

Nottingham City Council's response to the Ofsted ILACS inspection

Introduction

Nottingham City Children’s Services were inspected by Ofsted in July 2022 under the Inspection of Local Authority Children’s Services (ILACS) framework.

The inspection report was published on 5th September and is available on the Ofsted website: [Ofsted | Nottingham City Council](#)

The outcome of the inspection was

| Judgement | Grade |
|--|--|
| The impact of leaders on social work practice with children and families | Requires improvement to be good |
| The experiences and progress of children who need help and protection | Inadequate |
| The experiences and progress of children in care and care leavers | Requires improvement to be good |
| Overall effectiveness | Inadequate (limited by the grading within the domain of children in need of help and protection). |

The Ofsted Action plan will be monitored through the Children’s at the Heart Improvement Board, which is chaired by an independent Department for Education Improvement Advisor. The Improvement Board was recently restructured to enable it to secure sustainable improvements in children’s services through robust strategic leadership across the partnership, alongside a focus on the detail of processes and systems within the local authority’s children’s services. As a result, there will be an Executive Board comprised of senior local authority leaders, the portfolio holder and Chair of the Safeguarding Children’s Partnership which will meet monthly to provide support and challenge to Children’s Services. The Partnership Board, made up of senior partnership leaders, will take place quarterly.



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1. Effectiveness and timeliness of responses to children's needs when first presented to the multi-agency safeguarding hub (MASH).

| Outcomes for Children and Families | Action needed | Responsible | Due Date | Progress | Impact | RAG |
|---|---|----------------------------------|----------|---|---|---|
| <p>Children, young people, and families are offered help when needs and/or concerns are first identified</p> <p>There is a timely and</p> | Increase Social Work capacity by 8 additional social work posts | | 16/09/22 | <p>Agency cover has been secured whilst the posts are recruited to through the permanent establishment.</p> <p>Resource for 8 additional permanent posts has been identified.</p> <p>Permanent social work posts are now being advertised as part of rolling recruitment.</p> | <p>Increased capacity has had a positive impact upon the timeliness of response to children:</p> <p>Numbers of open contacts has reduced from over 1000 in January 2022 to 196 in October 2022. Improvement from 603 contacts with 158 open longer than 6 days in June to 196 contacts open in November with 26 being open for 6 days (none exceeded 5 working days). This will continue to be monitored through MASH performance data by the MASH management team.</p> | <p style="background-color: green; color: white; text-align: center;">RAG</p> |
| | Create an additional Service Manager post to create additional capacity in the MASH | Sam Danyluk Head of Service – | 16/09/22 | An interim Service Manager has been recruited and has been in post since 5 th | The creation of this post provides greater oversight on data, timeliness, and relationships with partners. The impact of this additional | |



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| effective response to referrals, including out of normal office hours | | First Response | | September, pending recruitment to permanent establishment. | capacity will be improved application of threshold both within the service and with wider partners leading to more timely outcomes for children and families. This impact is measured above and below. | Green |
| | Undertake weekly audits around decision making and the application of threshold within the MASH | David Goldsworthy Service Manager - MASH | 31/03/23 | Dip samples have commenced and will take as part of business as usual. End date of 31 st March to monitor continued impact and action to remain amber until satisfied this is a sustained improvement. Updates will be provided to the Children's Executive Improvement Board on a monthly basis. | Improved consistency is being achieved in the decision making and application of thresholds within the MASH – In October 120 dip samples undertaken of which 4 were sent back for further information to be sought. A selection of these were sent to the independent auditor for further scrutiny w/c 21st November. Monthly audit information will be reviewed to ensure consistency. | Yellow |
| | Implement RAY rating system to aid prioritisation of contacts | | | 30/11/22 | This has been implemented | This provides a consistent framework for threshold decisions and ensures |



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|------------------------------------|--|--|----------|---|--|-----|
| | | | | | children at greatest risk are prioritised. | |
| | <p>Devise MASH practice guidance which outlines the expectations around consistency for the Team Managers and MASH colleagues.</p> <p>Review current Analysis and Insight reports to ensure that they accurately capture the impact measures within the MASH</p> | Sam Danyluk Head of Service – First Response | 31/01/23 | <p>First draft to be presented at children’s leadership by mid-January 23.</p> <p>Once RAY rating is implemented further review work will be undertaken on the suite of data reports available.</p> | There will be clear effective management footprint on children's case files, which will mean children receive the right support in a timely way. | |
| | Undertake a multi-agency review to look at current workflows in place and how these can be improved to support timely information sharing | | 31/01/23 | First meeting to took place W/C 5.12.22 | There will be clear pathways for information sharing that supports timely decision making for children | |
| | Review MASH partners to include education, Youth Justice Service and Juno Women's Aid. | | 31/03/23 | Juno Women’s Aid have now returned to the MASH. | Partners will be present and responsive in the MASH room enabling more timely screening and decision making. This will also promote collaborative partnership working. | |



