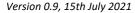
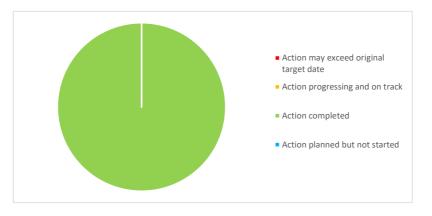
HM Inspection of Probation report: Inspection of youth offending services in Rotherham: Inspection Action Plan 2021

| CURRENT RAG STATUS | No. of actions: |
|--|-----------------|
| Action may exceed original target date | 0 |
| Action progressing and on track | 0 |
| Action completed | 46 |
| Action planned but not started | 0 |







^{*}All dates have taken into consideration the current Government Covid guidance and the impact of the Tier requirements and current Lockdown restrictions.

The Management Board reserves the right to amend deadlines if there is evidence that the planned work has been adversely affected by the pandemic.

| Action may exceed original target date |
|--|
| Action progressing and on track |
| Action completed |
| Action planned but not started |

| No. | Action/Notes: | Lead Action Owner | By When | Progress Update: | Status: |
|------|---|--|----------------|--|------------------|
| eco | mmendations | | | | |
| . Ma | ke sure that Board members understand the sp | ecific needs of children | n known to the | YOT and advocate on their behalf in their own a | gencies. |
| l.1 | 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. | |
| Enc | gure the narthership understands the reasons f | or the significant numb | er of Looked A | EVIDENCE: Minutes of meeting and powerpoint. fter Children known to the YOT, and reviews the | |
| 2.1 | 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 EVIDENCE: Minutes of meeting and powerpoint. | - |
| .2 | Review local Authority Policy – Looked after Children and Youth Justice | Head of Service LAC | Feb-21 | Policy has been revised and was agreed at Board on 21/06/2021. | Action completed |
| 3 | Hold workshops for staff across CYPS and partnership to update knowledge and skills | CYPS Training | Mar-21 | Workshops completed. | Action completed |
| .4 | Provide bespoke training in Restorative Justice for staff in residential care homes and foster carers | CYPS Training | Mar-21 | Complete: YPS training commissioned and delivered 5th January 2021. Training has now been commissioned. LAC and Placements Team part of delivery | Action completed |
| | | | | Foster Carer sessions were run on the 16th, 17th, 18th and 19th of March 2021. 75 Foster Carers trained which is the equivelent of 52 households across the borough | |
| 5 | Review own agency policies and procedures to ensure that these are aligned with protocol for LAC. | Management Board | Mar-21 | Presented to the Board on 21/06/2021 and added to the Board's action log. Revied at the Board on 22/09/2021. | Action completed |

| No. | Action/Notes: | Lead Action | By When | Progress Update: | Status: |
|-------|---|--|------------------|---|------------------|
| | | Owner | | | |
| 3.1 | Health needs analysis to be completed SAME AS 6.1 | Management Board – CCG Manager | Feb-21 | Screening tools shared with CCG Manager 29/12/20 SALT, MH and PH Screening completed in January across current YOT cohort. | Action completed |
| .2 | Review of Health Needs Analysis Findings - SAME AS 6.2 | Management Board – CCG Manager | Mar-21 | Information sharing arrangement agreed at Board on 15th March 2021. Report circulated to Board members. | Action completed |
| .3 | Development of Health Pathways including: CAMHS, SALT, 0-19 - SAME AS 6.3 | Management Board – CCG Manager | Mar-21 | All pathways are now completed and operational. | Action completed |
| .4 | Implementation of pathways - SAME AS 6.4 | Management Board – CCG Manager | Apr-21 | All pathways are now completed and operational. | Action completed |
| . Rev | view the quality and accessibility of education, | training and employme | ent provision fo | or post-16-year-old children known to the service | |
| 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. Confirmed there is currently no stakeholder meeting within the region. Regular meetings with YOT heads of service across South Yorkshire to ensure consistent approach and identifying and resolving any shared barriers. | |
| 1.2 | Meet with existing post 16 providers to develop pathways for YOT young people. | Service Manager Evidence Based Hub and YOT | May-21 | Variety of pathways and support in place for YOT cohort. | Action completed |
| .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. EVIDENCE: Minutes from P&S Working Group. | Action completed |
| .4 | Provide opportunities via ESF pathway ESF Lead to attend YOT team meeting in January 2021 | Early Help ESF Lead | Feb-21 | ESF lead attended YOT Team meeting 14th January 2021 | Action completed |
| .5 | Undertake skills audit to identify gaps in provision, accessibility and/or barriers to inclusion and ensure that commissioning arrangements are in place to meet these gaps. View the quality of risk of harm work and impro | | Mar-21 | Skills audit undertaken and included in Management Board report for 15th March 2021. | Action completed |

