

Date of issue: Monday 1st February 2021

MEETING	EDUCATION AND CHILDREN'S SERVICES SCRUTINY PANEL (Councillors Basra (Chair), Kelly (Vice-Chair), A Cheema, Ajaib, Begum, Qaseem, A Sandhu and Sarfraz. One vacancy) <u>Education Voting Co-opted Members</u> Vacant <u>Education Non-Voting Co-opted Members</u> Paul Kassapian - Secondary School Representative Fifi El Sayed – Slough Youth Parliament
DATE AND TIME:	THURSDAY, 4TH FEBRUARY, 2021 AT 6.30 PM
VENUE:	VIRTUAL MEETING
DEMOCRATIC SERVICES OFFICER: (for all enquiries)	NICHOLAS PONTONE 07749 709868

SUPPLEMENTARY PAPERS

The following Papers have been added to the agenda for the above meeting:-

* Items 5 and 6 were not available for publication with the rest of the agenda.

PART 1

<u>AGENDA ITEM</u>	<u>REPORT TITLE</u>	<u>PAGE</u>	<u>WARD</u>
5.	Slough Children's Services Trust's Performance	1 - 40	All
6.	The Draft Threshold Document	41 - 56	All

This page is intentionally left blank

SLOUGH BOROUGH COUNCIL

REPORT TO: Education and Children's Services Scrutiny Panel

DATE: 4th February 2021

CONTACT OFFICER: Carol Douch Assistant Director Frontline Practice and Review,
Slough Children's Services Trust
(For all Enquiries) 01753 690825

WARD(S): All

PART I
FOR COMMENT & CONSIDERATION

REVIEW OF PERFORMANCE IN SLOUGH CHILDREN'S SERVICES TRUST

1. **Purpose of Report**

The purpose of the report is to inform elected members of Education and Children's Services Scrutiny Panel, of the current performance and operational challenges for Slough Children's Services Trust as at December 2020.

2. **Recommendation(s)/Proposed Action**

Education and Children's Services Scrutiny Panel members note the report and request a further report in three or six months' time.

3.. **Conclusion**

Members will note the improving performance of the Trust against a backdrop of significant pressures brought about by the Covid pandemic, resource constraints, and workforce difficulties. Areas of improvement are still needed and can be explored within the meeting.

4. **Appendices**

'1. Trust Improvement Plan

'2' Dashboard Slough Children's Trust Performance -

This page is intentionally left blank



Performance of Slough Children's Services Trust

4 February 2021

Carol Douch
AD Frontline Practice and Improvement

Agenda

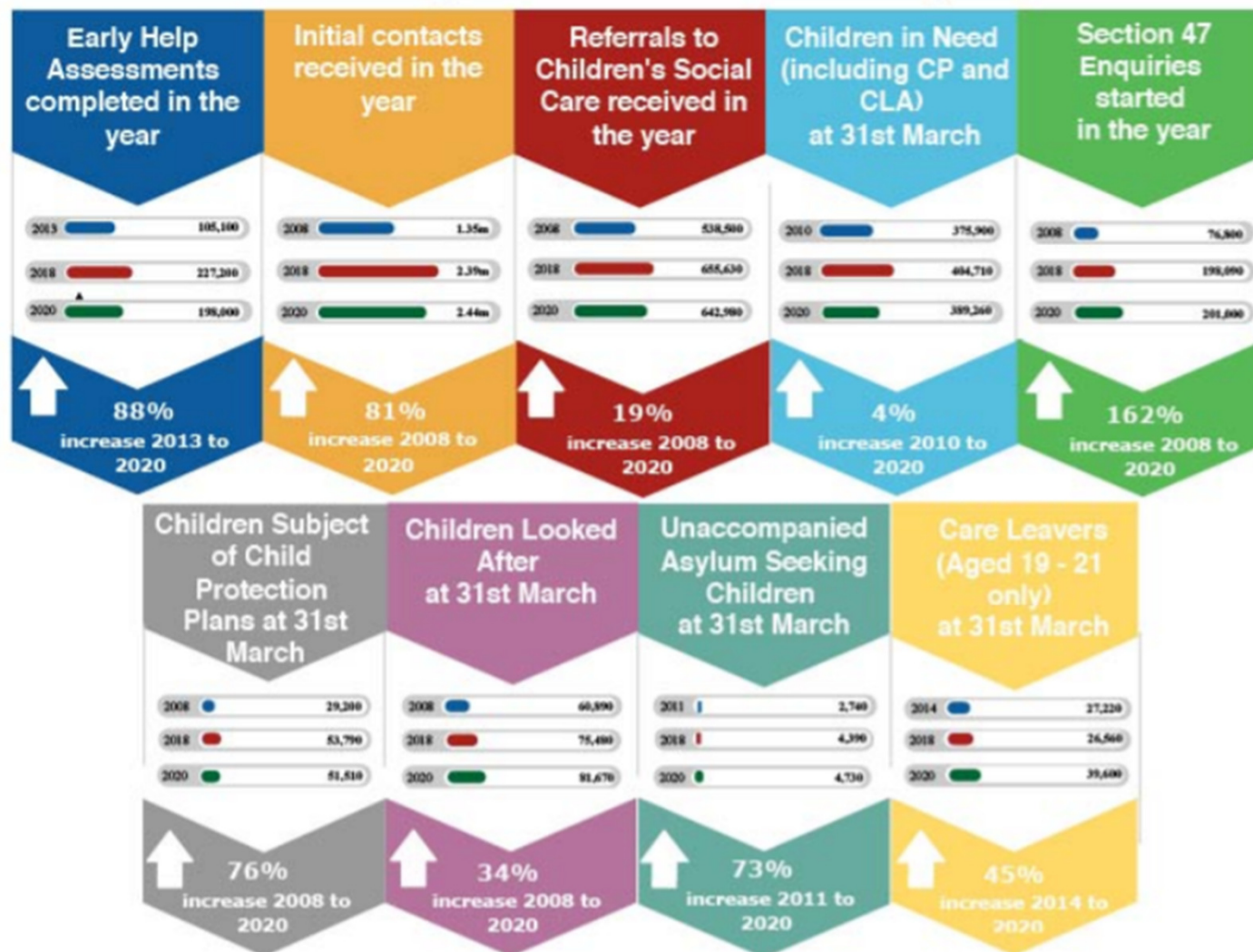
1. National Perspective
2. Revised Improvement Plan
3. Immediate overall operational pressures
4. Caseloads
5. Service operational pressures and Caseloads

National context of increase in workload

- Children and young people are presenting with more complex needs as a result of parental mental ill-health, drug and alcohol misuse, and domestic violence before the Covid-19 pandemic
- Whilst this has been increasing over the past two years, it has been more acute during the pandemic and is forecast to increase further as the full impact of the pandemic is realised
- Local authorities reported an increase in the work associated with safeguarding young people from exploitation, and in particular from exploitation by organised crime networks
- The National Child Safeguarding Practice Review Panel - In January 2020 the Panel reported 137 cases of babies harmed or killed due to NAI since the Panel's inception in June 2018. As social isolation and lack of access to health care services are risk factors for NAI, respondents reporting a further increase. **20% increase.** (*Berks West 3 last year, 11 this year*)
- There was a 38% increase in children who were electively home educated on 1st October 2020

*Source ADCS Safeguarding Pressures Phase 7 December 2020

Safeguarding Pressures: Change in children's services activity



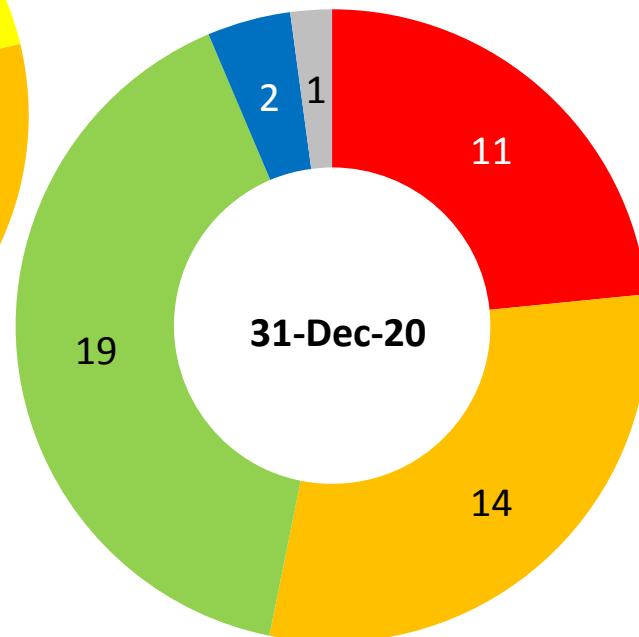
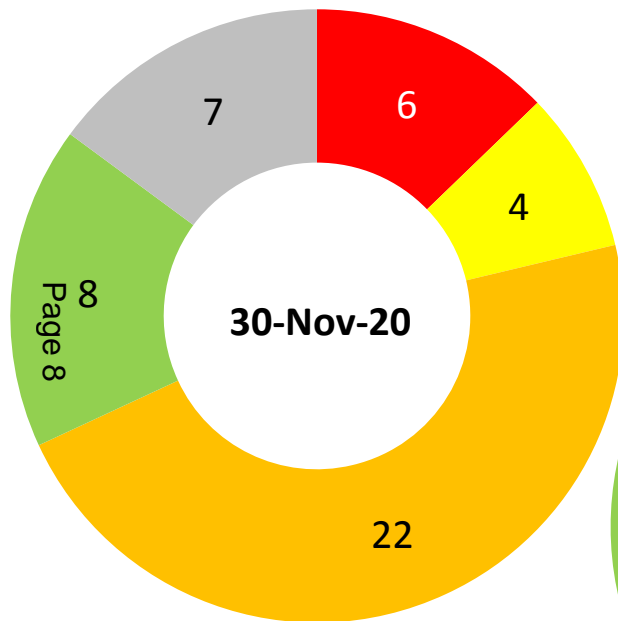
Revised Improvement Plan



The revised Improvement Plan (appended separately) focuses on key areas to drive further changes across the whole system and gives assurance that performance is embedding

- **Getting the Basics Right** – to ensure children receive the right service at the right time to meet needs
- **Listen to the voice of the child and their family** – to drive plans and interventions
- **Embedding Public Law Outline** – and achieving Early Permanency
- **Implementation of Contextual Safeguarding**
- **Ensuring stability of workforce** – to recruit and retain the right workforce do the job well
- **Improving Supervision and Management Oversight** – to drive Children's Journey's
- **Quality Assurance** – continuous learning and improvement to get to Good

Improvement Plan Progress



Overall there has been an improvement in progressing actions this month

5 additional reds:

- 1 green to red
- 4 amber to red
- 1 grey to red

6 less greys (actions not reportable):

- 3 grey to green
- 2 grey to amber
- 1 grey to red

11 additional greens:

- 9 amber to green
- 1 yellow to green
- 3 grey to green

4 less yellows (actions outside tolerance but better than last time):

- 1 yellow to green
- 3 yellow to amber

2 new blues (actions completed): both amber to blue

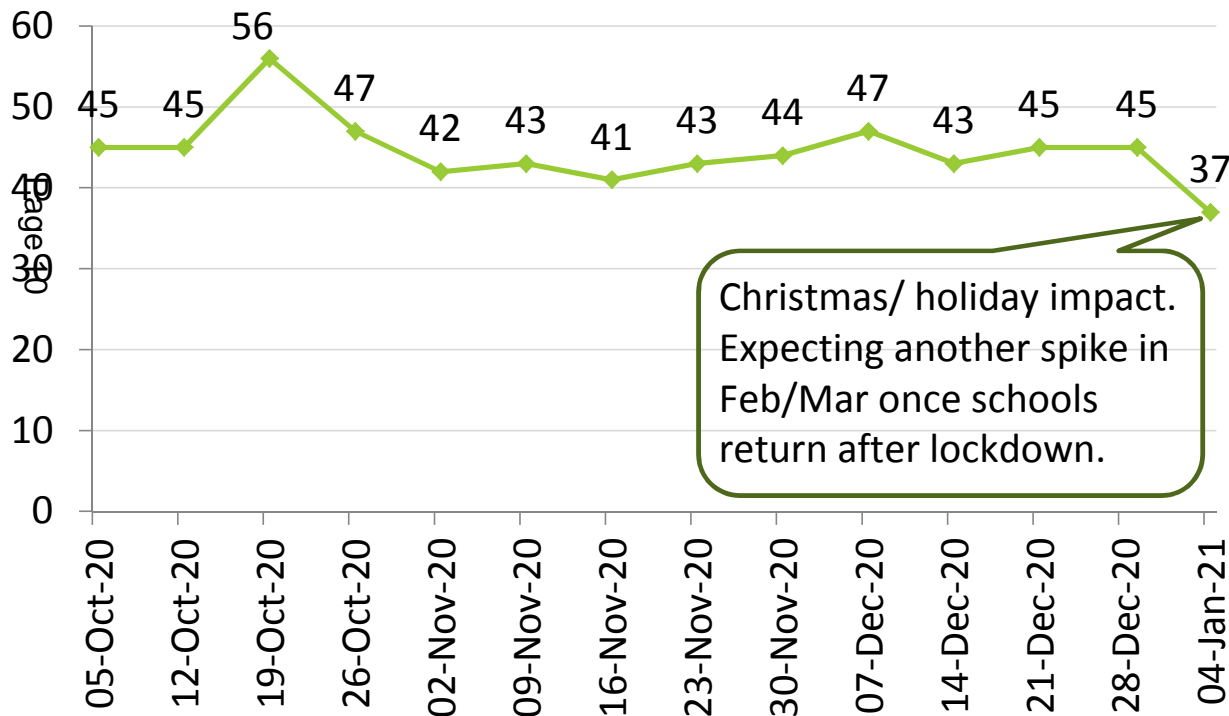
Overall Operational Pressures



- **Staffing pressures** with increase in agency staff
- **Lack of quality social workers** available to recruit
- **Whole system outage** from 5 – 9 November 2020 impact of this is not yet known.
- **Lack of placements** available across all cohorts of children and young people adding pressure to services, and staffing pressures in the placements team
- **Business support** a number of agency staff have started in post, however they are still being inducted into their roles
- **Blue Jeans security assurance in place but awaiting sign-off from partners** - adding to pressures in WT18 compliant strategy meetings/ Core Groups/Conferences

Highest Caseload Each Week

Highest Case Load Each Week



- As taken from the 4 January 2021 Compliance report.
- The highest caseload at the end of November was 43 children. At the end of December this rose to 45 children but has since reduced to 37 children at the beginning of January 2021.
- All but two of the highest caseloads this week were in the Front Door Assessment teams.
- Since the spike in October 2020, caseloads have started to reduce but remain high for some and in particular in the Front Door Assessment Teams.