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| | Implement a policy that 3 contacts in a 6-month period will escalate to a referral. | | | New policy implemented: 3 contacts in a 6-month period review is now standard practice. | Cumulative harm to children is considered, and reviewed following 3 contacts | Yellow |
| | Seek to secure representation from education and midwifery to strengthen Multi Agency Domestic Abuse decision making | | 31/03/23 | In progress | Multi-agency decision making where there are domestic abuse concerns will be strengthened | Yellow |
| Professionals understand thresholds and identify children and young people in need of help and protection. They make appropriate referrals to children's social care and can access social work expertise | Hold workshops with Designated Safeguarding Leads re informed consent for all contacts that are not relating to immediate harm to children | | 31/03/23 | First sessions held at the DSL network in October 22 attended by 100 DSL's Further sessions are being delivered with the safeguarding partnership to school Safeguarding leads week commencing 28th November. | The partnership will have a sound understanding of consent and this will inform contacts into the MASH. All partners will be aware of the "threshold of need" document and actively using this as a shared document. Therefore, children and families will be supported at the right part of the system? | Yellow |
| | Refresh of Multi Agency Referral Form | | 31/03/23 | Re-refresh has taken place, word document went live on the website end of November. | | Green |
| | Refresh the Threshold Descriptors and launch via the Partnership. | | 31/03/23 | First draft to be developed by 03.01.2022 | | Yellow |
| | Undertake a review of the consultation line to improve | | 31/03/23 | Consultation in respect of the consultation line has been completed. | | Yellow |



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| <p>and advice. This leads to families receiving timely and proportionate intervention that improves outcomes.</p> <p>Early help improves the child's situation and supports sustainable progress.</p> | <p>the sharing of information without consent and how information shared is recorded.</p> | | | <p>A time focussed tracking system has been implemented to mitigate the risk of advice not being actioned when this is given to professionals.</p> <p>This tracking system will remain in place until 19th December when the line will cease to operate.</p> <p>Communication will be sent out via the education newsletter to confirm this.</p> | <p>ensure that appropriate consultations and advice is sought from schools' designated leads and the city's network of advanced safeguarding leads. This will ensure advice is sought from appropriate professionals and appropriate referrals are made to children's social care.</p> | |
| | <p>Develop an engagement programme of multi-agency workshops exploring best practice in securing improved outcomes for children and young people to include:</p> <ul style="list-style-type: none"> • Initial engagement with families who may have additional needs. • Early help strategy and early help assessments. • Consistent approach to statutory thresholds. | <p>Rosa Waddington</p> <p>Chair of the Safeguarding Partnership Strategic Leadership Group</p> | 30/04/23 | <p>We are working on this area with the safeguarding partnership, first meeting took place Monday 28th November 2022.</p> | <p>Children and families will be able to access wider early help services when they need this to achieve positive outcomes and avoid unnecessary escalation to statutory services.</p> | |



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| | <ul style="list-style-type: none"> Consistent approach to seeking informed consent | | | | | |
| <p>Help given to families is proportionate to the level of need. Information-sharing between agencies and professionals is timely, specific, effective, and lawful. Action is taken to avoid drift and delay.</p> | <p>Undertake weekly dip samples to verify the threshold for "No Further Action" decisions is being consistently applied</p> | <p>Sam Danyluk Head of Service – First Response</p> | 30/03/23 | <p>These are taking place. There has also been some additional quality assurance of these by an external auditor. In October 120 dip samples were completed. 4 were sent back for further information to be sought. A selection of these are with the independent auditor for further scrutiny.</p> | <p>There will be confidence and evidence that threshold decisions are being applied consistently, meaning that children and families get the timely support which is proportionate to their need. This will be supported and evidenced by QA work and analysis and insight data information.</p> | |
| | <p>Undertake monthly dip samples focussed on the quality of the information shared and recorded and outcomes of decision making</p> | | 28/02/23 | <p>These have been running and are on-going and are now business as usual around NFA decisions. We are now shifting our focus to decisions around threshold for assessment.</p> | <p>There will be confidence that appropriate information is being shared resulting in a timely appropriate decision. This will ensure that children are receiving a timely response that is appropriate to their circumstances and level of need.</p> | |



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| Children and families experience child protection enquiries that are thorough and lead to timely action, which reduces the risk of harm to children | Task and finish group to be set up with partners to review current arrangements for strategy discussions. | Sam Danyluk Head of Service – First Response | 28/02/23 | Two groups have taken place to date, with internal colleagues and partners. | Strategy discussions will be attended by health and police colleagues, held in a timely way with a consistent application around the threshold for initiating S47 enquiries. | |
| | Review Liquid Logic LCS strategy discussion form and ensure it supports good practice and is based on outcomes for children. | | | Meetings to review the discussion form are in progress. Second meeting scheduled w/c 12 th December | | |



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2. Management oversight and direction of front-line work and the local authority designated officer (LADO)

