Integrated Partnership Business Plan 2023/24

Version 1.7

Version	Significant changes	Editor	Date
1.1	RAG column moved, RAG key inserted, Pages numbered	M. Fitzgerald	30/03/23
1.2	RAG rated (provisionally)	M. Fitzgerald	12/04/23
1.3	RAG rating removed. Document renamed.	M. Fitzgerald	18/04/23
1.4	Workstream numbers, impact measures revised	K. Emmanuel	26/05/23
1.5	Workstream achievements, IM tag key inserted	K. Emmanuel	05/06/23
1.6	RAG rating inserted	E. Blake, T. McGregor	07/07/23
1.7	RAG rating amends and Executive agreement	E. Blake, T. McGregor	18/07/23

Vision and Values
- Our vision: Listening, Learning, and Improving Outcomes for children and young people.
- Our values: Respectful Challenge, Accountability, Listening, Learning and Inclusion.

Our Strategic Priorities for 2023/4:
- Priority 1: To implement Solihull's Neglect Strategy
- Priority 2: Solihull's Early Help arrangements
- Priority 3: Actions to address the findings from external inspections and peer reviews

Structure
The Plan is divided into six key workstreams:

This Integrated Business Plan also contains outstanding actions held over from:
- JTAI recommendations (January 2022)
- National Review Action Plan (May 2022)
- LGA Peer review (June 2022)

and considers the Ofsted findings from the Inspection of Looked After Children and Safeguarding (October 2022).

Each action has a progress section accompanied by a BRAG rating.

Key to BRAG rating:

Action not on track, risk to implementation

Action progressing, some issues but realistic plans in place to recover

Action not yet completed, but on track and will be completed by milestone

Action complete

Each impact measure has one or multiple tags to explain how they will be measured.
Key to Impact Measure tags:

[M] Milestone	A key deliverable in a workstream, necessarily with discrete evidence. These are numbered according to level of dependency.
(R) Recurring	Progress-based measure, normally with continuous evidence and interrogative syntax. These will likely need to be repeated/renewed.
(G) Growth	Progress is constrained by multiple dependencies, where work on all relevant dependencies has either begun or is scheduled for this year.
(F) Future	Progress is constrained by multiple dependencies, where work on all relevant dependencies has neither begun nor is scheduled for this year.

While this business plan is directed towards the 2023-2024 year, it also aims to lay the groundwork for the business plans in years 2024-2025 and 2025-2026. Below is a brief synopsis of expected achievements for each of the six workstreams over this three-year period.

	2023-2024 (Year 1)	2024-2025 (Year 2)	2025-2026 (Year 3)
Workstream 1	Implementation of Neglect Strategy (including dataset). Early Help Strategy has been developed and sufficiently staffed.	GCP2 has been utilised for every child on a Child Protection Plan due to neglect. Implementation of Early Help Strategy (including dataset).	GCP2 has been utilised for every child referred due to neglect. 25% reduction in number of statutory interventions from Q4 2024-25.
Workstream 2	MASH Steering Group has full oversight of data and has implemented a QA framework. DAPB has implemented data collection and developed a dataset.	Efficacy measures have been derived from MASH data and audit activity. Domestic abuse data fully informs commissioning of services and statutory interventions	Consistent recording and focus on the voice of children and young people in MASH and domestic abuse cases.
Workstream 3	Scrutiny programme is established. Data drives requisite elements of the QA framework. Implementation of new ARG oversight framework of SSCP data.	Y1 S11 audits feed SSCP objectives for the following two years. Voices of children/young people drive multiple elements of QA framework. Collation of partnership-wide dataset.	Establish predictive system for key indicators heading to exec.
Workstream 4	Integrated training and learning offer has been programmed	Collect data on the efficacy of integrated offer, respond to ongoing needs.	Training/learning data analysis drives recalibration of offer and feeds into audit programme.
Workstream 5	Cohesive integration of statutory reference documentation with SSCP objectives.	Provide measures of audience awareness of key documents.	Establishment of uptake improvement plan for selected stakeholders.
Workstream 6	New-look structure for Business Unit has been implemented.		Assessment of Business Unit with respect to needs/capacity.

