Action/Notes:	Lead Action Owner	By When	Progress Update:	Status:
ommendations				
ake sure that Board members under	stand the specific needs of child	dren known to th	e YOT and advocate on their I	pehalf in their owr
Presentation on specific needs of YOT cohort to Board members	Chair of the YOT Management Board	Jan-21	Complete -Extraordinary Board Meeting took place on 20th January 2021 and information presented to the board.	Action completed
Presentation to Board Members and Corporate Parenting Board regarding looked after children known to the YOT.	Service Manager Evidence Based Hub and YOT	Mar-21	Complete - Extraordinary Board Meeting took place on 20th January 2021 and information presented to the board. Corporate parenting board on 2 March 2021	Action completed
	Head of Service LAC	Feb-21	Policy has been revised and was agreed at Board on	Action completed
Hold workshops for staff across CYPS	CYPS Training	Mar-21	Once the policy (2.2) has	Action may exceed original target date
Provide bespoke training in Restorative Justice for staff in residential care homes and foster carers	CYPS Training	Mar-21	CYPS training to coordinate – agreed 5th January 2021. Training has now been commissioned. Currently working with LAC and	Action completed
	Dresentations ake sure that Board members under Presentation on specific needs of YOT cohort to Board members Description Description Description </td <td>ommendations ake sure that Board members understand the specific needs of child Presentation on specific needs of YOT cohort to Board members Chair of the YOT Management Board Board Desure the partnership understands the reasons for the significant numbers and reviews the policies and practices of all agencies to minimise to minimise to the subscription to Board Members and Corporate Parenting Board regarding looked after children known to the YOT. Presentation to Cal Authority Policy – Looked after Children and Youth Justice Hold workshops for staff across CYPS and partnership to update knowledge Provide bespoke training in Restorative Justice for staff in residential care homes and foster</td> <td>Dommendations Ake sure that Board members understand the specific needs of children known to the Presentation on specific needs of YOT cohort to Board members Chair of the YOT Management Board Jan-21 Secure the partnership understands the reasons for the significant number of Looked / and reviews the policies and practices of all agencies to minimise the possibility of construction to Board Members and Corporate Parenting Board regarding looked after children known to the YOT. Service Manager Evidence Based Hub and YOT Mar-21 Review local Authority Policy – Looked after Children and Youth Justice Head of Service LAC Feb-21 Hold workshops for staff across CYPS and partnership to update knowledge CYPS Training Mar-21 Provide bespoke training in Restorative Justice for staff in residential care homes and foster CYPS Training Mar-21</td> <td>Demmendations Commendations ake sure that Board members understand the specific needs of children known to the YOT and advocate on their I Presentation on specific needs of YOT cohort to Board Meeting took place on 20th January 2021 and information presented to the board. 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2.5	Review own agency policies and procedures to ensure that these are	Management Board	Mar-21	Presented to the Board on 21/06/2021 and added to	Action may exceed original target date
	aligned with protocol for LAC.			the Board's action log. To	
3. Ur	dertake a comprehensive health ne	eds analysis of YOT children to	better understand	review at the next Board on the health provision being o	delivered and what
3.1	Health needs analysis to be	Management Board – CCG	Feb-21	Screening tools shared with	Action completed
5.1	completed SAME AS 6.1	Manager	160-21	CCG Manager 29/12/20 agreed to complete SALT,	Action completed
3.2	Review of Health Needs Analysis Findings - SAME AS 6.2	Management Board – CCG Manager	Mar-21	Information sharing arrangement currently being worked on. Paul Theaker	Action completed
3.3	Development of Health Pathways including: CAMHS, SALT, 0-19 - SAME	Management Board – CCG Manager	Mar-21	All pathways are now completed and operational.	Action completed
3.4	Implementation of pathways - SAME AS 6.4	Management Board – CCG Manager	Apr-21	All pathways are now completed and operational.	Action completed
4. Re	eview the quality and accessibility of	education, training and employ	yment provision fo	r post-16-year-old children l	known to the servi
4.1	Meet with stakeholders across Sheffield City Region to ensure that provision is accessible, inclusive and sufficient to meet the needs of the cohort.	Service Manager Evidence Based Hub and YOT	Apr-21	Met with post 16 providers in Rotherham regarding YOT cohort and contextual safeguarding < <insert date>>. Confirmed there is currently no stakeholder meeting within the region.</insert 	Action completed
4.2	Meet with existing post 16 providers to develop pathways for YOT young	Service Manager Evidence Based Hub and YOT	May-21	Variety of pathways and support in place for YOT	Action completed
4.3	To attend people and skills working group. Economic recovery group to ensure YOT cohort are considered in recovery planning.	Early Help ESF Lead	Jan-21	Discussion with Jenny Lawless/ Rachel Jackson – RJ to take this action forward at next P&S Working Group. YOT cohort is considered in planning.	Action completed
4.4	Provide opportunities via ESF pathway - ESF Lead to attend YOT team meeting		Feb-21	Invited to YOT Team meeting 14th January 2021	Action completed