Referral and Assessment (Front Door)

Better/ Maintaining

- Number of contacts where a decision was made in 1 day: **96.4%** (95.6% last month)
- Referrals that were repeat referrals (within 12m): **12.9%** (19.7% last month, SN 22.0% & SE 25.1%)
- Initial assessments completed within timescale (45d): **84.6%** (79.5% last month, SN 84.8% & SE 82.4%)

Area of Focus for Further Improvement

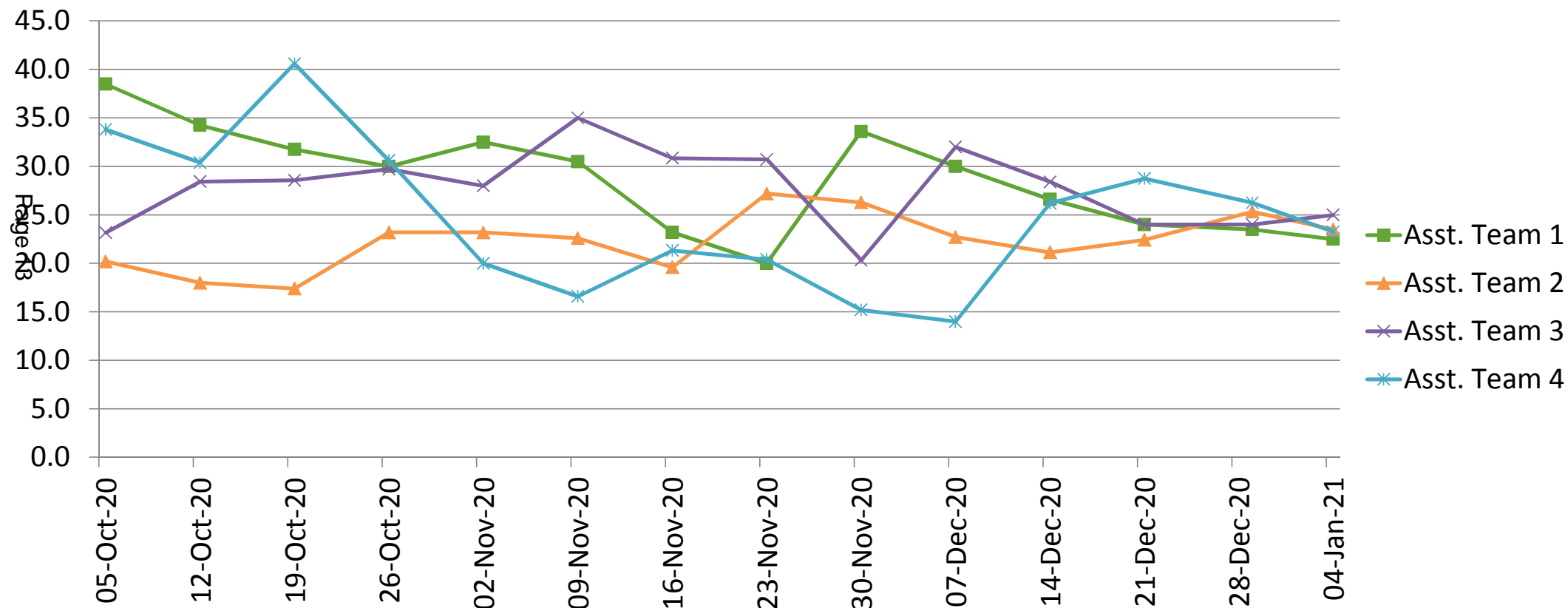
- % of contacts leading to referral: **34.0%** (34.9% last month)
- % of Section 47s which led to Initial CP Conference in month (children not already CP or CLA): **26.0%** (20.5% last month, SN 35.9%, SE 35.3%)

Referral and Assessment (Front Door)

Operational Pressures

- Head of Service contracted Covid (in the community) and now isolating at home.
- Staff in Referral and MASH wanting to work on a rota from home but we do not have sufficient/ appropriate technology to support this.
- Early Help and police colleagues not in-situ
- Impact of the system going down not yet known
- Caseloads remain too high (averaging 23.7) but slowly starting to reduce (of the top 10 caseloads, in the service 37 is the highest and 19 the lowest)
- Biggest impact of Blue Jeans compliance felt in the front door where majority of strategy discussions take place
- Stability of workforce

Average Caseloads: Referral and Assessment (Front Door)



Average Caseloads: Referral and Assessment (Front Door) & Vacancies



Caseloads

- The average caseload for the Referral and Assessment service remains high at 23.7 children per worker, with a peak in individual teams when they are on duty
- 2 teams have reduced to an average of 15 children per worker, when not on duty
- During December the volume of cases has not been as high when compared to October where the impact of schools returning was felt.

Vacancies

- Currently there are:
 - 1 Social Worker vacancy in the MASH
 - 3 Social Worker vacancies in the Assessment teams
 - 1 Team Admin vacancy in Assessment

Safeguarding and Family Support (CIN, CP and Court)

Better/ Maintaining

- CIN visits within timescales: **89.1%** (93.4% last month)
- CP plans ended after 2+ years: **0.00%** (6.3% last month, SN 4.4% & SE 5.0%)
- Children subject to a CP plan for 2 or more years: **1.7%** (1.7% last month, SN 2.8% & SE 2.4%)
- Children on a CP plan visited in the last 2 weeks: **95.8%** (86.4% last month)

Area of Focus for Further Improvement

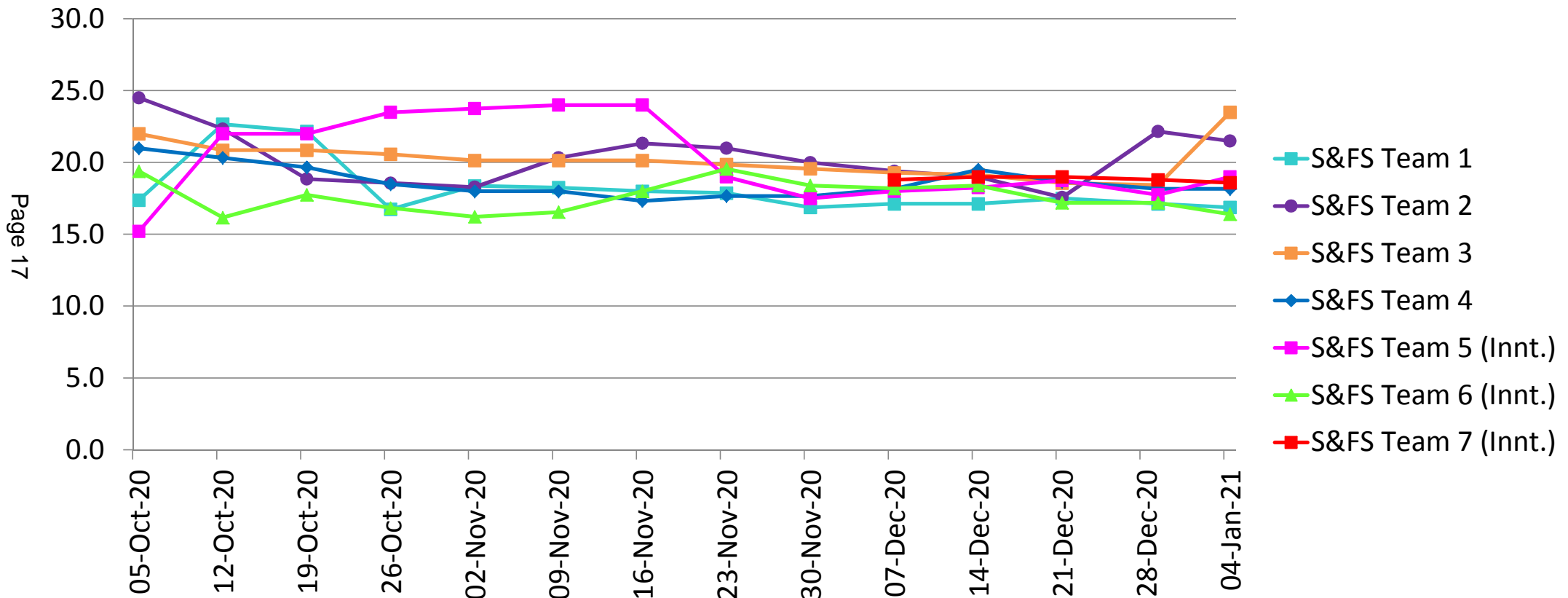
- Children subject to CIN (S17) plans for over 12 months: **20.1%** (19.1% last month)
- CP plans that were repeat plans (ever): **25.0%** (9.5% last month, SN 20.9% & SE 23.4%)
- CP Plans that were repeat plans within 2 years: **14.3%** (2.9% last month)
- ICPCs held within statutory timescales: **70.0%** (70.5% last month, SN 80.6% & SE 75.9%)
- RCPCs held within timescale: **64.7%** (68.7% last month, SN 92.2% & SE 89.5%)

Safeguarding and Family Support (CIN, CP and Court)

Operational Pressures

- Overall number of CIN have increased: **563** (549 last month)
- Overall number of CP plans have reduced: **346** (355 last month)
- Numbers in PLO: **12 families (24 children)** (11 families (23 children) last month)
- Pending: **2 family (2 children)** (2 families (3 children) last month)
- Currently in care proceedings: **55 families (90 children)** (51 families (85 children) last month)
- To issue: **1 family (1 child)** (5 families (7 children) last month)
- Capacity in joint legal team to respond, now starting to delay going to court as a result.

Average Caseloads: Safeguarding and Family Support (CIN & CP)



Average Caseloads: Safeguarding and Family Support (CIN & CP) & Vacancies



Caseloads

- The average caseload for Safeguarding and Family Support services has reduced this period to 19.4 (previously 20).
- Caseloads are becoming more equitable across the teams.
- There is a spotlight on the throughput of children in need at present.

Vacancies

- Currently there are 4 Social Worker vacancies.
- Change of social workers is impacting on relationships with children and families, and causing drift and delay

Children Looked After and Support Services

Better/ Maintaining

- Children with 3 or more placements in the last year: **7.0%** (8.6% last month, SN 11.3% & SE 12.0%)
- Children in the same placement for 2 or more years: **87.5%** (86.0% last month, SN 65.5% & SE 68.0%)
- Children seen alone at visit within timescale: **67.7%** (66.5% last month)
- Children with up-to-date health checks: **90.8%** (93.2% last month, SN 90.7% & SE 86.0%)

Areas of Focus for Further Improvement

- Children placed more than 20 miles away: **29.5%** (30.2% last month, SN 15%.0 & SE 26.0%)
- Children with up-to-date dental checks: **52.5%** (54.1% last month, SN 87.9% & SE 86.0%)
- IHAs within timescale (1m): **0.0%** (20.0% last month)

Children Looked After and Support Services

Operational Pressures

- 215 children in care (210 last month)
- More large and complex sibling groups coming into care
- Sufficiency pressures finding suitable and/or emergency placements and keeping siblings together
- Instability of crisis placements, some of which is Covid related
- Number of schools closing is impacting on placement stability for some children

Care Leavers

Better/ Maintaining

- Care leavers in suitable accommodation (19-21y/o): **91.0%** (90.0% last month, SN 83.6% & SE 91.0%)

Areas of Focus for Further Improvement

- Care leavers in education, employment and training: **45.0%** (48.0% last month, SN 52.4% & SE 54%)
- Care leavers with current pathway plan: **64.2%** (68.1% last month)
- Pathways into housing for 18+
- More tailored Pathway Plans

Care Leavers and Children with Disability (CWD)

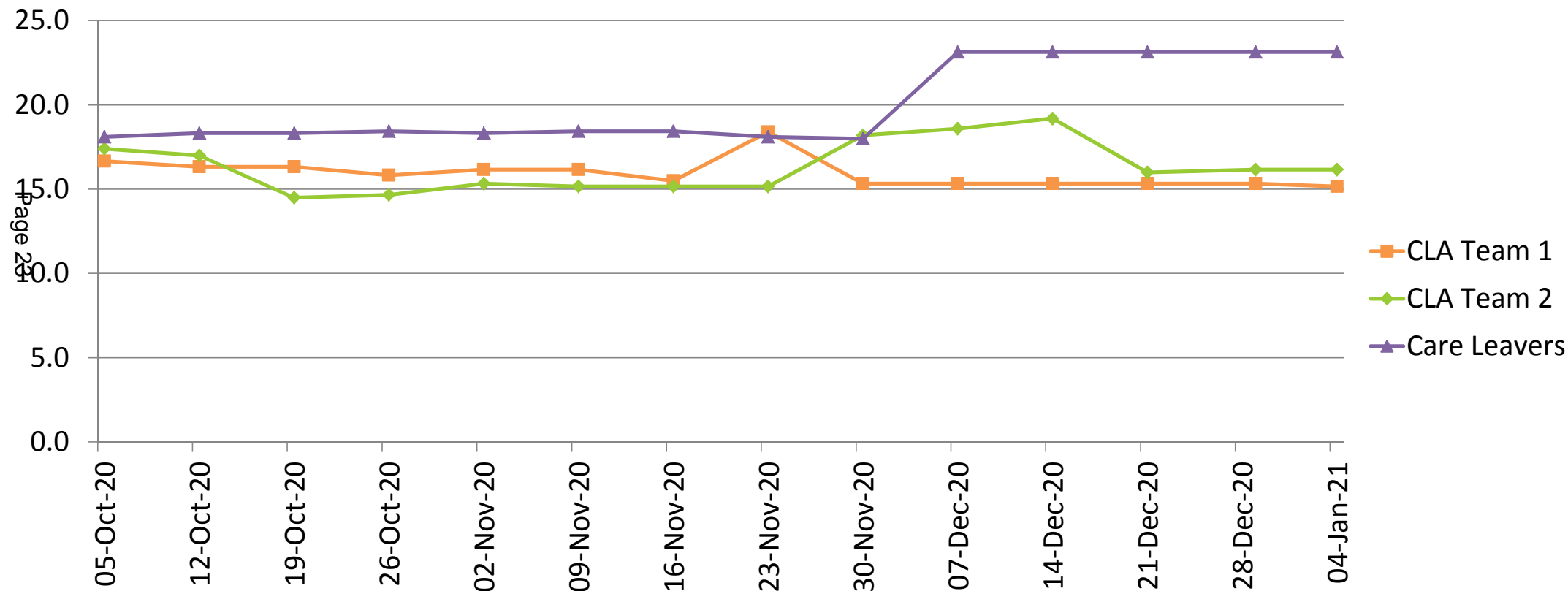
Care Leavers Operational Pressures

- Sudden loss of valued member of team, supporting team members and young people
- NEET
- Housing and supported living accommodation

CWD Operational Pressures

- Breakaway (respite unit) 5 members of staff with Covid or shielding.
- Increase in demand for respite
- Challenges in tri-partite funding
- No crisis pathway for children on the autistic spectrum

Average Caseloads: CLA and Support Services (CLA and LC)



Average Caseloads: (CLA and LC) & Vacancies



Caseloads

- The average caseload for Children Looked After and Support Services is 22.3.
- For the Children looked After teams , the average caseload per worker has remained fairly stable since the beginning of October.
- Pressure on the Care Leavers service due to the sudden sad loss of a good PA with the average number of cases currently at 23.1.

