consultant social work practitioner focusing on CIN planning and direct work with children and young people.
1b	Refresh and implement the Neglect Operational Strategy as our partnership approach to addressing neglect. Evaluate the impact of the Strategy via the Safeguarding Children's Partnership Neglect Board on a quarterly basis.	Louise Hurst, Head of Service Child in Need and Child Protection	March 2022 Impact evaluated quarterly.	<p>The Neglect Strategy has been refreshed in consultation with all partners and children and young people. It was launched in July 2021. Outcome measures listed below have been agreed across the partnership. The Neglect Board will review progress and impact on performance on a quarterly basis.</p> <ul style="list-style-type: none"> • Increase in Early Help Assessments led by Partner Agencies where neglect is identified as a factor. • Increase in the number of contacts to ChECS where neglect is identified, that are accompanied by a Neglect Screening Tool. • Reduction in the number of children experiencing a second or subsequent Child Protection Plan for Neglect.


1c	Deliver high support and high challenge to teams through our lead practitioners, extending this from three to four lead practitioners from June 2021.	Sarah Flint, Principal Social Worker	March 2022	Four lead practitioners are in place to respond to areas of focus identified through audit and quality assurance activity. They are delivering masterclasses, targeted support to newly qualified social workers, and direct work with children and families. Monthly impact reports on this support are produced which are reported to the Excellence in Social Work Practice Leadership Meeting.
1d	Develop an annual training offer for social workers so it is clear what training is available and required for each specialism.	Jo Rigg, Training Officer	Annually	Following on from our training offer launched in July 2021 our updated annual offer will commence in June 2022.
1e	Review the forms on the child's record, starting with plans, to ensure they support best quality practice.	Sarah Flint, Principal Social Worker	March 2022	The form for children's plans has been rewritten in consultation with systems analysis and frontline practitioners. This plan has been piloted in frontline teams and final changes will be agreed in September with a go live date of November 2021.
1f	Ensure that assessments consider children's identities when reaching decisions. Ensure ethnicity is recorded at point of referral.	Sarah Flint, Principal Social Worker	March 2023 Training plan reviewed annually	Additional training opportunities and masterclasses are being delivered to focus on considering children's identities and writing quality assessments. Masterclasses commence in March 2022 and are delivered regularly throughout the year.
1g	Ensure that when children's circumstances do change, assessments are updated promptly to reflect this. 80% of all open cases will have had an updated assessment in the last 12 months.	Louise Hurst, Head of Service Child in Need and Child Protection Annemarie Parker, Head of Service Cared for Children and Care Leavers.	March 2023	91% children have an updated C&F assessment within the last 12 months. There have also been 399 multiple assessments, evidencing that when things do change for children their assessments are updated.

Recommendation	<p>Ensure consistent management oversight and supervision in the organisation to ensure that consistent, good-quality social work practice is in place (Nov 2019)</p>
What inspectors found	<p>Management oversight and supervision did not provide sufficient challenge or reflection to enable practitioners to improve their practice.</p> <p>Management oversight:</p> <ul style="list-style-type: none"> • Management oversight and challenge was not fully embedded in all areas - management oversight from both Team Managers and IROs did not always drive progressing plans within children’s timescales. • Performance information was not always scrutinised sufficiently to provide critical challenge of all services. • Current checks and balances did not identify the areas of weaker practice found in the inspection. <p>Audits:</p> <ul style="list-style-type: none"> • Team manager audits were inconsistent in quality, and some audits were over-optimistic in their judgements. Some audits were more compliance focused so were less effective in supporting reflection and improved practice. Some parts of the audit forms were not completed. • Inspectors felt there was not enough moderation of audits from senior managers (14% audited cases were moderated) given the over-optimism of judgements in team manager audits. <p>Supervision:</p> <ul style="list-style-type: none"> • Most social workers received regular supervision; however supervision was not always sufficiently analytical or reflective. <p>Findings from the Focused Visit - November 2021</p> <p>In most parts of the service, more effective management oversight is ensuring that children’s needs are met including through the provision of relevant services...most managers have regular oversight of social work with children and their families. Supervision takes place with sufficient frequency in most teams...however, management oversight does not always challenge and prevent drift for all children effectively. This is particularly evident in the service for disabled children, where supervision and management oversight are less regular and effective.</p>