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|---|---|--|----------|---|--|-----|
| Systematic and high-quality management oversight of frontline practice drive child-centred plans and actions within the timescales appropriate for the child. | All Team Managers within the service to benefit from undertaking the Frontline training programme | Nicole Harris Head of Service – Fieldwork/ Sarah Wright Interim Principal Social Worker | 31/01/24 | Team Managers for the first cohort have been identified and submitted their applications. All spaces reserved for the upcoming 3 cohorts. DFE funding for Essex (Sector Led Improvement Partner) has been approved. This will provide manager peer support for a period of 3 months to those Team Managers in cohorts 2 and 3 pending their frontline programme starting to support sharing of best practice | All social work qualified Team Managers will have completed the course. This will support them develop their confidence in applying their knowledge and skills to provide high quality oversight of practice, which will be evident on a child's file through child centred plans and reduced drift in timescales. | |
| Managers and front-line workers have clear expectations to enable them to deliver so that children and families | Devise MASH practice guidance which outlines the expectations around consistency for the Team Managers and MASH colleagues. | Sam Danyluk Head of Service – First Response | 31/01/23 | First draft to be presented at leadership by mid-January 2023. | There will be clear, effective management oversight evident in the footprint on children's case files. | |



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|--|---|---|----------|---|---|--------|
| receive consistent and timely services. | Unallocated guidance to be developed for Targeted Family Support Teams | Nicole Harris Head of Service – Fieldwork | 31/10/22 | This has been approved and was shared with the workforce w/c 3rd October 2022. It is available on the intranet for the workforce to access. | There will be good management oversight of unallocated work in TFST which is consistent across all TFS teams. | Green |
| | Devise bottom line expectations for Team Managers in Duty which will include expectations around review and management oversight. | Sam Danyluk Head of Service – First Response | 31/03/23 | An expectations document has been drafted and is under review by the Head of Service. This will launch with the team in January 2023. Management oversight will be reviewed through dip samples between January and March. | There will be clear, effective management footprint on children's case files. | Yellow |
| Children who require long term intervention or who have experienced repeated referrals will have clear management oversight to ensure intervention is purposeful and reduce drift and delay. | Implement process of Service Managers reviewing long term Child in Need (CIN) plans (9 months+) with Team Managers | Nicole Harris Head of Service – Fieldwork | 31/01/23 | This process is now in place, but work is needed to confirm that this is taking place consistently and there is evidence of this oversight on case files. Dip sampling activity is taking place in December 2022 to capture the consistency and impact of management oversight on progression towards good outcomes for children. | Children who require long term intervention through a CIN plan will have clear management oversight to ensure intervention is purposeful and reduce drift and delay | Yellow |
| | Develop process for review of repeat CiN plans by Managers. | | 28/02/23 | Work on the process will commence in January 2023 | Children who require long term intervention through a CIN plan will have clear | |



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| There will be a clearer understanding of the reasons for repeat/long term child protection plans which can help the development of training and tools to support practitioners. | | | | | management oversight to ensure intervention is purposeful and reduce drift and delay | |
| | All children subject to repeat/long term (over 15 months) child protection plans are to be reviewed at panel | | Start Oct 22 and review every 6 weeks | Dates for the panel have been organised. The first started on 17th October 2022. These are planned to take place every 4-6 weeks. Panels have now taken place with 79 children having been reviewed and actions identified. A learning briefing has been completed which will be shared with the Social Work Teams in January 2023 as part of a practice development session. Panels have been booked to take place every 6 weeks. | There will be a clearer understanding of the reasons for repeat/long term child protection plans will inform the development of training and tools to support practitioners. The panels will provide management oversight which will see Care plans for children progress at pace | |
| For children who have been missing or often missing, there is a clear plan of urgent action in place to protect them and to reduce | Recruitment of Team manager for missing and exploitation to ensure that return home interviews are timely and include analysis of the child's circumstances that feeds into care and other plans. | John Matravers Head of Service – Safeguarding, Partnerships | 05/12/22 | Permanent recruitment is underway, and an interim candidate has been identified to undertake the role from December 2022 to drive improved performance. The interim post holder will remain in post until recruitment to permanent establishment has been completed and is in post. | There will be clear management oversight to ensure that return home interviews are timely, provide a clear analysis and this contributes to a safety plan for the child. | |



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| the risk of harm or further harm. | | and Quality Assurance | | | | |
| Allegations of abuse, mistreatment or poor practice by professionals and carers are taken seriously. Steps are taken to protect children and young people and the management of allegations against staff is robust and effective | All processes, policies, and procedures for the Local Authority Designated Officer service will be reviewed and amended (this will include Local Authority Designated Officer decisions made by the Designated Officer). | John Matravers Head of Service – Safeguarding, Partnerships and Quality Assurance | 07/11/22 | Procedures have been reviewed and updated so that they are clear and simple. | Process and decision making will be clear and consistent. | |
| | Provide clarity to all on who the Local Authority Designated Officer is – published via safeguarding partnership | | | The Local Authority Designated Officer has been updated on the website for the Nottingham City Safeguarding Children’s Partnership and has been introduced to the partnership including all school and Early Years Designated Safeguarding Leads. | Partners will know how to contact the LADO. | |
| There will be effective management oversight and tracking of referrals to reduce drift and | Minimum standards for recording (including management footprint and decision making) to be agreed following consultation and review of regional and national Local | John Matravers Head of Service – Safeguarding, | 10/10/22 | The Allegations Management Service Team managed by the LADO has agreed on all standards required and these are in place. Service meetings have taken place where procedures and policies were discussed and agreed, including footprint, management oversight and clarity re Local Authority Designated | There will be clear effective management oversight in all referral records. Decision | |



