



Integrated Partnership Business Plan 2023/24

Version 1.13

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	E. Blake, T. McGregor	18/07/23
1.8	Progress Updated	E. Blake, T. McGregor	29/08/23
1.9	Progress Updated	E. Blake	09/10/23
1.10	Progress Updated	E. Blake	01/12/23
1.11	Progress Updated	E. Blake	16/02/24
1.12	Progress Updated	E. Blake	09/04/24
1.13	Progress Updated	E. Blake	05/06/24

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

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, Board/ Subgroup	Target Date	BRAG	Measures of Impact	Progress/ Impact reported to Executive Group
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: <ul style="list-style-type: none"> Progress on the revision and development of tools and guidance for practitioners. Use of GCP2 to identify need and risk in respect of neglect. Establishing data that supports the identification of neglect at an early stage. 	Officer: Chair of Neglect Steering Group DSP: Deputy Chief Executive/Chief Nursing Officer (ICB) Group: SSCP Neglect Steering Group	September 2023	Blue	Neglect Delivery Plan revised and agreed by the Executive, with clear actions allocated.	November 23 - Delivery plan agreed at ARG 07.11.23.
				November 2023	Blue	Continuum of tools established and shared [M]	February 24 – Continuum of tools agreed at ARG 07.11.23. Presented at Early Help Strategy launch 27.11.23 and built into multi-agency training. Additional dissemination has taken place via the SSCP Newsletter and the Neglect Champions.
				November 2024	Green	Guidance to support identification of neglect across the workforce and community is established and disseminated.	May 24 – The Tiered Knowledge Framework has been agreed - this guidance is tailored on the individual's level of interaction and involvement with children and families. The Neglect Screening Tool is now in place and feedback has been positive. All documents can be found Neglect - Solihull Safeguarding Children Partnership (safeguardingsolihull.org.uk) . At the last Neglect Group, it was agreed that some basic neglect training materials, produced by the SSCP, would support colleagues to ensure their single agency training was up to date and in-line with our expectations. This is in progress with the aim that it be launched at the Neglect Conference in the autumn. Deadline updated accordingly.

Key to RAG 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

1 STRATEGIC PRIORITIES							
The overall aim of Workstream 1: To co-ordinate multi-agency strategies identified as priorities by the safeguarding partners							
Required Outcomes	Actions	Responsible Officer, Board/ Subgroup	Target Date	BRAG	Measures of Impact	Progress/ Impact reported to Executive Group	
			Rolling (every quarter)	Amber	(G)(R) How proportionate is the use of GCP2 to identify need and risk with respect to neglect?	<p>May 24 – Data regarding the use of GCP2 is only available if the assessment is completed by Children’s Services. Data reflects only a small proportion of GCP2s being completed for those cases identified as neglect. This has been escalated to the senior leaders within Children’s Services.</p> <p>In addition we need to better understand how GCP2 is being used/completed outside of Childrens Services.</p>	
			October 2024	Green	(F) Data from partners (including police and health) to be joined with current data	<p>June 24 – Data in relation to neglect is a standing item at the Neglect Steering Group. However, it is currently limited. A project involving funding from the DfE is being undertaken to bring data from a range of agencies together. The target data for this action has been updated to reflect that this project will until October 24.</p>	
1.2	There is a strong focus across the Partnership on preventative work and an early help offer which can meet demand in Solihull	<p>Establish system of reporting to Executive meetings on the Partnership’s Early Help offer, specifically, progress on the:</p> <ul style="list-style-type: none"> • Development of the strategy • Implementation of the strategy 	<p>Officer: Chair of Learning and Development Group (LDG)</p> <p>DSP: Deputy Chief Executive/Chief Nursing Officer (ICB)</p>	September 2023	Blue	The strategy implementation plan has been completed and signed off. [M2]	<p>September 23 - The Early Help Strategy which was agreed by the Executive in September 2023. This included a delivery plan, which details the ongoing development work required.</p>
			November 2023	Blue	The multi-agency EH offer is sufficiently staffed to meet demand [M1]	<p>February 24 - Significant additional resource has been invested in Level 3/Targeted Early Help within Children’s Services. The Family Support Service have appointed 5 specialist practitioners to lead on specific areas. In</p>	