4.5	in provision, accessibility and/or barriers to inclusion and ensure that commissioning arrangements are in	YJ Operations Coordinator	Mar-21	Skills audit undertaken - to be included in Management Board report for 15th March 2021.	Action completed
5. Re	view the quality of risk of harm wor	k and improve the effectiveness	s of management ov	versight in all cases.	
5.1	Develop QA tool for Post court and out of court disposal to audit risk of Harm and Safety and wellbeing SAME AS 13.1 AND 21.1	-	Feb-21	Meeting arranged for 13th January to develop new QA tool. Training booked for March for YJ Coordinator and Snr Practitioners. Tool	Action completed
5.2	Monthly Case audits to be undertaken and findings collated and presented to YOT management board quarterly - SAME AS 13.2 AND 21.2 BUT	-	Mar-21	QA tool has been developed. 9 audits undertaken in February and will be 9 in March. Summary of findings	Action completed
5.3	Themed multi agency Audit to be completed bi-annually to QA partnership working arrangements SAME AS 13.3 AND 21.3 BUT	CYPS QPD team and Management Board	Mar-22	Meeting arranged for 13th January to schedule MA Audits and review current audit tools.	Action completed
5.4	Senior Practitioner and YOT Social Worker to undergo Management training provided by YJSIP - SAME AS	YJ Operations Coordinator	To commence January 2021	Training booked and commencing in January 2021. (YOT Social Worker no	Action completed
5.5	Mentor to be requested for YJ Operations Co-ordinator via YJSIP -	Service Manager Evidence Based Hub and YOT	Apr-21	Request was signed off by YOT management board on	Action completed
5.6	All YOT staff to complete refresher training on AssetPlus - SAME AS 13.6 BUT DIFFERENT COMPLETION DATE	Service Manager Evidence Based Hub and YOT	May-21	Training booked through Silver Bullet training company and has commenced in March 2021.	Action completed
5.7	To commission a peer review through Youth Justice Sector Improvement Partnership.	Management Board	Dec-21	Request was signed off by YOT management board on 15th March 2021. However, unlikely due to pandemic backlog, that this will take	Action completed
Orga	nisational delivery				

6.1	Health needs analysis to be completed SAME AS 3.1	Management Board Health representative	Feb-21	See 3.1.	DUPLICATE ACTION
6.2	Review of Health Needs Analysis Findings - SAME AS 3.2	Management Board Health representative	Mar-21	See 3.2.	DUPLICATE ACTION
6.3	Development of Health Pathways including: CAMHS, SALT, 0-19 - SAME	Management Board Health representative	Mar-21	See 3.3.	DUPLICATE ACTION
5.4	Implementation of pathways - SAME AS 3.4	Management Board Health representative	Apr-21	See 3.4.	DUPLICATE ACTION
6.5	Partnership training to be delivered to YOT and Health colleagues.	Management Board Health representative	Apr-21	CAMHS attended YOT team meeting on 25th March 2021 to deliver training on pathways and service offer.	Action completed
7. Tł	ne pathways for YOT staff to access h	ealth services, for example spe	ech, language and c	ommunication provision, la	ack clarity.
7.1	Screening tools to be revised and pathways developed and communicated to all YOT staff.	Management Board Health representative	Apr-21	Complete. SALT forms agreed at YOT Team Meeting on 15/07/2021.	Action completed
7.2	Dip Sampling of cases bi monthly to QA referrals to health services.	Service Manager Evidence Based Hub and YOT	Apr-21	Information sharing arrangement currently being	Action completed
	Management oversight of all	YJ Operations Coordinator	Jan-21	Completed in all cases and reinforced through Triage	Action completed
7.3	assessments to ensure multi agency contribution to assessment and plan.			and Outcomes panel	
	assessments to ensure multi agency	e specific needs of YOT children	so cannot effective	and Outcomes panel	in their own agen