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| ensure appropriate decisions are made. | Authority Designated Officer services. | Partnerships and Quality Assurance | | Officer making decisions where required | making will be timely, appropriate, and clear. | Green |
| | Local Authority Designated Officer spreadsheet to be monitored on a weekly basis via the Local Authority Designated Officer service meeting pending reporting capability being established on Liquid logic | | 10/01/23 | The LADO, Service Manager and Head of Service meet on a weekly basis to manage performance | | Green |
| | Develop a performance framework with standards for timely resolution on Liquid Logic to enable performance to be monitored. | | 27/01/23 | Referral made to Analysis and Insight for this performance framework to be reportable through Liquid Logic | | Yellow |
| Leaders will have a clear understanding of the quality and consistency of practice and outcomes for children to inform service improvements, | Undertake a comprehensive review and refresh of our Quality Assurance (QA) processes. | John Matravers Head of Service – Safeguarding, Partnerships | 27/01/23 | A review of quality assurance activity and proposals were presented to and agreed at Leadership on 25/10/2022. The service is struggling to achieve a satisfactory volume of audits so to address this a 12-month plan has been developed to increase capacity. DFE funding has been secured for 2 temporary agency social workers to | Managers will have a greater understanding of the consistency of quality of practice across the service to inform learning and development and the development practice tools | Yellow |



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| learning and development. This will ensure children and families receive consistent intervention and improved outcomes | | and Quality Assurance | | deliver at least 40 audits a month. Managers will be upskilled to undertake audits and resume as business as usual. | to ensure that more children receive good quality intervention and improved outcomes. | |
| | Complete a review of the moderation panel and its purpose | | 31/12/22 | A review of quality assurance moderation panel and proposals were presented to and agreed at Leadership on 25/10/2022. A clear moderation panel process will be in place by end December 2022. | | |
| | Set up monthly dip sampling led by Heads of Service | | 16/12/22 | Dip sampling is now undertaken by the Heads of Service and the frequency of this will be agreed and then performance monitored and addressed where required. | | |
| | Develop and implement thematic audits. | | 16/12/23 | A thematic audit schedule will be developed to commence in July 2023 | | |



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3. Social work capacity so that social workers and first-line managers can respond effectively to children in need of help and protection, and that children in care have greater consistency of social worker.

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|---|---|---|----------|--|--|--------|
| Nottingham will be an attractive Local Authority to work for with a variety of recruitment streams to enable vacant posts to be filled by permanent staff. This will increase service capacity, meaning children and families experience consistency of worker and their needs are responded to | Social Work apprenticeship scheme to be implemented in Children's Services | Nicole Harris / Aadil Bhatti Head of Service – Fieldwork / HR consultant | 31/01/26 | 8 internal applicants shortlisted to go through to university interview panel on 28 th November. Modelling being undertaken for the future cohorts, including career pathways across and into children's as part of Learning Academy development, and development of entry-pathways into social work (e.g. family support workers) | This will offer a new recruitment stream for workers to become qualified and offer additional capacity in the service once qualified. This will enable NCC to fill existing vacancies, reducing caseloads enabling swift allocation and enabling social workers to build relationships with children and families. | Yellow |
| | Work with HR reps to improve the accessibility and content of the recruitment site to highlight the benefits of coming to work at Nottingham City | Ailsa Barr/ Rachael Morris/ Aadil Bhatti Director CIS / Head of | 31/03/23 | Web pages went live w/c 14 November with new branding 'Changing Lives, Changing Futures' A marketing design brief has been sent w/c 14 November to marketing/design agencies for quotes to look at the children's online and social media | This will make Nottingham a more attractive option and support more applicants to apply for positions. This will enable NCC to fill existing vacancies, reducing | |



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| effectively and timely. | | Service – Fieldwork / HR business lead / HR consultant | | platform and hep produce a campaign for attracting social workers New recruitment system expected to be implemented in August 2022, delayed due to issues outside NCC's control. Go live expected March 2023. Social Care section on candidate site is being prepared. including uploading the marketing campaign materials (videos etc) on go live | caseloads enabling swift allocation and enabling social workers to build relationships with children and families. | |
| | Work with HR to produce a more effective recruitment campaign and process to fill vacant Children in Care and residential posts | Mary-Anne Cosgrove Head of Service – Children in Care, Care Leavers and Regulated Services | 31/12/22 | Social Media campaign live from 1/12/22. NQSW advert is going on seven local Universities from 1/12/22 Adverts have been drafted and an Indeed campaign launched for Residential Children's workers w/c 14/11/22. Links to this advert will be shared through social media channels. | Filling vacancies will increase capacity in CiC teams reducing caseloads to no more than 16 children so that children have time with their social worker to build trusting relationships | |
| | Recruitment to vacant Targeted Family Support Team posts | Nicole Harris Head of Service – Fieldwork | 31/01/23 | The recruitment process is underway. There were over 20 applicants to the post. Interviews due to take place w/c 05.12.22 | Filling vacancies will increase capacity in the TFST teams to ensure work can be allocated in a timely way reducing the | |



