Improvement and Action Plan - Swansea Youth Justice Service – Re- Reviewed April 2021

By October 2020, all areas of the plan have been successfully achieved. As a service, we agreed that we would continue to review the plan every six months to ensure we remain complaint and prepared for any future inspections.

Shown below is the Swansea Strategic improvement and action plan that has been developed in response to the joint inspection by HM Inspectorate of Probation. The plan currently reflects the strategic actions that Swansea Youth Justice Service needs to take forward to address the themes from the inspection.

Service Areas	Swansea Youth Justice Service
Swansea Youth Justice Leadership Team	Jay McCabe – Principal Officer Helen Williams – Operational manager Richard Henderson – Practice Lead Caroline Williams – Practice Lead Philippa Elliot – Senior Prac

Key: Red – Not started Amber- In progress Green – Completed

Improvement checkpoints dates	July 2019	August 2019	September 2019	October 2019	November 2019	December 2019	January 2020	February 2020	March 2020
Summative analysis across all actions	12 Green 12 Amber 8 Red		13 Green 18 Amber <mark>1 Red</mark>	19 Green 13 Amber	23 Green 9 Amber	25 Green 7 Amber	26 Green 6 Amber	27 Green 5 Amber	31 Green 1 Amber
Key opportunities	Managem ent board	Team meetings	Leadership meeting	Managem ent board	Manageme nt board	Team meeting	Manageme nt board	Team meeting	Manageme nt board

to monitor the plan	Leadershi p meeting	Leadershi p meeting	Staff developmen t day	developm ent day Team	Leadership meeting	Leadership meeting	Leadership meeting	Leadershi p meeting	Leadership meeting
	YJB catch ups x 2 (fortnightly)	YJB catch ups x 2 (fortnightly	YJB catch ups x 2 (fortnightly)	meeting Leadershi p meeting YJB catch ups x 2 (fortnightly)	YJB catch ups x 2 (fortnightly)	YJB catch ups x 2 (fortnightly)	YJB catch ups x 2 (fortnightly)	YJB catch ups x 2 (fortnightly)	YJB catch ups x 2 (fortnightly)

Priority area	Action (Why are we doing this)	Who is responsible	Resource implications (what are the costs in terms of time and staffing resources) Is this sustainable and how can we make this sustainable	Target Date	Outcome (How do we know we have achieved what we wanted to)	Progress update (How have evidenced that the team have been made aware, have ownership of the plan and can evidence that they have taken RAG rating
Identify a Partner in practice to assist with improvem	Consult with partner in practice because 1) Wrexham have taken a similar	Jay McCabe Principal officer and Mark Robinson temporary operational	Travel Staff time – 2 days out of service Resources have been shared	May 2019	One of the key issues from our inspection report related to our assessment of Risk Management and Safeguarding process.	Change this table June 26 th visited Wrexham Jay and Mark have

ant	:				identified here bie eee
ent	improvement	manager to		T	identified key pieces
Journey.	journey	link in with	Management time in	To ensure better	of work that they
		Donna	preparation and	outcomes for children	would want guidance
ldentify –	2) Welsh YOT –	Dickenson	implementation	and young people	from Wrexham
what was	guided by	from Wrexham			
wrong –	same duties	Caren Evans –	Development day		Mark has linked in
demonstr		operational	time to go through	The outcomes under	with Caren Jones –
ate how this links	 Responded to a poor 	manager	the new formats	this section are:-	Caren was one of the inspectors for
in with the	inspection		One concern relates	1) All staff will have	Western Bays and
improvem	inspection		the importance of	a clear	Wrexham's
ent	4) Recently		needing strong	understanding of	operational manage.
ent	showed a		business	the risk	operational manage.
	good		Dusiness	management	Further links have
	inspection			process	been made with Cwm
	пэресноп			process	Taff if needed
	5) We wanted to			2) The leadership	ran ii needed
	seek their			 The leadership team will have 	A report will be
	guidance			oversight,	produced to remind
	relating			appropriate	staff on a weekly
	relating			mechanisms to	basis and manual
				quality assure	oversight of workload
				3) Staff will feel	April 2021 – A South
				confident in their	Wales Improvement
				assessment of	group is now in place
				risk and	between Cardiff,
				safety/well-being	Swansea, NPT and
				<i>,</i>	Bridgend.
				4) This will result in	
				improved risk	We continue to link in
				management and	partners through
				overall	YOS manager
					Cymry, South Wales
				saleguarding	Cynny, South wales