| No. | Action/Notes: | Lead Action | By When | Progress Update: | Status: |
|------|--|--|-----------------------------|--|------------------|
| | | Owner | | | |
| 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 | Service Manager Evidence Based Hub and YOT | Feb-21 | Meeting took place on 13th January to develop new QA tool. Training delivered in March for YJ Coordinator and Snr Practitioners. Tool been developed and first audits took place in Jan-21, now BAU. | |
| 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 DIFFERENT ACTION OWNERS | Service Manager Evidence Based Hub and YOT | Mar-21 | QA tool has been developed. 9 audits undertaken in February and 9 in March. Summary of findings presented to YOT Board on 21st June 2021. | 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 DIFFERENT ACTION OWNERS | CYPS QPD team and Management Board | Mar-22 | Meeting took place 13th January to schedule MA Audits. Review of audit tools undertaken and updated. | Action completed |
| 5.4 | Senior Practitioner and YOT Social Worker to undergo Management training provided by YJSIP - SAME AS 13.4 | YJ Operations Coordinator | To commence January 2021 | Training took place in January 2021. | Action completed |
| 5.5 | Mentor to be requested for YJ Operations Co- ordinator via YJSIP - SAME AS 13.5 | Service Manager Evidence Based Hub and YOT | Apr-21 | Request was signed off by YOT management board on 15th March 2021 | 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 commenced in March 2021. Feedback was really positive. | 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. Peer Review completed March 2022. | Action completed |
| Orga | nisational delivery | | | | |
| | hough health provision is available through the | Early Help Service, the | arrangements | do not recognise the specialised needs of | |
| 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 AS 3.3 | Management Board Health representative | Mar-21 | See 3.3. | DUPLICATE ACTION |
| 6.4 | 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. YOT staff attended CAMHS team meeting on 21st April 2021 to deliver training around YOT. | Action completed |