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| | | | | | wait time for families in need of support | |
| | Provision of placements for a further cohort of Step Up to Social Work students | Alison Rawlins Practice Education Specialist | 30/09/24 | Confirmation to D2N2 that we will accept 7 Step UP Social Work students has been approved | This generates additional support for existing staff as Step Up Students taken on placements and work with families/supporting qualified workers, providing another recruitment stream for vacant posts. | |
| | Rolling recruitment of qualified social workers (Assessed and Supported Year in practice (ASYE) and experienced) | Sam Danyluk / Nicole Harris / HR Heads of Service First Response / Fieldwork and HR consultants | Review 30/09/23 | Rolling recruitment is continuing for experienced and ASYE social workers. Interview panels are booked every month. At this stage applications remain at a low level. Social Media campaign for experienced social workers is live from 1/12/22. NQSW advert is on seven local Universities from 1/12/22 Ad-hoc panels arranged where experienced Social worker applications are received to minimise any drift and delay | By offering rolling recruitment and being responsive to offers, we increase the chances of successfully recruiting to vacant posts. | |



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| | | | | <p>HR implemented a more proactive approach to vacancy management, ensuring permanent recruitment is captured as part of rolling recruitment (including advertised) or agency cover is attempted</p> <p>Candidate care: process put in place and pre-employment checks are commenced within 24 hours of offer. Options around paid campaigns have been explored including jobs boards and sector specific sites.</p> | | |
| Nottingham will be a Local Authority that people want to remain with. This will decrease staff | Development sessions to be established for cohorts of qualified social workers | <p>Nicole Harris/Sam Danyluk/Mary-Anne Cosgrove/John Matravers</p> <p>Heads of Service – Fieldwork/First Response/</p> | review 30/09/23 | <p>Level 3 sessions have taken place and are scheduled for every 6 weeks. These are planned to include presentations from partner agencies including CAFCASS.</p> <p>ASYE's already have a programme of learning and developments events. All ASYE's are booked to have feedback sessions in Feb.</p> | This will support the development of practice knowledge and skills for social workers and provide mentoring and support sessions which will see increased retention of social workers. This will reduce the likelihood of children and families experiencing a change of social worker, which will | |



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| turnover, meaning that children and families experience consistency of worker and are able to build strong relationships, improving their outcomes. | | CiC, Care leavers and Regulated Services/ Safeguarding, Partnerships and Quality Assurance | | | support the development of trusting relationships. | |
| | Develop a Children's Integrated Service's Learning Academy page Develop training pathway to support development pathways for Children's Integrated Service staff | Sam Morris Head of Service - Strategy and Improvement | 31/12/23 | Project working group established. Options paper to presented to Children's Integrated Service leadership team on 8th November 2022 and scope agreed with People's Leadership Team on 7th December | Launch of the CIS Learning Academy that offers a range of learning mediums accessible to all staff within CIS. There will be clear development pathways for staff which will provide staff with job satisfaction, increasing retention rates. This will reduce the likelihood of children and families experiencing a change of social worker, which will support the development of trusting relationships. | |



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| | Review workforce strategy plans from good or outstanding Local Authorities | Sam Morris / Rachael Morris | 30/11/22 | Workforce strategies for Local Authorities identified as 'good' and 'outstanding' secured. Met to review and plan HoS December workshop on 10 th November. | There is a refreshed workforce strategy that sets out CIS workforce strategy which will provide a clear offer to the workforce with the aim of increasing recruitment and retention rates. This will reduce the likelihood of children and families experiencing a change of social worker, which will support the development of trusting relationships. | Green |
| | Workshop with Heads of Service to agree workforce vision and key essentials of a strategy | Head of Service – Strategy and Improvement / HR | 28/02/23 | 1 st workshop scheduled for 16 th December | | Yellow |
| | Refresh and launch the workforce strategy | Business Lead | 30/06/23 | The Workforce Delivery Plan is in place in the absence of the developing strategy, this is delivering key scoping work and operational work to support the stability of the workforce in the interim. | | Yellow |



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4. Placement sufficiency for children in care and those with complex needs.

