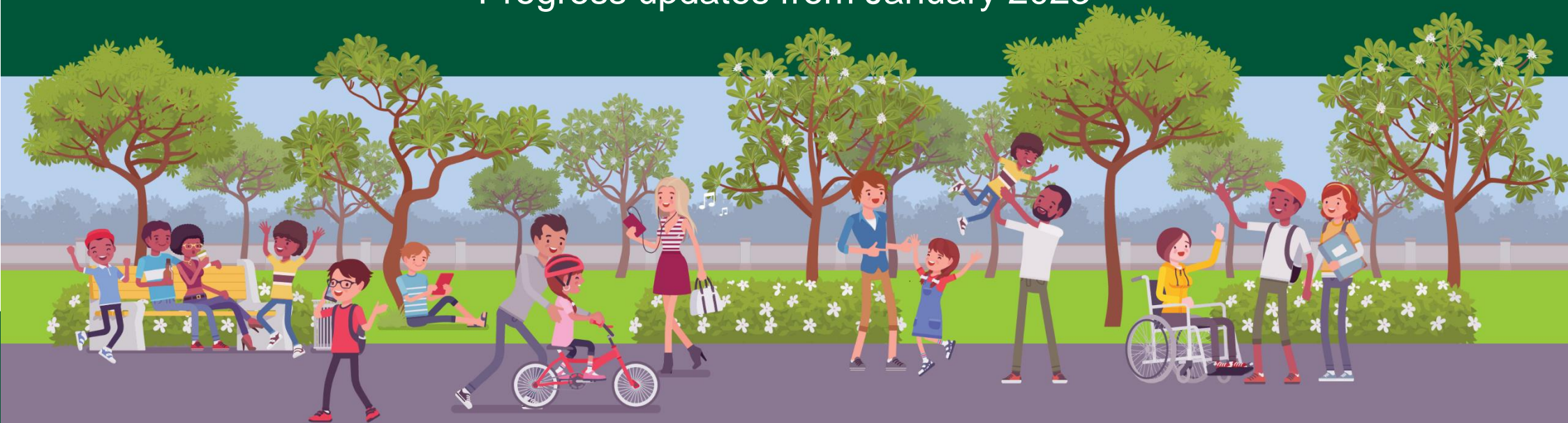


Together we will make Cheshire East a great place to be young

Action Plan to address the ILACS Recommendations

April 2021 – 2023

Progress updates from January 2023



Introduction

This is our action plan which began in 2021 in response to 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. The statutory children's safeguarding partnership experienced a Joint Targeted Area Inspection in July 2022, and a separate [action plan](#) exists to address those partnership recommendations. The full inspection reports are all 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 all 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**.

Our journey to excellence

It's been over three years since the full inspection, and since then we have experienced a focused visit, a [SEND re-inspection](#), a [pan-Cheshire Youth Justice Inspection](#), the uncertainty of a global pandemic, and a Joint Targeted Area Inspection. The directorate also engage in a cycle of peer and annual reviews which supports our learning and development through high support and high challenge.

We are also being supported by a Children's Improvement Advisor from the Department for Education (DfE) around our service developments in response to the Joint Targeted Area Inspection. We are participating in the DfE's delivering better value programme to support the council to achieve a more sustainable financial position in relation to special educational needs and/or disabilities. We are implementing Family Hubs to join up services locally, improve the connections between families, professionals, services, and providers, and put relationships at the heart of family help. Family hubs will support children and young people from birth until they reach the age of 19 (or up to 25 for young people with special educational needs and disabilities).

As leaders, we developed a clear vision for children, young people, and care experienced adults in Cheshire East, **Together for Children and Young People**. We must 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 continued to invest in Children's Social Care Services with growth in 2021/2022 and further projected growth throughout the delivery of the Medium Term Financial Strategy, however the growth for 2023/24 and beyond needs to be seen in the context of savings that need to be made in repose to the high rate of inflation, pay awards and increased complexity and rate of demand. This

update report will provide data and quality assurance information from quarter 2 in 2022-23 (July to September 2022).