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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, Board/ Subgroup	Target Date	BRAG	Measures of Impact	Progress/ Impact reported to Executive Group
		<ul style="list-style-type: none"> Reduction in the numbers of children requiring statutory interventions Timeliness of identifying support needs and provision of early help 	Group: SSCP Early Help Task & Finish Group, and Assurance and Review Group				<p>addition, 9 further workers have been appointed – combination of youth workers and family support workers.</p> <p>Workforce numbers for other agencies are reviewed as part of the SSCP dataset, and discussed at ARG.</p>
				March 2024	Blue	The Strategy has been launched alongside the new hub.	April 24 - Launch event took place online on 27.11.23. In-person network events/roadshows have taken place in four localities/family hub bases, bringing together locality-based practitioners and community organisations.
				March 2024	Blue	Data provides evidence that Early Help processes are effecting positive change in the numbers of children requiring statutory intervention.	April 24 - The Early Help Strategy and associated workstreams will take time to embed before significant changes in data can be evidenced. This will be monitored via the Early Help Strategic Board and the MASH Steering Group. Onward oversight will take place via the Early Help Strategic Board and can therefore be closed to the SSCP Business Plan.

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LEADERSHIP AND GOVERNANCE							
2	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, Board/ Subgroup	Target Date	BRAG	Impact measures	Progress/ Impact reported to Executive Group
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	Officer: Chair of MASH Steering Group DSP: Borough Commander (WMP) Group: SSCP MASH Steering Group	June 2023	Blue	Agreement/confirmation of audit KPIs (subject to yearly review) [M1]	July 23 - Standard suit of data is reviewed at each MASH Steering Group.
				July 2024	Green	Implementation of supplementary data collection framework [M2]	June 24 – Data continues to be presented and discussed at each MASH Steering Group, but additional work is taking place within Children’s Services and with the new SSCP Data Analyst to develop this further with access to a Power BI dashboard. Deadline has been revised to allow for this.
				September 2023 to initiate. Rolling quarter thereafter.	Blue	(G)(R) What percentage of audits this quarter record: <ul style="list-style-type: none"> • 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 	February 24 – A regular audit programme has been re-initiated, and the more stable workforce is enabling this to take place. The audits do cover the points noted and are routinely reported into the MASH Steering Group and the Audit Group. Learning is shared with colleagues in the MASH and with wider partner.

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LEADERSHIP AND GOVERNANCE

2

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, Board/ Subgroup	Target Date	BRAG	Impact measures	Progress/ Impact reported to Executive Group
			January 2024	Blue	(F)(R) What direction is revealed by trend analysis of our KPIs?	<p>February 24 - Key areas of performance have been regularly reported to the Lead Safeguarding Partners. This has primarily highlighted changes in contact recording over the past year, to more accurately reflect the numbers being received, promote the correct codes to be used and understand the key referral partners. This data has helped drive changes currently being made to the Liquid Logic forms used in the MASH, which will in turn support updates to processes that will improve timeliness figures.</p> <p>The data has supported the assurance obtained through audit and independent scrutiny, that the MASH is now operating safely, in an environment where all key partner agencies are co-located and joint working effectively.</p>
<p><i>* The source of the evidence of impact should be the MASH audits by MASH, and findings from the multi-agency practice audits.</i></p>						

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LEADERSHIP AND GOVERNANCE

2

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, Board/ Subgroup	Target Date	BRAG	Impact measures	Progress/ Impact reported to Executive Group	
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: <ul style="list-style-type: none"> Strengthened practice Commissioning arrangements to support practice Progress against impact measures 					
			Officer: Chair of DA Partnership Board	May 2023	Blue	(R) What was the response rate from partner agencies surveyed about understanding DA?	May 23 - All key partner agencies responded to the survey – 18 in total. Report can be provided on request.
			DSP: Borough Commander (WMP)	May 2023	Blue	(R) What proportion of our partner agencies confirmed they provided regular review of DA definitions/processes?	May 23 - 83% of the organisation reported that they made amendments to their DA operating procedures in line with changes to the statutory guidance.
			Group: Safer Solihull (CSP), DA Partnership Board	July 2024	Green	(G) Merger of the SSCP, DAPB and other relevant datasets to drive performance analysis	February 24 - Work is ongoing with Public Health colleagues and SMBC Transformation Team re the development of an updated dataset relating to DA.
			July 2024	Green	(F)(R) Collect and interpret data on the voice of the child/YP in DA cases to determine qualitative success markers	April 24 – Voice of the Child audit was undertaken in November 2023 and the cases selected included children where DA is a feature in the household. Additionally, all the SSCP multi-agency audits (which will feature DA cases) include the voice of the child. The findings from SSCP audits can be found here: Learning from Multi-Agency Audits and Independent Scrutiny - Solihull Safeguarding Children Partnership (safeguardingsolihull.org.uk)	