		STRATEGIC PRIORITIES					
1		**The overall aim of Workstream 1: To co-ordinate multi-agency strategies identified as priorities by the safeguarding partners**					
	Required Outcomes	**Actions**	**Responsible Officer**	**Target Date**	**Rag Rating**	**Measures of Impact**	**Impact reported to Executive Group and accepted**
1.1	Children at risk of or experiencing neglect are identified in a timely way and receive interventions which make a positive difference	Establish system of reporting to Executive meetings on the Partnership's Neglect Delivery Plan, specifically: • Reduction in the numbers of children on Child Protection Plans due to neglect • Reduction in the number of children on repeat CP Plans due to neglect • Use of GCP2 to identify need and risk in respect of neglect	Chair of Neglect Steering Group DSL: Deputy Chief Executive/Chief Nursing Officer (ICB)	July 2023	Blue	Collect data about severity of neglect cases (Levels 1-4) when they are met by the local authority, after they pass through the MASH, and time taken for this process. [M1]	
				September 2023	Amber	(R) Analyse [M1] data stream to provide narrative around improvement in handling neglect. [M2]	
				Rolling (every quarter)	Amber	(G)(R) How proportionate is the use of GCP2 to identify need and risk with respect to neglect?	
				September 2023	Amber	(F) Data from partners (including police and health) to be joined with current data	
1.2	There is a strong focus across the Partnership on preventative work and an early help offer which can meet demand in Solihull	Establish system of reporting to Executive meetings on the Partnership's Early Help offer, specifically, progress on the: • Development of the strategy • Implementation of the strategy • Reduction in the numbers of children requiring statutory interventions • Timeliness of identifying support needs and provision of early help	Chair of Learning and Development Group (LDG) DSL: Deputy Chief Executive/Chief Nursing Officer (ICB)	September 2023	Green	The multi-agency EH offer is sufficiently staffed to meet demand [M1]	
				September 2023	Green	The strategy implementation plan has been completed and signed off. [M2]	

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2	LEADERSHIP AND GOVERNANCE						
	The overall aim of Workstream 2: To develop strategic leadership and strengthen governance arrangements to ensure there is appropriate oversight of the experiences of children and families						
	Required Outcomes	**Actions**	**Responsible Officer**	**Target Date**	**Rag Rating**	**Impact measures**	**Impact reported to Executive Group and accepted**
2.1 (LGA rec. 6a)	Strengthened Executive oversight and scrutiny of the experiences of children and families who are referred into the front door of children's services (MASH)	Reporting every 6 weeks from the MASH Steering Group to the Executive group. The reporting will provide a direct line of sight on performance based on data and quality of practice from audits	Chair of MASH Steering Group DSL: Borough Commander (WMP)	June 2023	Blue	Agreement/confirmation of audit KPIs (subject to yearly review) [M1]	
				September 2023	Green	Implementation of supplementary data collection framework [M2]	
				September 2023	Green	(G)(R) What percentage of audits this quarter record: • Effective management oversight of screening/decision-making (NRAP/JTAI)* • Timely information sharing in accordance with GDPR (NRAP/JTAI)* • Early identification of risk (JTAI)* • Appropriate application of thresholds (JTAI)* • Robust decision-making (JTAI)* • Voice of the child/YP and their family	
				January 2024	Green	(F)(R) What direction is revealed by trend analysis of our KPIs?	
	The source of the evidence of impact should be the MASH audits by MASH, and findings from the multi-agency practice audits.						