| Screening tools to be revised and pathways | Owner | | | |
|--|--|---|---|--|
| 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 |
| Dip Sampling of cases bi monthly to QA referrals to health services. | Service Manager Evidence Based Hub and YOT | Apr-21 | Information sharing arrangement agreed at Board on 15th March 2021. | Action completed |
| Management oversight of all assessments to ensure multi agency contribution to assessment and plan. | YJ Operations Coordinator | Jan-21 | Completed in all cases and reinforced through Triage and Outcomes panel | Action completed |
| ard members do not understand the specific ne | eds of YOT children so | cannot effective | ely advocate on their behalf in their own agencie | es. |
| Quarterly presentation to YOT Board regarding current cohort status – including BAME, LAC, Health, SEND, ETE, Exclusions, re-offending | YJ Operations Coordinator | Extraordinary YOT Board Meeting took place on 20th January 2021 | Analysis and data presented to YOT Management Board December 2020 and Extraordinary YOT board on 20th January 2021. | Action completed |
| Individual Board Members to provide disproportionality analysis of own services in relation to BAME, LAC, Health, SEND, EET, Exclusions. | Management Board | Mar-21 | Work progressing, awaiting final summary report with recommendations to Board on 22/09/2021. Wider conversations around disproportionality with VRU, LCJB and YOT heads of service. This is included in the delivery plan for reducing reoffending (LCJB). Will be working with the PCC's independent ethics panel to look at stop and search data. | Action completed |
| e Management Board and the partnership have | not focused on why so | many Looked A | After Children are known to the YOT. | |
| See also Recommendation 1 above. | Chair of the YOT Management Board | Jan-21 | Complete - Extraordinary Board Meeting took place on 20th January 2021 | DUPLICATE ACTION |
| Presentation to YOT Board in December and workshop in January. Presentation to Corporate Parenting Panel in March and ILSC January. | Chair of the YOT Management Board | Mar-21 | | Action completed |
| | | ning and emplo | | |
| | Management Board | | See also Recommendation 4 above. | DUPLICATE ACTION |
| Audit of YOT NEET cohort – findings presented to outreach and engagement coordinators and a specific strategy developed to meet the needs of the YOT cohort. | YJ Operations Coordinator | Feb-21 | YOT NEET cohort audit complete.Feedback shared with EH Outreach and Engagement staff to inform NEET Strategy. | Action completed |
| | ensure multi agency contribution to assessment and plan. ard members do not understand the specific nee Quarterly presentation to YOT Board regarding current cohort status – including BAME, LAC, Health, SEND, ETE, Exclusions, re-offending Individual Board Members to provide disproportionality analysis of own services in relation to BAME, LAC, Health, SEND, EET, Exclusions. Management Board and the partnership have See also Recommendation 1 above. Presentation to YOT Board in December and workshop in January. Presentation to Corporate Parenting Panel in March and ILSC January. Tigures for post-16-year-old children who are See also Recommendation 4 above. Audit of YOT NEET cohort – findings presented to outreach and engagement coordinators and a specific strategy developed to meet the needs of the YOT cohort. | ensure multi agency contribution to assessment and plan. ard members do not understand the specific needs of YOT children so Quarterly presentation to YOT Board regarding current cohort status – including BAME, LAC, Health, SEND, ETE, Exclusions, re-offending Individual Board Members to provide disproportionality analysis of own services in relation to BAME, LAC, Health, SEND, EET, Exclusions. Management Board and the partnership have not focused on why so See also Recommendation 1 above. Management Board on December and workshop in January. Presentation to Corporate Parenting Panel in March and ILSC January. DT figures for post-16-year-old children who are not in education, trained See also Recommendation 4 above. Audit of YOT NEET cohort – findings presented to outreach and engagement coordinators and a specific strategy developed to meet the needs of the YOT cohort. | ensure multi agency contribution to assessment and plan. ard members do not understand the specific needs of YOT children so cannot effective Quarterly presentation to YOT Board regarding current cohort status – including BAME, LAC, Health, SEND, ETE, Exclusions, re-offending Individual Board Members to provide disproportionality analysis of own services in relation to BAME, LAC, Health, SEND, EET, Exclusions. Management Board and the partnership have not focused on why so many Looked Activation to YOT Board in December and workshop in January. Presentation to Corporate Parenting Panel in March and ILSC January. DT figures for post-16-year-old children who are not in education, training and employment and engagement coordinators and a specific strategy developed to meet the needs of the YOT cohort. Coordinator YOT board in Extraordinary YOT Board on Mar-21 Management Board Chair of the YOT Management Board Chair of the YOT Management Board Management Board Mar-21 Management Board Feb-21 Coordinator | ensure multi agency contribution to assessment and plan. Coordinator Courterly presentation to YOT Board regarding current cohort status – including BAME, LAC, Health, SEND, ETE, Exclusions, re-offending Individual Board Members to provide disproportionality analysis of own services in relation to BAME, LAC, Health, SEND, ETF, Exclusions. Management Board Management Board Management Board Management Board Management Board and the partnership have not focused on why so many Looked After Children are known to the YOT. See also Recommendation 1 above. Presentation to YOT Board in December and workshop in January. Presentation to Corporate Parenting Panel in March and ILSC January. Diffigures for post-16-year-old children who are not in education, training and employment are high, and the partnership has not See also Recommendation 4 above. Management Board Analysis and data presented to YOT Management Board dheting took place on 20th January 2021. Mar-21 Work progressing, awaiting final summary report with recommendations to Board on 22/09/2021. Wider conversations around disproportionality with VRU, LCIB and YOT heads of service. This is included will be working with the PCC's independent ethics panel to look at stop and search data. Management Board and the partnership have not focused on why so many Looked After Children are known to the YOT. Management Board Chair of the YOT Management Board Chair of the YOT Management Board Presentation to YOT Board in December and workshop in January. Presentation to Corporate Parenting Panel in March and ILSC January. Diffigures for post-16-year-old children who are not in education, training and employment are high, and the partnership has not See also Recommendation 4 above. Management Board VI Operations Cordinator VI Operations Cordinator Triage and Outcomes panel to YOT Management Board To 20th January 2021 The Corporate Parenting Panel in March and ILSC January. Mar-21 Mork progressing, avaiting final summary report with recommendatio |