8.2	Individual Board Members to provide	Management Board	Mar-21	Work progressing, awaiting	Action may exceed
	disproportionality analysis of own			final summary report with	original target date
	services in relation to BAME, LAC,			recommendations to Board	
	Health, SEND, EET, Exclusions.			on 22/09/2021. Wider	
				conversations around	
				disproportionality with VRU,	
				LCJB and YOT heads of	
				service. This is included in	
9. Tł	ne Management Board and the parti	nership have not focused on wh	iy so many Looked	After Children are known to	the YOT.
9.1	See also Recommendation 1 above.	Chair of the YOT Management	Jan-21	Complete - Extraordinary	DUPLICATE ACTION
		Board		Board Meeting took place on	
				- 20th January 2021	
9.2	Presentation to YOT Board in	Chair of the YOT Management	Mar-21		Action completed
	December and workshop in January.	Board			
	Presentation to Corporate Parenting				
10. \	Danol in March and USC January OT figures for post-16-year-old chil	dren who are not in education	training and emply	wment are high, and the	
	nership has not done enough work t				
	See also Recommendation 4 above.	Management Board		See also Recommendation 4	DUPLICATE ACTION
L0.1			Feb-21		DUPLICATE ACTION
10.1	See also Recommendation 4 above.	Management Board		See also Recommendation 4	
10.1 10.2	See also Recommendation 4 above. Audit of YOT NEET cohort – findings	Management Board		See also Recommendation 4 above Conversation has taken	
10.1	See also Recommendation 4 above. Audit of YOT NEET cohort – findings presented to outreach and	Management Board		See also Recommendation 4 above Conversation has taken place re: inclusion of this in	

11.1	Focus group arranged for January 2021 to consult with staff in YOT, EBH and EH to agree how to share good practice and obtain best outcomes for Young people.	Service Manager Evidence Based Hub and YOT		Fortnightly YOT team meetings take place to share learning and good practice from locality teams. Team meetings have, to date, included input from: - Outreach and Engagement teams re Children's Centre activities - Early Help Managers – Assessment, planning and TAF reviews - Evidence Based Hub – Parenting programmes	Action completed
11.2	YOT workers to be 'matched' to a locality team to develop a better understanding of support and services	Service Manager Evidence Based Hub and YOT	Feb-21		Action completed
11.3	Future Planned Team meetings: ESF 14/1/21 SENDIASS 28/1/21	Service Manager Evidence Based Hub and YOT		Rachel Jackson attended ESF meeting. Kerry Taylor attended	Action completed
12. Tł	ne inspection found that manageme	nt oversight is poor both for po	st-court orders and	out-of-court disposals.	
12.1	See also recommendation 5 above.	Service Manager Evidence Based Hub and YOT		See also recommendation 5 above.	DUPLICATE ACTION
12.2	Case managers to record individual discussions with Managers as management oversight to ensure this is clear in case records.	Service Manager Evidence Based Hub and YOT		Communicated to staff via team meeting and daily check in – reinforced through supervision of cases.	Action completed
12.3	Service Manager to continue to Moderate case file Audits and review previous Audits to draw out key learning and ensure this is communicated to all staff	Service Manager Evidence Based Hub and YOT	be reviewed quarterly.	CYPS audit schedule in place, audit feedback is standing item on team meeting agenda and supervision. Audit findings to be presented quarterly to	Action completed

Cour	rt disposals				
13. A	ssessing, delivering interventions ar	nd reviewing to keep other peop	ole safe were poor a	areas of practice that requi	re improvement.
13.1	Develop QA tool for Post court and out of court disposal to audit risk of Harm and Safety and wellbeing SAME AS	-	Feb-21	See 5.1.	DUPLICATE ACTION
13.2	Monthly Case audits to be undertaken and findings collated and presented to YOT management board quarterly - SAME AS 5.2 AND 21.2 BUT	-	Monthly activity to be reviewed quarterly and presented to board	See 5.2.	DUPLICATE ACTION
13.3	Themed multi agency Audit to be completed bi-annually to QA partnership working arrangements SAME AS 5.3 AND 21.3 BUT	CYPS QPD team and Management Board	Mar-22	See 5.3.	DUPLICATE ACTION
13.4	Senior Practitioner and YOT Social Worker to undergo Management training provided by YJSIP - SAME AS	YJ Coordinator	Jan-21	See 5.4.	DUPLICATE ACTION
13.5	Mentor to be requested for YJ Operations Co-ordinator via YJSIP -	Service Manager Evidence Based Hub and YOT	Apr-21	See 5.5	DUPLICATE ACTION
13.6	All YOT staff to complete refresher training on AssetPlus - SAME AS 5.6 BUT DIFFERENT COMPLETION DATE	Service Manager Evidence Based Hub and YOT	May-21	See 5.6.	DUPLICATE ACTION
14. T	he needs and wishes of victims were	e not always considered, and th	e potential impact	on victims was not adequat	tely assessed.
14.1	Develop QA tool for Post court and out of court disposal to audit victim	Remedi manager	Feb-21	On target to be completed	Action completed
14.2	Review victim engagement at quarterly contract reviews with	Remedi manager	Mar-21	Contract reviews are in place and take place quarterly	Action completed