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|--|---|---|----------|--|--|-----|
| Children will be in the right home in the right place at the right time for their needs. Children with complex needs who need to be in care will have a safe placement as soon as it is needed | Work regionally and locally to ensure increased capacity in in-house and external provision, including transformation work. | Mary-Anne Cosgrove | 01/04/23 | D2N2 joint commissioning on-going. D2N2 Fostering Group on-going. Meetings between Heads of Service and Newton Europe have taken place, revisiting the diagnostic findings, workstreams and agreeing principles and initial start-up milestones. Block contract in place for 4 children's homes (3 now open) and Supported Accommodation x 10 (now up and running); Supported Lodging x 20 | Children will be able to be live in a home that suits their needs without delay, providing them with stability and security. | |
| | Continue to work regionally to increase local provision for children with complex needs. Commissioning redesign includes increased capacity for Children in Care. | Head of Service – Children in Care, Care Leavers and Regulated Services | 01/04/23 | Interim Children's Commissioners recruited November 2022. They will lead on strategy update. They are now beginning to engage with D2N2, providers and the service to look at sufficiency needs and opportunities. | There will be a clear strategy to support long term sustainable homes for children so that children are able to live in a home that suits their needs and provides them with stability and security. | |



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| Outcomes for children and families | Action needed | Responsible | Due Date | Progress including evidence | Impact | RAG |
|------------------------------------|---|-------------|----------|---|---|-----|
| | Work with Newton Europe to progress the Modernisation of Fostering strand of the transformation programme | | 01/04/23 | Meeting between Heads of Service and Newton Europe revisiting the diagnostic findings, workstreams and agreeing principles and initial start-up milestones have taken place. Newton have begun scoping work. Further Residential Block being explored | There will be a pool of foster carers that will enable children to live in a home that suits their needs and provides them with a safe and secure family environment. | |



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5. The service response to care leavers aged 21 and over.

| Outcomes for children and families | Action needed | Responsible | Due Date | Progress including evidence (include reference to data reports on KPIs, findings from audit) | Impact (anticipated impact - to be updated with evidence of actual impact once objectives achieved) | RAG |
|--|---|---|----------|--|--|-----|
| Care leavers aged over 21 will be able to easily find and navigate the local offer to know what is available to them. They will be able to access support needed through a Personal Advisor. | Local Offer to be updated through collaborative Task and Finish group. | Mary-Anne Cosgrove Head of Service – Children in Care, Care Leavers and Regulated Services | 31/03/23 | Task and Finish Group have met on 4 occasions and have developed 3 areas of focus 1) The offer on the website 2) Developing the offer further 3) Young people are consulted about the offer as it develops. Meetings are also taking place with other departments and partners to confirm and improve the local offer. | Care leavers will be able to easily access the local offer and understand what support they are entitled to. They will be able to access support through a personal advisor as needed, enabling supported transition into adulthood. | |
| | Submit funding request to increase capacity by an additional 4 PAs to meet needs care leavers aged 21 | | | Business case submitted Approved w/c December 5th | | |
| | Resource to develop and support website/app to be identified. | | | A resource has been identified. A funding bid to support development and purchase of the resource has been approved by the Department for Education w/c/ 5 th December to enable a digital local offer to be built this year. | | |



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6. The service response to young people age 16- and 17-year olds who present as homeless.

| Outcomes for children and families | Action needed | Responsible | Due Date | Progress including evidence (include reference to data reports on KPIs, findings from audit) | Impact (anticipated impact - to be updated with evidence of actual impact once objectives achieved) | RAG |
|--|--|---|----------|--|---|-----|
| Children who present with homelessness issues will have a timely response and understand the options available to them. Regular quality assurance activity will evidence a change in practice. | Refresh of protocol for young people who present as homeless and draft practice guidance to support practitioners in all areas of the service. | Sam Danyluk Head of Service – First Response | 31/12/22 | The protocol was re-drafted in March 2022, a refresh will be ready for December. | Children presenting as homeless will receive information on the options that are available to them in a timely way and will be supported to access appropriate options. | |
| | Design information leaflet that can be shared with all young people who present as homeless. | | | Leaflet has been designed; this was presented at YP's cabinet for feedback. The feedback has led to changes, it is now ready to go to print. | | |
| | Launch Event to include attending whole service management meeting, Practice Forum, and team meetings. | | | This was discussed at the whole service management meeting on 16 th November 2022. | | |
| | Ensure that children have access to independent advocacy to allow informed decision making. | | | Advocacy contract currently being explored. | | |
| | Monthly audit activity to take place which will | | | A live tracker is in place to consider all new referrals and track their | | |



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| Outcomes for children and families | Action needed | Responsible | Due Date | Progress including evidence (include reference to data reports on KPIs, findings from audit) | Impact (anticipated impact - to be updated with evidence of actual impact once objectives achieved) | RAG |
|--|--|---|----------|--|---|-----|
| | include seeking feedback from children to ensure that their individual needs and vulnerabilities are understood in conjunction with decisions that are made in respect of their housing needs. | | | outcomes. The service will seek feedback from young people on a quarterly basis. The next set of feedback is due by end December 2022. The service will meet with the quality assurance team to see if further support can be offered in obtaining feedback. | | |
| There will be sufficient suitable accommodation capacity for children who present as homeless. | Explore placement and social housing options currently available and review sufficiency to ensure that all children have access to safe and appropriate accommodation when needed. | Sam Danyluk Head of Service – First Response | 31/12/22 | Meeting held with Housing Aid on 18 th November. Plan to discuss the current commissioned service with housing strategy. | Children presenting as homeless will be able to access suitable accommodation in a timely manner. | |