Vacancies

Currently there is:

- 2 Personal Advisor vacancy
- 1 Social Worker vacancy in the Children Looked After team; and
- 1 Team Admin vacancy

Workforce Headlines as at end of December 2020

- In total there are currently **11 vacancies** (9 SWs, 2 Administrators) in frontline* staff, compared to 14 vacancies at the end of November 2020.
- There are **0 upcoming vacancies** in frontline* staff, compared to the 2 upcoming vacancies at the end of November 2020.
- Children with supervisions within timescale: **78.9%** (80.8% last month)
- Children with management oversight: **89.6%** (90.8% last month)

This page is intentionally left blank



Trust Improvement Plan

Summary

Plans for delivering additional improvements following a period of increased demand, to embed sustainable changes and improve outcomes for children, young people and their families.

Policy Owner: Chief Executive

Version: 0.17

Date: January 2021

Review Dates: February 2021 and March 2021 (using data from the month before)

Introduction

Slough Children’s Services Trust (SCST) is an independent, not-for-profit company that provides social care and support services to children, young people and families.

The SCST fundamental purpose is ‘Ensuring children in Slough are safe, secure and successful.’

The SCST aims to provide:

- the best possible service, ensuring that children and families are at the centre of everything we do
- the best possible outcomes for vulnerable children and families
- the best possible support to staff, enabling families to change and flourish
- Do the right thing for children, at the right time and to work to keep families together, where it’s safe to do'

The Improvement Plan

Following the Trust’s inspection in January 2019 where services were found to be Requires Improvement to be Good overall, the Trust developed an action plan in response to the findings of the inspection and its own self-evaluation.

In the six to eight months following the ILACS inspection, significant progress was made in addressing identified areas for improvement as well as sustaining progress seen by Ofsted. However, in the autumn and throughout significant parts of 2020, children’s social care experienced high and increased demand which caused pressure in the system and contributed to a stall and in some areas a decline in the Trust’s progress. This improvement plan is focused on the key actions to ensure social care practice is child focused and the basics are completed well and takes into consideration the outcomes from recent Ofsted focused visit in October 2020 with further areas for focus included.

Underpinning this improvement plan are a series of service level plans which outline the actions which services will take to further improve their own area and links to the Trust Business Plan. The Business plan sets out the key objectives and vision for the Trust in the coming year, aiming to provide stability, value for money and service delivery improvement to the children, families and the workforce of Slough Children’s Trust.

The improvement plan has been updated into new categories to focus areas of improvement and ensure actions deliver sustained outcomes. The 7 key themes are:

- Getting the basics right – the quality and timeliness of assessment planning for children in need of help and protection
- Voice of the child and their family
- Embedding Public Law Outline
- Supervision and Management Oversight of Childrens Journeys
- Implementation of Contextual Safeguarding
- Stability of the Workforce
- Quality Assurance

Trust Service Plans and Owners

- | | |
|--|------------------------------|
| • Referral and Assessment | Fanny Jacob |
| • Youth Offending Team | Jennifer Cail |
| • Safeguarding and Family Support | Michelle Henry/ Garry Jeffry |
| • Children with Disabilities | Reshma Bessesar |
| • Children Looked After and Support Services | Reshma Bessesar |
| • Care Leavers | Reshma Bessesar |
| • Virtual School | Anne Bunce |
| • Independent Fostering Service | Saima Arif |
| • Adoption | Raheela Khan |
| • Safeguarding and Quality Assurance | Sandra Davis |
| • HR | Kate McCorriston |
| • Trust Business Plan | Matt Marsden |

Governance, Assurance and Measuring Impact

The improvement plan is overseen by the Transition Steering Group chaired by Trevor Doughty, DFE Commissioner. The plan will tracked and measured by a dashboard of key indicators to demonstrate progress in a visual way taken from the weekly Enhanced Caseload Report (ECR), the monthly Trust Performance Report (TPR) and information gathered from monthly moderated audit activity and audit activity on specific cohorts of children.

The improvement plan is incorporated into the performance management cycle of reporting through Performance and Accountability Meetings with Heads of Service to ensure ownership across the Trust.

Key individuals responsible for delivery of the Improvement Plan

- | | |
|---------------------------------------|--|
| • Interim Chief Executive (Trust) | Eleni Ioannides (and SBC DCS) |
| • Director of Operations (Trust) | Parmjit Chahal |
| • Assistant Director for QIPP (Trust) | Brent Lumley |
| • Director of Finance (Trust) | Matt Marsden |
| • Head of HR and OD (Trust) | Kate McCorriston |
| • Assistant Director (Interim) | Carol Douch (Frontline Practice and Improvement) |

Actions will be RAG rated for outcome and impact as follows.

	Outcome:	Impact:
RED	Tasks timescales have slipped and need attention.	Not on target and outside of tolerances with no improvement
YELLOW	Tasks timescales have slipped and need attention.	Not on target and outside of tolerance but improvement on previous return
AMBER	Tasks are on track, but may not yet be fully embedded as business as usual	Not on target but within tolerances
GREEN	Tasks are progressing as expected and are deemed to be on target	Impact of outcomes is meeting or exceeding targets
BLUE	Completed	Completed
GREY	Action is not scheduled to start in this period	Impact not yet expected to be realised or unable to report this time

Getting the basics right – the quality and timeliness of assessments, planning and interventions for children in need of help and protection

RAG Update

Ref	Actions	Leads and resource	Timescales	Impact to be achieved/ KPIs/ How do we know?	Progress	30 Nov	Jan 2021																
1	<p>Strengthen the quality and timeliness of assessments completed across the Trust so the quality are less variable and they are completed in a timely way.</p> <ul style="list-style-type: none"> Assessment Team Managers to deliver training based on good practice 	AD Frontline Practice and Improvement	March 2021	As measured by audits and dip samples, all assessments are based on a robust assessment of need and risk, include evidence of direct work with families, identify appropriate intervention which meet the needs of the family and all assessments to conclude with a written plan of support of the children	<ul style="list-style-type: none"> Audit schedule developed and going through governance. Dip sampling audit tool developed. Timeliness evidence being collated. Audit summary report prepared Progress reported in performance and accountability meetings. Children and Families Assessment Schedule evidenced for CLA and CL's <p>Weekly ECR/Compliance Report: Target 90%</p> <table border="1"> <caption>C&F Assessments Completed on Time</caption> <thead> <tr> <th>Date</th> <th>Percentage</th> </tr> </thead> <tbody> <tr> <td>26-Oct-20</td> <td>96.80%</td> </tr> <tr> <td>02-Nov-20</td> <td>95.40%</td> </tr> <tr> <td>09-Nov-20</td> <td>96.10%</td> </tr> <tr> <td>16-Nov-20</td> <td>94.10%</td> </tr> <tr> <td>23-Nov-20</td> <td>92.40%</td> </tr> <tr> <td>30-Nov-20</td> <td>92.30%</td> </tr> <tr> <td>07-Dec-20</td> <td>93.00%</td> </tr> </tbody> </table>	Date	Percentage	26-Oct-20	96.80%	02-Nov-20	95.40%	09-Nov-20	96.10%	16-Nov-20	94.10%	23-Nov-20	92.40%	30-Nov-20	92.30%	07-Dec-20	93.00%		
Date	Percentage																						
26-Oct-20	96.80%																						
02-Nov-20	95.40%																						
09-Nov-20	96.10%																						
16-Nov-20	94.10%																						
23-Nov-20	92.40%																						
30-Nov-20	92.30%																						
07-Dec-20	93.00%																						
2	<p>Urgently improve the quality and timeliness of CIN meetings and plans:</p> <ol style="list-style-type: none"> Complete Core Audit of children on CIN Plans to establish baseline Appoint ATM to drive up quality and timeliness Deliver bite size training on a Good CIN meeting Develop one minute guide 	Head of Safeguarding and Support	27 November 2020	All plans are SMART, focused, responsive to the needs of children, are based on robust assessment of need and risk with and are clear how the plan is going to make a difference to the lived experience of the child	<ol style="list-style-type: none"> 10 CIN cases audited – 70% (7) were RI but with some good features and 30% (3) were inadequate. <ul style="list-style-type: none"> Diagnostics completed from CIN audit report and areas of focus confirmed. Report completed with recommendations made to improve process and to be shared wider with staff groups. ATM appointed to model chairing of CIN meetings and drive up quality Training schedule established <ul style="list-style-type: none"> Actions and next steps identified from CIN case audits CIN project established to review all CIN over 9 months Guide being developed 																		

Getting the basics right – the quality and timeliness of assessments, planning and interventions for children in need of help and protection

RAG Update

Ref	Actions	Leads and resource	Timescales	Impact to be achieved/ KPIs/ How do we know?	Progress	30 Nov	Jan 2021																								
3	<p>Review thresholds within Child Protection assessment and planning process.</p> <p>(a) Deep dive to be completed into</p> <ul style="list-style-type: none"> Threshold for S47 Large sibling groups Children off plans at 3 months Children on plans 9 months+ Children on dual plans <p>(b) Action Plan to be developed based on findings</p>	AD Frontline Practice and Improvement	18 December 2020	<p>Interventions with children are proportionate</p> <p>We will be more in-line with the stat neighbors and England average with regards to our CP cohort.</p>	<p>(a) CP Assessment Thresholds and Planning Process</p> <table border="1"> <thead> <tr> <th colspan="8">Number of children who are both CLA and CP</th> </tr> <tr> <th>CLA & CP</th> <th>27 Jul 20</th> <th>24 Aug 20</th> <th>28 Sep 20</th> <th>26 Oct 20</th> <th>23 Nov 20</th> <th>Dec 20</th> <th>Jan 21</th> </tr> </thead> <tbody> <tr> <td></td> <td>7</td> <td>6</td> <td>13</td> <td>6</td> <td>11</td> <td>TBC</td> <td>TBC</td> </tr> </tbody> </table> <ul style="list-style-type: none"> Dip Sampling completed by AD for Quality, Improvement, Practice and Performance; of 66 s47 decisions which did not progress to ICPC to check for appropriate decision making. Of these: <ul style="list-style-type: none"> 97% of decisions (63) were appropriate, and 3% of decisions (3) should have progressed to an ICPC (have been escalated) All other areas reviewed in Managers Audit Day on 20 November 2020. <p>(b) Managers audit day reviewed all areas of focus – report and action plan to follow</p>	Number of children who are both CLA and CP								CLA & CP	27 Jul 20	24 Aug 20	28 Sep 20	26 Oct 20	23 Nov 20	Dec 20	Jan 21		7	6	13	6	11	TBC	TBC		
Number of children who are both CLA and CP																															
CLA & CP	27 Jul 20	24 Aug 20	28 Sep 20	26 Oct 20	23 Nov 20	Dec 20	Jan 21																								
	7	6	13	6	11	TBC	TBC																								
4	<p>Improve the timeliness and quality of a core groups</p> <p>(a) Bitesize session on core groups due at 12/11/20 Managers briefing session</p> <p>(b) SG Partnership to deliver training on Core Groups across partnership</p>	Head of QA Safeguarding	14 December 2020	Core Groups are well chaired, the plan is reviewed and minutes/ plan provided in advance of the meeting.	<p>(a) 7 managers (3 from Assessment, 1 from Safeguarding, 1 from CLA and 2 from CL) attended the core groups training session as part of the managers briefing</p> <p>(b) QA Service is working with the Safeguarding Partnership to provide a training video and information on core groups, as a direct result of 9 plus months of audit activity. Training video completed and scheduled to be delivered</p> <ul style="list-style-type: none"> Whole service day delayed due to Covid restrictions but planning for how to integrate staff sessions in monthly manager briefing cycle is underway 																										
5	<p>Frontline staff are supported to have a clearer understanding of the impact of neglect on children using the screening tool and effectively intervene to mitigate the risks/ impact on children:</p> <ul style="list-style-type: none"> Staff to complete neglect training 	AD Frontline Practice and Improvement	31 March 2021	<p>All frontline staff complete neglect training to increase their understanding of neglect and the correct neglect tool to use</p> <p>100% of children and young people have the neglect tool completed where this is identified as the primary need (measured through a report run off ICS)</p>	<ul style="list-style-type: none"> Neglect was the focus for Practice Learning Week w/c 16 November 2020. Daily emails were sent with useful information, tools and tips related to neglect as well as findings from a SPR in Slough related to neglect. 48% of open CP cases have neglect as the main reason (October ChAT) Continued focus on neglect 																										
6	Conduct a swift review, of processes to ensure effective stepping down from CP and CIN to Early Help, amending processes and pathways as necessary and ensuring they are embedded.	Head of Review and Assessment	17 December 2020	Reduction in the number of children stepped up from 381 to 300 over the year of the year which averages out to 25 children per month. Baseline 31 children stepped up in April 2020.	<table border="1"> <thead> <tr> <th colspan="6">Children stepped up from Early Help CSC</th> </tr> <tr> <th>Period</th> <th>Aug 20</th> <th>Sep 20</th> <th>Oct 20</th> <th>Nov 20</th> <th>Dec 20</th> </tr> </thead> <tbody> <tr> <td>For the month</td> <td>37</td> <td>21</td> <td>19</td> <td>27</td> <td>32</td> </tr> <tr> <td>YTD</td> <td>171</td> <td>192</td> <td>211</td> <td>238</td> <td>270</td> </tr> </tbody> </table> <p>Step-up and Step Down managers briefing session was scheduled for December 2020 however due to low attendance and IT set-up issues this session was cancelled and all areas of focus rescheduled for 11 February 2021.</p>	Children stepped up from Early Help CSC						Period	Aug 20	Sep 20	Oct 20	Nov 20	Dec 20	For the month	37	21	19	27	32	YTD	171	192	211	238	270		
Children stepped up from Early Help CSC																															
Period	Aug 20	Sep 20	Oct 20	Nov 20	Dec 20																										
For the month	37	21	19	27	32																										
YTD	171	192	211	238	270																										

Getting the basics right – the quality and timeliness of assessments, planning and interventions for children in need of help and protection

RAG Update

Ref	Actions	Leads and resource	Timescales	Impact to be achieved/ KPIs/ How do we know?	Progress	30 Nov	Jan 2021
7	Review and update the sufficiency strategy to ensure that there are sufficient placements available that meet individual children’s needs, which are best value, in the locality.	Head of Commissioning	31 March 2021	Children are placed in primarily family settings which meet their needs and are locally based to ensure that they can continue with their school and maintain their relationships with friends and family. Reduction in the number of children who have to move because placements are sought in an emergency and do not meet individual needs.	<ul style="list-style-type: none"> Draft sufficiency strategy with ELT for review. As part of trnasofrmation programme, placements team has been fully recruited to. 		