14.3	Remedi to liaise with SYP to encourage	Remedi Manager	Mar-21	Deep dive audits being	Action completed
	victims to give consent to engage with			completed by Remedi. Issue	
	services.			of time taken from offence	
				to sentencing has been	
				escalated to the Local	
				Criminal Justice Board and	
				will be discussed at the	
15. A	lack of health input in relevant case	es meant that some children's no	eeds were not met.		
15.1	See also recommendation 4 above.	Board Members – Rotherham CCG		See also recommendation 4	DUPLICATE ACTION
		Representative and TRFT Manager		above.	
15.2	Health services to be represented at	Board Members – Rotherham CCG	Jan-21	Complete - Liaison and	Action completed
	YMARAC and Triage and Outcome	Representative and TRFT Manager		diversion attending both	
	Panel SAME AS 18.2			meetings	
16. W	/hen children were discussed at mu	tiagency meetings it was not al	ways evident in the	ir cases what impact this h	ad on their level of
16.1	Monthly Dip sampling of case files to	Service Manager Evidence Based	Feb-21	Dates for dip sampling	Action completed
	ensure case records reflect risk levels	Hub and YOT		scheduled for 2021 –	
	and intervention addresses risk			findings to be reported to	
	identified.			YOT management Board	
				quarterly.	

17.1	Refresher training TIP to be completed by all YOT staff and practice lead identified.	CYPS training and development Service Manager Evidence Based Hub and YOT	Mar-21	Agreed with CYPS Training and development. TIP has been offered and delivered by Violence Reduction Unit in line with CYPS workforce plan.	Action completed
17.2	Refresher training in SOS to be completed by all YOT staff and practice lead identified.	CYPS training and development Service Manager Evidence Based Hub and YOT	May-21	SoS training was delivered to YOT team in April and May 2021. The advanced training for	Action completed
Out-	of-court disposals				
18. T	he lack of health provision in releva	nt cases hampered the work do	ne to keep children	safe	
18.1	See also recommendation 4 above.	Board representatives – CCG Manager and TRFT Manager		See also recommendation 4 above.	DUPLICATE ACTION
18.2	Health services to be represented at YMARAC and Triage and Outcome	Board representatives – CCG Manager and TRFT Manager	Jan-21	See 15.2.	DUPLICATE ACTION
19. N	ot all children were assessed before				
19.1	All children to be referred to the YOT for screening and initial assessment prior to outcome.	South Yorkshire Police	Mar-21	Agreed with SYP District Commander to commence March 2021. New pathway has been agreed. Review of capacity in SYP and YOT agreed on all LAC (rather than all	Action completed
19.2	To establish a triage and outcomes panel to ensure Multi agency decision making regarding Domain 3 cases and	Service Manager Evidence Based Hub and YOT	Feb-21	Panel Established – TOR have been reviewed and agreed.	Action completed

20. F	or out-of-court work generally, there	e was a capacity issue with the	role of the seconde	d police officer, as there wa	as insufficient reso
20.1	YOT Police officer to produce new pathway and identify where additional	South Yorkshire Police	Jan-21	Completed – SYP YOT Police officer to broker support	Action completed
20.2	Pathway to be presented and agreed at March YOT Management board.	South Yorkshire Police	Apr-21	Agreed at 15th March 2021 Board.	Action completed
21. P	lanning and the delivery of services	for a child's safety and wellbeir	ng and for keeping o	other people safe were poo	r
21.1	Develop QA tool for Post court and out of court disposal to audit risk of Harm and Safety and wellbeing SAME AS	-	Feb-21	See 5.1.	DUPLICATE ACTION
21.2	Monthly Case audits to be undertaken and findings collated and presented to YOT management board quarterly - SAME AS 5.2 AND 13.2 BUT	-	Mar-21	See 5.2.	DUPLICATE ACTION
21.3	Themed multi agency Audit to be completed bi-annually to QA partnership working arrangements SAME AS 5.3 AND 13.3 BUT	CYPS PQ Team and YOT Management Board	Mar-22	See 5.3.	DUPLICATE ACTION