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7. The quality and timeliness of return home interviews for children.

| Outcomes for children and families | Action needed | Responsible | Due Date | Progress including evidence (include reference to data reports on KPIs, findings from audit) | Impact (anticipated impact - to be updated with evidence of actual impact once objectives achieved) | RAG |
|---|---|--|----------|---|--|-----|
| There will be sufficient team capacity so that children who have been missing receive a timely return home interview with an adult that they can relate to. | Increase the capacity of the team from 2 workers to 4 | John Matravers Head of Service – | 28/02/23 | Recruitment is underway for two additional workers to undertake return home interviews. | This will increase worker capacity which ensure children who are missing will receive a return home interview. | |
| | Recruit to a Team Manager post | Safeguarding, Partnerships and Quality Assurance | | Permanent recruitment is underway, and an interim candidate has been identified to undertake the role to drive performance about timely return home interviews, that analysis is clear and contributes to the safety plan for the child | Recruitment to the Team Manager post will enable management oversight of children who are missing to ensure that they receive a quality timely return home interview which will feed into a safety plan. | |
| | When the child/young person declines the interview, will still progress with family and professionals to bring analysis | John Matravers Head of Service – | | The Interim Team Manager is progressing performance management with the existing team and is clear that this is an expected practice standard. This will be monitored through, supervision, dip sampling and audit. | When a child declines a return home interview there will still be an understanding of the factors involved which can then be addressed in the safety plan. | |



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| Outcomes for children and families | Action needed | Responsible | Due Date | Progress including evidence (include reference to data reports on KPIs, findings from audit) | Impact (anticipated impact - to be updated with evidence of actual impact once objectives achieved) | RAG |
|---|--|--|----------|---|---|-----|
| Return home interviews will provide an analysis of the child's circumstances, which will contribute to a robust safety plan for that child. | Review and update the existing flowchart and policy and procedures | Safeguarding, Partnerships and Quality Assurance | 10/01/23 | Existing protocol has been updated and is now consistent with national statutory guidance. | This will ensure that the response to children who go missing is in line with national guidance | |
| | Share the final documents with all partners so that there is clarity on expectations. | | | These are with the Head of Service for review prior to sharing with partners. | | |
| | Service Manager and Head of Service to undertake dip samples of contact with the child. | | | A programme of dip sampling commenced in November. | Children's lived experience will be understood by managers to inform future service developments. | |
| | Development of Missing Team to ensure standards are met. Timeliness and recording of RHI to be in line with statutory guidance – 72 hours' national standard | | | Supervision and team meetings are held in line with service standards to ensure the embedding of improvement is required. IRO's will also involve missing officers in planning and reviewing for all children | This will ensure that the response to children who go missing is in line with national guidance to ensure that children receive a timely return home interview and robust safety plan | |
| Undertake dip sampling to ensure the quality of return home interviews in terms of better analysis of push and pull factors and that | | | | A programme of dip sampling commenced in November | There will be a consistency in the quality and timeliness of return home interviews and safety plans. Lessons will inform future learning | |



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| Outcomes for children and families | Action needed | Responsible | Due Date | Progress including evidence (include reference to data reports on KPIs, findings from audit) | Impact (anticipated impact - to be updated with evidence of actual impact once objectives achieved) | RAG |
|------------------------------------|---|-------------|----------|---|---|-----|
| | the return home interview is reflected in the safety planning and assessment for all children | | | | and development and the creation of tools to inform practice to influence positive outcomes for children. | |
| | <p>Independent Reviewing Officers to involve missing officers in planning and reviewing for all children</p> <p>Independent Reviewing Officers to involve the missing team in planning for the children at reviews and when missing episodes have occurred for children identified as Children in Need.</p> | | | <p>Clear direction has been given to IROs that they are to ensure oversight of all missing episodes.</p> <p>Work is underway with analysis and insight to ensure that all allocated reviewing officers are notified via Liquid Logic when there is a missing episode to enable this.</p> <p>Auditing and dip sampling of this will take place by the Team Manager and services manager on a weekly basis.</p> | <p>There will be a full understanding of the child's circumstances, which will ensure all factors are considered in safety planning and appropriate plans are put in place.</p> | |



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8. Oversight of children missing from education and those who are electively home educated.