Baseline from 2020/21	Target for September 2021	Target for March 2022
<p>In Q4 2021/22, 74% assessments were completed within 45 days.</p> <p>In April 2021, 65% children had an updated C&F assessment within the last 12 months.</p> <p>In Q4 2021/22, the percentage of plans updated within timescales was:</p> <ul style="list-style-type: none"> • 72% CIN • 87% CP • 95% Cared for 	<p>80% assessments will be completed within 45 days.</p> <p>80% children will have an updated C&F assessment within the last 12 months.</p> <p>Over 80% of all plans will be updated within timescales.</p> <p>80% audited cases will have good management oversight.</p> <p>80% judgements from internal auditors will be agreed as accurate by the external auditor.</p>	<p>90% assessments will be completed within 45 days.</p> <p>90% children will have an updated C&F assessment within the last 12 months.</p> <p>Over 90% of all plans will be updated within timescales.</p> <p>90% audited cases will have good management oversight.</p> <p>90% judgements from internal auditors will be agreed as accurate by the external auditor.</p>
Position in March 2022 in relation to targets		Progress relative to targets
From October – December 2021, 83% assessments were completed within 45 days.		 Below target
91% children have an updated C&F assessment within the last 12 months.		 Achieved above target for March 2022
<p>Percentage of plans updated within timescales:</p> <ul style="list-style-type: none"> • Cared for plans - Crewe CINCP 94%, Macclesfield CINCP 81%, Cared for 94%, CWD 100% • CP plans – Crewe CINCP 88%, Macclesfield CINCP 97%, CWD 100% • CIN plans - Crewe CINCP 79%, Macclesfield CINCP 84%, CWD 39% <p>* Timescales for our Children with Disabilities may fall outside of statutory timescales following consideration of the statutory and regulatory duties contained within <i>Section 17(4) of the Children Act 1989, Volume 2 of the Children Act 1989 guidance, How to safeguard and promote the welfare of disabled children using short breaks (DSCF 2010)</i> and the <i>Care Planning, Placement and Case Review (England) regulation (2010)</i>, where we conclude that the parents are appropriately exercising their parental responsibility and there are no safeguarding concerns we will visit and review in a frequency that is proportionate to the child’s needs.</p>		 Some teams are achieving above target  and some are below target

From October – December 2012 47% of management oversight audits were good.				↓ Below target
Ref	What we will do to achieve consistently good practice	Lead person	Complete by	Progress to date
2a	Quality assurance from experienced practitioners and managers to evaluate the quality of case file audits, disseminate learning and continue to drive practice forward.	Kerry Birtles, Director of Children's Social Care	March 2022 Quarterly	Quality assurance manager to moderate a percentage of whole case file audits to ensure effective benchmarking.
2b	Develop a new process around senior manager moderation.	Phil Alcock, Audit & Quality Assurance Officer	July 2021	A new process has been developed; Heads of Service, director and executive directors are now included in the social care audit process.
2c	Annual supervision audit to be undertaken to ensure there is continued focus on impact on outcomes for children which drives improvement to practice, and there is a golden thread between senior leaders and frontline teams.	Kerry Birtles, Director of Children's Social Care	June 2022/ Annually	
2d	Performance challenge and scrutiny sessions to be carried out at Directorate Management level and with the senior leadership team for Children's Social Care to ensure scrutiny of performance drives improved outcomes for children.	Deborah Woodcock, Executive Director of Children's Services	March 2022/ Quarterly	Performance scrutiny takes place on a quarterly basis, demonstrating transparency and accountability of frontline practice to the DCS.
2e	Two Heads of Service to apply for the Practice Leadership Development Programme as part of our continued development of our senior leadership team.	Kerry Birtles, Director of Children's Social Care	April 2021	One Head of Service was successful in securing a place and has completed the course.