		We will	know this has	regional group and directly with other
			chieved by:	YOT's where we feel necessary.
			a) Robust risk management assessments/ plans/program mes and reviews are in place.	
			b) Evidence that these have been reviewed	
			c) Evidence of appropriate challenge when plans need further development.	
			d) Evidence that the risk of harm has reduced for the young and the community	
			e) A reduction in the overall	

				level of risk	
internal systems to help improvem ent journey This is that:- 1) 2)	e the right re supervised appropriate doperational manager Richard Henderson –	Staffing Time Meeting space	No set date as this is an ongoing journey.	One of the key themes from the inspection relates to staff not being supervised and not having appropriate oversight by the right lead. To ensure better outcomes for children and young people 1) The outcome will be that staff will feel supported 2) That regular supervision takes place 3) That the leadership team understand the teams cases and workload	Lines of supervision are now in place The next step is to look at how to ensure this is embedded on an ongoing basis. (how have we involved staff in the development of the plan How are we going to develop the plan together). How are the team communicating Case management guidance to be

	 Mechanism for managing wellbeing of staff Mechanism for escalating concerns relating to young people Training and development needs are identified to support and promote staff's well- being 				 4) Workload is managed effectively We will know we've achieved by 1) Dip sampling will be provided – once per quarter 2) Evidence that all staff have monthly supervision 3) Evidence that staff are being supervised by the appropriate lead 	developed Weekly reporting Planner to have oversight of all reports and timescales April 2021 - Clear lines of supervision continue to be in place. Staff continue to receive supervision on a monthly basis. The quality of supervision continues to be the primary focus and workshops have been delivered to senior staff to assist them to carry out supervision more effectively
Develop team identity and well- being	Development day to be set up, to look at quality and what that means. Also to address change management for the service.	Rebecca Jones – Training and development officer Mark Robinson	One day for team development – long term to create cohesion	February 2020	One of the key themes from the inspection report related staff wellbeing and the value of quality To ensure better	Regular meetings are taking place to identify what the delivery of the development day will look like.

	– Interim	outcomes for children	Discussion with
1) To help the	Practice	and young people	Rebecca around
team	Manager		booking the
understand		The outcomes are:-	development day.
where they	Jay McCabe –		
are in terms	Principal	1) The team can	When the new
of change	officer	identify where	operational manager
management		they feel their	starts – the
process		barriers are in	development day
о т		terms of	
2) To engage		changing	Delayed until
the team in			February 2020 due to
the		2) To contribute to	other key
improvement plan and		and develop a shared	commitments taking place within the
seek their		understanding of	service.
voice and		quality and what	Service.
contribution		that looks like	Completed 7 th
contribution			February 2020
3) Providing the		3) For the team to	
í team with		ź take ownership	April 2021
time to		and the	Ongoing team
explore and		improvement	meetings take place
develop an		journey	Workshop sessions
understandin			have been delivered
g around the		4) Staff to feel	around quality of
importance of		motivated to	assessments, reports
quality.		change	and interventions
4) Develop		5) For the services	Senior meetings take
team		to experience a	place on Mondays
cohesiveness		dynamic and dynamic and	Every morning there are check ins in place
		motivated	are check ins in place
		monvaleu	

	workforce	Recently the service
	We will know that we've	vision and values/principals
	achieved this by	have recently been
	1) Feedback from	developed in
	the development	conjunction with the
	day	team – however there
		is a larger Vanguard
	2) Direct evaluation	review intended to
	and feedback	take place by
	during	May/June 2021
	supervision	
		We continue to
	3) Increased level of	
	engagement by	within the case
	staff who will	manager's cohort.
	want to contribute	However, one is
	to service	retiring in health grounds and the
	development	other is being
	4) Reduction in staff	referred Occ Health
	sickness and	
	stress	Staff representatives
		attend the
	5) Fewer changes in	management board
	case	to articulate staff
	management	views, feelings and
		any issues

