

RMBC Notice to Improve Action Plan

Performance Measures

Date of Update 20th August, 2010

Objective	Key Actions	Measures			Lead	RAG	Performance Commentary	Lead Workstream(s)
		Baseline	Current Performance	Targets				
Staying Safe - Performance								
	NI 68 - Increase the % of referrals of children in need to children's social care going onto initial assessment in line with the current statistical neighbour average/top band performance (mid range is good performance)	57.6% (2008/09 outturn) (2270/3940) 59.8% (position as at Nov 2009) 2009/10 outturn 73.4%	79.74%	65% March 2010 68% October 2010 70% March 2011	Gani Martins	↑ Green	From 1st April to 20th August the figure is 79.74%, (compared with 62.63% reported to the Panel on the 13 th July). And exceeds the March 2011 target. Data checks continue to be undertaken by the Practice Improvement Managers to check accuracy in recording and are part of the QA process. The outturn figure as at 31 st March 2010 73.4% indications are SN 69.2% and N 63.8%	Social Work
Improvement Objective	NI 59 - Increase the % of initial assessments for children's social care carried out within 7 working days of referral from the 2008/09 baseline in line with current statistical neighbour average/top band performance (high is good performance)	77.8% (2008/09 outturn) (1767/2270) 73% (position as at Nov 2009) 2009/10 outturn 75.2%	80.11%	80% March 2010 85% October 2010 87% March 2011	Gani Martins	→ Amber	80.11% (compared with 80.16% reported in July) of the I.A.s completed between 1st April and the 20th August were completed in time. Data checks continue to be undertaken by the Practice Improvement managers to check accuracy in recording and are part of the QA process. The outturn figure as at 31 st March 2010 75.2% indications are SN 71.6% and N 71.8%	Social Work
Improvement Objective	NI 60 - Increase the % of core assessments for children's social care carried out within 35 working days of their commencement from the 2008/09 baseline in line with the current statistical neighbour average/top band performance (high is good performance)	84.9% (2008/09 outturn) (276/325) 68% (position as at Nov 2009) 2009/10 outturn 80%	87.67%	80% March 2010 84% October 2010 87% March 2011	Gani Martins	↑ Green	Between 1st April and 20 th August 87.67% of Core Assessments have been completed in time, higher than the March 2011 target of 87%. Sample core assessments are being audited by the Practice Improvement Managers The outturn figure as at 31 st March 2010 80% indications are SN 80.4% and N 78.2%	Social Work