Voice of the child and their family

RAG Update

Ref	Actions	Leads and resource	Timescales	Impact to be achieved/ KPIs/ How do we know?	Progress	30 Nov	Current																																																																																																																																													
8	CIN/ CP and the SQA services collectively identify different ways they can facilitate more children and young people contributing to their CIN/CP plan and attending their reviews	Review Service Manager and Commissioning Manager	27 November 2020	<p>Increase in the physical attendance of children and young people aged 4+ from 10.2% (YTD 2019/2020) at their reviews as measured and reported on by the Reviewing Service Manager.</p> <p>Increase the input of children and aged young people who provide input directly, via an advocate or none verbally from 9% (YTD 2019/2020). As measured and reported on by the Reviewing Service Manager.</p>	<p>Quarterly update of children who attend their CLA reviews - TPR</p> <table border="1"> <thead> <tr> <th colspan="11">Participation of children in their CLA Review (%)</th> </tr> <tr> <th>Method</th> <th>Apr</th> <th>May</th> <th>Jun</th> <th>Jul</th> <th>Aug</th> <th>Sep</th> <th>Oct</th> <th>Nov</th> <th>Dec</th> <th></th> </tr> </thead> <tbody> <tr> <td>% of children who participated</td> <td>100</td> <td>100</td> <td>91</td> <td>96</td> <td>95</td> <td>100</td> <td>86</td> <td>92</td> <td>93</td> <td></td> </tr> <tr> <td>% of children under 4yrs at time of review</td> <td>33</td> <td>20</td> <td>27</td> <td>20</td> <td>23</td> <td>4.3</td> <td>20</td> <td>25</td> <td>21</td> <td></td> </tr> <tr> <td>% who attended & spoke for self</td> <td>70</td> <td>65</td> <td>82</td> <td>32</td> <td>77</td> <td>65</td> <td>69</td> <td>67</td> <td>86</td> <td></td> </tr> <tr> <td>% attended but advocate spoke on their behalf</td> <td>0</td> <td>0</td> <td>0</td> <td>0</td> <td>0</td> <td>0</td> <td>0</td> <td>4</td> <td>0</td> <td></td> </tr> <tr> <td>% who attended, communicated non-verbally</td> <td>0</td> <td>0</td> <td>0</td> <td>0</td> <td>5</td> <td>4</td> <td>0</td> <td>0</td> <td>0</td> <td></td> </tr> <tr> <td>% an advocate spoke on their behalf but child did not</td> <td>19</td> <td>10</td> <td>0</td> <td>40</td> <td>9</td> <td>30</td> <td>3</td> <td>21</td> <td>7</td> <td></td> </tr> <tr> <td>% Child did not attend but used other medium to participate</td> <td>11</td> <td>25</td> <td>9</td> <td>24</td> <td>5</td> <td>0</td> <td>14</td> <td>0</td> <td>0</td> <td></td> </tr> </tbody> </table> <table border="1"> <thead> <tr> <th>My Review My View</th> <th>Q2</th> </tr> </thead> <tbody> <tr> <td>Total completing</td> <td>14</td> </tr> <tr> <td>Aged 4-7</td> <td>3</td> </tr> <tr> <td>First review</td> <td>1</td> </tr> </tbody> </table> <p>NYAS Dashboard Data – Awaiting the Q2 report to update figures below The targeted number of referrals per quarter is 25, in Q1 there was a 56% increase, discounting the Rights sessions</p> <table border="1"> <thead> <tr> <th>NYAS Dashboard</th> <th colspan="3">Q1</th> <th colspan="3">Q2</th> <th rowspan="2">Total</th> <th rowspan="2">% of annual target</th> </tr> <tr> <th>Category</th> <th>Apr</th> <th>May</th> <th>Jun</th> <th>Jul</th> <th>Aug</th> <th>Sep</th> </tr> </thead> <tbody> <tr> <td>Issue based Advocacy</td> <td>12</td> <td>11</td> <td>16</td> <td>TBC</td> <td>TBC</td> <td>TBC</td> <td>39</td> <td>39%</td> </tr> <tr> <td>Rights sessions</td> <td>9</td> <td>8</td> <td>1</td> <td>TBC</td> <td>TBC</td> <td>TBC</td> <td>18</td> <td>N/A</td> </tr> </tbody> </table> <ul style="list-style-type: none"> Canvassed the views of all children on how best to contribute. Current referrals with NYAS to advocate for children has been maintained through Covid-19. In addition, particularly in the light of the Adoption & Children (Coronavirus) (Amendment) 	Participation of children in their CLA Review (%)											Method	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec		% of children who participated	100	100	91	96	95	100	86	92	93		% of children under 4yrs at time of review	33	20	27	20	23	4.3	20	25	21		% who attended & spoke for self	70	65	82	32	77	65	69	67	86		% attended but advocate spoke on their behalf	0	0	0	0	0	0	0	4	0		% who attended, communicated non-verbally	0	0	0	0	5	4	0	0	0		% an advocate spoke on their behalf but child did not	19	10	0	40	9	30	3	21	7		% Child did not attend but used other medium to participate	11	25	9	24	5	0	14	0	0		My Review My View	Q2	Total completing	14	Aged 4-7	3	First review	1	NYAS Dashboard	Q1			Q2			Total	% of annual target	Category	Apr	May	Jun	Jul	Aug	Sep	Issue based Advocacy	12	11	16	TBC	TBC	TBC	39	39%	Rights sessions	9	8	1	TBC	TBC	TBC	18	N/A		
Participation of children in their CLA Review (%)																																																																																																																																																				
Method	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec																																																																																																																																											
% of children who participated	100	100	91	96	95	100	86	92	93																																																																																																																																											
% of children under 4yrs at time of review	33	20	27	20	23	4.3	20	25	21																																																																																																																																											
% who attended & spoke for self	70	65	82	32	77	65	69	67	86																																																																																																																																											
% attended but advocate spoke on their behalf	0	0	0	0	0	0	0	4	0																																																																																																																																											
% who attended, communicated non-verbally	0	0	0	0	5	4	0	0	0																																																																																																																																											
% an advocate spoke on their behalf but child did not	19	10	0	40	9	30	3	21	7																																																																																																																																											
% Child did not attend but used other medium to participate	11	25	9	24	5	0	14	0	0																																																																																																																																											
My Review My View	Q2																																																																																																																																																			
Total completing	14																																																																																																																																																			
Aged 4-7	3																																																																																																																																																			
First review	1																																																																																																																																																			
NYAS Dashboard	Q1			Q2			Total	% of annual target																																																																																																																																												
Category	Apr	May	Jun	Jul	Aug	Sep																																																																																																																																														
Issue based Advocacy	12	11	16	TBC	TBC	TBC	39	39%																																																																																																																																												
Rights sessions	9	8	1	TBC	TBC	TBC	18	N/A																																																																																																																																												

Voice of the child and their family						RAG Update	
Ref	Actions	Leads and resource	Timescales	Impact to be achieved/ KPIs/ How do we know?	Progress	30 Nov	Current
9	Feedback from parents: (a) Contact is made with parents on cases open 3-6 months to identify the barriers to their understanding of why their children are on a plan, what needs to change to address risks and get their feedback on social work support. (b) Follow up on parents who did not know why they were on a plan to see if their understanding has changed (c) Repeat in 6 months	AD Frontline Practice and Improvement, Service Coordinators	December 2020	Increased feedback from parents who have been involved in their plan and know what they need to do and the barrier they face to provide a baseline to measure against	Regs, NYAS provided a further 18 Rights Sessions to children and young people. (a) Parent participation is an area that needs to be progressed to drive participation and engagement. Given the virtual nature of Practice Learning Week in November 2020, parent participation wasn't as prominent in previous PLWs. (b) Part of participation strategy (c) Part of participation strategy		
10	Complete a wider review of participation for children in need of help and protection and embed engagement of frontline staff	Participation Lead	30 November 2020	Increased feedback from children and families who feel they have been listened to and understand why they are being contacted by the Trust. Increased participation of children in their plans and reviews.	<ul style="list-style-type: none"> COVID19, social distancing, staff turnover and attendance have all impacted the development of the participatory CP conference model introduced earlier this year. An online training package on direct work and safety planning to support this approach is currently being rolled out across the Trust in place of face to face training previously held. Collaborative workstreams have completed the wider review and findings are being summarised by Head of QA. An updated participation strategy to go through governance processes before being shared wider and implemented across the Trust 		

Page 32

Embedding Public Law Outline- driving Early Permanency						RAG Update																																													
Ref	Actions	Leads and resource	Timescales	Impact to be achieved/ KPIs/ How do we know?	Progress	30 Nov	Current																																												
11	Rigorously drive the timeliness and quality of interventions with children through the PLO process (a) Fortnightly PLO meetings with JLT to progress individual children (b) Case Manager to model good practice	Head of Safeguarding and Family Support	February 2021	Ensure that parents are clear about the changes that are needed to safeguard children and that the relevant assessments and interventions are completed in a timely way (within 12 weeks) Early Permanence is achieved for children and their plans	(a) Capacity in Joint Legal Team to respond to requests for support which is resulting in delays going into court. (b) TSG Returns: <table border="1"> <thead> <tr> <th>PLO Numbers:</th> <th>Oct-20</th> <th>Nov-20</th> <th>Dec-20</th> </tr> </thead> <tbody> <tr> <td>Families</td> <td>12</td> <td>13</td> <td>TBC</td> </tr> <tr> <td>Children</td> <td>20</td> <td>24</td> <td>TBC</td> </tr> <tr> <td>Pending:</td> <td></td> <td></td> <td></td> </tr> <tr> <td>Families</td> <td>-</td> <td>1</td> <td>TBC</td> </tr> <tr> <td>Care proceedings:</td> <td></td> <td></td> <td></td> </tr> <tr> <td>Families</td> <td>45</td> <td>50</td> <td>TBC</td> </tr> <tr> <td>Children</td> <td>76</td> <td>83</td> <td>TBC</td> </tr> <tr> <td>To issue:</td> <td></td> <td></td> <td></td> </tr> <tr> <td>Families</td> <td>-</td> <td>4</td> <td>TBC</td> </tr> <tr> <td>Children</td> <td>-</td> <td>10</td> <td>TBC</td> </tr> </tbody> </table>	PLO Numbers:	Oct-20	Nov-20	Dec-20	Families	12	13	TBC	Children	20	24	TBC	Pending:				Families	-	1	TBC	Care proceedings:				Families	45	50	TBC	Children	76	83	TBC	To issue:				Families	-	4	TBC	Children	-	10	TBC		
PLO Numbers:	Oct-20	Nov-20	Dec-20																																																
Families	12	13	TBC																																																
Children	20	24	TBC																																																
Pending:																																																			
Families	-	1	TBC																																																
Care proceedings:																																																			
Families	45	50	TBC																																																
Children	76	83	TBC																																																
To issue:																																																			
Families	-	4	TBC																																																
Children	-	10	TBC																																																

Embedding Public Law Outline- driving Early Permanency						RAG Update	
Ref	Actions	Leads and resource	Timescales	Impact to be achieved/ KPIs/ How do we know?	Progress	30 Nov	Current
12	Deliver joint training from JLT and the Trust: <ul style="list-style-type: none"> • PLO • SW statement • Thresholds • Placement Orders 	JLT and AD Frontline Practice	March 2021	SWS present competently in court, are clear about thresholds and ensure early permanency for children	<ul style="list-style-type: none"> • Bitesize training commissioned as detailed in the training report to QP&I in December 2020. - Feedback from training (managers and SWs) was positive and agreement this should be made mandatory to improve understanding of court skills, thresholds and statement writing. • Next step is to arrange second session with Reading JLT. 		
13	Support staff to understand how permanency planning effectively drives permanence for children at an early stage.	Head of Service, Family Safeguarding	March 2021	SW understand that everyday counts for children to achieve stability and permanency for them to achieve their full potential	Permanency has been planned for the managers briefing session on 11 th February 2021		