| No. | Action/Notes: | Lead Action | By When | Progress Update: | Status: |
|--------|--|--|--|--|------------------|
| | | Owner | | | |
| 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 | Jan-21 | 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 - Evidence Based Hub – Young People programmes - ICON training - Participation, Voice and Influence - CCE Pathways Focus group took place. | Action completed |
| 11.2 | YOT workers to be 'matched' to a locality team to develop a better understanding of support and services in localities and communities. | Service Manager Evidence Based Hub and YOT | Feb-21 | Linked workers to locality teams. | Action completed |
| 11.3 | Future Planned Team meetings: ESF 14/1/21 SENDIASS 28/1/21 | Service Manager Evidence Based Hub and YOT | Feb-21 | Rachel Jackson attended ESF meeting. Kerry Taylor attended SENDIASS meeting. | Action completed |
| 12. Th | ne inspection found that management oversigh | t is poor both for post- | 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 | Jan-21 | Communicated to staff via team meeting and daily check in – reinforced through supervision of cases. Evidence will come through audits. Monitor going forward. BAU. | 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 | Monthly activity – to be reviewed quarterly. | CYPS audit schedule in place, audit feedback is standing item on team meeting agenda and supervision. Audit findings presented quarterly to Management board. Now businesss as usual. | Action completed |
| Cour | t disposals | | | | |
| | ssessing, delivering interventions and reviewing | g to keep other people | safe were poor a | areas of practice that require 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 5.1 AND 21.1 | Service Manager Evidence Based Hub and YOT | Feb-21 | See 5.1. | DUPLICATE ACTION |

| No. | Action/Notes: | Lead Action Owner | By When | Progress Update: | Status: |
|--------|---|--|-------------------|--|------------------|
| 13.2 | , , | - | , , | See 5.2. | DUPLICATE ACTION |
| | Themed multi agency Audit to be completed bi- annually to QA partnership working arrangements SAME AS 5.3 AND 21.3 BUT DIFFERENT ACTION OWNERS | 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 5.4 | YJ Coordinator | Jan-21 | See 5.4. | DUPLICATE ACTION |
| | Mentor to be requested for YJ Operations Co- ordinator via YJSIP - SAME AS 5.5 | Service Manager Evidence Based Hub and YOT | Apr-21 | See 5.5 | DUPLICATE ACTION |
| | 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 |
| .4. Th | ne needs and wishes of victims were not always | s considered, and the p | otential impact o | on victims was not adequately assessed. | |
| 14.1 | Develop QA tool for Post court and out of court disposal to audit victim involvement. | Remedi manager | Feb-21 | Developed and in place. BAU. | Action completed |
| .4.2 | Review victim engagement at quarterly contract reviews with Remedi. | Remedi manager | Mar-21 | Contract reviews are in place and take place quarterly. BAU. | Action completed |
| | Remedi to liaise with SYP to encourage victims to give consent to engage with services. | Remedi Manager | | Deep dive audits being undertaken by Remedi. Issue of time taken from offence to sentencing has been escalated to the Local Criminal Justice Board and was discussed at the Complete Victim Care Meeting. Remedi are liaising with adult victim services to identify good practice in engaging victims in restorative justice.BAU. | Action completed |
| L5. A | lack of health input in relevant cases meant the | at some children's need | ls were not met. | | |
| 15.1 | See also recommendation 4 above. | Board Members – Rotherham CCG Representative and TRFT Manager | | See also recommendation 4 above. | DUPLICATE ACTION |
| 15.2 | Health services to be represented at YMARAC and Triage and Outcome Panel SAME AS 18.2 | Board Members – Rotherham CCG Representative and TRFT Manager | Jan-21 | Complete - Liaison and diversion now attending both meetings. BAU. | Action completed |

| No. | Action/Notes: | Lead Action Owner | By When | Progress Update: | Status: |
|--------|---|--|-----------------|---|-------------------------|
| 16.1 | Monthly Dip sampling of case files to ensure case records reflect risk levels and intervention addresses risk identified. | Service Manager Evidence Based Hub and YOT | Feb-21 | Dates for dip sampling scheduled for 2021 – findings to be reported to YOT management Board quarterly. | Action completed |
| | | | | Dip sampling commenced 25th January 2021, first report presented to Board in June 2021. BAU. | |
| 17. Al | though staff had received training on signs of s | afety and trauma-infor | med practice, t | here was limited evidence that these approache | s were used with childr |
| 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 | May-21 | SoS training was delivered to YOT team in April and May 2021. | Action completed |
| | | Service Manager Evidence Based Hub and YOT | | The advanced training for managers and senior practioners also now complete. | |
| Out-c | of-court disposals | | | | |
| 18. Th | e lack of health provision in relevant cases har | npered the work done | to keep childre | n safe | |
| 18.1 | | Board representatives – CCG Manager and TRFT Manager | | See also recommendation 4 above. | DUPLICATE ACTION |
| 18.2 | | Board representatives – CCG Manager and TRFT Manager | Jan-21 | See 15.2. | DUPLICATE ACTION |
| 19. No | ot all children were assessed before a disposal | was delivered. | | | |
| | and initial assessment prior to outcome. | South Yorkshire Police | Mar-21 | Agreed with SYP District Commander and commenced March 2021. New pathway agreed. Review of capacity in SYP and YOT agreed on all LAC (rather than all children), and any offences committed within a child's home in order to ensure early intervention. This was rolled out on 1st March 2021. BAU. | |
| 19.2 | | Service Manager Evidence Based Hub and YOT | Feb-21 | Panel Established – TOR have been reviewed and agreed. BAU. | Action completed |