Operational Targets

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Objective	Key Actions	Measures		Target Date	Lead	RAG	Performance Commentary	Lead Workstream(s)
		Baseline	Targets					
1. Staying Safe – Social Worker Practice and Process								
Establish and implement an effective policy on the auditing of assessments and referrals so as to ensure managerial involvement in quality assurance	Implement an improved quality assurance framework for assessments and referrals	Each Team Manager audits 3 files per month as per guidance. Locality Managers to audit 3 files per month and 5 NFA Audits	100% compliance with the policy	August } Milestones Sept } Oct } 30th Nov deadline	Gani Martins	↑ Amber	Quality Assurance has increased significantly and although practice issues are being identified there is evidence of some improvement and Practice Improvement Managers tackle the issues through coaching and mentoring. During July out of 68 expected case file audits 52 were received and completed, (45 of these were completed by Locality and Team Managers) A further more detailed report will be submitted to the panel meeting on the 29 th September.	Social Work
	Conduct a review on all NFA cases to quality assure the high level of 'no further action' decisions being taken	NFA Contacts and Referrals 1.4.2009 to 9.12.2009 33.18% Total Contacts NFAd 11.12% Total Referrals NFAd by localities	10% reduction in overall contact and referrals which result in NFA by March 2010	Sept 2010	Gani Martins	↑ Amber	Quality Assurance has increased significantly and although practice issues are being identified there is evidence of some improvement and Practice Improvement Managers tackle the issues through coaching and mentoring. During August an additional 300 NFA cases have had an independent audit. Findings are currently being analysed and will be reported to Panel in September.	Social Work
	Conduct Business Process re-engineering exercise on current practices in relation to Assessments and Referrals in line with best practice to enhance performance	Practices in relation to Assessments and Referrals in need of review	Business process Re-engineering process completed	August 2010 for reprioritisation Sept 2010 for completion of Top 5 Commencement and Project Plan for those remaining August 2010	John Dunn, RBT / Rebecca Wragg	↑ Amber	The top 5 priority processes are now completed and signed off by SCMT. The LAC work plan has been re-prioritised.	ICT
Improve the use of the CAF in practice across children's services so that it is effectively used to inform early intervention	Improve quality and completion levels of CAFs No. of CAFs No. of CAFs preventing I.A. etc	Between January 2006 and July 2009 there have been 976 CAFs completed in Rotherham.	600 CAFs to be completed between April 2010 and March 2011	March 2011	Simon Perry / Sarah Whittle	↑ Amber	Following the launch of the early intervention improvement programme and CAF training re-commencing on the 24th February, as at the 8th July 519 staff and 89 managers have now been trained. Since the first of April 2010 213 CAFs have been completed. Further work is being done around front desk and how the referrals feeding into initial assessments can be captured by the CAF coordinators.	Early Intervention
Implement the recommendations from the recent Fostering Inspection	Develop an action plan and monitoring system to implement the 9 recommendations	Action Plan Developed	Action Plan developed and actions implemented	Completion of individual actions by Sept 2010	Gani Martins	↑ Amber	Action plan is now in place and presented to DLT 17 th August, implementation and monitoring of the recommendations has commenced.	Social work

Implement the recommendations from the recent Safeguarding and LAC inspection	Develop an action plan and monitoring system to implement the 9 recommendations	Action Plan Developed	Action Plan developed and actions implemented	Completion of 3 immediate actions by mid Sept 2010. Completion of remaining 6 actions by mid November 2010	Gani Martins	↑ Amber	Action Plan drafted following receipt of formal notification from OFSTED.	Social work
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Operational Targets

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		Baseline	Targets					
1. Staying Safe – Social Worker Practice and Process								
Monitor improvement in children's social care, by establishing rigorous performance management system which delivers regular monitoring, routine and quality assurance of social care performance	Ensure that all children's homes are compliant with regulatory requirements Review compliance in relation to revised inspection criteria (currently out for consultation). Conduct routine audits of compliance and report key themes arising.	1 - St Edmunds	No inadequate children's homes	October 2010	Gani Martins	complete		Social Work
	Conduct robust quality assurance checks on information systems to ensure that contacts, referrals and the status of investigations, assessments and plans are up to date	Quality assurance and audits require improved performance framework	% of monthly supervision checks conducted - 100% Number and % of adequate data quality checks conducted - 100%	October 2010	Gani Martins	→ Amber	A single QA/Audit Framework has been implemented which covers all aspects of this action. The overall data quality assurance strategy and monitoring and reporting policies and procedure has been signed off by the SCPMT. From the 1st March initial and core assessments are being audited with a bank of good practice which has been developed. Further, more robust recording of audits has recently been introduced. A report was submitted to the Improvement Panel on the 13th July, a further more detailed report will be submitted to the panel on the 29 th September.	Social Work
Review social workers' responsibilities to ensure that responsibilities are clearly and tightly defined so that no staff carry too wide a range of work. This will need to involve consideration of whether a restructuring of children's social care services is necessary	Undertake Fieldwork Review and implement improved operational structure	The remaining priority action to be addressed	Fully reviewed social care infrastructure in place	October 2010	Gani Martins	→ Amber	A report of the review has been completed and a project plan developed to ensure effective and timely implementation. Key areas include: Front Door improvements, the number of locality teams, and introduction of dedicated LAC teams. This report was shared with Safeguarding and Corporate Parenting Management Team and DLT on the 27th April. Key posts have been appointed to and expressions of interest are being considered from social workers and administration staff. Implementation will be complete by October 2010.	Social Work / Workforce