Supervision and Management Oversight of Childrens Journey's						RAG Update																																				
Ref	Actions	Leads and resource	Timescales	Impact to be achieved/ KPIs/ How do we know?	Progress	30 Nov	Current																																			
14	All managers are clear about the supervision policy and adhere to its requirements of all children being supervised at least every 2 months (a) Conduct observations of 1-to-1's and dip samples of supervision files, closing the loop activity with social workers and identification and implementation of training needs (b) Review process for storing files	AD Frontline Practice and Improvement Head of S&QA, Heads of Service	30 October 2020	Children's plans are effectively driven through effective, reflective quality supervision. There is consistent and layered supervision visible on each child's record which demonstrates good decision making and improvements for the child <u>Target:</u> 95% of cases receive supervision with every staff member to have a minimum 9 personal supervisions within any rolling 12 month period as measured in the weekly ECR. <table border="1" data-bbox="1261 1155 1869 1333"> <thead> <tr> <th></th> <th>% of Supervisions</th> <th>No. of Supervisions</th> </tr> </thead> <tbody> <tr> <td>Sep 2020</td> <td>60%</td> <td>7</td> </tr> <tr> <td>Nov 2020</td> <td>75%</td> <td>7</td> </tr> <tr> <td>Jan 2021</td> <td>80%</td> <td>8</td> </tr> <tr> <td>Mar 2021</td> <td>95%</td> <td>9</td> </tr> </tbody> </table> <u>Baseline 10/08/2020 ECR:</u> 50.8% children with a supervision in timescale Average 7.4 supervisions in last 12 months		% of Supervisions	No. of Supervisions	Sep 2020	60%	7	Nov 2020	75%	7	Jan 2021	80%	8	Mar 2021	95%	9	(a) We now have compliance with regards to compliance of supervisions completed in time. <ul style="list-style-type: none"> • Next steps are auditing some 1-2-1 sessions to assess quality. • Updated supervision forms currently being sampled and tested before being launched wider. • Work to update ICS scheduled. <table border="1" data-bbox="2092 1176 2686 1438"> <thead> <tr> <th>% of Supervisions completed in time</th> <th>26 Oct</th> <th>30 Nov</th> <th>31 Dec</th> </tr> </thead> <tbody> <tr> <td>Assessment Teams</td> <td>6.6%</td> <td>0.0%</td> <td>0.0%</td> </tr> <tr> <td>Safeguarding & FS</td> <td>85.2%</td> <td>80.0%</td> <td>74.7%</td> </tr> <tr> <td>CLA & Support Services (incl. CWD and CL)</td> <td>83.9%</td> <td>83.6%</td> <td>94.7%</td> </tr> <tr> <td>Total</td> <td>79.2%</td> <td>78.1%</td> <td>79.7%</td> </tr> </tbody> </table> (b) Storing files still to be done	% of Supervisions completed in time	26 Oct	30 Nov	31 Dec	Assessment Teams	6.6%	0.0%	0.0%	Safeguarding & FS	85.2%	80.0%	74.7%	CLA & Support Services (incl. CWD and CL)	83.9%	83.6%	94.7%	Total	79.2%	78.1%	79.7%		
	% of Supervisions	No. of Supervisions																																								
Sep 2020	60%	7																																								
Nov 2020	75%	7																																								
Jan 2021	80%	8																																								
Mar 2021	95%	9																																								
% of Supervisions completed in time	26 Oct	30 Nov	31 Dec																																							
Assessment Teams	6.6%	0.0%	0.0%																																							
Safeguarding & FS	85.2%	80.0%	74.7%																																							
CLA & Support Services (incl. CWD and CL)	83.9%	83.6%	94.7%																																							
Total	79.2%	78.1%	79.7%																																							
15	All managers are supported to understand how to consistently and effectively implement the expectations around management oversight; to drive planning for children and families and give clear direction to staff. Development of busy managers guide to management oversight	Heads of Service	30 October 2020	<u>Target:</u> Management oversight is present on 50% of cases in the last month (based on case notes only) <u>Baseline 10/08/2020 ECR: 38.1%</u>	MO covered in management briefing sessions and performance is as follows: <table border="1" data-bbox="2092 1627 2433 1795"> <thead> <tr> <th>Month</th> <th>Cases with MO</th> </tr> </thead> <tbody> <tr> <td>Sep 20</td> <td>45.0%</td> </tr> <tr> <td>26 Oct 20</td> <td>88.0%</td> </tr> <tr> <td>30 Nov 20</td> <td>89.2%</td> </tr> <tr> <td>31 Dec 20</td> <td>89.1%</td> </tr> </tbody> </table>	Month	Cases with MO	Sep 20	45.0%	26 Oct 20	88.0%	30 Nov 20	89.2%	31 Dec 20	89.1%																											
Month	Cases with MO																																									
Sep 20	45.0%																																									
26 Oct 20	88.0%																																									
30 Nov 20	89.2%																																									
31 Dec 20	89.1%																																									

Implementation of Contextual Safeguarding						RAG Update	
---	--	--	--	--	--	------------	--

Ref	Actions	Leads and resource	Timescales	Impact to be achieved/ KPIs/ How do we know?	Progress	30 Nov	Current																					
16	Develop a multi-agency contextual safeguarding team to undertake prevention/assessment /planning and interventions for children who are being exploited sexually and criminally and through PREVENT, modern day slavery and trafficking See separate PID	AD Frontline Practice and Improvement and Head of Service MASH, Referral, Assessment and YOT.	31 March 2021	Risk is reduced for vulnerable children and young people	<ul style="list-style-type: none"> As part of Phase 1 - recruited CE Coordinator in the front door. Project team set up to deliver a contextual safeguarding team in Slough. Desktop research has been undertaken of models across the country and review of relevant SCRs and SPRs to understand learning. Mapped out different models of delivery and working up a final model for SCST. 																							
17	Improve the quality of RHI and intelligence gathering to identify hotspots: (a) Reinstate daily missing meetings with TVP (b) Review the current offer for RHI to ensure there is an independent interview following all missing episodes (c) Ensure MO after each missing episode (d) Undertake mapping of information gleaned	Heads of Service Referral and Assessment	31 March 2021	Through the MACE achieve a strong triangulation of information relating to CE, missing, exploitation and trafficked children/ YP and effective use of this information to keep individuals safe and plan both strategic and operational actions 100% of young people missing are offered a RHI for each episode with an 80% take up rate. Baseline: 50% of children missing from care ytd who have an independent return interview within timescale (July 2020 TPR)	(a) Daily missing meetings taking place with TVP. (b) Review of current offer to be completed <table border="1"> <thead> <tr> <th>RHIs</th> <th>Jul</th> <th>Aug</th> <th>Sep</th> <th>Oct</th> <th>Nov</th> <th>Dec</th> </tr> </thead> <tbody> <tr> <td>In Slough</td> <td>N/A</td> <td>N/A</td> <td>0</td> <td>TBC</td> <td>TBC</td> <td>TBC</td> </tr> <tr> <td>Out of Borough</td> <td>0</td> <td>40%</td> <td>75%</td> <td>TBC</td> <td>TBC</td> <td>TBC</td> </tr> </tbody> </table> (c) MO recorded after each missing episode. (d) Research been undertaken with OLAs around RHIs outside of borough to ensure best practice in slough.	RHIs	Jul	Aug	Sep	Oct	Nov	Dec	In Slough	N/A	N/A	0	TBC	TBC	TBC	Out of Borough	0	40%	75%	TBC	TBC	TBC		
RHIs	Jul	Aug	Sep	Oct	Nov	Dec																						
In Slough	N/A	N/A	0	TBC	TBC	TBC																						
Out of Borough	0	40%	75%	TBC	TBC	TBC																						
18	Explore/ develop an edge of care service to meet the needs of children and young people at risk of harm from the trio of vulnerabilities including, mental health, substance misuse and domestic abuse.	AD Frontline Practice and Review, ELT	31 March 2021	There is a reduction in the number of DA cases where children are present or involved There is a reduction in the number of cases where substance misuse is a factor There are better outcomes for cases where mental health factors are involved.	Being mapped with contextual safeguarding team development to prevent children coming into care																							

Page 34

Stability of the Workforce							RAG Update
Ref	Actions	Leads and resource	Timescales	Impact to be achieved/ KPIs/ How do we know?	Progress and	30 Nov	Current
19	Organise a whole service day with staff to all key back to basics practice delivered in Cake and Learn and Manager's Briefings	Assistant Director Frontline Practice and Improvement	TBC	Case file recording shows a wide range of direct work tools used by social workers to engage children ensuring the voice of the child is heard within their own care planning as evidence by dip sampling which continues beyond the time of the rapid improvement plan.	<ul style="list-style-type: none"> Whole service day planning initiated however there are significant challenges around venue and maintaining social distancing. Looking to deliver a series of regular, smaller sessions run more than once for all staff to attend starting in January 2021 – See action 20 		
20	Develop a suite of bite size workshops/Managers briefings for staff clearly identifying standards and expectations of the workforce in terms of frontline practice, and lessons from audits and reviews	Assistant Director Frontline Practice and Improvement / HOS	30 March 2021	Increased feedback from parents who feel staff have understood their concerns and made a difference for them.	<ul style="list-style-type: none"> Managers briefings, staff sessions and Cake and learn sessions mapped into a single schedule. Staff sessions to be booked in. Clear instructions to all staff around who needs to attend which session to be issued 		
21	Coaching of new and existing managers (elements covered by staff collage) and ensuring all new	Heads of Service	31 March 2021	Target: Management oversight is present on 50% of cases	<ul style="list-style-type: none"> Training set-up 		

Stability of the Workforce							RAG Update																				
Ref	Actions	Leads and resource	Timescales	Impact to be achieved/ KPIs/ How do we know?	Progress and	30 Nov	Current																				
	managers have a clear understanding of management oversight expectations including 'Need to Know' protocols in their local induction			in the last month (based on case notes only) Baseline 10/08/2020 ECR: 38.1% 45% - September 2020 50% - October 2020																							
22	Send regular pulse survey's out to all staff to check understanding and knowledge base of Learning and development	Communications Officer	Ongoing from 2 October 2020	Staff report through pulse survey they are more aware of the support available to them and the majority of respondents report they have consulted with at least 1 individual for support	<ul style="list-style-type: none"> Pulse surveys are being mapped into an overall formal comms plan to ensure it aligns with Trust wide communications approach. The plan will be added once approved 																						
23	Develop an online knowledge Hub providing access to a range of information and tools for practitioners.	Head of S&QA, Practice Lead	17 December 2020	Staff feedback they are able to easily access key information and tools and this has helped them improve their practice.	<ul style="list-style-type: none"> Knowledge Hub has been set up on the intranet but needs to be populated further. Work programme being developed to promote refreshed Knowledge Hub with all staff. 																						
24	Ensure there is sufficient social work resource for allocation of children, so caseloads are reduced and in line with the agreed targets	Assistant Director Frontline Practice and Improvement and Head of HR and OD	31 March 2021	<p>Caseloads are reduced enabling more effective interventions with children, children are in the right service and the right time and turnover of staff decreases</p> <p>Average Caseload targets:</p> <ul style="list-style-type: none"> Referral and Assessment: 25 Safeguarding and Family Support: 22 CLA: 18 <p>Baseline: 10/08/2020 ECR</p> <ul style="list-style-type: none"> Referral and Assessment: 25.75 Safeguarding and Family Support: 22.18 (includes Court but not Innovate) CLA: 14.81 <p>100% cases are allocated each month as measured by the weekly ECR. Baseline 10/08/2020 – 2 unallocated cases</p>	<table border="1"> <thead> <tr> <th colspan="4">Average Caseload at end of Month</th> </tr> <tr> <th>Service Area</th> <th>26 Oct</th> <th>30 Nov</th> <th>31 Dec</th> </tr> </thead> <tbody> <tr> <td>Referral and Assessment</td> <td>28.4</td> <td>24.0</td> <td>24.2</td> </tr> <tr> <td>Safeguarding and Family Support</td> <td>19.1</td> <td>18.8</td> <td>20.0</td> </tr> <tr> <td>Children Looked After and Support Services (incl. CWD and CL)</td> <td>24.0</td> <td>21.4</td> <td>22.3</td> </tr> </tbody> </table>	Average Caseload at end of Month				Service Area	26 Oct	30 Nov	31 Dec	Referral and Assessment	28.4	24.0	24.2	Safeguarding and Family Support	19.1	18.8	20.0	Children Looked After and Support Services (incl. CWD and CL)	24.0	21.4	22.3		
Average Caseload at end of Month																											
Service Area	26 Oct	30 Nov	31 Dec																								
Referral and Assessment	28.4	24.0	24.2																								
Safeguarding and Family Support	19.1	18.8	20.0																								
Children Looked After and Support Services (incl. CWD and CL)	24.0	21.4	22.3																								
25	<p>(a) Review and refresh the recruitment strategy to look at different opportunities to attract and recruit permanent staff including working with vendors to attract and recruit permanent staff to the Trust.</p> <p>(b) Embed learning from exit interviews to support recruitment and development of permanent staff.</p>	Head of HR and OD	31 March 2021	<p>Reduce the number of changes of social workers or children</p> <p>25% or less of children looked after (for 12 months or more) have two or more changes of social worker in 12 months (Baseline 36.3% ytd July 2020 TPR)</p>	<p>(a) % of children looked after (for 12 months or more) have two or more changes of social worker in 12 months - TPR</p> <table border="1"> <thead> <tr> <th colspan="2">CLA with 2 or more changes of social worker in 12m</th> </tr> </thead> <tbody> <tr> <td>Sep 20</td> <td>50.0%</td> </tr> <tr> <td>Oct 20</td> <td>48.9%</td> </tr> <tr> <td>Nov 20</td> <td>41.5%</td> </tr> <tr> <td>Dec 20</td> <td>40.3%</td> </tr> </tbody> </table> <p>(b) Virtual open evening explored</p>	CLA with 2 or more changes of social worker in 12m		Sep 20	50.0%	Oct 20	48.9%	Nov 20	41.5%	Dec 20	40.3%												
CLA with 2 or more changes of social worker in 12m																											
Sep 20	50.0%																										
Oct 20	48.9%																										
Nov 20	41.5%																										
Dec 20	40.3%																										
26	Benchmark benefit packages and flexible working arrangements to support high performing agency staff to go permanent.	Head of HR and OD	17 December 2020	75% of frontline case holding staff are permanent by March 2021	<p>HR Dashboard: % of frontline case holding staff</p> <table border="1"> <thead> <tr> <th>Jul</th> <th>Aug</th> <th>Sep</th> <th>Oct</th> <th>Nov</th> <th>Dec</th> </tr> </thead> <tbody> <tr> <td>52.1%</td> <td>53.5%</td> <td>49.3%</td> <td>54.9%</td> <td>52.1%</td> <td>TBC</td> </tr> </tbody> </table>	Jul	Aug	Sep	Oct	Nov	Dec	52.1%	53.5%	49.3%	54.9%	52.1%	TBC										
Jul	Aug	Sep	Oct	Nov	Dec																						
52.1%	53.5%	49.3%	54.9%	52.1%	TBC																						
27	Collate a list of all training to identify how its	Head of HR and OD	30 October	75% of frontline case holding staff are permanent	<ul style="list-style-type: none"> Training analysis completed by Head of HR and OD for 																						

Stability of the Workforce						RAG Update	
Ref	Actions	Leads and resource	Timescales	Impact to be achieved/ KPIs/ How do we know?	Progress and	30 Nov	Current
	delivered, who delivers it, which is mandatory, how long it is, etc. to support with workforce development and retention		2020	by March 2021	Transformation Programme Board. – Feedback noted further work required <ul style="list-style-type: none"> Workforce development work underway with draft workforce strategy developed and next steps are to map out all training across all roles in the Trust to revise requirements and develop bespoke training offers for staff. 		
28	All new starters to receive both a corporate and local inductions to support the retention of staff and managers. This will be through use of the induction documents available on the intranet (with hard copies in team folders).	Head of HR and OD and Heads of Service/ Service Coordinators	Ongoing as of July 2020	100% of new starters receive an effective induction	<ul style="list-style-type: none"> Local induction trialed with innovate teams and now embedded across the service with service leads speaking at rolling induction programme. Corporate inductions are taking place. MASH Local Induction drafted and going through ELT governance. 		
29	Strengthen communications to staff through better use of the available TV screens and other methods and evidence impact of change.	Assistant Director Frontline Practice and Improvement , Project Manager	1 February 2021 (was due 9 October 2020)	Staff are more engaged and feedback positively in the health check surveys. Improved outcomes for children and young people through improved intervention from staff who are better informed.	TV screens requested at new office building to support this communications requirement. Office move delayed until end of Jan 2021.		

