

## Action Plan addressing recommendations from the Ofsted Focused Visit – September 2020

This action plan addresses the areas for improvement following the Ofsted Focused Visit of Milton Keynes CSC in September 2020.

Progress of this action plan is review at monthly meetings with key leads for the action plan; Sophie Marshall (Principal Social Worker), Melinda May (Group Head of Service Children and Families) this review work is supported by Phil Roberts (Safeguarding Improvement Officer).

### Key to RAG Rating

The RAG status should be interpreted as follows:

RAG Shading	Action Status
	Action not yet started.
	Action in progress and on schedule to complete on time as planned.
	Action in progress but at risk of not completing on time as planned.
	Action started, but blocked; key milestone not met, or other as yet unresolved impediment to completion.
	Action completed successfully.

Area identified for improvement: Address case allocation and capacity in Family Support Teams					
	Actions	Owner(s)	Progress / Outcome	RAG	Time Scales
1	Performance Team to implement a weekly report of all cases allocated to Deputy Team Managers to ensure senior management oversight. Report to be shared with Mac Heath, Melinda May, Candice Boatswain and Sophie Marshall. Candice Boatswain to monitor.	Lisa Beckett / Candice Boatswain	This is now routinely taking place and happening on a weekly basis. Active Heads of Service follow up on areas of concern are having an impact.		Monday AM weekly
2	Case allocation and progression, by ensuring that all children transferring from the MASH are quickly allocated and revisited and their plans are progressed.	Candice Boatswain	Challenging volume of cases coming. Close senior management oversight.		Ofsted Meeting Monthly
3	Introduce 4 new social workers to increase capacity across the FSTs. The 4 posts will be filled immediately by agency workers in the interim.	Melinda May	New posts created: 4 SW posts, 1 QA worker, 1 independent chair, 1 LADO. Successful permanent recruitment campaign 8 new social workers joining MKC.		Review in monthly recruitment meetings

Area identified for improvement: Improve recording of management oversight and decision making ensuring this includes rational for the decisions					
	Actions	Owner(s)	Progress / Outcome	RAG	Time Scale
4	Produce guidance for managers with setting expectations for recording of management decisions (including decisions between supervision / assessment sign off etc.) This will be added as an area of focus in our monthly audits with social workers.	Sophie Marshall	Launched as part of the new Quality Assurance framework in April 2021. Guidance for managers on recording sent out in February 2021.		April 2021 February 2021
5	While supervision takes place regularly, the quality of recording is variable. For some children, supervision records lack detailed actions with timescales to prevent drift in progressing plans.	Sophie Marshall / Nickie Healy	Launched as part of the new Quality Assurance framework in April 2021. Guidance for managers on recording sent out in February 2021		April 2021
6	Training for recording management decisions to be organised for all supervisors.	Sophie Marshall / Nickie Healy	Managers attended mandatory training March 2021		March 2021
7	Review impact of midway review monitoring meetings by Independent Chairs	Quality Assurance	Audit set for 28 <sup>th</sup> June 2021 to look at impact – in the interim being monitored by the Independent Reviewing Officer development plan. Audit has been completed and report is being produced by 30 July.		July 2021

Area identified for improvement: Review the case load and workload arrangements for the Personal Advisors in the 16 – 25 service					
	Actions	Owner(s)	Progress / Outcome	RAG	Time Scale
8	Review of caseloads to be completed by Team Manager and Head of Corporate Parenting.	Huma Ali / Sivay Heer	This is captured monthly in our data market and reviewed quarterly at our CSC performance board		Monthly Quarterly
9	Some pathway plans are not comprehensive enough. They do not consistently have clear action plans to help achieve positive change or to mitigate potential risks. Pathway plans do not always sufficiently capture future plans for care leavers who are NEET (not in education, employment or training)	Sivay Heer	Meeting held 9.2.2021 to create an improvement plan for pathway plans. Pathway Plan audit 26.5.21 SOS training booked July 2021 Janet has been to the team in the mean time.		July 2021
10	Placement sufficiency is a challenge in Milton Keynes, particularly for care leavers. Leaders and politicians are working to address this within the council, for example by working with the housing department to create new accommodation in Milton Keynes specifically for care leavers.	Youth Accommodation Sufficiency Board	Task and finish group formed to include commissioning, adult services, and housing services with a view to make recommendations in April 2021		April 2021

Area identified for improvement: Continue to develop quality assurance approach ensuring audit focuses on having a critical eye					
Actions	Owner(s)	Progress / Outcome	RAG	Time Scale	
11	Sophie Marshall / Phil Roberts	Restructure to be progressed in March 2021 to the safeguarding service to introduces additional capacity.  Delay due to management restructure, due to progress June 2021 – plan in place.		June 2021	
12	Rhian Williams Virtual School Governing Body Sivay Heer	New Portal launched January 2021 PEPs trained staff being included in audit timetable from April 2021  Pathway plan audit includes PEPs, Rhian has attended TMs to give input about the new system – update April 2021		April 2021	
13	Sophie Marshall / Phil Roberts	Being reviewed alongside SESLIP group work. Launch April 2021  Completed and rolled out – will need on going review Updated April 2021		April 2021	
14	Sophie Marshall / Phil Roberts	Moderation capacity increased by 3 managers – start Jan 2021 – Monthly audits undertaken		Jan 2021	

15	Implement quarterly auditor development sessions which focus on lessons learned from moderation, external review, and auditors experience.	Sophie Marshall / Phil Roberts	First one June 30 <sup>th</sup> , 2021  Feedback has been considered and adjustments have been made to the audit tool. Moderation from Q1 will commence in July.	June 2021
16	Develop 'what good looks like' practice expectations for key elements (e.g., recording management decision).	Sophie Marshall / Phil Roberts	Part of the training which is being delivered in March 2021  Training delivered and guidance sent to managers March 2021	March 2021
17	Ensure quarterly QA reports are being shared and discussed at Team Meetings so that practitioners are clear about learning and action being taken to make improvements.	Sophie Marshall / Phil Roberts	Discussion with Deputy Team Managers – action – Quality Assurance to create a headline page that can be shared at Team Meetings – first one Feb 2021	February 2021
18	Mandatory audit training for all managers and those conducting audits	Sophie Marshall/Nickie Healy	New Audit forms and Audit training March 31 <sup>st</sup> 2021  Training taken place and circulated to managers may need to review as audit quality is assessment March 2021	March 2021

Area identified for improvement: Review Transitions arrangements					
Actions	Owner(s)	Progress / Outcome	RAG	Time Scale	
19	Review Transfer policy	Sivay Heer / Sophie Marshall/Candice Boatswain	Two meetings held with agreement for process from MASH to FST and FST to CIC and 16 plus – SM to rewrite policy to reflect agreement. Further planning needed for clarity from MASH to Children and Families Practice – Family Support Team to Children and Families Practice and Children in Care back to Family Support.  Signed off my MM and MH – MK Together have seen. Updated April 2021		March 2021
20	Develop agreed process for case transfer meetings.	Sophie Marshall/Sivay Heer/Candice Boatswain	Now agreed and will be part of transitions policy. Not yet green as being launched to staff with new policy mid Feb. MASH workers started new process as a trial until then.  Signed off my MM and MH – MK Together have seen. Updated April 2021		March 2021



25	Supervision themed audit to check progress on actions within three months of training being completed	Quality Assurance	Planned for May 2021 Supervision observations of managers started to take place April 2021  Supervision audit June 16 <sup>th</sup> . Audit completed and write-up to be completed (delayed due to system issue and audit records not being fully accessible).		June 2021
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