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LEADERSHIP AND GOVERNANCE							
2	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, Board/ Subgroup	Target Date	BRAG	Impact measures	Progress/ Impact reported to Executive Group
							Within Children' Services it features in all the 8 weekly child's journey audits.

PERFORMANCE MANAGEMENT INFORMATION AND QUALITY ASSURANCE							
3	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, Board/ Subgroup	Target Date	BRAG	Measures of Impact	Progress/ Impact reported to Executive Group
	3.1	Arrangements are in place for robust independent scrutiny of the multi-agency safeguarding arrangements (MASA) in Solihull	Recruitment of an Independent Scrutineer	Officer and DSP: Director of Children's Services (SMBC) Group: SSCP Executive	May 2024	Blue	The independent scrutineer is in place. [M1]

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PERFORMANCE MANAGEMENT INFORMATION AND QUALITY ASSURANCE							
3	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, Board/ Subgroup	Target Date	BRAG	Measures of Impact	Progress/ Impact reported to Executive Group
							June 24 – new Independent Scrutineer is in post.
		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.	June 23 – Scrutiny topics for each quarter are agreed. Scrutineer is sending scoping reports to the DSPs when required (was marked as Completed). February 24 – As above. The programme of focussed scrutiny exercises is continuing.
				December 2023	Blue	Scrutiny of S11 audits has been carried out [M2]	February 24 – Data has been collated and has been considered by the Audit Group and ARG. Queries highlighted in relation to supervision and auditing have been built into the multi-agency supervision and audit work.
				March 2024	Blue	(G) 360-degree evaluation of scrutiny has been carried out.	April 24 – Based on the scrutiny arrangements in 2023, this was being evaluated regularly by the Executive, DSPs and LSPs. Once the post has been recruited to, the evaluation of success and performance will be re-instigated.
3.2	Quality assurance activity provides the safeguarding partners with the data and intelligence required to		Establish system of reporting to every Executive	Officer: Chair of the Assurance & Review Group (ARG)	Rolling (every quarter)	Blue	(R) Elements of the SSCP QA Framework have been selected for particular focus, and in concordance

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PERFORMANCE MANAGEMENT INFORMATION AND QUALITY ASSURANCE							
3	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, Board/ Subgroup	Target Date	BRAG	Measures of Impact	Progress/ Impact reported to Executive Group
	maintain a clear line of sight on multi-agency safeguarding performance and practice	meeting on multi-agency safeguarding performance and practice	DSP: Director of Children's Services (SMBC) Group: SSCP Audit Group, and ARG			with the ARG workplan and risk priorities (R) Report on QA activity for the selected elements is delivered to the ARG. [M1]	the Executive is available on the SSCP website. Action plans are being monitored through the Audit Subgroup. The programme for 24/25 has been agreed.
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: <ul style="list-style-type: none"> 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 	Officer: Chair of Assurance and Review Group (ARG) DSP: Director of Children's Services (SMBC) Group: SSCP Assurance and Review Group	Rolling (every quarter)	Blue	(R) What percentage of indicators in the SSCP dataset have data and commentary supplied for them?	Data is routinely supplied for each indicator. Commentary is dependent on whether there is significant movement/trend in any indicator.
					Amber	(R) What percentage of the relevant partner agencies sent representatives to ARG? (Target 90%)	May 24 – In the past year (April 23-March 24): <ul style="list-style-type: none"> An average of 82% of expected partner agencies attended. All three statutory partners attended apart from two meetings where one statutory partner was absent.
					Blue	(R) Indicators flagged for concern by ARG consistently receive specific actions and risk management?	June 24 – Quarterly data is now being discussed in detail and actions (and responses) recorded in the minutes. This process will continue to be refined with the new SSCP Data Analyst in post. Specific areas of concern are escalated and responded to e.g. SOLAR data.