Action Plan

Date of progress updates: January 2023





<p>Recommendation</p>	<p>Improve the quality, consistency and analysis of assessments, and the child focus of plans (Nov 2019).</p>		
<p>What inspectors found</p>	<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>		
<p>Baseline from 2020/21</p>	<p>Target for September 2021</p>	<p>Target for September 2022 (Q2)</p>	
<p>45% audited cases were good or better quality in November 2020.</p>	<p>60% audited cases will be good or outstanding.</p>	<p>70% audited cases will be good or outstanding.</p>	


Position in September 2022 (Q2) in relation to targets				Progress relative to targets
Quarter 2 quality assurance activity found that 25% audited cases were good (however the sample size of this audit was small due to the impact of the Joint Targeted Area Inspection and audit activity divert to other areas of partnership focus.)				 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	December 2023	2022 experienced some significant staffing challenges and therefore it is necessary to deliver our revised masterclass programme again throughout 2023 including 4 x per week during learning week.
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 reviews 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 commenced in June 2022. The refreshed plan for 2023 will be delivered from April 2023.
1e	Review the forms on the child's record, starting with plans, to ensure they support best quality practice.	Sarah Flint, Principal Social Worker	February 2023	The service has developed a single plan for children and young people which will avoid duplication and provide an opportunity for consistency.
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	Masterclasses were delivered to frontline practitioners in March 2022. This continues to be an area of focus and will be a mandatory part of the contact and referral report to ensure that this improves further.
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	84% children have an updated C&F assessment within the last 12 months in Q2.


1h	Introduce child-centred recording where case notes on children's files will be written in the style of a letter to the child.	Director of Children's Social Care	June 2023	Plans are being put in place to introduce this, the aim is to support child-centred practice through explaining why decisions were made to the child.
Recommendation	Ensure consistent management oversight and supervision in the organisation to ensure that consistent, good-quality social work practice is in place (Nov 2019)			
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</p>			

for all children effectively. This is particularly evident in the service for disabled children, where supervision and management oversight are less regular and effective.

Baseline from 2020/21	Target for September 2021	Target for September 2022 (Q2)
<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 September 2022 (Q2) in relation to targets		Progress relative to targets
From July – September 2022, 56% assessments were completed within 45 days and 70% within 50 days.		 Below target
84% children had an updated C&F assessment within the last 12 months in Q2.		 Below target
<p>Percentage of plans updated within timescales in Q2:</p> <ul style="list-style-type: none"> • Cared for plans - Crewe CINCP 82%, Macclesfield CINCP 58%, Cared for 92%, CWD 100% • CP plans – Crewe CINCP 91%, Macclesfield CINCP 87%, CWD 100% • CIN plans - Crewe CINCP 60%, Macclesfield CINCP 54%, CWD 44% <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</p>		 Some teams are achieving above target and some are below target – CIN plans are below target for all teams 

parental responsibility and there are no safeguarding concerns we will visit and review in a frequency that is proportionate to the child's needs.				
From July – September 2022 17% of audited cases showed good management oversight (however the sample size of this audit was small due to the impact of the Joint Targeted Area Inspection and audit activity divert to other areas of partnership focus.)				 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 and Quality Assurance Officer	July 2021	A new process has been developed; heads of service, the director of children's social care and executive director of children's services are now included in the children's 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 2023/	Supervision audits will be completed for 2023 in June. Compliance with supervision is tracked on a monthly basis.
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. However we recognise that some areas of our performance needs further improvement, so this action has been marked as amber.

