

Ofsted Inspection April / May 2012

Action Plan – Key Ofsted Recommendations

Safeguarding Services

**Overall Effectiveness
Capacity for Improvement**

**Adequate
Adequate**

No	Area for Improvement	Action Required	Ofsted Time scale	Local Time scale	Lead Officer	Sub delegate officers	Progress / Comments	Test	Evid. On File	Date Comp.
1	All partner agencies should ensure operational staff understand and work to the agreed threshold for access to Social Care services	Meet with each of the 14 head teachers from each secondary school and each of the primary heads within their clusters to discuss: threshold document; referral pathways; agency responsibilities	immediately		Sue Reynolds	Julie Daniels Martin Murphy Susan Fisher	1 meeting already taken place with Parenthorn	Letter to each head confirming appointment Confirmation in SCMT minute when each meeting has taken place	Yes - part	
		Arrange inter-agency workshop day using case studies across the thresholds inviting partners			Sue Reynolds	Julie Daniels Martin Murphy Susan Fisher		Confirmation in SCMT when workshop has taken place		
		Develop TOR for EIS/A&A stakeholder group and re-launch			Julie Daniels	Martin Murphy Kirsty Walton Rebecca Sutton		Confirmation in SCMT minute when group re-convened		
		Threshold document, referral pathways, agency responsibilities to be discussed at "Safeguarding in schools" sub group			Julie Daniels			Minute of BSCB Executive		
		Re-distribution of			Julie Daniels			Copy of letter		

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		threshold document via BSCB with a covering letter offering opportunities to meet with managers to discuss document and spend time on A&A						accompanying threshold document		
2	Ensure carers know how to make representations regarding the accuracy of CPC /core group minutes	Include details of how to request amendments on the covering letter which goes out with the minutes	immed		Claire Paynter			Copy amended front sheet to conference reports	Yes	June 2012
		Standard letter to be devised to go out with core group minutes to address how amendments can be addressed			Melanie Tunney			Copy of letter		
3	Ensure there are appropriate arrangements for elected members to offer regular challenge & support to officers in their safeguarding work	Action Plan to be agreed by Cabinet	3 months	11/07/12	Mark Carriline			Relevant Minute of Cabinet		
		Report and Action Plan considered by Overview and Scrutiny Committee		28/08/12				Relevant Minute of Meeting		
		Overview and Scrutiny Committee receive regular progress updates on action plan and Safeguarding performance more generally - at least twice a year		TBC on 28/08/12				Relevant Minutes of Meetings, copies of reports		
		Safeguarding Performance to be included in all Star Chamber		Meetings to be scheduled throughout year				Copy of presentation		

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		presentations		commencing 09/08/12 then quarterly						
		Leader and Chief Executive meet with DCS, Lead Member and Chair of Safeguarding Board to consider and agree any response to Safeguarding Board Annual report and Business Plan		End Sept 2012				Note of agreed action from meeting		
4	Include the audit of supervision records and annual staff appraisals in a formal social care audit framework and consider extending the range of staff who carry out case file audits to include front line practitioners and senior officers	Development of QA&PM Framework	3 months	July 2012	Saul Ainsworth	Liz Shingler Claire Paynter		Audit framework revised and approved at SCMT		
		Refine Supervision audit tool;		July 2012	Claire Paynter			Copy of new audit template		
		Complete audit of Supervision		August 2012	Melanie Tunney	Julie Daniels		Feedback to SCPG		
		Develop new appraisal template		August 2012	Ruth Wheatley	Judith Simms		Copy of new template		
		Launch new appraisal template		Sept 2012	Ruth Wheatley	Judith Simms		Minute of SLG		
		Develop appraisal audit tool		Sept 2012	Ruth Wheatley	Judith Simms		Minute of SLG		
		Audit appraisals		January 2013	Ruth Wheatley	Judith Simms		Report to SLG with copy to SCPG		
5	Ensure social work reports for CPCs are prepared in advance so that the content can be shared with families prior to conference	Joint email from service managers to all social work staff to advise of the reasons this must take place and of the plan for monitoring.	3 months		Melanie Tunney	Julie Daniels Claire Paynter		Copy of email		