Recommendation	Improve management oversight of cases in pre-proceedings, to avoid drift and delay for children (November 2019)		
What inspectors found	<p>Pre-proceedings work to try to achieve positive change for children and to avoid the need for them to come into care was not consistently timely.</p> <p>Some children’s cases were managed within public law outline processes for too long without sufficient management oversight and review to decide whether alternative action needed to be taken to protect them.</p> <p>No children were found to be at immediate risk, however a small number of children experienced neglectful situations for too long. Some children waited too long to enter care and experience a sense of permanence. For a few children, this meant that they entered care in an unplanned way.</p> <p>Findings from the Focused Visit - November 2021</p> <p>Children receive pre-proceedings support when it is appropriate given the nature or duration of concerns about them. Improved senior-management oversight of early pre-proceedings work is having a positive impact on the timeliness and effectiveness of this input for children. Cases are appropriately stepped down from pre-proceedings when concerns lessen as a result of effective and focused support</p>		
	Baseline from 2020/21	Target for September 2021	Target for March 2022
<p>Audits in February and March 2021 showed that:</p> <ul style="list-style-type: none"> • Management oversight is improving. Team managers had improved their oversight of PLO casework in the majority of cases. • The 4-week review that was implemented in February 2020 is having a positive impact on identifying and preventing potential early drift in PLO. • There was evidence of consistent Service Manager oversight. 	<p>Audit of cases within pre-proceedings will show that for 80% cases, management oversight is effectively ensuring that children do not experience drift or delay.</p>		<p>Audit of cases within pre-proceedings will show that for 90% cases, management oversight is effectively ensuring that children do not experience drift or delay.</p>

Position in March 2022 in relation to targets				Progress relative to targets
<p>The audit highlights an improved picture in terms of evidencing the PLO journey across the child's record and some discussions taking place in supervision that capture the progress and impact of any drift in planning however still some variability and we will be completing a One Minute Guide on what is expected within this 'Management Footprint' to continue to support consistency improving.</p>				 Below target
Ref	What we will do to achieve consistently good practice	Lead person	Complete by	Progress to date
3a	Lead/ engage in the Local Family Justice Board and Public Law Working Group Publication to ensure compliance and practice is in line with external changes and challenge the delays that are created by Court capacity.	Kerry Birtles, Director of Children's Social Care	Ongoing	Children's Social Care continue to engage with the Local Family Justice Board and have taken a proactive role in leading regional work around Public Law Working Group Publication (PLWG) which was announced in March 2021. We continue to work across the Cheshire and Merseyside region in implementing the findings of the PLWG and have implemented the guidance for S20 Practice. We continue to develop practice within the PLO workstream to create a regional 'PLO Toolkit'.
3b	The service to be held to account for the effectiveness of social work practice in this area through regular reports and updates to the Achieving Outcomes for Children and Young People Senior Leadership Team Meeting.	Kerry Birtles, Director of Children's Social Care	Progress is monitored on a quarterly basis.	Reports are being received by the Achieving Outcomes for Children and Young People Senior Leadership Team Meeting.
3c	Regular audits to be completed on pre-proceedings and proceedings to ensure progress in this area continues to be monitored.	Louise Hurst, Head of Service for Child in Need and Child Protection	March 2022	Audits on the impact of Team Manager oversight within PLO are taking place bi-monthly. These audits are showing improvement in team manager oversight however there are still areas for development. PLO cases within our Children with Disabilities Service have also been aligned to


				<p>Macclesfield CINCP to support consistent oversight.</p> <p>Our Ofsted focused visit in November 2021 highlighted the improvements made in PLO planning for children and we continue to strengthen social work practice broadly around family networking and contingency planning.</p> <p>Dip sampling of our PLO work will become 'business as usual' and part of our thematic quarterly dip sample.</p> <p>The Legal Strategic Board sits quarterly and the performance report relating to all Legal activity is scrutinised within this meeting.</p>
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Recommendation	Improve the response to children in private fostering arrangements, children who are homeless aged 16 and 17 years old, and care leavers who need emergency accommodation (November 2019)		
What inspectors found	<p>Private fostering The response to children who were privately fostered was variable - the needs of some children were not thoroughly assessed, some did not always receive the right support, and the need for permanence was not always addressed promptly.</p> <p>Care leavers who need emergency accommodation Some care leavers told inspectors that they did not always feel safe when they had been placed in emergency accommodation.</p> <p>Young people presenting as homeless When young people presented as homeless, there was not a sufficiently robust response to ensure that their needs were fully identified, that they were fully supported, or that they were made aware of their right to become cared for. As a result, a small number of young people remained in situations of vulnerability.</p>		
	Baseline from 2020/21	Target for September 2021	
<p>We have recommissioned our emergency accommodation offer in light of the feedback from young people and inspectors.</p> <p>An audit of privately fostered cases in January 2021 found that:</p> <ul style="list-style-type: none"> • 10 out of 11 children’s arrangement met the criteria for private fostering • 10 out of 11 arrangements were suitable for the child • 7 out of 11 children had an updated assessment within the last 12 months. 	<p>The bi-monthly ChECS audit will tell us that children and young people feel safe in their accommodation.</p> <p>80% privately fostered cases that are audited will be good or outstanding.</p> <p>80% audited cases for 16-17 year olds will show that support is good or outstanding quality.</p>	<p>The bi-monthly ChECS audit will tell us that children and young people feel safe in their accommodation.</p> <p>90% privately fostered cases that are audited will be good or outstanding.</p> <p>90% audited cases for 16-17 year olds will show that support is good or outstanding quality.</p>	