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 September 2022 (Q2)
<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 		<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>

identifying and preventing potential early drift in PLO. <ul style="list-style-type: none"> • There was evidence of consistent Service Manager oversight. 				
Position in September 2022 (Q2) in relation to targets		Progress relative to targets		
An audit on PLO in Q2 showed that: <ul style="list-style-type: none"> • 80% cases were sitting within 26 weeks • Cases that concluded in Q2 were on average completed within 26 weeks. • When reviewing case files, it can often be difficult to identify the impact that any drift and delay is having on the child, so further work is needed in this area. 		 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	The director of children’s social care is now the vice chair of the Local Family Justice Board. The team are to embark on a peer review of the Public Law Outline (PLO) in February and March 2023 and are ambitious to continue to make progress in relation to PLO to assist in the timeliness of care proceedings in achieving timely and good quality outcomes for children and young people.
3b	The service to be held to account for the effectiveness of social work practice in this area through accountability to the Local Family Justice Board.	Kerry Birtles, Director of Children’s Social Care	Quarterly to the Local Family Justice Board	The Local Family Justice Board has a developed action plan to address the regional challenges in relation to progress in PLO and public law care proceedings.
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	March 2022	Quarterly audits of PLO are taking place which are reported to the children’s social care senior leadership team.

		Need and Child Protection		
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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	Target for September 2022 (Q2)
We have recommissioned our emergency accommodation offer in light of the feedback from young people and inspectors.		The bi-monthly ChECS audit will tell us that children and young people feel safe in their accommodation.	The bi-monthly ChECS audit will tell us that children and young people feel safe in their accommodation.

<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. • 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. 	<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>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>
<p>Position in September 2022 (Q2) in relation to targets</p>		<p>Progress relative to targets</p>
<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>A survey of care leavers in October and November 2021 found that 85.3% young people felt safe in their home, and 90.6% said they knew who to contact if they didn’t feel safe at home.</p>		<p>★ Achieved target</p>

<p>A dip sample of all seven privately fostered cases open in November and December 2022 found that :</p> <ul style="list-style-type: none"> • The fostering independent reviewing officer's oversight was evident on 6 of the 7 children's records • There was evidence of appropriate challenge to the case management where this was required • There was some team manager oversight. 	<p>Judgements were not made during this audit as it was assessing consistency in practice.</p>			
<p>An audit of homeless 16-17 year olds in November 2022 found that:</p> <ul style="list-style-type: none"> • Between 31 March 2022 and 31 October 2022 7 young people were identified as genuinely homeless. • There was clear management oversight in 5 cases (71%). • There was evidence within young people's files that section 17 and section 20 had been discussed, but the guidance wasn't provided in all cases. • Joint housing interviews have taken place and have been face to face wherever possible. 	<p>Judgements were not made during this audit as it was assessing consistency in practice.</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. 	<p>Claire Shepherd, Fostering Independent Reviewing Office</p>	<p>March 2021</p>	<p>The private fostering lead is in place; initial audit activity began in May 2021 continues on a monthly basis. Currently there are seven private fostering cases which are being scrutinized on a monthly basis to ensure that there is consistent adherence with timescales. A masterclass programme has been developed to inform staff of the private fostering arrangements. Policy and procedures have been refreshed and ongoing work is continuing on updating the profile of private fostering with the community.</p>
4b	<p>Provide accommodation under the recommissioning of 16+ supported accommodation.</p>	<p>Dave Leadbetter, Head of Service Children's Commissioning</p>	<p>July 2021</p>	<p>The recommissioning of 16+ supported accommodation is complete and the contract has been awarded. Extensive remodeling has taken</p>