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		IRO to advise SM on each case when this practice is not adhered to			Claire Paynter	IROs		Minute of SCPG demonstrating improvement		
		TMs to discuss with social workers during supervision			Mel Tunney Julie Daniels	TMs		Minute of SCPG demonstrating improvement		
		IROs to collate data on a monthly basis and report to SCPG			Lisa Bell	IROs		Minute of SCPG demonstrating improvement		
		IROs to raise in conference			Lisa Bell	IROs		Minutes of SCPG demonstrating improvement		
6	Ensure that the minutes of strategy meetings are distributed promptly	Meeting between BSU and ATMs to discuss agreed procedure for minuting and distributing all strategy meetings Same meeting to consider monitoring process	3 months		Julie Daniels	Gary Horton Martin Murphy		Minute of report on monitoring mechanism to SCPG		
7	Ensure that the minutes CPCs are distributed promptly	Weekly monitoring of CPCs		In place	Claire Paynter	BSU	56 minutes currently outstanding (12 under 2 weeks)	Monthly monitoring sheets will evidence date of distribution of CPCs		
		Distribution of CPC word documents given delays caused by Liquid logic		From 19/06/12	Claire Paynter	BSU				
		Plan to address backlog of CPCs		In progress	Claire Paynter	BSU				
		Achieve CPC distribution within 1 month		Sept 2012	Claire Paynter	BSU				
8	NHS Bury & the	A task and finish	3 months		Karen	Julie Daniels	1/06/12	Copy of email and		

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	Council should ensure that safeguarding referrals regarding unborn babies are dealt with in a timely way that does not impede unborn baby planning or delay the discharge of mothers	group to be convened including representatives from Children's Social Care, NHS Bury, Pennine Acute Hospital Foundation (CSB), Royal Bolton Hospital Trust.			Whitehead	Mel Tunney Maxine Lomax	Invites to participate sent to CSB HV's, CSB safeguarding team, RBH, PAHT, KW, CP	letter		
		To develop a pathway and to disseminate to key agencies to provide a clear understanding regarding referral points and thresholds for referral at 15 weeks			Karen Whitehead	Julie Daniels Mel Tunney Maxine Lomax		Copy of email & letter		
		Email to all social workers and TMs to advise that referrals re unborn babies can be made by partners at fifteen weeks' gestation			Julie Daniels	TMs		Copy of email		
		Letter to partners advising of change in procedure to be disseminated via SL			Karen Whitehead			Copy of letter		
		Key personnel in health to raise with SM if referrals not accepted at fifteen weeks gestation			Julie Daniels			Issue to be raised in SCPG and minuted		
9	NHS Bury and Pennine Acute Hospitals NHS Trust should improve the rates of safeguarding training so that a minimum of 80% of	A training plan is in place following the Oldham Ofsted inspection, It is proposed to adopt the same plan which is trust wide.	3 months		Karen Whitehead Maxine Lomax		1/06/2012 Mid may figures for PAHT as follows: L2 - 76.5% of eligible workforce L3 - 68.5%	Pennine Acute & NHS Bury Training Plan		

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	all staff groups are in date and have received the correct level of training necessary for their post						Written to head of OD for NHS GM (Jacqui Wood)	Copy of letter		
		The monthly figures on number of staff trained to level 2 and level 3 on the Bury site as a percentage of the total to be trained to be presented monthly to the Designated Nurse for Safeguarding, NHS Bury.					7/06/2012 discussion with B Jackson OD. Agreed that staff will complete by mid July, piece for Comms written and sent. OD will co-ordinate training	Copy of letter		
		The target of 80% NHS Bury staff to complete level 1 e-learning for basic awareness in child protection (via the NHS module) by 31/07/12.						The figures will be reported to CCG Board and submitted to the Local Authority		
10	NHS Bury and Pennine Acute Hospitals NHS Trust should ensure compliance with Safer Recruitment and the NHS Employment Check Standards, especially in relation to CRB checks on current staff who change post within the Trust	NHS Bury will write to the Executive Lead for Safeguarding at PAHT for evidence that the required standards are being met.	3 months	31/07/12	Karen Whitehead	Maxine Lomax	Letter sent to Exec lead at PAHT on the 1/06/2012 7/06/2012 letter acknowledged-outcome awaited	Policy Sample audit of 20 Internal Appointments		
		The evidence will be scrutinised by NHS Bury HR Manager and assurance provided to the Local Authority and the CCG Board.			Karen Whitehead	Maxine Lomax		Minute of SCMT		
11	The Council & partners should ensure that the EI Strategy becomes	To be included in meetings with head teachers (see 1 above)	6 months		Sue Reynolds	Julie Daniels		Letter to each head confirming appointment		

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	embed across the partnership							Confirmation in SCMT minute when each meeting has taken place		
		Clear info. pack on intranet (links all thresholds, includes flowcharts, CAF)			Sue Reynolds	Andrea Whyne		Confirmation in SCMT minute when each meeting has taken place		
		21/09/12 Network Day			Lindsay Dennis	Sue Reynolds		Copy of programme of event		
		Organise 'road shows' to further promote work following Network Day			Sue Reynolds	Julie Daniels		Copy of programme of event		
		Promote relationships with Childrens centres and health			Sue Reynolds	Karen Whitehead		Minute of progress (SCMT)		
		Complete survey monkey within agencies to check on their knowledge of access to A & A/EIS (quarterly)		Nov 2012	Sue Reynolds	Julie Daniels		Survey results Report Cards re: Number of CAFs Referral rates to A&A Repeat referral rates to A&A		