Operational Targets

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Objective	Key Actions	Measures		Target Date	Lead	RAG	Performance Commentary	Lead Workstream(s)
		Baseline	Targets					
2. Enjoying and Achieving – Practice and Process								
Improve Performance across primary schools with a particular focus on addressing the performance of schools below the floor targets	Implement this plan, as agreed with DCSF and National Strategies, to bring about demonstrable and sustained improvement in primary school standards throughout the term of the Improvement Notice.	13 Primary schools below floor targets 10 Primary schools below floor targets (2010)	13 down to 8 during 2010 and then down to 0 in 2011	March 2010 October 2010 March 2011	David Light	↓ Amber	Report was submitted to Improvement Panel on 22nd April 2010 and a World Class Primaries Board meets with DCSF and National Strategies involvement to progress the actions in the plan. 10 of the original 13 schools rose above the floor target including 3 of the 5 hard to reach schools. However, based on provisional results 7 other schools fell below the floor target. Further work is taking place in SES to address this.	Enjoying and Achieving

Objective	Key Actions	Measures		Target Date	Lead	RAG	Performance Commentary	Lead Workstream(s)
		Baseline	Targets					
Leadership and Management/Capacity Building/Support								
Develop a comprehensive programme of training, mentoring and continuous professional development for all social care staff so that they have the skills to complete high quality and timely assessments	Identify practice issues related to quality and consistency from Quality Assurance audit reports by Locality and Teams.	TBA	TBA	Aug/Sept and October milestones	Deb Johnson and Warren Carratt	Red	New action for development in relation to embedding and sustaining the changed practice in relation to findings from the Quality Assurance programme of work.	Social work
	Incorporate into L&D activity identifying most appropriate to resolve issues encountered	TBA	TBA	30th Nov 2010 deadline	Deb Johnson and Warren Carratt	Red	New action for development in relation to embedding and sustaining the changed practice in relation to findings from the Quality Assurance programme of work.	Social work
	Evaluate effectiveness of L&D interventions by Locality and Teams in relation to improved practice.	TBA	TBA	Aug/Sept and October milestones	Deb Johnson and Warren Carratt	Red	New action for development in relation to embedding and sustaining the changed practice in relation to findings from the Quality Assurance programme of work.	Social work
	Track improvement of Locality and Teams in relation to quality issues identified.	TBA	TBA	30th Nov 2010 deadline	Deb Johnson and Warren Carratt	Red	New action for development in relation to embedding and sustaining the changed practice in relation to findings from the Quality Assurance programme of work.	Social work
	Ensure that accountabilities for each individual are being reinforced through consistently applied PDR's to ensure staff have a satisfactory Performance Plan. Consider action post inspection report	81%	90%	Nov 2010	Julie Westwood/ Warren Carratt	→ Amber	An audit report has revealed that supervision / PDRs are still under-recorded on Yourself and work is being undertaken to correct this. The review conducted at the end of July showed that 64% of Staff had received a PDR. Sample of audits of PDRs have also taken place. Further detailed analysis is taking place and a report will be submitted to the Improvement Panel in September.	Workforce / Performance

Objective	Key Actions	Measures		Target Date	Lead	RAG	Performance Commentary	Lead Workstream(s)
		Baseline	Targets					
3. Leadership and Management/Capacity Building/Support								
Demonstrate improvements in staff satisfaction and in the satisfaction of children and families with the services they receive through the term of the Improvement Notice	Improve outcomes of CYPS Satisfaction Surveys	Employee Opinion Survey Family Placement Survey Audit Commission in Schools Survey Social Worker Survey	Employee Opinion Survey TBC LAC reviews TBC Audit Commission in Schools Survey TBC Social Worker Survey TBC	March 2010 Oct 2010 and March 2011 Milestone January 2011	Julie Westwood/ Warren Carratt	↑ Amber	Baseline for EOS - 64% (CYPS) rest of Council 69% - target to be discussed 69%, the next EOS is not until 2011, HR are planning for a specific survey for CYPS to be run between the 22 nd November and 10 th December with results in mid January. Baseline for Audit Commission schools survey response rate 2008 29% 2009 63%. Target 80%, next survey not now run until 2011 (now 2 yearly). The Family Placement Survey is a bi-annual survey of Foster Carers and Adopters, the next survey is scheduled for 2011.	Workforce and all Workstreams