Quality Assurance						RAG Update	
Ref	Actions	Leads and resource	Timescales	Impact to be achieved/ KPIs/ How do we know?	Progress	30 Nov	Current
30	<p>Review and refresh the Quality Assurance Framework to be reviewed, to ensure that it includes all key activity across the child's journey in terms of data performance, auditing, dip sampling and feedback from children and families</p> <p>(a) Project Worker/ Team Manager to be appointed to embed the QAF</p> <p>(b) Develop an audit schedule which covers audit activity across the whole child's journey. This will be embedded within the framework and looking to secure funding through DfE for post to manage this.</p>	AD QUIP	30 December 2020	<p>A comprehensive framework to support the driving of continuous improvement of frontline practice, effective analysis timeliness and quality of practice in Slough</p> <p>To ensure that the work with children and their family is outcome focused and the distance travelled can be measured to avoid drift and delay</p>	<ul style="list-style-type: none"> Recruitment for additional QA capacity Benchmarking of current QA framework against good exemplars elsewhere to support refresh Funding obtained from DfE 		
31	Trust standards to be reviewed in line with ongoing developments and improvement. – aim to have an online accessible version for all staff.	Head of S&QA	31 January 2021	<p>Staff state they know about practice standards and guides and use them in pulse surveys and supervisions</p> <p>At least 35% of cases audited are rates as good and the number of cases rated inadequate is less than 10% as measured in the quarterly audit reports</p>	TBC		
32	Close the loop on practice standards and the outcomes framework to define how they link together, and launch in practice learning week	AD Frontline Practice and Improvement , Assistant Director of QIPP	16 November 2020	<p>Staff state they know about practice standards and guides and use them in pulse surveys and supervisions</p> <p>At least 35% of cases audited are rates as good and the number of cases rated inadequate is less than 10% as measured in the quarterly audit reports</p>	<ul style="list-style-type: none"> Practice week held on 16th November with a focus on neglect. Sessions were largely held virtually, which did impact on the collaborative aspect of previous PLW's The outcomes framework is currently being through the front door to test the form before being launched wider at the practice learning week. 		
33	Embed links to guides for staff within the corporate induction and on the intranet.	Communications officer	Quarterly as of August 2020	<p>Staff state they know about practice standards and guides and use them in pulse surveys and supervisions</p> <p>At least 35% of cases audited are rates as good and the number of cases rated inadequate is less than 10% as measured in the quarterly audit reports</p>	<ul style="list-style-type: none"> Links circulated to all staff and activity to embed this into regular communications underway. 		

This page is intentionally left blank

Yellow = improved on last month

Amber = as good as stat neighbour/SE average,
Green = better than stat neighbour/SE average,
Red = worse than stat neighbour/SE average

Performance Measure	Definitions	Target	Tolerance	Direction of travel	Baseline	Previous Month	Current Month	Full quarter	Annual return	Benchmarking (annual or quarterly or as at 31st March)					
					Apr-20	Nov-20	Dec-20	Slough 2020/21 Q3	Slough 2019/20	SN 2019/20	SE 2019/20	ENG 2019/20	Bexley 2019/20	Kingston 2019/20	Redbridge 2019/20
Front Door															
Contacts received and completed	No. of contacts received in month that have been finalised	n/a	n/a	n/a	751	897	783	2654	12785	n/a	n/a	n/a	n/a	n/a	n/a
Contacts received rate per 10,000	-	n/a	n/a	n/a	174.2	208.1	181.6	615.6	2965.5	n/a	n/a	n/a	n/a	n/a	n/a
% of contacts leading to referral	Proportion of contacts received in month, where the outcome was to progress to referral	n/a	n/a	n/a	25.8%	34.9%	34.0%	32.7%	19.3%	n/a	n/a	n/a	n/a	n/a	n/a
Contacts: decision and authorisation within 1 workday	Proportion of contacts received in month, where the contacts were finalised within 1 working day	95.0%	5.0%	↑ Higher is better	92.3%	95.6%	96.4%	n/a	95.1%	n/a	n/a	n/a	n/a	n/a	n/a
Referrals received	No. of referrals received in month	n/a	n/a	n/a	208	325	272	916	2540	5066	114440	642890	2795	1411	5212
Referrals received per 10,000	-	n/a	n/a	n/a	48.2	75.4	63.1	220.8	596	572.2	535.8	544.5	489.6	357	683.6
% of referrals received that were re-referrals (within 12 months)	Proportion of referrals received where the previous referral start date is within 12 months of the latest referral start date	22.0%	1.0%	↓ Lower is better	16.3%	19.7%	12.9%	15.9%	15.4%	22.0%	25.1%	22.6%	17.9%	15.0%	19.0%
Assessments completed	No. of assessments that have been completed in month by the Referral & Assessment Service	n/a	n/a	n/a	349	313	319	1121	2484	4791	98170	568600	3023	2572	3816
Assessments completed rate per 10,000	-	n/a	n/a	n/a	81.0	72.6	74.0	260.0	576.2	568.7	561	553.6	529.5	650.7	500.5
% of assessments completed and authorised within 45 working days	Proportion of assessments that have been completed and authorised by the Referral & Assessment Service in month that were completed within 45 working days	90.0%	5.0%	↑ Higher is better	59.0%	79.2%	84.6%	79.8%	74.9%	84.8%	82.4%	83.1%	92.0%	95.0%	97.0%
Section 47s initiated	No. of section 47s started in month	n/a	n/a	n/a	38	181	102	488	1297	1722	33690	201170	685	648	1562
Section 47s initiated rate per 10,000	-	n/a	n/a	n/a	8.8	42.0	23.7	113.2	300	198	172	168	12	163.9	204.9
% of Section 47s which led to Initial CP Conference in month (children not already CP or CLA)	Proportion of section 47s that actually led to an ICPC, where the child was not already subject to a CPP	n/a	n/a	n/a	39.6%	20.5%	26.0%	21.6%	31.0%	35.9%	35.3%	38.5%	40.6%	42.4%	26.7%
CP, CIN and Court															
Children subject to a child in need (S17) plan	No. of children specifically subject to a CIN (S17) plan	n/a	n/a	n/a	475	549	563	563	485	n/a	n/a	n/a	n/a	n/a	n/a
% of children subject to CIN (S17) plans for over 12 months	Proportion of children subject to a CIN (S17) plan that have been on that plan for more than 12 months	n/a	n/a	n/a	20.0%	19.1%	20.1%	20.1%	21.1%	n/a	n/a	n/a	n/a	n/a	n/a
% of CIN visits within timescales	Proportion of children subject to a CIN (S17) plan that have been seen within timescales	90.0%	5.0%	↑ Higher is better	87.4%	93.4%	89.1%	n/a	72.7%	n/a	n/a	n/a	n/a	n/a	n/a
Number of children subject to a CP Plan	No. of children subject to a child protection plan	n/a	n/a	n/a	311	355	346	346	301	409	8110	51510	120	129	250
Number of children subject to a CP Plan per 10,000	-	n/a	n/a	n/a	72.1	82.3	80.3	80.3	69.8	44.6	41.2	42.8	21	33	33
% of CP Plans started that were repeat plans	Proportion of children that became subject to a child protection plan, which was a second or subsequent plan regardless of timescales	12.0%	2.0%	↓ Lower is better	0.0%	9.5%	25.0%	11.5%	18.3%	20.9%	23.4%	21.9%	12.4%	30.9%	16.2%
% of CP Plans started that were repeat plans within 2 years	Proportion of children that became subject to a child protection plan, which was a second or subsequent plan within 2 years of the previous plan ending	10.0%	2.0%	↓ Lower is better	0.0%	2.9%	14.3%	7.3%	2.8%	n/a	n/a	n/a	n/a	n/a	n/a
% of ended CP Plans that ended after 2+ years	Proportion of Child Protection Plans that ended which were open for 2 or more years	5.0%	1.0%	↓ Lower is better	5.6%	6.3%	0.0%	n/a	5.1%	4.4%	5.0%	3.6%	n/a	n/a	n/a
% of children subject to a CP Plan for 2 years or more	Proportion of children currently subject to a Child Protection Plan, where the plan has been open for more than 2 or more years	2.0%	0.5%	↓ Lower is better	1.3%	1.7%	1.7%	1.7%	1.7%	2.8%	2.4%	2.1%	n/a	0.0%	n/a
% of ICPCs held within statutory timescale (within 15 days of S47)	Proportion of ICPCs that took place within 15 working days of the section 47 starting	92.0%	5.0%	↑ Higher is better	43.3%	70.5%	70.0%	63.9%	40.2%	80.6%	75.9%	77.7%	78.8%	94.9%	95.4%
% of RCPCs held within timescale	Proportion of children that have been subject to a Child Protection Plan for 3 months or more that have had a review within timescales	95.0%	0.0%	↑ Higher is better	76.3%	68.7%	64.7%	64.7%	70.1%	92.2%	89.5%	91.5%	93.5%	100.0%	98.8%
% of children subject to a CP Plan visited in the last 2 weeks (all ages)	Proportion of children that are subject to a Child Protection Plan at the end of the month that have been seen in the last two weeks	92.0%	5.0%	↑ Higher is better	65.7%	86.4%	95.8%	95.8%	87.3%	n/a	n/a	n/a	n/a	n/a	n/a
% of children subject to a CP Plan visited in the last 2 weeks and seen alone (aged 3+) at their latest or penultimate visit	Proportion of children aged 3 or over that are subject to a Child Protection Plan at the end of the month that have been seen alone in the last two weeks	n/a	n/a	n/a	47.4%	77.7%	74.7%	74.7%	67.9	n/a	n/a	n/a	n/a	n/a	n/a
Children looked after															
Number of full time children looked after (CLA) at month end	No. of full time children looked after (not including those subject to short breaks)	n/a	n/a	n/a	191	210	215	215	196	595	10450	80080	222	125	237
Rate of full time Children looked after per 10,000	-	n/a	n/a	n/a	44.3	48.7	49.9	49.9	45.0	63.3	53.0	67.0	39.0	32.0	31.0
% of Children looked after in care for 2 or more years	Proportion of full time children looked after that have been in care for 2 or more years	n/a	n/a	n/a	44.5%	42.9%	42.3%	n/a	44.9%	n/a	n/a	n/a	n/a	n/a	n/a
% of CLA with 3 or more placements in the last year (12 months)	Proportion of full time children looked after that have had 3 or more placements in the last 12 months (excluding temporary/respite placements)	12.0%	3.0%	↓ Lower is better	15.7%	8.6%	7.0%	7.0%	11.0%	11.3%	12.0%	10.0%	12.0%	9.0%	8.0%
% of CLA in the same placement for 2 years or more (placement stability)	Proportion of full time children looked after aged under 16 that have been in care for at least 2.5 years and have been in the same placement for at least 2 years	75.0%	5.0%	↑ Higher is better	73.7%	86.0%	87.5%	87.5%	75.4%	65.5%	68.0%	69.0%	65.0%	78.0%	65.0%
% CLA at month end placed over 20 miles away	Proportion of full time children looked after that have entered care in the last 12 months, that have been placed more than 20 miles from their family home	25.0%	5.0%	↓ Lower is better	32.6%	30.2%	29.5%	n/a	29.0%	15.0%	26.0%	20.0%	16.0%	24.0%	18.0%
Children looked after who were seen alone at a statutory visit within timescales	Proportion of children looked after that have been seen alone within timescales	90.0%	5.0%	↑ Higher is better	70.3%	66.5%	67.7%	n/a	69.2%	n/a	n/a	n/a	n/a	n/a	n/a
% of CLA with up to date health checks	Proportion of children looked after, that have been in care for 12 months or more with an up to date health assessment	90.0%	2.0%	↑ Higher is better	96.2%	93.2%	90.8%	n/a	96.0%	90.7%	86.0%	86.0%	87.0%	95.0%	70.0%
% of CLA with up to date dental checks	Proportion of children looked after, that have been in care for 12 months or more with an up to date dental check	90.0%	2.0%	↑ Higher is better	77.4%	54.1%	52.5%	n/a	82.0%	87.9%	86.0%	86.0%	99.0%	99.0%	70.0%
% of IHAs within timescales (in month)	Proportion of children looked after that have been looked after for at least 20 working days, where the initial health assessment was completed within 20 working days	85.0%	5.0%	↑ Higher is better	33.3%	20.0%	0.0%	n/a	66.0%	n/a	n/a	n/a	n/a	n/a	n/a
Care leavers															
Care leavers, including eligible, relevant and former relevant young people (aged 19-21)	No. of care leavers aged 19-21	n/a	n/a	n/a	84	80	80	80	87	250	4750	29930	154	73	152
% of care leavers in education, employment or training (aged 19-21)	Proportion of care leavers aged 19-21 that are in education, training, or employment	70.0%	5.0%	↑ Higher is better	59.5%	48.0%	45.0%	45.0%	59.0%	52.4%	54.0%	52.0%	55.0%	51.0%	51.0%
% of care leavers in suitable accommodation (aged 19-21)	Proportion of care leavers aged 19-21 that are deemed to be in suitable accommodation	85.0%	5.0%	↑ Higher is better	85.7%	90.0%	91.0%	91.0%	79.0%	83.6%	91.0%	85.0%	90.0%	81.0%	79.0%
% of care leavers with a current Pathway Plan (16+)	Proportion of care leavers with an up to date pathway plan	95.0%	5.0%	↑ Higher is better	76.1%	68.1%	64.2%	n/a	65.7%	n/a	n/a	n/a	n/a	n/a	n/a
Demand and workforce															
Total open allocated caseload	Total referrals open to SCST	n/a	n/a	n/a	1454	1870	1834	1834	1589	3071	59950	389260	1757	977	2130
Child In Need rate per 10,000	DfE definition of "Child in Need" is any child open to children's social care	n/a	n/a	n/a	337.3	433.8	425.4	425.4	368.6	341.1	304.4	323.7	307.8	247.2	279.4
Average number of children allocated per social worker	Local measure of average number of children allocated per social worker	18.0	5 cases	↓ Lower is better	21.4	24.0	24.1	n/a	17.5	n/a	n/a	n/a	n/a	n/a	n/a

Yellow = improved on last month

Amber = as good as stat neighbour/ SE average,
 Green = better than stat neighbour/ SE average,
 Red = worse than stat neighbour/ SE average

Performance Measure	Definitions	Target	Tolerance	Direction of travel	Baseline	Previous Month	Current Month	Full quarter	Annual return	Benchmarking (annual or quarterly or as at 31st March)					
					Apr-20	Nov-20	Dec-20	Slough 2020/21 Q3	Slough 2019/20	SN 2019/20	SE 2019/20	ENG 2019/20	Bexley 2019/20	Kingston 2019/20	Redbridge 2019/20
Average caseload (qualified SW)	Average number of cases per child and family social worker (gathered through the Children's Social Work Workforce Census)	n/a	n/a	n/a	n/a	n/a	n/a	n/a	17.5	16.3	16.7	16.9	16	13.8	17.9
No. of children's referrals with supervision within timescales	No. of children with supervision on their file that has been completed within timescales (where the referral has been open for a minimum of 12 weeks)	n/a	n/a	n/a	437	959	1003	n/a	289	n/a	n/a	n/a	n/a	n/a	n/a
% of children's referrals with supervision within timescales	Proportion of children with supervision on their file that has been completed within timescales (where the referral has been open for a minimum of 12 weeks)	95.0%	5.0%	↑ Higher is better	32.7%	78.9%	80.8%	n/a	18.8%	n/a	n/a	n/a	n/a	n/a	n/a
No. of children's referrals with management oversight	No. of children with management oversight recorded on their file	n/a	n/a	n/a	419	1627	1630	n/a	451	n/a	n/a	n/a	n/a	n/a	n/a
% of children's referrals with management oversight	No. of children with management oversight recorded on their file	100.0%	3.0%	↑ Higher is better	31.3%	89.6%	90.8%	n/a	29.3%	n/a	n/a	n/a	n/a	n/a	n/a

SLOUGH BOROUGH COUNCIL

REPORT TO: Education and Children Service’s Scrutiny
DATE: 4th February 2021
CONTACT OFFICER: Betty Lynch, Safeguarding Partnership Manager
(For all Enquiries) 07821811386
WARD(S): ALL.