Develop YJS Training Plan	Develop training plan to specifically support YJS staff The training will deliver a number of themed courses to address the training gaps within staff practice to ensure they are trained to:- Identify safeguarding issues Completing asset plus assessments Identify CSE Planning and delivery of intervention programs Delivering effective supervision (why are we doing this)	Mark Robinson – Interim Operational Manager Jay McCabe – Principal officer Rebecca Jones – Training officer Teresa Mylan- Rees – Principal officer	Time for training Cost of training Staffing costs	July 2019	The inspection identified areas of improvement around key areas of the service these included - Assessment - Intervention - Planning To ensure the quality of assessment are improved The staff feel confident and understand what is required of the to carry out their role That children and young people receive the right service To ensure better outcomes for children and young people	A training plan has now been developed in conjunction with the training department. April 2020-21 - Key training has been delivered whilst during Covid • Asset plus • Workshops on quality – Assessments, reports and interventions • SOS • Contextual safeguarding • Level 2 safeguarding • County Lines • NRM trg • Workshop around CE
	 To ensure all staff are 				by	2021 for new staff

 trained to an appropriate level 2) Are provided with the right qualifications for the job role. 3) The correct training is in place for the staff to carry out and perform their job roles effectively 4) Identify any additional training needs 	Dishead	Cita # times	Marsh 2000	 Increased engagement in activities Staff reporting more confidence in supervision and team meetings, that they feel better equipped to manage the demands of the job Staff feel suitably trained and have the knowledge to carry out their jobs roles The service users have robust assessment, plans and quality interventions Reduction in offending and reoffending 	JM has met with Deb reed to identify this year's trg plan
Create mapping and profiling to be	Richard Henderson –	Staff time Young people's time	March 2020	The inspection identified the need to map out the	Update: October 2020 - LiveTracker

oonvioo	o o malata d	Dractica Laad		profile and peeds of our	has been developed
service	completed	Practice Lead		profile and needs of our	has been developed
users and		Helen Williams		young people.	and cohort has been
identify	Set up practitioner	practice			identified
interventi	forum – develop	manager			
ons to	themed feedback for	Jay McCabe –		To ensure better	Development of the
meet	the board	principal officer		outcomes for young	serious Youth
their		Caroline		people	Violence Strategy
needs	(why are we doing	Williams –			and CYP profile is
	this)	practice lead		This will be evidenced	underway – April
	·			by	2021 – this is
	1) To better			•	ongoing and data
	understand	Lisa Parker		Data which reflects the	sets are being
	our cohort in			changing needs of the	obtained to create
	order to			young people being	young person profile
	respond to			worked with.	<i>y y y y y y y y y y</i>
	them				Participation work
				This will be evidenced	has taken place and
	2) To target our			by	feedback process is
	resources			~)	now in place to help
	more			1) The development	inform service
	effectively			of a new range of	development – April
	oncourony			programmes of	2021 - this is
	3) To develop			intervention	ongoing and the
	the service in			which reflect the	focus of the work is
	line with the			changing needs	now to develop a
	ever			of our cohort	forum for this
	changing				feedback to be
	needs of			2) Young people	discussed and
				,	reviewed – to review
	young people			feeding back that	
				they are happy	in June 2021.
				with the local	Live treeker eccier
				offer as part of	Live tracker session
				ongoing	have started and
				consultation	work is being

					 3) Evidence of a reduction in offending and reoffending 4) Increased engagement from young people 	undertaken to identify specific cohorts to monitor and review Young person's feedback is now being presented to the board at each board as of January 2021 We have also changed paperwork systems as part of the National Standards audit to include the feedback from young person, parents and or carers.
Develop YJS participati on group	Service Users participation group to be set up Young people to be consulted on to seek their views on service provisions	Rob Richards – intervention centre manager and two identified participation champions - Jason Evans	Staff time Meeting space	Ongoing – started but needs to be an ongoing work strand.	The inspection identified the importance of the service user's voice within the shaping and development of the service. This is to ensure the	Consultation has been started and cohort of 10-14 year old have been sought Next steps to continue to embed this as an ongoing

	Morgan Parkin		service is dynamic and	piece of practice.
(why are we doing	Morgan r arkin		continues to meet the	piece of practice.
this)			needs of the young	Rob Richards is
1) To improve			people it seeks work	going to take the lead
the offer of			with.	on developing an
support			with the second s	ongoing participation
oupport			That young people have	group.
2) Work out			a strong voice and	9.049.
what children			control in the shaping	Update – August
and young			and delivery of the	2020 – participation
people think			service	working group is in
are the gaps				place and currently
in the service			To ensure better	looking at
			outcomes for children	approaches and
3) Have a better			and young people. This	mechanisms for CYP
understandin			will be evidenced by	to provide feedback
g of what				to the service –
young people			1) Regular	April 2021 – to be
need from			consultation and	reviewed in June
the YJS			feedback being	<mark>2021</mark>
			sought from	
To plan for			young people	Consideration of
future service				setting up a young
delivery			Evidence of the	person's board
			interventions	
5) To work out			evolving to reflect	Joint strategic work
what			the needs and	with secure estate to
interventions			preferences of	look at co-production
work for			young people	
young people				
			3) Evidence of them	
			engaging in the	
			service	