<ul style="list-style-type: none"> • However, the audit also showed that there were areas which still needed further improvement. • Going forward audits will be rated against the Ofsted criteria. <p>An audit of homeless 16-17 year olds in February 2021 found that :</p> <ul style="list-style-type: none"> • 83% cases had a clear discussion on young people's choice regarding section 17 and section 20. • 100% had evidence of management oversight. • Areas for improvement included advocacy, which was not consistently discussed with young people, and there were opportunities for improvements to practice identified in 2 cases. 		
Position in March 2022 in relation to targets		Progress relative to targets
<p>A survey from Crewe YMCA with young people in October 2021 found that 86% young people felt safe in their accommodation. Our Care Leavers survey that took in November 2021 found that 85% of young people felt safe in their accommodation.</p>		<p>↑ Achieved target</p>
<p>An audit of privately fostered cases in March 2022 found that :</p> <ul style="list-style-type: none"> • There is evidence in 4 out of 5 cases that the child and parent have been spoken to about the private fostering arrangement • In the majority of cases, there is evidence that the child has been seen and spoken to alone during home visits • Every Private Fostering situation is assessed to be currently suitable and meeting the needs of the child • In most cases, the support needs of the carers are considered within the CIN planning. 		<p>↔ On track to achieve target</p>

<p>An audit of homeless 16-17 year olds in March 2022 found that:</p> <ul style="list-style-type: none"> • Case files evidenced a clear discussion on young people’s choice regarding section 17 and section 20 and guidance had been provided. • Management oversight is evident, with direction given regarding young people who genuinely present as homeless. • 3 cases were selected as good case examples to be shared across the service. • Joint housing interviews have taken place and have been face to face wherever possible. 				<p> Achieved target</p>
Ref	What we will do to achieve consistently good practice	Lead person	Complete by	Progress to date
4a	<p>Provide additional capacity within the Fostering Service to lead on private fostering to:</p> <ul style="list-style-type: none"> - raise awareness in a dedicated campaign from September 2021 - audit cases so we can use the learning to focus on where we need to continue to improve practice - profile private fostering in the community. 	Alison Talheth, Service Manager for Children with Disabilities	March 2021	The private fostering lead is in place; initial audit activity began in May 2021 and will continue on a monthly basis. Training has taken place with school admission as part of the identification of private fostering arrangements.
4b	Provide accommodation under the recommissioning of 16+ supported accommodation.	Dave Leadbetter, Head of Service Children’s Commissioning	July 2021	The recommissioning of 16+ supported accommodation is complete and the contract has been awarded. Extensive remodeling has taken place with a complete rebuild of accommodation following consultation with young people. The build is due to be complete on the 24 September 2021.
4c	Implement the recommendations following external validation from Jill Boak, Ministry of Housing.	Annemarie Parker, Head of Service for Cared for Children and Care Leavers	June 2021	We have made significant progress against the action plan in response to the external validation from the Ministry of Housing. We met with Jill Boak from MHCLG and our Housing colleagues on 3 September 2021 to review progress against the