PART I
FOR COMMENT & CONSIDERATION

SAFEGUARDING PARTNERSHIP THRESHOLD DOCUMENT.

1. **Purpose of Report**

To inform members about what a threshold document is, why it is necessary, how it is used in practice and why it is important.

2. **Recommendation(s)/Proposed Action**

The Panel is requested to note the report.

3. **The Slough Joint Wellbeing Strategy, the JSNA and the Five Year Plan**

Children’s Well Being

3a. **Slough Joint Wellbeing Strategy Priorities**

This work supports the well being strategy priority:

“Protecting vulnerable children”

3b. **Five Year Plan Outcomes**

- *Slough children will grow up to be happy, healthy and successful*

4. **Other Implications**

(a) **Financial**

There are no financial implications in this report.

(b) **Risk Management**

There are no risk management issues.

(c) **Human Rights Act and Other Legal Implications**

There are no Human Rights Act implications.

(d) Equalities Impact Assessment

There are no equalities impact issues as the document applies to all children, equally.

5. Supporting Information

5.1 The safeguarding children threshold document is a technical tool which acts as a reference document for practitioners. It helps them to make professional judgements about whether they should make a safeguarding referral about children or whether there might be other options. The detail is helpful when a child's presentation does not clearly indicate that there may be a child protection concern. In all such events and in training and communications, practitioners are always encouraged to consult with social workers to seek advice. The document provides a range of examples of cases that will proceed to child protection enquiries, children in need, or those requiring early help. It helps busy practitioners to work this out, either by themselves or with their supervisors and managers. It is a multi-agency document with its root in the Children Act 1989 which requires Children's Social care services to publish eligibility criteria.

5.2 This document is currently being developed by the safeguarding partnership with many managers and practitioners from all agencies, including schools, working together to develop a concise reference tool. A new and helpful addition to this new version is that it is rooted in the UN convention on the rights of the child and makes it explicit that when making professional judgements about referral, practitioners are adhering to the legal rights of children and so not making subjective evaluations about the parents or carers. The final document will be agreed in March and will be widely published in early April. Training and communications will be developed to ensure practitioners are aware of the new document.

5.3 The work is led by Slough Safeguarding Partnership.

6. Comments of Other Committees

There are no comments from other committees.

7. Conclusion

The scrutiny committee is informed about the purpose and importance of the safeguarding partnership threshold document.

8. Appendices Attached

'A' - DRAFT Threshold document.

9. **Background Papers**

1. - Children act 1989,
2. - Children act 2004,
3. - Children and social work act 2017
- 4 - DfE: Working together to safeguarding children 2018

This page is intentionally left blank

DRAFT THRESHOLD WORKING DOCUMENT

February 2021

This page has not been changed from the original draft.

Levels of need			
Level 1: Not needing any interventions.			
<i>Need</i>	<i>Agencies providing support</i>	<i>Example indicators</i>	<i>What to do</i>
No additional support needed beyond that which is already available and provided by the school and health services.	Schools and nurseries, Early Years health visiting, school nursing, Young People's service. Voluntary and community sector.	Children making good overall progress in all areas of development broadly receiving appropriate universal services such as health care and education.	No action required.
Level 2: Needing help from one or more partners. www.sloughfamilyservices.org.uk			
<i>Need</i>	<i>Agencies providing support</i>	<i>Example indicators</i>	<i>What to do</i>
Children and young people with additional needs. Some require simple short term interventions. Some require a co-ordinated approach by multiple partners.	Services above may engage mental health services, substance misuse and/or other services to help the child and family to understand their needs and devise solutions.	Parental learning difficulties/poverty and debt, physical disability/long term health conditions/ chronic health conditions/poor hygiene/family without permanent accommodation/the child requires additional educational support//the family are asylum seekers/the child is a young carer/persistent unauthorised absences from school. Pre-disposing factors to exploitation, eg, loss of a significant adult, has lived, or is living with domestic abuse, poor school attendance, at risk of school exclusion, related behavioural problems.	Work with the child and family to understand the child's needs. Engage appropriate services to work with them. In cases involving multiple partners and increasing in complexity, make appropriate arrangements to share information and ensure services are co-ordinated and there is a clear plan. Complete the CE risk identification tool Check the link above to the Family Information Service to find out what services are available.
Level 3: Additional needs requiring specialist support			
<i>Need</i>	<i>Agencies providing support</i>	<i>Example indicators</i>	<i>What to do</i>
Children whose needs require specialist.	In addition to above; Young People's Service/ Youth Offending Team (YOT), Children's Social Care Services..	The child has a physical or mental health condition or disability which significantly affects their everyday functioning and access to education. High level of complex health needs or constant care needs. Offending behaviours. Exhibiting behaviours Indicating in interest in or early involvement with Crime or criminal gangs.(and parents capability unclear?)	Refer to appropriate specialist service YOT or Young People's Service. Complete the CE risk identification tool and refer.

Level 4: Acute and urgent need including child protection

Need	Agencies providing support	Example indicators	What to do
<p>Children requiring formal statutory intervention under section 47 of the Children Act, (i.e. requires child protection procedures) Victim or perpetrator of knife Involved in gangs, county lines.</p>	<p>Those already providing services, e.g. schools and colleges, GP. Children's services and social care will lead. Young people services, YOT</p>	<p>Children;</p> <ul style="list-style-type: none"> • who disclose abuse or harm • who are suffering or likely to suffer significant harm • whose parents are unable to provide care, for whatever reason • where physical, sexual or emotional abuse or neglect is suspected • may be suffering as a result of suspected fabricated illness • are at risk of sexual exploitation and trafficking. • are at risk of female genital mutilation (FGM) • are at risk of forced marriage and/or honour based violence • where there are allegations of harm by a person in a position of trust • who are in contact with persons who are considered to pose a risk to children • who are unaccompanied Asylum Seekers. • whose behaviour is so extreme they are at risk of removal from home e.g. control issues, risk taking, dangerous behaviour <p>Harmed by exploitation including knife crime, Gangs/county lines and/or sexual exploitation.</p> <ul style="list-style-type: none"> • as yet unborn and there is concern about Parental capability. <p>Concealed pregnancy.</p>	<p>Follow child protection procedures, Contact the Children's Trust and make a referral without delay.</p> <p>For exploitation: complete the CE risk tool AND MARF to make the referral</p>
<p>Young people who have committed an offence</p>	<p>Those already providing services, e.g. schools and colleges, GP. Police /court refer to YOT who will lead.</p>	<p>Young people who get into trouble with the police or are arrested, are charged with a crime and go to court and/ or are convicted of a crime and given a sentence.</p>	<p>Link to YOT here</p>

The rest of the document has been amended to incorporate the child's rights from the UN convention on the rights of the child. Level 1 is described as the expectations we have of parents/carers so this is a kind of baseline and reflects the assumptions we make in practice but we tend not to articulate them. .

Child's developmental needs: Health

<i>Every child's right</i>	Level 1 <i>Expectations of parents/carers</i>	Level 2	Level 3	Level 4
<p>Article 6: Life survival and development <i>Every child has the right to life, to thrive and develop to their full potential</i></p> <p>Article 23: Children with disabilities <i>Children with disabilities have a right to live a full life with support their families.</i></p>	<p>Parents pro-actively manage their child's health, and take up preventative screening and immunisations services. Parents respond to health problems without delay.</p>	<p>Parents not taking up screening and preventative health services, have been advised of the risks and health professionals have made every effort to encourage parents to take up these offers. Health professionals are assured that parents understand the risks and have taken an informed decision about this. Child's health and welfare not adversely impacted by parent's decisions. Parents take the child for medical consultation when there are health problems without delay. Excellent oral hygiene.</p>	<p>Parents are persistently refusing to take up screening and preventative health services and are refusing to take clinical advice and so are not informed of the risks. Health professionals are concerned about the health of the child, such as Failure To Thrive, inappropriate diet and unable to carry out an assessment to clarify this. Parents delay in seeking medical attention for the child. Poor oral hygiene and parents refuse to take the child for dental treatment.</p>	<p>Parents persistently refusing to take up preventative health services, and/or to seek medical/dental attention for the child and there is concern that the child is suffering or likely to suffer significant harm from a clinical condition. Factitious and Induced illness. Child suffering severe dental pain or suffering from infections because parents refusing to take the child for dental treatment. Non-organic Failure to Thrive.</p>
<p>Article 24: Health & Health Services</p>	<p>Parents/carers supporting the child to meet developmental milestones, including speech and language.</p>	<p>Delays in reaching developmental Milestones. Interventions are accepted and lead to improvements.</p>	<p>Persistent delays in reaching developmental Milestones, a clinician suggests that this is likely to be due to a concern about parenting capacity.</p>	<p>There is concern about persistent developmental a failure of the parents to accept advice and provide appropriate care and this suggests the child is suffering or likely to suffer significant harm.</p>
<p><i>Every child has the right to the best possible health with good health care, clean water, nutritious food, a clean environment and education on health and well being.</i></p>	<p>Parents/carers ensure the child has a healthy diet, and suitable clothing.</p>	<p>Parents finding it difficult to provide Healthy food and adequate clothing. This is due to poverty of lack of awareness and advice is accepted and having a positive impact.</p>	<p>Parents unable to provide appropriate food and/or clothing. Efforts by partners to help them improve have failed and the child is in need of statutory support.</p>	<p>There is persistent failure to provide the child with adequate food and clothing and child is suffering or likely to suffer significant harm due to the cumulative and adverse impact of this on his/her welfare.</p>
	<p>Parents nurture positive mental health development</p>	<p>Concerns around mental health, self-harm, depression, eating disorders, body image. Family accepting help and interventions are having a positive impact.</p>	<p>Concerns about mental health are persistent and efforts by partners to support the child and family are not working and there is concern about parental capacity to manage these challenges.</p>	<p>The child is experiencing deteriorating mental health problems and there is concern about parental capacity and that the child is suffering or likely to suffer significant harm without formal child protection interventions.</p>
	<p>Parents supporting the child who has a disability and do not need support services.</p>	<p>Disabled and requiring multi-agency support services and sound planning. Complex needs. Parents champion the child's needs.</p>	<p>Disabled as defined by the Children Act 1989; diagnosed with severe or profound: learning disability, developmental delay, physical disability, sensory disability; multiple disabilities that impact on the child or young person to the same degree as a diagnosis of severe / profound disability. (link to CWD and SEND offer).</p>	<p>Disabled and suffering or likely to suffer significant harm, (including inadequate or sub-optimal care/neglect or other forms of abuse. Parental capacity concerns.</p>
	<p>Parents/carers support the child about Sexual health/respect their privacy.</p>	<p>Starting to have sex (under 16). Conception aged under 16. Complies with and support with positive outcomes</p>	<p>Inappropriate sexual images of the child have been shared on social media.</p>	<p>Sexual activity under the age of 13 Sexual exploitation. Sexual abuse</p>

Child's developmental needs: Education

Every child's right	Level 1 Expectations of parent	Level 2	Level 3	Level 4
<p>Article 28: Education Every child has the right to an education.</p> <p>Article 17: Access to information Every child has the right to reliable information from a variety of sources that is important to their wellbeing. They should be protected from harmful information from the media.</p>	<p>Parents/Carers ensure the child attends school regularly, on time and with the right equipment.</p>	<p>Occasional to persistent truanting, poor punctuality, and or school attendance. Not in education, employment or training (NEET) Previous fixed term or permanent exclusion from another educational establishment. Managed move. Not supported by parents/carers to succeed in the labour market. Child Missing Education. (CME).</p>	<p>The parent does not engage with the school and resists suggestions of supportive interventions. The young person is often discouraged by parents/carers from success in the labour market. Child is missing education and there are indicators suggesting exploitation.</p>	<p>The parent/carer actively discourages or prevents the child from learning or engaging with the school. The young person is obstructed and discouraged from success in the labour market. There are concerns about exploitation.</p>

Childs developmental needs: Emotional and behaviour development

Every child's right	Level 1 Expectations of parents/carers	Level 2	Level 3	Level 4
<p>Article 12: Views of child Every child has the right to express their views, feelings and wishes in all matters affecting them and to have their views taken seriously</p>	<p>Parents/carers nurture good quality early attachments. When parents have mental health problems of their own, they comply with medical advice. They promote the child's growing abilities doing this in a way that recognises the child's increasing capacity to make their own choices</p>	<p>Parents/Carers recognising mental health or emotional issues. Difficulty coping with anger, and frustration. Loss of a significant adult. Low self esteem; lacking confidence in own ability. Interventions accepted and working. Anti- social behaviour resolved with appropriate interventions.</p>	<p>Deteriorating mental health and emotional issues. Behavioural problems worsening, despite interventions. Concern about parents' capability. Behaviour leading to risk of social exclusion, or school exclusion. ?Child -parent abuse, Unresolved bereavement issues. Requiring social work interventions to prevent admission to care. ? concealed pregnancy?</p>	<p>Parents/carers demonstrably detached from the child's needs. Unresponsive. High criticism, low warmth. Parents/cares lack capability to promote self esteem and confidence in the child and this continues despite efforts to help them understand this. Parent/child relationship breaking down due to child parent abuse. Unexplained injuries, Bruising in non mobile infants.(bruising protocol)</p>
<p>Article 37: Inhuman treatment Children have a right not to be tortured or suffer cruel or degrading treatment or punishment</p>	<p>Take steps to talk to and educate their child about substance misuse issues.</p>	<p>Parents concerned or recognising child's substance misuse. Accepting interventions and they are working.</p>	<p>Parents/carers not accepting serious substance problems. misuse interventions being refused or not working and likely to impair the child's health and development.</p>	<p>Substance misuse likely to be causing significant harm. Child dealing and/or trafficking and so being exploited. Parental capability a concern.</p>