Operational Targets

Objective	Key Actions	Measures		Target Date	Lead	RAG	Performance Commentary	Lead Workstream(s)
		Baseline	Targets					
4. Performance Management								
<p>Improve Annual Children's Service Scores Profile to Performing well by 11 through implementation of all outstanding recommendations and improvement of inspection scores to good or better</p>	<p>Continually assess the position in relation to all outstanding external inspection recommendations including all those listed in CAA Blocks A and B</p>	<p>Performing Poorly</p>	<p>90% of recommendations met in original timescale 12 reports per year</p>	<p>monthly</p>	<p>Julie Westwood</p>	<p>→ Amber</p>	<p>Recommendations from key high risk inspections being input. Visits undertaken to Early Years and SES to examine recording systems already deployed. These have been found to be satisfactory. There will be on site visits to validate the implementation of recommendations and the state of readiness in terms of achieving a positive outcome in the next inspection. Action plans have been requested from the services to shift proportion of services to good or better and have been received and were discussed with GO on the 9th June. A report on the latest OFSTED profile is on the agenda for the 31st August</p>	<p>Performance</p>
	<p>Introduce robust monthly monitoring arrangements to ensure implementation of all outstanding inspection recommendations from all inspections in original timescales</p>	<p>Inspection recommendations from key inspections are being monitored but reports need to include all inspected services</p>	<p>90% of recommendations met in original timescale 12 reports per year</p>	<p>Quarterly</p>	<p>Julie Westwood</p>	<p>→ Amber</p>	<p>All inspection recommendations (with the exception of schools and childminders which have an established monitoring system) are being entered into the reconfigured CYP inspections monitoring system. A further report is on the agenda for the 31st August.</p>	<p>Social Work / Performance</p>
	<p>Improve CYP Performance Profile rating for Block A by increasing % of inspected services rated "good or better"</p>	<p>Performing Poorly (bottom band for both PRU and Children's Homes) 54.9%</p>	<p>Performing Well (65% - 79% categorised as outstanding or good)</p>	<p>Quarterly</p>	<p>Julie Westwood</p>	<p>→ Amber</p>	<p>A report on the latest OFSTED profile is on the agenda for the 31st August.</p>	<p>Performance</p>
	<p>Improve CYP Performance Profile rating for Block B by: Ensuring majority of inspected scores are rated "good or better" for safeguarding LAC and SCRs</p>	<p>Fostering - Satisfactory SCRs 2/4 judged inadequate</p>	<p>Fostering - Good All future SCRs rated adequate or better</p>	<p>Quarterly</p>	<p>Julie Westwood</p>	<p>→ Green</p>	<p>There are no current or outstanding Serious Case Reviews for the LSCB. A further SCR action plan has been signed off by GOYH in August and work continues evidencing the completion of the two remaining action plans. The LSCB has developed a quality assurance toolkit for SCR IMRs. Two one day conferences have been developed scheduled for September focussing on authoritative practice and lessons learned.</p>	<p>Performance</p>

Objective	Key Actions	Measures		Target Date	Lead	RAG	Performance Commentary	Lead Workstream(s)
		Baseline	Targets					
4. Performance Management								
	Improve CYP Performance Profile rating for Block C by improving NI performance	Not In line with or better than statistical neighbours and the national position	In line with or better than statistical neighbours and the national position	Quarterly	Julie Westwood	↓ Amber	Improvement plans are in place for NIs and where targets are not being met performance clinics are held to identify areas where further improvement can be made. A report on the latest OFSTED profile is on the agenda for the 31 st August	Performance
	Ensure quarterly reporting on the Children's Services Performance Profile on their release clearly outlining areas of risk and potential impact	Report on Quarter 2 profile prepared	4 reports per year and improvement in each service block	Quarterly	Julie Westwood	↑ Amber	A report on the latest OFSTED profile is on the agenda for the 31 st August	Performance