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2.2 (National Review ref. 5.3)	SSCP Executive is informed about the strengthened practice across the Partnership in respect of Domestic Abuse (DA) (including understanding of its contraposition to parental conflict, coercive and controlling behaviour, biases influencing identification of perpetrators and the impact of domestic abuse on children)	Establish system of reporting every quarter from the DAPB and SSAB Groups to the Executive group. The reporting will include: • Strengthened practice • Commissioning arrangements to support practice • Progress against impact measures	Chair of DAPB DSL: Borough Commander (WMP)	May 2023	Blue	(R) What was the response rate from partner agencies surveyed about understanding DA?	
				May 2023	Blue	(R) What proportion of our partner agencies confirmed they provided regular review of DA definitions/processes?	
				January 2024	Green	(G) Merger of the SSCP, DAPB and other relevant datasets to drive performance analysis	
				January 2024	Green	(F)(R) Collect and interpret data on the voice of the child/YP in DA cases to determine qualitative success markers	

3	**PERFORMANCE MANAGEMENT INFORMATION AND QUALITY ASSURANCE**						
	The overall aim of Workstream 3: To provide safeguarding partners with the management data and intelligence required to evaluate the effectiveness of multi-agency safeguarding arrangements						
	Required Outcomes	**Actions**	**Responsible Officer**	**Target Date**	**Rag Rating**	**Measures of Impact**	**Impact reported to Executive Group and accepted**
3.1	Arrangements are in place for robust independent scrutiny of the multi-agency safeguarding arrangements (MASA) in Solihull	Recruitment of an Independent Scrutineer	DSL: Director of Children's Services (SMBC)	April 2023	Blue	The independent scrutineer is in place. [M1]	
		The commissioning of a programme of scrutiny activity and reporting to the LSPs and the SSCP Executive		June 2023	Blue	(R) Direction of scrutiny over the coming quarter has been determined.	
				September 2023	Green	Scrutiny of S11 audits has been carried out [M2]	
				January 2024	Green	(G) 360-degree evaluation of scrutiny has been carried out.	
3.2	Quality assurance activity provides the safeguarding partners with the data and intelligence required to maintain a clear line of sight on multi-agency safeguarding performance and practice	Establish system of reporting to every Executive meeting on multi-agency safeguarding performance and practice	Chair of the Assurance & Review Group (ARG) DSL: Director of Children's Services (SMBC)	Rolling (every quarter)	Green	(R) Elements of the SSCP QA Framework have been selected for particular focus, and in concordance with the ARG workplan and risk priorities	
					Green	(R) Report on QA activity for the selected elements is delivered to the ARG. [M1]	

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<mark style="background:green">Action not yet completed, but on track and will be completed by milestone</mark>   <mark style="background:blue">Action complete</mark>

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	Required Outcomes	**Actions**	**Responsible Officer**	**Target Date**	**Rag Rating**	**Measures of Impact**	**Impact reported to Executive Group and accepted**
3.3	Strong engagement and contribution by partners in multi-agency meetings leads to effective information sharing, identification of risk and robust decision-making	Assurances about: • gaps in information when decisions are made about need and risk (NRAP) • relevant partner agencies are invited to multi-agency meetings for children (JTAI) • multi-agency engagement and attendance are reported to the Executive on a quarterly basis	Chair of Assurance and Review Group (ARG) DSL: Director of Children's Services (SMBC)	Rolling (every quarter)	Amber	(R) What percentage of indicators in the SSCP dataset have data and commentary supplied for them?	
					Amber	(R) What percentage of the relevant partner agencies sent representatives to ARG or dataset group?	
					Amber	(R) What percentage of indicators flagged for concern by ARG have received specific actions and risk management?	
					Amber	(R) What percentage of indicators identified as strengths have displayed continuous positive progress over four quarters?	

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4	PRACTICE & LEARNING

The overall aim of Workstream 4: To improve frontline practice by disseminating learning and providing multi-agency training to the wider workforce