				action plan. The MHCLG were satisfied that we are continuing to work effectively as a partnership.
4d	Update the joint housing protocol with our ambition that no care leaver will access emergency accommodation.	Annemarie Parker, Head of Service for Cared for Children and Care Leavers	July 2022	The joint housing protocol has been updated and is currently being authorised jointly by Housing and Children's Social Care. Our Ignition Panel continues to work well and the use of emergency accommodation remains at an absolute minimum.
4e	Employ a housing officer in the front door to further strengthen the offer of prevention of 16/17 homelessness, and to support a robust response when this does happen.	Naomi Hollinshead, Service Manager for ChECS	June 2021	Recruitment to this post is complete and the housing officer is now in place, providing additional support and functions such as housing in the context of domestic abuse.
4f	Monthly multi-agency audits on 16-17 presenting as homeless to continue to take place in the front door to assess progress in this area.	Naomi Hollinshead, Service Manager for ChECS	March 2022/ Bi-monthly	A reduction to bi-monthly audits was agreed in line with the positive progress made in this area. These will continue to ensure assurance is offered about meeting the needs of this potentially vulnerable group.

Recommendation	Improve the quality and consistency of support and engagement with foster carers (November 2019)		
What inspectors found	<p>Sufficiency of in-house foster carers was a known challenge - the number of approved fostering households had reduced and recent attempts to improve recruitment had not had the impact that we had hoped for.</p> <p>A significant group of foster carers had raised concerns about the support they received from the council. Inspectors found that foster carers were not always well supported, and that in some cases, working relationships were at risk of breaking down. Senior leaders were aware of the issues, and an independent review of the fostering service was planned prior to the inspection taking place.</p>		
Baseline from 2020/21	Target for September 2021	Target for March 2022	
<p>As at February 2021, our fostering recruitment campaign had resulted in</p> <ul style="list-style-type: none"> • 83 new foster care enquiries • 14 new foster carers in assessment. <p>100% of our assessments of new foster carers were completed within the 8 months statutory timeframe. Our internal ambition is to complete these within 16 weeks.</p> <p>97% foster carer annual reviews were completed within timescales (held every 12 months).</p> <p>Feedback from foster carers demonstrates relationships have improved since the inspection.</p>	<p>We will gain an additional 30 in-house foster carers over the next 3 years (5 new carers by September).</p> <p>Over 50% assessments for new foster carers will be completed within 16 weeks.</p> <p>90% foster carer annual reviews will be completed within timescales (held every 12 months).</p> <p>Feedback from foster carers will continue to demonstrate improved relationships between foster carers and Cheshire East Council.</p>	<p>We will gain an additional 30 in-house foster carers over the next 3 years (5 additional new carers between September and March).</p> <p>Over 80% assessments for new foster carers will be completed within 16 weeks.</p> <p>99% foster carer annual reviews will be completed within timescales (held every 12 months).</p> <p>Feedback from foster carers will continue to demonstrate improved relationships between foster carers and Cheshire East Council.</p>	
Position in March 2022 in relation to targets		Progress relative to targets	
<p>We have continued to increase our recruitment of foster carers, creating an additional 7 homes for vulnerable children and young people from September 2021-March 2022.</p>		<p> Achieved above target for March 2022.</p>	


<p>We are still short of routinely achieving 50% of our new foster carer assessments within 16 weeks. Of the 7 newly approved foster carers only 1 was achieved within 16 weeks. A number of the other assessments were completed just outside of timescales and there are some mitigating factors, including the impact of Covid.</p>	<p> Below target for March 2022</p>
<p>We were previously achieved above our September target of 90% of fostering annual reviews being completed within timescales, due to the impact of the pandemic this has now dropped to 71% complete within timescales.</p>	<p> Below target for March 2022</p>
<p>Feedback from foster carers continues to demonstrate improved relationships. Direct feedback is sought from the Fostering IRO at every Foster Carer Review. Foster carers are also assisting in the delivery and design of frontline services such as foster carers delivering training to frontline colleagues and sitting as core members of the Virtual School Governing Body. The Foster Carer Survey has just been completed and the results are being analysed. The Foster Carer forum has been relaunched in March 22 with good attendance, foster carers feedback that they feel there have been improvements in communication.</p>	<p> Achieved target for March 2022.</p>