Child's development needs: Identity

The child's rights	Level 1 Expectations of parents/carers	Level 2	Level 3	Level 4
<p>Article 7: Birth registration <i>Every child has a right to be registered at birth with a name and nationality and as far as possible to know and be cared for by their parents</i></p> <p>Article 8: protection of identity <i>Every child has a right to identity Everyone must respect and protect that right</i></p> <p>Article 13: Freedom of expression <i>Every child must be free to express their thoughts and opinions and to access relevant information as long as it is within the law</i></p> <p>Article 30: Minority groups <i>Every child has the right to learn and to use the language, customs and religion of their family irrespective of the country they live in.</i></p>	<p>Ensure the child has a positive and clear sense of self and abilities and he/ she demonstrates feelings of belonging and acceptance. Parents listen to the child and consider their views.</p>	<p>Some insecurities around identity. Subject to discrimination and Low self esteem. Social exclusion?</p>	<p>??</p>	<p>Parents unable or unwilling to protect from race hate. Persistently demonstrates extremist views and may be being radicalised.</p>

Child's development needs: Family and social relationships

The child's rights	Level Expectations of parents	Level 2	Level 3	Level 4
<p>Article 9: Separation from parents <i>Children must not be separated from their parents against their will unless it is in their best interests</i></p> <p>Article 10: Family reunification <i>If parents live in a different country, children have a right to live with them in the same country.</i></p> <p>Article 14: Freedom of thought, belief and religion</p>	<p>Parents encourage the child to have a positive understanding of his/her cultural, ethnic and linguistic identity and sees this as a positive contribution to a multi-cultural society. Parents/carers</p>	<p>Parents/carers identify bullying/isolation around perceived difference, or the child is bullying others. Parents/carers concerned that the child may be involved in gangs.</p>	<p>A criminal record relating to serious or violent crime is held by a member of the family which may impact on the children in the household. There is known involvement in gang activity.</p>	<p>Unaccompanied asylum seeking child. Child socially isolated and lacking appropriate role models. There is known involvement in gang activity which is impacting significantly on the child and family.</p>

<p><i>Every child has the right to think and believe what they choose and also to practise their religion, as long as they are not stopping other people from enjoying their rights.</i></p> <p>Article 15 Freedom of association <i>Every child has the right to meet with other children and to join groups and organisations as long as it does not stop other people from enjoying their rights</i></p>	<p>encourage social and friendship networks.</p> <p>Parent/carers ensure their children are supported to practise their religion and to understand and respect other religious views.</p>	<p>Family may be new to area or new to Britain. Family not engaging in local services. Family socially excluded.</p> <p>There is concern that the education the child is receiving does not teach them about different cultures, faiths and ideas or, if it does, is derogatory and dismissive of different faiths, cultures and ideas</p>	<p>The child is being educated to hold intolerant, extremist views. Family only mixing with other children and adults who hold similar intolerant, extremist views.</p>	<p>There are concerns that the child is being radicalised: http://proceduresonline.com/berks/slough/p_sg_ch_extremism.html</p>
<p>Article 18: Parental responsibilities <i>Both parents share responsibility for bringing up their child The best interests of the child must be a top priority in all decisions and actions that affect him/her.</i></p> <p>Article 31: Leisure, play and culture <i>Every child has the right to relax, play and take part in a wide range of cultural and artistic activities</i></p>	<p>Parents/ Care givers providing stable, consistent support to the child in a low criticism, high warmth environment which prioritises the child's needs and promotes their development.</p>	<p>Parents with poor parenting experiences in childhood, seeking and accepting advice and support.</p> <p>Loss of significant parent/carer, there is a significant attachment to another relative providing support. depression, anxiety, eating disorders.</p> <p>Child of a teenage parent accepting practical advice and support.</p>	<p>Low parental aspirations. Unconcerned about child's potential Parents unable to prioritise the child's needs over their own needs(such as mental health or substance misuse) and efforts to changes this have not worked or have not accepted by parents/caregivers.</p> <p>A child is under the age of 16 (under 18 if disabled), is cared for by someone who is not their parent or a close relative for 28 days or more (private fostering).</p> <p>Child of a teenage parent who is finding parenting challenging, child receives little warmth and affection, and persistent efforts to advise and support are not working and there is information to suggest escalating risk without intervention.</p>	<p>The child is suffering or likely to suffer significant harm as parents/caregivers overlook his/her needs and/or expose him/her to risks of harm. High criticism, low warmth from parents/ care givers.</p> <p>Family breakdown. Deceased parents and no arrangements to care for the child.</p> <p>Teenage parent who is a subject of child protection plan or is a child looked after. Child of a teenage parent where there are concerns about neglect or abuse.</p>

		The child is undertaking some caring responsibilities, occasionally or regularly needed to care for another family member.	The young carer's responsibilities are such that; he/she is unlikely to achieve or maintain, or to have the opportunity of achieving or maintaining, a reasonable standard of health or development without the provision for him of services by a local authority, or his/her health or development is likely to be significantly impaired, or further impaired, without the provision for him of such services.	The young carer's responsibilities are complex and demanding and suggest that he/she is suffering or likely to suffer significant harm as the child's own needs are being neglected.
Child's development needs: Social presentation				
The child's rights	Level one Expectations of Parents/carers.	Level two	Level three	Level four
Article 27: Standard of living <i>Every child has the right to a standard of living that is good enough to meet their physical and social needs and support their development.</i>	Parents/carers ensure the child is appropriately dressed for different settings.	Inappropriately dressed- or persistently inappropriately dressed for the weather, shunned by other children. Resolved with advice.	Persistently inappropriately dressed, child not protected from extremes of weather. Parental capacity suggests parents need formal help and support to effect change.	Persistently inappropriately dressed despite multi-agency interventions. Parents unable to take protective action.
	Good level of personal hygiene.	Poor personal hygiene resolved with advice and support or resulting in social isolation from peers.	Persistent poor hygiene. Shunned or bullied and/or excluded by peers. Parental capacity concerns.	Poor hygiene persistent and chronic despite advice and support and this is a feature of other factors suggesting neglect and likely significant harm.
	Parents/carers champion the needs of their children, advocate for them and strive to ensure they have what they need to thrive.	Parents unable to meet some of the child's physical or social needs and are seeking and accepting help and this is resolving.	Parents unable to provide for the child's physical or social need and the child's development is likely to be impaired without interventions.	Parents unable or unwilling to co-operate with offers of help to provide for the child's physical or social needs and this is causing, or likely to cause significant harm to the child's development.

Parenting capacity: Basic care, safety and protection

The child's rights	Level 1 expectations of parents/carers	Level 2	Level 3	Level 4
<p>Article 3: Best Interests <i>The best interests of the child must be a top priority in all decisions and actions that affect him/her</i></p> <p>Article 5: Parental Guidance <i>Children have a right to receive support from their family to provide guidance and direction for the child to learn to exercise their rights, recognising their increasing capacity</i></p> <p>Article 11 Abduction <i>Children have a right to be protected from abduction by their parents or other relatives</i></p> <p>Article 16 Privacy <i>Every child has the right to privacy including protection from unlawful attacks that harm their reputation.</i></p> <p>Article 19: Violence, abuse and neglect <i>Children have a right to be protected from all forms of violence, abuse, neglect and bad treatment by their parents or anyone else looking after them.</i></p> <p>Article 40: Juvenile justice <i>A child breaking the law must be treated with dignity and respect</i></p>	<p>Parents/Carers provide for the child's needs and protect from danger and harm.</p> <p>They support the child's development through interaction and play and provide appropriate guidance and boundaries.</p>	<p>Parents/carers not providing good quality care across a number of areas of the child's needs some of the time. Parents are compliant with advice and support and this is having a positive impact.</p> <p>Possibility of substance misuse by adults within the home and there is at least one parent/carer providing consistent care and safeguarding the child.</p> <p>Parents need help to understand the importance of activities and play in the child's development.</p> <p>May have different carers. Inconsistent boundaries. Can be anti-social. Spends much time alone. Parent rarely manages disputes between siblings. Parents compliant with advice and support.</p>	<p>Parents/carers have a range of challenges impacting on their ability to provide for the child's needs, eg. substance misuse problem (including alcohol) and there is no parent/carer providing consistent care to and safeguarding the child. Child is rarely comforted when distressed. Parents/carers have no other positive relationships. There are no toys visible at the home visit, parents do not understand the importance of play and there are other concerns about safeguarding. Efforts to help parents understand the importance of play are not working. Inconsistent parenting which impairs emotional or behavioural development and parent not responding to advice and support. Parents' capability to comply with advice and support is considered to be compromised.</p>	<p>Parents unable to protect their child/ren and cannot prioritise the child's needs over their own. Severe or long term harm has been or is likely to be done to the child and/or the parents/carers are unwilling or unable to engage in work to improve care provided.</p> <p>Failure to provide good quality care across most of the child's needs most of the time. Parents not compliant inconsistent and therefore harmful.</p> <p>Parents' use of alcohol or other substances is impairing their ability to provide safe care for their child/ren. There is no parent/carer providing consistent care and safeguarding the child and there is information to suggest that the child is suffering or likely to suffer significant harm.</p> <p>Teenage parents who themselves were subject to child protection plan or looked after</p> <p>Parents inconsistent, highly critical or apathetic towards child. Child is rejected or abandoned Parents are negative and abusive (verbally, emotionally and/or mentally) towards the child. Few or no effective boundaries set by</p>

				parents. Child regularly behaves in an anti-social way. Inconsistent and/or violent discipline. Subject to a parenting order which may be related to the child's criminal behaviour, anti-social behaviour or persistent absence from school.
--	--	--	--	---

Family and environmental factors

Family history and functioning

Where domestic violence is suspected; always refer to DV guidance http://proceduresonline.com/berks/slough/p_dom_viol_abuse.html

Housing, employment and finance

Rights of the child	Level 1 Expectations of parents/carers	Level 2	Level 3	Level 4
Article 27: Standard of living <i>Every child has the right to a standard of living that is good enough to meet their physical and social needs and support their development.</i>	Parents/carers understand the need for, and strive to achieve housing that has all basic amenities and appropriate facilities.	Family affected by low income or unemployment. Parents have limited formal education. Adequate or poor housing. Family seeking asylum or refugees. Overcrowding, temporary accommodation, homelessness.	Physical accommodation places child in danger. No fixed abode or homeless. 16-17 year old homeless young people. (refer to housing)	Families seeking asylum or refugees where there is a concern about their ability to safeguard the child/ren.
	Parents/carers aspirational for their child.	Unemployment affecting aspirations. Prolonged unemployment, inter-generational worklessness.	Parents' /carers' ability to provide adequate care and the child's basic needs is affected by debt and poor financial management as the child's needs are consistently not prioritised and this is affecting their welfare.	There is information to suggest that the child is suffering or likely to suffer significant harm as a result of long standing, chronic failure to resolve financial difficulties. Debt and poor financial management, for example due to the need to purchase drugs or alcohol, or gambling is resulting in inadequate care, e.g. utilities supplies cut off, rent in arrears /eviction and or no money for food.
	Parents/carers have sufficient income to provide for the child's needs and where this is not the case, they make every effort to seek support.	Financial difficulties, e.g. redundancy or serious debts/poverty impacting on ability to care for the child. Parents concerned and seeking appropriate help.		

Family's social Integration/accessing community resources

Exploitation/ Extra familial abuse

Rights of the child	Level 1 Expectations of parents and the community.	Level 2	Level 3	Level 4
Article 32 Child Labour <i>Children must be protected from economic exploitation and work that is dangerous or might harm their health, development or education. If children work they have a right to be safe and paid fairly</i>	Parents/ carers ensure that their child, if employed is protected by the legislation and employers follow guidance appropriately.	Parents need support and advice to understand child employment safety issues.	Parents and carers willing but needing support to safeguard the children from Domestic Servitude/ unsafe employers.	Parents not protecting children from or encouraging or colluding with Domestic servitude, Drug dealing/county lines Cannabis farms.
Article 33 Drug abuse <i>Children must be protected from the illegal use of drugs and from being involved in the production or distribution of drugs</i>	Parents/carers act as role models by not engaging in substance misuse. They teach their children about the dangers of substance misuse..	Parents/carers need support and advice to talk to their children about substance misuse.	Parents unable to safeguarding their children from drug trafficking/county lines or from using drugs and and complying with support from social workers and partners..	Drug dealing/county lines, Cannabis farms. Parents openly engaging in illegal substance misuse and not protecting their children from this exposure. Parents distracted by their own needs and not prioritising the need to safeguard their children from these issues.
Article 34 Sexual exploitation <i>Children must be protected from all forms of sexual abuse and exploitation.</i>	Parents/carers should operate reasonable privacy boundaries and promote the child's persona and physical integrity and on line safety.	Sexting?	Sexting? Extra-familial exploitation including on line abuse and parents concerned and needing support safeguarding their child from this.	Sexting? Intra-familial sexual abuse. Extra-familial Exploitation including on-line abuse and parents unable or unwilling to safeguard the child from this.
Article 35 Abduction, sale and trafficking <i>Children must be</i>	Parents/ carers should protect/education their children from the dangers of exploitation and trafficking.			UASC, Domestic servitude

<p><i>protected from being abducted, sold or moved illegally to a different place in or outside their country for the purpose of exploitation</i></p>				
<p>Article 36 Other exploitation <i>Children must be protected from all forms of exploitation, e.g. for political activities, by the media or for medical research</i></p>	<p>Parents/carers educate their children about the importance of respecting different cultures and ways of life.</p>			<p>Prevent referrals</p>
<p>Article 39 Recovery from trauma and reintegration <i>Children who have experienced neglect abuse exploitation , torture or who are victims of war must receive special support to help them recover their health, dignity, self respect or social life</i></p>				