				place with a complete rebuild of accommodation following consultation with young people.
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	On reflection this has not been included within the joint housing protocol as we feel there are some circumstances in which we would be unable to prevent care leavers needing to access emergency accommodation – for example if there was a fire/flood/fleeing from violence. 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 September 2022 (Q2)
	<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>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>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>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>Feedback from foster carers will continue to demonstrate improved relationships between foster carers and Cheshire East Council.</p>	<p>Feedback from foster carers will continue to demonstrate improved relationships between foster carers and Cheshire East Council.</p>		
Position in September 2022 (Q2) in relation to targets		Progress relative to targets		
<p>In Q1 and Q2 of 2022-23 we have not achieved a net gain of additional homes for children, as although we have recruited new fosters carers, we have also experienced some resignations.</p> <p>We have been continuing to step up recruitment activities, and had a very successful Cheshire Foster Care Fortnight Campaign in May 2022. We attended various events across the county to continue to spread the message about the difference that fostering can and does make to children's lives. This activity has led to a steady increase in enquiries and applications from people who want to foster.</p>		<p> Below target</p>		
<p>We are still short of achieving new foster carer assessments within 16 weeks. Of the 2 newly approved foster carers in Q2 neither were achieved within 16 weeks.</p>		<p> Below target</p>		
<p>96% of fostering annual reviews were being completed within timescales in Q2.</p>		<p> Below target</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, Mockingbird project and Fostering Board. The Foster Carer Survey has been completed and the results are being analysed. The Foster Carer forum has been relaunched in March 2022 with good attendance, foster carers feedback that they feel there have been improvements in communication. The Foster Carers Association was established in September 2022, chaired by foster carer Ken Talbot.</p>		<p> Achieved target</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. 	Samantha Walker, Head of Provider Services	March 2023/ Ongoing	<p>We have been continuing to step up recruitment activities, and had a very successful Cheshire Foster Care Fortnight Campaign in May 2022. We attended various events across the county to continue to spread the message about the difference that fostering can and does make to children’s lives. This activity has led to a steady increase in enquiries and applications from people who want to foster.</p> <p>We have set up our dedicated Facebook page and launched Fostering Champions Ambassadors Scheme, Christmas and World Cup campaign. We are using advertisement on roundabouts across Cheshire East and an ongoing radio campaign.</p> <p>In 2002 we promised to plant a tree for every fostering household this year and for every new household over the next 5 years.</p> <p>We are planning to plant between 40-50 young tree saplings in 4 locations across Cheshire East in</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 ‘Did you know’ campaign and to consolidate our targeted recruitment to attract more foster carers who can offer home to sibling groups, teenagers, parent and baby, unaccompanied asylum-seeking children and step down from residential.</p>
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5b	Redesign the fostering service to establish specialised teams to enable effective support to foster carers and young people.	Samantha Walker, Head of Provider Services	December 2022	The fostering service redesign has been completed.
5c	Develop and launch our second Mockingbird Hub.	Sarah Probert, Mockingbird Lead Practitioner	January 2022	We successfully launched our second Mockingbird Hub in January 2022.
5d	Continue to update the fostering policies and procedures.	Samantha Walker, Head of Provider Services	April 2023	We are moving to having our policies and procedures provided and maintained by a specialist company – Tri-ex. The new policies and procedures will be in place by April 2023.
5e	Increase sufficiency in short break provision, including retendering our short break local offer for disabled children and their families.	Samantha Walker, Head of Provider Services	March 2022	Our Short Break Local Offer for Disabled Children and their families has been recommissioned and began operation on 1 June 2021. Between May 2022 and January 2023 there were 884 people using short breaks. We have also recruited three new Short Break Foster Carers which increases our overall number to six.
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.	Samantha Walker, Head of Provider Services	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).	Samantha Walker, Head of Provider Service	July 2023	<p>5 workstreams are in place which are overseen by officers and service users. These are:</p> <ol style="list-style-type: none"> 1. Portals – A number of new portal forms have been developed with a large training drive for Foster Carers in Q3 2022/23. 2. Fostering Recruitment Workflow – the new Workflow went live in December 2021. 3. Family and Friends Workflow – the new Workflow went live in December 2021. 4. Special Guardianship Workflow - the new Workflow went live in December 2021. 5. Private Fostering Workflow – Work on Private Fostering will continue into 2023/24.
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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 September 2022 (Q2)
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 September 2022 (Q2) in relation to targets				Progress relative to targets
Lead practitioners are supporting the workforce to gain confidence around holding family networks. This has included masterclasses on holding family network meetings, and role modelling. The consistent use of family networking as part of ongoing child in need planning requires further embedding.				 Below target
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 one to one support to be offered where required to practitioners	Sarah Flint, Principal Social Worker/ Practice Leads	December 2023	2022 experienced some significant staffing challenges and therefore it is necessary to deliver our revised masterclass programme again throughout 2023, 4 x per week during learning week.