Ref	What we will do to achieve consistently good practice	Lead person	Timescale	Progress to date
5a	<p>Continue to improve fostering recruitment and retention by</p> <ul style="list-style-type: none"> -continuing to develop our marketing and recruitment campaign -becoming a foster friendly employer -launching a foster carer charter so it is clear what foster carers can expect from the LA, and our expectations of carers -developing specialist salaried foster carers. 	Alison Talheth, Service Manager Fostering	March 2023/ Ongoing	<p>We are continuing to develop our marketing and recruitment campaign. Our current campaign has focused within mainline train stations across Cheshire East and our ongoing digital media presence.</p> <p>We have ambitions to become a foster friendly employer and to launch a revised foster carers charter.</p> <p>We are working with colleagues in the Marketing and Communications Team on launching a fresh campaign for Foster Care Fortnight to launch our new 'BE THERE' campaign and to consolidate our</p>


				targeted recruitment to attract more foster carers who can offer home to sibling groups, teenagers, and unaccompanied asylum-seeking children.
5b	Redesign the fostering service to establish specialised teams to enable effective support to foster carers and young people.	Alison Talheth, Service Manager for Children with Disabilities	December 2022	The consultation on the changes to the Fostering Service is underway. The recruitment and marketing team has already been established and an acting team manager is in place through a service secondment.
5c	Develop and launch our second Mockingbird Hub.	Sarah Probert, Mockingbird Lead Practitioner	December 2021	We successfully launched our second Mockingbird Hub in January 2022.
5d	Continue to update the fostering policies and procedures.	Alison Talheth, Service Manager Fostering	September 2022	We have updated over 50% of our policies and procedures, due to staffing changes at senior management level within the service the timeframe for this has been extended and work continues.
5e	Increase sufficiency in short break provision, including retendering our short break local offer for Disabled Children and their Families.	Alison Talheth, Service Manager Fostering	March 2022	Our Short Break Local Offer for Disabled Children and their families has been recommissioned and began operation on 1 June 2021. We have also recruited two new Short Break Foster Carers which increases our overall number to five. We have submitted a bid to the Respite Innovation Fund to deliver two respite flats to support children aged 16+ with disabilities to prepare for adulthood. The outcome of the bid will be known after 22 March 2022.

5f	Continue to engage with foster carers through regular newsletters, foster carer workshops, and involving foster carers in service development through task and finish groups.	Alison Talheth, Service Manager Fostering	March 2022	Annual foster carer survey complete. We have continued to publish regular newsletters. We have foster carer representation on all of our development groups and have recruited a foster carer to the Virtual School Governing Body. We have reestablished our Foster Carer Forums with a good attendance and positive feedback received about the improvements in communication shared at the February 2022 meeting.
5g	Develop and launch an information recording system which enables data input and data capture specifically through the fostering service (Fostering System Optimisation).	Alison Talheth, Service Manager Fostering	March 2022	7 workstreams have been established which are overseen by officers and service users. These are (with timeline dates): 1. Portals (21/22) 2. Fostering Recruitment Workflow (21/22) 3. Family and Friends Workflow (21/22) 4. Special Guardianship Workflow (22) 5. Private Fostering Workflow (22) 6. Staying Put Workflow (22/23) 7. Supported Accommodation / Lodgings Workflow (22/23)

Additional recommendations following the Focused Visit: November 2021

Recommendation	Improve the identification of contingency arrangements in child-in-need plans.				
What inspectors found	<p>Contingency arrangements in child in need plans are not always sufficiently well-formed or detailed. Management oversight is also not always fully responsive to children's changing needs, and child in need meetings do not always lead to the identification of drift for children. This all means that, when situations deteriorate for children in need, alternative decisive action is not always taken promptly.</p> <p>Family support networks are routinely considered to offer immediate support for children and families. This helps families to build resilience and lessens the need for external professional involvement. Family support networks are not explored well enough in longer-term contingency planning.</p>				
Baseline from 2021/22		Target for September 2022		Target for March 2023	
Family support networks were not consistently explored well enough in longer-term contingency planning.		Family Networking to be evidenced on 80% of children's records who remain open to Children's Social Care following an assessment.		Family Networking to be evidenced on 90% of children's records who remain open to Children's Social Care following an assessment.	
Position in March 2022 in relation to targets				Progress relative to targets	
Family Networking is well understood across the CIN/CP Service. There is evidence that families form part of immediate safety plans and are also considered if the parenting being provided becomes too risky and alternative care is required, however the steady and consistent use of family networking as part of ongoing child in need planning requires further embedding.				 On track to achieve target for September 2022	
Ref	What we will do to achieve consistently good practice	Lead person	Timescale	Progress to date	
6a	Masterclasses for all staff on Family Networking and 1:1 support to be offered where required to practitioners	Sarah Flint, Principal Social Worker/ Practice Leads	July 2022		
6b	Bottom lines to be set at key points in a child's journey to embed the practice of family networking and its impact on children and families	Louise Hurst, Head of Service for Child in Need and Child Protection	April 2022		