Develop relationsh ip with education partners	To review our relationships with our education partners – To develop joint	Jay McCabe – Principal officer Julie Thomas – head of child and family	Staff time Commitment to meeting	To be completed by March 2019	The inspection report highlighted the need to develop stronger links with education partners to ensure the education needs of young people	Meeting with Amanda Taylor from the PRU yet to be arranged Principal officer will be attending the PRU
	 To develop joint education models ensuring children and young people are receiving an education offer. (Why are we doing this) 1) Ensure the young people at risk of becoming NEET are identified and highlighted earlier 	services Helen Morgan Rees – Head of Education Mark Robinson – Interim Operational manager Sam Goulding – ETE worker			 needs of young people known to the YJS were being met. To ensure better outcomes for children and young people To evidence that this will be achieved:- 1) Evidence of the young people who are at risk have an appropriate intervention being provided 2) Communication 	be attending the PRO board meeting to have an oversight of the operations. Principal officer has made links with the head of education and agreement to provide them with cases where barriers are occurring. The YJS will also provide a spreadsheet with cases where there are risks of NEET/ or becoming NEET
	2) Track and monitor the journey for				links are in place and an escalation pathway is in	gathered and a consistent measure of ETE hours is being

risk of being NEETUpdate: TOR sent around and first working group to be started in December 2019.3) To help identify interventions to help prevent the risk from occurring and offer the relevant interventions at the right time.3) Young people who are at risk of becoming or are NEET have a pathway identified to prevent the, becoming NEET or reengage in education/trainingUpdate: TOR sent around and first working group to be started in December 2019.4) A reduction in the right time.Image: sentence operational group to hard to place operational group to hard to place op	young people	place	developed.
Apprenticeships task and finish group and sits on the NEET board Task and finish group	NEET 3) To help identify interventions to help prevent the risk from occurring and offer the relevant interventions at the right	 who are at risk of becoming or are NEET have a pathway identified to prevent the, becoming NEET or reengage in education/training 4) A reduction in the number of young people who are 	around and first working group to be started in December 2019. Update: October 2020 – PO sits on the hard to place operational group to help address barriers and raise needs of CYP known to YJS services – April 2021 - no change, this remains the same April 2021 - PO leads on Traineeships and Apprenticeships task and finish group and sits on the NEET board Task and finish group to be set back up due to movements within education in terms of chair of the group.

						and represents the service in this forum Operational manager to set up joint monthly meetings with Education and YJS – Helen Howells, David Bawden and Ryland Phillips
Develop and improve Swansea YJS internal systems (how is this relating to back to improved outcomes for young people)	Review polices/escalation processes:- Pathways to escalation CSE CP High Risk cases Mental Health County lines/Modern Day Slavery MAPPA Education exclusion (why are we doing this) 1) To ensure children and	Mark Robinson – interim Caroline Williams – Practice lead Richard Henderson – practice lead Heather Black – Administrator Jay McCabe – Principal officer	Staffing time initially Meeting time	October 2019	The inspection highlighted that the assessment of risk and safety/well-being needed to improve. This will ensure that children and young people receive the right support at the right time and help to improve wellbeing by improving their safety. To ensure better outcomes for children and young people This will be evidenced by 1) An increased number of	Task group is to be set jointly with safeguarding board to look review all YJS policies and procedures - Frist meeting took place on the 22 nd October 2019. Management team have developed a spreadsheet of all referrals being made Completed All staff are doing the level 2 safeguarding -

	 young people are safeguarded 2) To ensure that where risk are identified, children and young people are escalated to the relevant agencies 3) The right processes are being followed and the relevant service areas are aware of the concerns 				4) 5)	YJS where concerns highlighted Evidence that that the child/Young person's risk has been assessed appropriately	processes have been set up to ensure that cases are being escalated. Escalation data sheet to be developed and lead to oversee this. 01.11.2019 – Data sheet has now been developed and will be used to track all the cases where escalation or referrals to partner agencies are taking place April 2021 - Live tracker to be considered – e,g, YP on protocol, CSE Development of a process chart to identify escalation processes
Develop	Review statutory	Mark Robinson	Staff time	September 2019	The	inspection report	Prevention
clear	and prevention	– Interim	Induction sessions		highlig	phted that the	Updated prevention