| No. | Action/Notes: | Lead Action | By When | Progress Update: | Status: |
|--------|---|--|-----------------|--|-----------------------|
| | | Owner | | | |
| 20. Fo | or out-of-court work generally, there was a cap | acity issue with the role | e of the second | ed police officer, as there was insufficient resou | irce to meet the work |
| 20.1 | YOT Police officer to produce new pathway and identify where additional capacity is required. | South Yorkshire Police | Jan-21 | Completed – SYP YOT Police officer now brokers support from wider police force. | Action completed |
| 0.2 | Pathway to be presented and agreed at March YOT Management board. | South Yorkshire Police | Apr-21 | Pathway agreed at 15th March 2021 Board. | Action completed |
| 21. Pl | anning and the delivery of services for a child's | safety and wellbeing a | nd for keeping | other people safe were poor | |
| 21.1 | disposal to audit risk of Harm and Safety and | Service Manager Evidence Based Hub and YOT | Feb-21 | See 5.1. | DUPLICATE ACTION |
| 1.2 | Monthly Case audits to be undertaken and findings collated and presented to YOT management board quarterly - SAME AS 5.2 AND 13.2 BUT DIFFERENT ACTION OWNERS | Evidence Based Hub and | Mar-21 | See 5.2. | DUPLICATE ACTION |
| 1.3 | Themed multi agency Audit to be completed bi- annually to QA partnership working arrangements SAME AS 5.3 AND 13.3 BUT DIFFERENT ACTION OWNERS | CYPS PQ Team and YOT Management Board | Mar-22 | See 5.3. | DUPLICATE ACTION |

| Action may exceed original target date | 0 |
|--|----|
| Action progressing and on track | 0 |
| Action completed | 46 |
| Action planned but not started | 0 |

| | Acronyms | | | | | | |
|------------|---|--|--|--|--|--|--|
| YOT | Youth Offending Team | | | | | | |
| LAC | Looked After Children | | | | | | |
| CYPS | Children & Young People's Service | | | | | | |
| SALT | Speech & Language Therapy | | | | | | |
| MH | Mental Health | | | | | | |
| PH | Physical Health | | | | | | |
| CAMHS | Child & Adolescent Mental Health Service | | | | | | |
| 0-19 | Health Service | | | | | | |
| ESF | European Social Fund | | | | | | |
| QA | Quality Assurance | | | | | | |
| MA | Multi-Agency | | | | | | |
| YJSIP | Youth Justice Sector Improvement Partnership | | | | | | |
| Asset Plus | Youth Justice Approved Assessment Tool | | | | | | |
| SEND | Special Educational Needs & Disabilities | | | | | | |
| BAME | Black, Asian and Minority Ethnicity | | | | | | |
| ETE | Education, Training & Employment | | | | | | |
| | Public Health message with the ultimate purpose to reduce Shaken Baby Syndrome. | | | | | | |
| | *I – Infant crying is normal | | | | | | |
| ICON | *C – Comforting methods can help | | | | | | |
| | *O – It's Ok to walk away | | | | | | |
| | *N – Never, ever shake a baby | | | | | | |
| ILSC | Improving Lives Select Commission | | | | | | |
| NEET | Not in Education, Employment or Training | | | | | | |
| EH | Early Help | | | | | | |
| CCE | Child Criminal Exploitation | | | | | | |
| TAF | Team Around Family | | | | | | |
| SENDIASS | Special Educational Needs & Disabilities Information Advice & Support Service | | | | | | |
| TRFT | The Rotherham Foundation Trust | | | | | | |
| YMARAC | Youth Multi Agency Risk Assessment Conference | | | | | | |
| SOS | Signs of Safety | | | | | | |
| TIP | Trauma Informed Practice | | | | | | |
| TOR | Terms of Reference | | | | | | |
| PSR | Pre-Sentence Report | | | | | | |
| SYP | South Yorkshire Police | | | | | | |
| P&Q | Performance & Quality | | | | | | |