Services for Looked After Children

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**Adequate
Good**

No	Area for Improvement	Action Required	Ofsted Time scale	Local Time scale	Lead Officer	Sub delegate officer	Progress / Comments	Test	Evid. On File	Date Comp.
12	Ensure statutory visit records make clear that children & young people have been seen (and seen alone where appropriate) and that their needs, views and wishes are reported on each visit	Remind Team Managers by email of expectations in ensuring stat visit responsibilities are completed and reviewed in all supervision sessions	Immed	Immed	Liz Shingler	Melanie Tunney Claire Paynter Julie Daniels	New system alerts TMs when stat visits are overdue	Copy of email		
		Report Card to be developed regarding statutory visit compliance			Sue Harris	David Thompson		Minute of SCPG		
		Themed audit on quality of statutory visits			Claire Paynter	Lisa Bell		Minute of SCPG		
		Random telephone calls to foster carers re statutory visit compliance			Saul Ainsworth	SL (SG)/SMs		Minute of SCPG		
		Explore potential for revision to IT system to ensure that system alerts in place to TMs when stat visits due.			Liz Shingler	Mike Hather		Email report from Mike Hather		
		Existing template is to be used as guidance by the SWs.			Sue Harris			Email confirming all staff informed		
13	Ensure that case management decisions are recorded on the electronic case file and that the reasons for decisions are included	Remind Team Managers of expectations	Immed	June 2012	Melanie Tunney	Julie Daniels		Minute of Team Manager meeting;		

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		Check protocol addresses this and revise as required.		June 2012	Melanie Tunney	Julie Daniels		Minute of SCMT		
		Themed audit within QA&PM Framework		Sept 2012	Melanie Tunney	Nicola Higham Gareth Millar		Minute of SCPG		
14	Ensure that all assessments take full account of the family history in assessing risk	Themed team meeting to remind staff of the need to consider full family history and impact of family members outside of the home and ensuring that chronologies of a child's experience and genograms are used productively within the assessment process	3 months		Melanie Tunney	Nicola Higham Gareth Millar		Minutes of team meetings		
		Themed audit within QA&PM			Melanie Tunney	Nicola Higham Gareth Millar		Minute of SCPG		
15	Ensure that all electronic care plans are up to date and reflect the current plan for each child and young person in the care of Bury	Ensure new process for review of Care Plans is understood and is working;	3 months	July 2012	Liz Shingler	Claire Paynter	New process for LAC reviews has been developed (Revised Care Plan and progress update for Review has been combined into one document)	Minute of SCMT		
		IROs to ensure that all Care Plans that have not been revised are followed up and completed; flagged to senior managers when not.			Lisa Bell	IROs				
		TMs to be advised if not completed			Lisa Bell	IROs		Minute of SCPG		
		Themed audit within			Melanie	Nicola Higham		Minute of SCPG		

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		QA&PM			Tunney	Gareth Millar				
16	Ensure that social work reports for statutory reviews clearly set out progress made against the care plan to inform the review process	Revise format of report to review	3 months		Claire Paynter		Within new format there is no report; rather an care plan which is to be updated	Copy of template		June 2012
17	Ensure that all statutory reviews are chaired with sufficient rigour by the IROs and that challenge is fully documented in the review record	Guidance issued to IROs	3 months	June 2012	Claire Paynter		All review write ups are now overseen by C Paynter or Lisa Bell.	Reduction in number of review records returned to IROs for amendment.		
		Audit every one by Team manager/ Service manager before sending out for 3 month timescale and take immediate action		June – August	Claire Paynter			Record of follow-up reported upon monthly and included in Quarterly report.		
		Monthly sample audit thereafter			Claire Paynter			Report to SCPG		
18	Improve the timeliness of adoption of those children for whom it has been decided adoption is in their best interest	This will largely be encompassed by improvement to the Care Planning system which will shorten the length of time children are in care proceedings.	3 months	09/12	Liz Shingler	Jean Mackenzie		New Care Planning System in operation resulting in substantial lessening of the time between a child being made subject of an ICO and being placed for adoption or in other permanent placement evidenced via Report Card on timeliness of adoption in context of national report		

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								cards		
		Additional initiative – to explore the option for concurrent placements with Rochdale and Oldham Adoption Services		03/12	Liz Shingler					
		Continue to use Adoption Panel consistently for expertise in matching placements.		03/13	Liz Shingler					
19	Ensure that supervision records demonstrate reflective practice	Supervision themed audit	3 months		Claire Paynter & Liz Shingler			Themed audit report		