	Required Outcomes	Actions	Responsible Officer	Target date	Rag Rating	Measures of Impact	Impact reported to Executive Group and accepted
4.1	The multi-agency training offer reflects the learning needs of the workforce and includes the findings from case reviews and inspections and the safeguarding partners' strategic priorities	Commission a needs assessment to inform the local training offer and the extent to which it reflects findings from case reviews and inspections and the safeguarding partners' strategic priorities	Chair of the Learning and Development Group (LDG) DSL: Borough Commander (WMP)	April 2023	Blue	Learning and Development Group (LDG) produces formal training offer [M1]	
				September 2023	Green	(R) Data on attendance and training type is collected and analysed [M2]	
		Report to the Executive on the assessment of the Training offer and assurances of its' impact on practice	Chair of the Learning and Development Group (LDG) DSL: Borough Commander (WMP)	September 2023	Green	(G)(R) Data-driven audit activity provides insights into efficacy of training.	
4.2	Learning from Serious Incidents, Case Reviews and Audits is shared across the Partnership	Establish system of reporting to every Executive meeting on activity to share learning from Serious Incidents, Case Reviews and Audits	Chair of the Learning and Development Group (LDG) DSL: Borough Commander (WMP)	June 2023	Blue	(R) Have learning sessions that engage directly with all issues from serious incidents, case reviews, and audits from the previous quarter been scheduled or held	
				September 2023	Green	Partnership learning milestones to be collated and aggregated to direct future learning [M1]	

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5	CORE SSCP BUSINESS						
	The overall aim of Workstream 5: To support the delivery of statutory functions required of the safeguarding partners						
	Required Outcomes	**Actions**	**Responsible Officer**	**Target Date**	**Rag Rating**	**Measures of Impact**	**Impact reported to Executive Group and accepted**
5.1	Timely publication of the SSCP Annual Report	Adopt a project plan approach to production of the annual report using data, intelligence, and practitioner/service user feedback to provide a robust evaluation of the effectiveness of the local multi-agency safeguarding children arrangements	Chair of Exec Solihull Safeguarding Children Partnership Business Manager DSL: Deputy Chief Executive/Chief Nursing Officer (ICB)	Exec/H&WB sign-off: September 2023	Amber	The annual report has been published, delivered for sign-off and disseminated. [M1]	
				March 2024	Green	(G) Run workforce and public audience surveys on efficacy of annual report uptake	
				March 2024	Green	(F) Structured awareness tracking on specific audience demographics	
5.2	Published Multi-Agency Safeguarding Arrangements (MASA) document is kept under review and updated as appropriate	Review the updated MASA document in the light of feedback from the Children's Commissioner and publish as required.	Chair of Exec Solihull Safeguarding Children Partnership Business Manager DSL: Deputy Chief Executive/Chief Nursing Officer (ICB)	April 2023	Blue	Publication of MASA document. [M1]	
				September 2023	Green	MASA uptake data from S11 audits has been collected and analysed. [M2]	
5.3	The Risk Register identifies significant risks to the arrangements for safeguarding children and is used to escalate and monitor risk	Align the SSCP Risk Register to make it consistent with SMBC's approach to the identification and escalation of risk Establish system of quarterly reporting to Executive meetings on the Partnership's Risk register	Solihull Safeguarding Children Partnership Business Manager DSL: Deputy Chief Executive/Chief Nursing Officer (ICB)	September 2023	Green	Risk Registers from all partnership boards (including SSCP) to be shared with each other and aligned at board level. [M1]	
				September 2023	Green	Demonstrate efficacy of risk escalation strategy. [M2]	

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6	RESOURCING						
	The overall aim of Workstream 6: To ensure that there are sufficient resources to enable the safeguarding partners to deliver their statutory functions						
	Required Outcomes	Actions	Responsible Officer	Target Date	Rag Rating	Measures of Impact	Impact reported to Executive Group and accepted
6.1 (JTAI 1.1)	Staffing capacity within the SSCP Business Unit needs to enable the safeguarding partners to deliver their statutory functions	To complete a review of the Business Unit resource and operating processes to support decision-making on staffing capacity	Solihull Safeguarding Children Partnership DSP Leads (Executive) DSL: Director of Children's Services (SMBC)	March 2023	Blue	The updated BU structure plan is available. [M1]	
				June 2023	Amber	(R) What percentage of the positions listed by the plan have been hired to?	
				June 2023	Blue	The partners' commitments to resource allocation has been affirmed for this year. [M2]	
				June 2023	Blue	(R) What percentage of the plan's resource allocation has been provided?	
				September 2023	Green	(G) Run a 360-degree evaluation to track cultural change. [M3]	
				December 2023	Green	Does the 360-degree evaluation evidence an ongoing cultural shift towards stated values? [F]	

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