this) To ensure better outcomes for children the right children are identified for the service 2) To ensure the resources Children are identified for the service Children are the service Children are identified for the service Children are the service Children are the resources Children a	erral forms – nools, feeder nools – resulting in are appropriate errals
to the right children and young people2) Agencies will have a clearneed crimit understanding of preve eligibility and are ta3) To ensure that other services understand3) To ensure that other servicesAndre meetunderstand4<	atutory ork to be carried to provide an erview of orders of ed and where minal activity and evention referrals taking place drea Rees — etings with ads/primary and condary. aflets to be vised

	service boundaries and roles are clear				 a clear assessment of need and plan which evidences that need 4) A clear distinction is in place which separates, prevention, high end prevention and statutory YJS work 	now in place. Refer has to be certain that the risk of offending is clear. April 2021 - Referral form has been review very recently Prevention staff to re- visit schools and teams to discuss the services
Develop robust pre assessme nt	 Review our screening process and how that looks (Why are we doing this) 1) To ensure referrals are appropriate 2) The right young people receive the right level of intervention 	Richard Henderson – Practice Lead Caroline Williams – Practice lead	Staff time Meeting space Regular review meetings	June 2019 - a further meeting took place on 29/07/2019 to formalise this.	The inspection highlighted that initial screenings did not a) identify appropriate referrals and b) assess well-being, safety and risk effectively. To ensure better outcomes for children and young people, evidence that this is being achieved 1) A robust screening tool and process will	Screening tool has been redeveloped This provides a robust assessment of risk, safety and well- being It's more aligned to asset plus Agreed process Low level out of court will now receive screening tool In the long term – the focus will be on using

3) The risk,			be developed	asset plus for out of
safety and			and in place	court disposals
well-being of				
young people		2)	Appropriate	Further discussions
at risk of			referrals	to take place
offending or			receiving the right	regarding training all
who have			intervention	non-social work staff
offended are				to complete asset
correctly		3)	Evidence that all	plus.
assessed			factors have	
			been	
			appropriately	Staff have bene
			assessed on	trained at all levels to
			initial screenings	use asset plus.
		4)	That plans and	Agreed that low level
			interventions are	risks can have a
			appropriate	proportionate
			developed to	screening, all other
			meet the needs	matters will be
			of young people	assessed using asset
			who require YJS	plus.
			services.	
				April - Staff who have
				been trained to use
				Asset Plus are now
				completing all
				assessments on
				asset
				Once all the training
				Once all the training
				is completed by June,
				this will ensure that
				all staff will be using

						asset plus for all prevention cases from that point onwards In the interim screening is being where low risk of safety and wellbeing or
Set national standards	Exploring thematic board reporting Measuring outputs and outcomes – reporting on hard and soft outcome Setting targets – Assessments timescales No's referrals Case closure meetings (why are we doing this) 1) Ensure that the service is	Lisa Parker Caroline Williams Richard Henderson – Practice lead Caroline Williams Lisa Parker – Information officer Mark Robinson – Interim practice manager Jay McCabe – Principal officer	Staffing Meeting time and space Review meetings Out of count visit the YMC quarterly	To be set and agreed by board in March 2020	The inspection report highlighted the need for the management board to have greater awareness and responsibility for quality assuring and offering challenge/oversight both of the service and its operations. Also, to ensure that where young people were experiencing challenges, the board would use its function t address these and actively promote development and change.	 Performance report is now formulated and ready for first board meeting Agreed a task group to be set up working group. Board members will need to become responsible for a key area of that national standard. There is a consensus amongst the service that 2013 standards will be the standards we will continue to adopt.

setting the		outcomes for children	
benchmark to		and young people,	To be audited in
measure		this will be evidenced by	February 2020 and
itself against			new standards
neen agamet		1) Board members	agreed in March by
2) Hold		being more	the board.
members to		accountable for	To be taken to the
account for		key areas of the	board for ratification
key areas		national	in March 2020
that need to		standards	
be developed			Task groups are now
or improved		2) Examples of	set on the 12 th
and address		good practice	February 2020 to
any barriers		being developed	look at old and new
for young		when challenges	standards and each
people in		are raised.	group will be auditing
need of			current cases.
support in			
areas such		3) Improved	Update: April 2020 –
as health,		outcomes for the	completed and new
housing,		young people in	action and
accommodati		receipt of youth	improvement plan is
on and		justice services	in place resulting
education			from internal National
			standards audit. The
			service is currently
3) Hold the		Evidence that all	focusing on standard
Youth Justice		board members	1 & 2 – this will be
Service to		understand the	presented to the
account for		barriers and are	board in October
the work it		committed to	2020
does and		improving	A
ensure it		outcomes	April 2021 –
continues t to		through shared	Implementation plans