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 2023	This will be reviewed at the end of quarter 4 and is now a standard part of performance clinics.
6c	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	84% children have an updated C&F assessment within the last 12 months in Q2.
6d	Updated Family Networking Policy to be launched	Sarah Flint, Principal Social Worker	April 2023	We are moving to having our policies and procedures provided and maintained by a specialist company – Tri-ex. The new policies and procedures will be in place by April 2023

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 September 2022 (Q2)
<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 September 2022 (Q2) in relation to targets		Progress relative to targets
<p>At the end of Q2 2022-23, case supervision was at 76% within 8 weeks, however within the CWD service there are some children that require supervision at 12 week intervals as opposed to 8. We are further developing Power BI to ensure we are accurately able to report on this so we have a more accurate picture of supervision.</p> <p>Weekly dip sampling has taken place throughout Q1 and Q2 which has evidenced improvement in timely visiting to children and recording the rationale for visiting intervals.</p>		<p style="text-align: center;"> Below target</p>

There continues to be work required to bring the voice of the child through explicitly in every assessment however a significant improvement has been seen. We have also seen an improvement in the voice of the child being evidence in referrals to the CWD Care Package Panel.

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	<p>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.</p> <p>At the end of Q2 2022-23, case supervision was at 76% within 8 weeks, however within the CWD service there are some children that require supervision at 12 week intervals as opposed to 8. We are further developing Power BI to ensure we are accurately able to report on this so we have a more accurate picture of supervision.</p>
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 was updated in May 2022.
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 continuing to be written to each new and re-assessment and are recorded within the case summary.
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 commenced in April 2022 on a monthly basis.

				<p>Weekly dip sampling has taken place throughout Q1 and Q2 which has evidenced improvement in timely visiting to children and recording the rationale for visiting intervals.</p> <p>There continues to be work required to bring the voice of the child through explicitly in every assessment however a significant improvement has been seen. We have also seen an improvement in the voice of the child being evidence in referrals to the CWD Care Package Panel.</p>
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	Power BI has been developed to enhance performance management. Weekly Performance Clinics review all elements of statutory business.
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 (Keith Martin, Michelle Jones, Cat Linde and Louisa Joyce)	Ongoing throughout the year	These sessions are being run on a regular basis.

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 September 2022 (Q2)
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 September 2022 (Q2) 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
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).	Phil Alcock, Audit and Quality Assurance Officer	Ongoing throughout the year	This action has been completed every quarter and a report is provided to SCLT on a quarterly basis. This contains an update of findings, learning/ training that has been provided in response to audit themes and identifies if actions from previous audits have been completed. This report has supported the identification of where practice can be strengthened.

	Principal Social Worker to provide a quarterly briefing report to ensure learning and training is reflective of audit findings.			
8b	All auditors are responsible for tracking actions from audit and updating the case file with a case note to confirm completion.	Phil Alcock, Audit and Quality Assurance Officer	Ongoing throughout the year	This has been introduced as of quarter 3 as there is evidence that team managers have not consistently been responding to actions from audit.
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 throughout the year	The Principal social worker has been providing an update on a quarterly basis around whether actions from audit have been completed. This has highlighted that actions from audit have not consistently been completed. The Principal social worker will continue to support quarterly updates and it is expected that the introduction of action 8b will result in a consistent approach to ensuring actions from audit are completed.
8e	The Audit and Quality Assurance Officer will moderate 9 cases every quarter period.	Phil Alcock, Audit and Quality Assurance Officer	Ongoing throughout the year	An Independent Auditor has moderated 20 audits that were completed in quarter 1 and 2 of 2022-2023. This demonstrates that most of the judgements made by our auditors are sound.

				The Audit and Quality Assurance Officer will continue to moderate 9 cases every quarter period.
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