6c	Dip sampling on a quarterly basis to monitor the progress being made against this target and the quality of contingency planning	Louise Hurst, Head of Service for Child in Need and Child Protection	July 2022	
6d	Updated assessments to be completed when a child's needs change and this is to be reflected in the child's plan – this is a bottom line and will be measured through dip sample.	Louise Hurst, Head of Service for Child in Need and Child Protection	September 2022	91% children have an updated C&F assessment within the last 12 months. There have also been 399 multiple assessments, evidencing that when things do change for children their assessments are updated.
6e	Updated Family Networking Policy to be launched	Alison Talheth Service Manager Fostering Stephen Pepper Service Manager Child in Need and Child Protection	May 2022	

Recommendation	Improve the consistency and effectiveness of management oversight for disabled children.		
What inspectors found	Most managers have regular oversight of social work with children and their families. Supervision takes place with sufficient frequency in most teams, and children’s wishes and experiences are usually considered in discussions. However, management oversight does not always challenge and prevent drift for all children effectively. This is particularly evident in the service for disabled children, where supervision and management oversight are less regular and effective. While children are not left at risk of immediate harm as a result, they experience a more reactive service because of this.		
Baseline from 2021/22	Target for September 2022	Target for March 2023	
<ul style="list-style-type: none"> Supervision was not being completed across the CWD team in line with our supervision policy. Management oversight was not always consistent, particularly in relation to decision making and rationale for CIN intervention, visiting and review regimen. The wishes and feelings of the parents of disabled appeared to be given precedence over the wishes and feelings of disabled children themselves. 	<ul style="list-style-type: none"> Supervision will be completed and recorded in line with our supervision policy and evidence will be available to demonstrate the impact that supervision is having on the lives of our children. Management decisions will be recorded both in the case record and as part of the Child in Need assessment process that defines the reason for involvement and the CIN visiting and review requirements for each individual case (within case notes and case summary) The wishes and feeling of disabled children will be visible within Child in Need assessments and reviews. 	The preceding targets are evident on 100% of CWD cases.	
Position in March 2022 in relation to targets		Progress relative to targets	
Supervision was carried out for all social workers in December and this is now ongoing at a frequency as detailed in our supervision policy. Our Children with Disabilities (CWD) and Child in Need Visiting and Review Policy has been developed and is due to be finalised and implemented by May 2022.		 On track to achieve target for September 22	

Ref	What we will do to achieve consistently good practice	Lead person	Timescale	Progress to date
7a	Supervision will be completed with all social workers and family support workers that meets the requirements of our own supervision policy.	Michelle Jones and Cat Linde, Team Managers Children with Disabilities	April 2022	During December 2021 all social workers were allocated team managers to work through their allocated cases. This set a benchmark for Team Manager Michelle Jones to work from when she joined the CWD Service.
7b	CWD Child in Need Visiting and Review Policy to be developed and implemented.	Keith Martin, Service Manager Children with Disabilities	May 2022	The policy has been written and is currently being formatted onto the standardised policy pro-forma.
7c	The rationale for the application of the child in need visiting and review regimen is clearly recorded on each case, in line with the policy described above.	Michelle Jones, Team Manager Children with Disabilities	Ongoing	Rationales are currently being written to each new and re-assessment.
7d	Dip sample audits will be completed each month to look at supervision and the application of the CWD child in need visiting and review policy.	Keith Martin, Service Manager Children with Disabilities	Ongoing on a monthly basis	Dip sampling audits will commence April 2022 and will be ongoing on a monthly basis.
7e	Reporting system will be developed through Power BI that accurately reflects visiting and review performance matched against the CWD Child in Need visiting and review policy.	Business Intelligence and Children with Disabilities Management Team (Pete Thorley, Michelle Jones and Keith Martin)	September 2022	
7f	A series of Team Development Days will be established that will focus on acknowledging good practice and improving practice across the service.	Children with Disabilities Management Team	Ongoing throughout the year	The first Development Day has been established for April and will focus on social work practice across child protection, child in need and cared for children and young people.