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PERFORMANCE MANAGEMENT INFORMATION AND QUALITY ASSURANCE							
3	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, Board/ Subgroup	Target Date	BRAG	Measures of Impact	Progress/ Impact reported to Executive Group
		attendance are reported to the Executive on a quarterly basis			Blue	(R) What percentage of indicators identified as strengths have displayed continuous positive progress over four quarters?	May 24 – Mirrors above action regarding receipt of data. Indicators have not specifically been labelled as areas of strength or concern and therefore this action cannot be completed as currently described but all data is reviewed for negative or positive trends and reported as such.

PRACTICE & LEARNING							
4	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, Board/ Subgroup	Target date	BRAG	Measures of Impact	Progress/Impact reported to Executive Group
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'	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	Officer: Chair Learning and Development Group (LDG) DSP: Borough Commander (WMP) Group: SSCP LDG	April 2023	Blue	Learning and Development Group (LDG) produces formal training offer [M1]	August 23 – L&D offer is published (see training portal: SSCP Training) and routinely advertised through the SSCP newsletter (SSCP website).
				September 2023 and rolling each quarter	Blue	(R) Data on attendance and training type is collected and analysed [M2]	June 2024: Quantitative evidence of multi-agency attendance at SSCP training is provided at each LDG meeting, and colleagues are challenged. The 23/24 annual training report reflects the highest number of attendees to SSCP training since data collection started in 2017.

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PRACTICE & LEARNING							
4	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, Board/ Subgroup	Target date	BRAG	Measures of Impact	Progress/Impact reported to Executive Group
	strategic priorities	Report to the Executive on the assessment of the Training offer and assurances of its' impact on practice	Officer: Chair Learning and Development Group (LDG) DSP: Borough Commander (WMP) Group: SSCP LDG	April 2024	Green	(G)(R) Data-driven audit activity provides insights into efficacy of training, alongside qualitative feedback from training attendees and their managers.	April 2024 - Qualitative feedback is already routinely sought from training attendees and their managers, and this is reported annually. Further methods of triangulating this will be introduced as future multi-agency audits, and any case reviews, will cross-reference to training records to establish if multi-agency training has been accessed.
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	Officer: Chair Learning and Development Group (LDG) DSP: Borough Commander (WMP) Group: SSCP LDG	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	February 24 – Case review learning events are organised when cases are published, or earlier when learning is identified. An event took place in May 2023 featuring learning from the national panel review and a local CSPR: video . The author of that CSPR also spoke at the Early Help launch event in November 2023. A date is being arranged for the author of another CSPR to speak to practitioners in June 2024. This is a standing LDG agenda item and information is shared from the CSPR Panel.

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PRACTICE & LEARNING							
4	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, Board/ Subgroup	Target date	BRAG	Measures of Impact	Progress/Impact reported to Executive Group
				April 2024	Blue	Partnership learning requirements to be collated and aggregated to direct future learning [M1] Links to the move to have a more flexible learning offer and will be reported in the annual report.	June 24 – A staff survey was undertaken in October 2023 and reported in November 2023. The results fed into the Training Needs Analysis completed by partners which informed the SSCP training offer for 2024/25. The new offer reflects partners and practitioners needs is more flexible in its delivery.

CORE SSCP BUSINESS							
5	The overall aim of Workstream 5: To support the delivery of statutory functions required of the safeguarding partners						
	Required Outcomes	Actions	Responsible Officer, Board/ Subgroup	Target Date	BRAG	Measures of Impact	Progress/ Impact reported to Executive Group
5.1	Timely publication of the SSCP Yearly 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	Officer: SSCP Business Manager DSP: Deputy Chief Executive/Chief Nursing Officer (ICB) Group: SSCP Executive	Exec sign-off: September 2023	Blue	The yearly report has been published, delivered for sign-off and disseminated. [M1]	December 23 – A revised Yearly Report has been written and agreed by the Executive in September. It was accepted by the LSPs and presented to the H&W Board in November. A set of summary slides for practitioners was also produced. A parent friendly version is being prepared. This will describe the SSCP, with a section on work undertaken, to enable this to be a document that can be updated simply each year.
				October 2024	Green	(G) Run workforce and public audience surveys on efficacy of yearly report uptake	