| Outcomes for children and families | Action needed | Responsible | Due Date | Progress including evidence (include reference to data reports on KPIs, findings from audit) | Impact (anticipated impact - to be updated with evidence of actual impact once objectives achieved) | RAG |
|---|---|---|----------|--|--|--------|
| The Local Authority will have a greater oversight of children missing from education or attending part time timetables, enabling appropriate support to be targeted to those that need it | Review arrangements for locating children missing from education | Jasmin Howell and Karen McAndrew Head of Service – Virtual Schools / Service Manager Education Welfare Service | 25/11/22 | New process map and officer functions in place | To improve consistency of practice. EWO'S will have consistent response across the service. Enabling us to trace more families more efficiently and quicker. Expectations and timelines will be clearer. | Green |
| | Strengthen process for monitoring by developing a dashboard that holds key information. | | 31/01/23 | Draft dashboard in place via Power BI which reads from Capita/Liquid Logic/Officer spreadsheet. Currently in further development. | This will enable a fast and efficient service. Further links to other data systems will ensure everything is covered. | Yellow |
| | Strengthen process of monitoring by updating the case note template (on Capita One) to include further information. | | 25/11/22 | Case recording log now indicates the following: LIQUID LOGIC CHECK = Date checked REVENUES AND BENEFITS SYSTEM= Date checked | All checks will enable the service to provide a more detailed case recording log and evidence of impact. This will ensure the best possible outcomes for families; ensuring children | Green |



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|------------------------------------|--|-------------|----------|--|---|-----|
| | | | | <p>HOME VISITS= Date checked</p> <p>SAFEGUARDING CONCERNS/RISKS (PLEASE SPECIFY) = Date checked</p> <p>CHECK AGENICES KNOWN TO BE WORKING WITH OR HAVE WORKED IN THE PAST= Date checked</p> <p>Manager oversight – Termly case audits for all Officers</p> <p>6- weekly case supervision of all RED cases</p> | <p>and young people are not out of education for longer than is necessary.</p> <p>The log will effectively trace the family, wherever they have landed.</p> | |
| | Develop a system to enable City Schools to report vulnerable children (permanently excluded and children with an Education and Health Care Plan) on part-timetables to the Local Authority | | 17/02/23 | <p>Process being developed by the 3 HoS (Education Directorate) to review the arrangements, SLA and KPIs of Raleigh Learning Trust who are commissioned to provide 6th day provision of children PEX.</p> <p>SEND team meeting with other people in the region to consider a process for monitoring and tracking children with an EHCP on part-time TT.</p> | <p>The Local authority will have an ongoing and updated list of vulnerable children on a part-time timetable and will be able to support regular review of these children's readiness to accessing education full-time.</p> | |



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|---|---|---|----------|---|--|--------|
| | Develop a process for monitoring and reporting on the data collected to identify and address issues/gaps as they arise. | | 31/03/23 | Completion of the review and new arrangements, as above, will inform the development of this process | Regular identification and updates of the number of vulnerable children on part-time timetables and the demographics and status of these children will support greater oversight of this cohort and that plans are in place to support them accordingly. | Yellow |
| The Local Authority will have a greater understanding of any safeguarding risks for children who are electively home educated, which will allow the right support to be offered at the right time | Liaise with other LAs to consider their systems for assessing and reducing safeguarding risks. | Karen McAndrew Service Manager Education Welfare Service | 27/01/23 | Met with Notts responsible officer for EHE and information gathered from Derbyshire. Both have a team of advisors (QTS) who undertake home visits to children EHE- that NCC do not have. | Now have a greater understanding of other Local Authority practice, structure, and the systems they use. | Green |
| | Develop and implement local system, based on good practice, for recording, addressing, and reporting on identified safeguarding risks | | 10/02/23 | A RAG rating system on the EHE tracker is in development 3-way meetings between families and school to be included within RAG rating | This will create a more robust system to ensure that safeguarding risks to children EHE are identified, enabling the right support at the right time | Yellow |



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|------------------------------------|---------------|-------------|----------|--|---|-----|
| | | | | <p>Quarterly mapping will be refined to include identified safeguarding risks.</p> <p>Monthly KPI report in development listing CiC/CP/CiN/EHCP learners</p> <p>Exploring development of a quarterly dip test of EHE learners to ensure safeguarding processes are being adhered to.</p> <p>Reinstated annual review for learners accessing Nottingham College New system for EHE enquiries in place.</p> <p>New system in place for new EHE enquiries.</p> <p>Weekly panel in place to discuss 8 EHE families to consider holistic needs.</p> <p>All new/closed cases shared with City Care – 0-19 service half termly.</p> | | |



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|------------------------------------|---|-------------|----------|---|---|-----|
| | Review system for assessing and reviewing safeguarding risks periodically for effectiveness and efficiency. | | 10/03/23 | Once above NCC system finalised, arrangements will be put in place to assess and ensure effectiveness periodically. | This will enable a more informed oversight of the quality of educational provision and safeguarding practices. To have a quarterly DIP audit in place. To hold a monthly panel, to ensure the reviews are quality assured and consistent. | |

RAG Key:

| | |
|-----------------------------|---|
| Completed | |
| In progress & on schedule | |
| Delayed/Not on schedule | |
| Planning: not yet commenced | |



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For any Red actions identified above use the table below to identify mitigating actions, accountable person/s and revised due date:

| Outstanding Action | Reason for delay | Mitigating actions in progress | Responsible Officer | Revised due date |
|-------------------------|----------------------------------|--|---------------------|------------------|
| Copy any RAG items here | Brief summary of cause for delay | Brief summary of mitigations in place and/or planned | Name | Date |