		<p>(Keith Martin, Michelle Jones, Cat Linde and Louisa Joyce)</p>		<p>The session in May will focus on protecting disabled children, through the delivery of the safeguarding children's board safeguarding training.</p> <p>We will be planning further sessions to focus on increasing family networking and the use of an adapted Graded Care Profile for CWD.</p> <p>We are also commissioning specific communication training for social workers and family support workers; this will include augmentative communication methods so that the wishes and views of disabled children and young people can be better understood.</p>
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Recommendation	Improve the completion of audit recommendations to further improve experiences for children.			
What inspectors found	A child-focused auditing programme provides a clear overall picture of the impact of practice for children across the service. Thematic findings from this work inform areas for future service development. For example, the identification through audit of the need to strengthen support for children at risk of neglect has led to more effective responses to these children. While the impact of individual audits can be seen in subsequent practice with some children, this is not always evident for every child whose records have been audited.			
Baseline from November 2021		Target for September 2022		Target for March 2023
The follow up of audit recommendations was not consistent for all children.		Progress of the implementation of audit recommendations will be tracked and monitored through the dip sampling of cases by our four Practice Leads on a monthly basis.		Senior leaders will be confident that the process is fully embedded, feedback from our Practice Leads and quarterly audit reports will confirm this, and outcomes for children will be improved.
Position in March 2022 in relation to targets				Progress relative to targets
We are establishing a process to further track audit outcomes; our Practice Leads will dip sample eight cases per month to ensure that previously made audit recommendations have been followed up.				← On track to achieve target for September 2022
Ref	What we will do to achieve consistently good practice	Lead person	Complete by	Progress to date
8a	Audits will continue to be completed over a quarter period. The headline report of the audit findings will be completed by the Audit and Quality Assurance Officer at the end of each quarter and reported to the social care senior leadership team (SCLT). At the next quarter meeting the Heads of Service for each area audited will provide a briefing report to confirm that actions have been completed and that	Phil Alcock, Audit and Quality Assurance Officer	May 2022/ Quarterly	This was included in report to SCLT presented on 20 January 2022 and agreed.

	support and learning put in place to support improved service delivery and outcomes for children.			
8b	<p>A case note that identifies that audit recommendations have been completed will be included on the child's case file record by the team manager (who is responsible for the case). This case note will be selected from the drop down box in case notes under 'New Case Note – File Audit- Service Feedback'</p> <p>A report has been created on LiquidLogic to track that these are evident on case files.</p> <p>The Audit and Quality Assurance Officer will request reports about this activity from the Business Intelligence Team which will be presented at each quarter SCLT meeting.</p>	Phil Alcock, Audit and Quality Assurance Officer	July 2022	<p>Expectation made clear in report presented to SCLT and agreed on 20 January 2022.</p> <p>Business intelligence established reporting process for this activity on 17 January 2022.</p>
8c	The Principal Social Worker (PSW), Director of Children's Social Care and DCS will attend the audit plenary sessions and receive audit reports. The PSW will provide quarterly reports to SCLT to evidence the link between the learning provided and audit findings to support 'closing the loop.'	Sarah Flint, Principal Social Worker	May 2022/ Quarterly	Previous audit reports have been shared with the PSW.
8d	Practice Leads will dip sample eight cases per month to ensure that previously made audit recommendations have been followed up.	Sarah Flint, Principal Social Worker/ Practice Leads	Ongoing on a monthly basis	
8e	The Audit and Quality Assurance Officer will moderate 9 cases every quarter period.	Phil Alcock, Audit and Quality Assurance Officer	June 2022/ Quarterly	It has been agreed that an Independent Auditor will moderate 50% of the audit cohort on a 6 monthly basis. A report will be provided by the independent auditor following each 6 monthly cycle. The first

				cycle of this moderation will commence from June 2022.
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