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CORE SSCP BUSINESS							
5	The overall aim of Workstream 5: To support the delivery of statutory functions required of the safeguarding partners						
	Required Outcomes	Actions	Responsible Officer, Board/ Subgroup	Target Date	BRAG	Measures of Impact	Progress/ Impact reported to Executive Group
							April 24 – The survey will be scheduled for later in the year when the YP version has been circulated, and the 2023/24 report produced and published.
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.	Officer: SSCP Business Manager DSP: Deputy Chief Executive/Chief Nursing Officer (ICB) Group: SSCP Executive	April 2023	Blue	Publication of MASA document. [M1]	Revised document published: SSCP website
				November	Blue	Six-month review of MASA document	December 23 – Review undertaken by Business Manager and Independent Scrutineer. Amendments to bring document in line with current practice made, which was agreed by the SSCP Executive (October) and LSPs (November). Updated report published (SSCP website).
				November 2023	Blue	MASA uptake data from S11 audits has been collected and analysed. [M2]	October 23 – S11 returns have been analysed. Leadership and governance was one of the best rated sections across the agencies. Further analysis will be undertaken by the Audit Group.
5.3	The Risk Register identifies significant risks to the	Align the SSCP Risk Register to make it consistent with SMBC's approach to the	Officer: SSCP Business Manager	September 2023	Blue	Risk Register is recorded on SMBC system and updated regularly.	October 23 – Risk register updated and presented to ARG and Executive at each meeting. This is now a standard agenda item.

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CORE SSCP BUSINESS							
5	The overall aim of Workstream 5: To support the delivery of statutory functions required of the safeguarding partners						
	Required Outcomes	Actions	Responsible Officer, Board/ Subgroup	Target Date	BRAG	Measures of Impact	Progress/ Impact reported to Executive Group
	arrangements for safeguarding children and is used to escalate and monitor risk	identification and escalation of risk. Establish system of quarterly reporting to Executive meetings on the Partnership's Risk register.	DSP: Deputy Chief Executive/Chief Nursing Officer (ICB) Group: SSCP Executive	September 2023	Blue	Demonstrate efficacy of risk escalation strategy. [M2]	November 23 – Risks are discussed at each ARG and Executive meeting. New risks have been identified and added. Risk Register is updated regularly.
				September 2024	Green	Risk Registers from all partnership boards (including SSCP) to be shared with each other and aligned at board level. [M1]	June 24 – The new Risk Management Procedure has been produced and the SMBC system upgraded to a 5x5 matrix. SSCP risks are to be re-evaluated for inclusion in the new system. SAB and CSP are going through a similar exercise, at which point partnership risks can be shared and aligned. Deadline has been updated to reflect move to new reporting system.

RESOURCING							
6	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, Board/ Subgroup	Target Date	BRAG	Measures of Impact	Progress/Impact reported to Executive Group
6.1 (JTAI 1.1)	Staffing capacity within the SSCP Support Hub needs to enable the safeguarding	To complete a review of the Support Hub resource and operating processes	Officers: SSCP DSPs DSP: Director of	March 2023	Blue	The updated BU structure plan is available. [M1]	August 2023 – The Support Hub structure is agreed for 2023, which includes a temporary full-time data analyst. All positions have been recruited to permanently, apart from
				June 2023	Blue	(R) What percentage of the positions listed by the plan have been hired to?	

Key to RAG 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

RESOURCING

6

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, Board/ Subgroup	Target Date	BRAG	Measures of Impact	Progress/Impact reported to Executive Group
partners to deliver their statutory functions	to support decision-making on staffing capacity	Children's Services (SMBC)	June 2023	Blue	The partners' commitments to resource allocation has been affirmed for this year. [M2]	the data analyst element. Temporary staff member is covering maternity leave. Funding has been agreed for the 2023/24 financial year to cover this staffing arrangement. December 2023 – Recruitment for permanent Data Analyst will take place in December/January. April 2024: Discussion at February Executive meeting agreed that there had been significant cultural shift in the SSCP, from the Support Hub through to the LSPs and Political Leads. Feedback has been noted from the Business Transformation Team (at a previous Executive meeting) and via Sor Alan Wood at meetings he attends.
		Group: SSCP Executive	June 2023	Blue	(R) What percentage of the plan's resource allocation has been provided?	
			March 2024	Blue	(G) Run a 360-degree evaluation to track cultural change. [M3]	
			March 2024	Blue	Does the 360-degree evaluation evidence an ongoing cultural shift towards stated values? [F]	

Key to RAG 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