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Objective	Key Actions	Measures		Target Date	Lead	RAG	Performance Commentary	Lead Workstream(s)
		Baseline	Targets					
5. Recruitment and Retention								
Increase the capacity of social carers to ensure effective services to safeguard vulnerable children	Reduce the vacancy rate of qualified social workers from the December 2009 baseline to meet the improvement notice target	37.2% 16th December 2009	20% vacancy rate by October 2010 10% vacancy rate by March 2011	October 2010	Gani Martins	→ Amber	Currently all social worker posts are filled. Either covered by permanent establishment posts or agency staff (18.8 posts covered) with 11.5 posts vacant	Social Care / Workforce
	Reduce the vacancy rate of team managers from the December 2009 baseline to meet the improvement notice target	33% 16th December 2009	16% vacancy rate by October 2010 8% vacancy rate by March 2011	October 2010	Gani Martins	↑ Amber	There are currently 26.7% Team Manager posts unfilled. There are 15 Team Manager posts in the establishment with 4 vacancies, however all of these are covered by agency staff.	Social Care / Workforce
	Recruit 30 new Foster Carers. There are another 24 couples in the process at the moment from referral to training process.	126 (January 2009)	156	March 2011	Gani Martins	→ Green	From April 2009 to March 2010 there were 22 foster carers approved. There are currently 139 foster carers. Since April 2010 7 sets of carers have been approved and 4 have been de-registered.	Social Care / Workforce
	Reduce the over reliance on agency staff	2009/10 spend = £1,843,627 (12 months) £1,811,768 relates to social care, £1,390,402 of which via the Duttons contract	Reduce by £440,000 in 2010/11 on agency staff	October 2010	Gani Martins	→ Red	The recruitment campaign for permanent social workers and team managers continues however, there is still major expenditure on agency staffing. Expenditure on agency social workers and team managers to date is £435,922 and agency admin £31,537. The increase from last time has been due to delays in invoices being received. Following some issues with one of the agencies additional work will be carried out free of charge.	Workforce / Finance

YPS Achievements

87.5% of care leavers are in employment, education or training, an improvement of 23.9% since the end of March 2010, exceeding the target of 67%..

CPP lasting over 2 years have reduced from the 2008/09 outturn of 4.8% to 4% (2009/10)

100% of CPP are reviewed within timescales. Child Protection Reviews are maintaining the top 100% performance (2009/10)

LAC Reviews in timescales improved from 96.5% to 97.1% (2009/10)

97% of all Rotherham Schools (including PRUs) have achieved National Healthy Schools Status

Childhood obesity for both reception and Year 6 has improved by 2% and we are now in line with our statistical neighbours.

86% of children and young people participate in 2 hours+ sport or PE (increase of 25% since 2006)

- 97.5% of schools are meeting Extended Services Core Offer.
- Rotherham has been rated the best in the region for children getting their first choice of secondary school 97%.
- Rotherham's Audit Commission Schools Survey 35% increase in response in 2009.
- Since 2005/6 there has been a 34% reduction in the number of young people entering the criminal justice system.
- Ofsted have judged Hilltop School to be outstanding in all major areas including Safeguarding.
- 72% of Rotherham's Under 5s are currently part of the Imagination Library Project, that's 11,221 children.
- GCSEs 2009 - 13th most improved Authority
- Foundation Stage 2009 15th most improved Authority.

- Thornhill has been judged by Ofsted as outstanding with an outstanding capacity to improve.
- Herringthorpe Junior School is one of the top 20 schools in the UK for the best use of technology. Runner up in the learning experience Primary Becta ICT Excellence Award
- Rotherham Schools Music Service - Second outstanding Ofsted inspection report.-
- Rotherham are the first Authority in the country to have 2 childminders achieve the Quality Mark for Early Years by the Basic Skills Agency