	 raise the standards of best practice 4) Review when things need to improve 5) Act as a quality assurance mechanism for the board and the service 				ownership.	are in place and the work for each standard is being individually reviewed at each consecutive board National standard operational actions under 1& 2 are now implemented.
Develop a framewor k for Quality assurance mechanis m.	Checklists need to be developed and in place Explore CFS audit tools and adapt the QA framework Dip sampling (Why are we doing this) 1) Ensure all assessments/ plans and interventions	Caroline Williams Richard Henderson – practice lead Caroline Williams – Practice lead Lisa Parker – Information officer Mark Robinson – Interim Practice manager with support from Jay McCabe –	Staffing Meeting space Review meetings	By March 2020	The inspection highlighted that quality assurance at all levels was lacking within the service and did not provide sufficient leadership oversight of cases and did not a) identify appropriate referrals and b) assess well-being, safety and risk effectively. To ensure better outcomes for children and young people, this will be evidenced by	First meeting took place 31 st May to agree process map for all staff to understand the work flow Agreed to develop templates for a good quality assessment, report and plan. These will be used to benchmark as the minimum standard for social workers to follow. These will be ready by the next

	متم واولي وتحو	principal officer			he and meating in
	are delivered to the highest possible	principal officer	1)	A robust and Q&A process	board meeting in November 2019.
	standard				Practice guidance to
2)	The right		2)	Appropriate levels of Q&A at	be developed
	young people receive the			relevant stages	Feedback and consultation to take
	support they need		3)	Evidence of monthly dip	place
				sampling of	
3)	Ongoing			cases to track	Update – August
	development and feedback			their	2020 - South Wales s improvement group is
	will aim seek		4)	That	in place to also
	to improve			assessments/pla	consider providing a
	the quality within the			ns and interventions are	peer review process.
	whole service			appropriately	Audit to take place in
				Q&A'd with	November/December
4)	The			necessary and	to look at quality of
	leadership team will			helpful feedback	plans and interventions
	have insight		5)	Regular meetings	
	into cases,			with social	Workshops are being
	where the staff need			workers to support the Q&A	delivered in November 2020 to
	support and			process	look at assessment
	development				skills, report writing
5)			6)	Evidence of	and plans. The aim to
	Develop a culture of			feedback being given in the right	improve the quality of the work, focus on
	reflective and			way to promote a	the skills of analysis
	honest/constr			culture of	and writing effective

	uctive feedback (360 degree approach) 6) Ensure needs and risks are identified and responded to accordingly				learning whilst promoting safety and well-being at all times.	plans and interventions April 2021 -Review the QA process and audit plan to be developed by all. May 2021. Practice manager is also seeking assurance that the quality of the of the QA is consistent
Induction process and training for other departme nts and new starters	Develop and induction plan and training power-point (Why are we doing this) 1) To help ensure all new staff understand the processes and practices 2) Raise the standard of the service 3) Deliver the	Lisa Parker – Information officer Heather Black – administrator Mark Robinson – Interim Practice Manager	Staffing Meeting space Regular induction and workshops sessions for team meetings	February 2019	The inspection report highlighted the importance of the service understanding it core business but also its eligibility and purpose. To assist new starters and partner agencies to understanding their expectations of the service, the service need to be clear about its thresholds and share that information appropriately. To ensure better outcomes for children and young people, this	Lisa Parker and Heather are meeting on in the beginning of July to start this process. This will then be submitted in the next improvement plan in October 2019. Update - induction pack is in place and will continue to reviewed annually. April 2021- Practice manager is meeting with C&F service reps to look at the whole induction process

	service remit to other teams and multi-agency partners to aid their understandin g of the service				 will be evidenced by Information available to all partner agencies to understand the work of the YJS 2) Workshops and induction training provided on a regular basis as and when needed. 3) Staff across C&F services, health, police and education understanding the role of the youth justice service 	
Clear lines of supervisi on of staff to be establishe d	All staff to revert to being supervised within their locality teams. (why are we doing this)	Mark Robinson Interim operational Manager Richard Henderson – Practice lead Caroline Williams –	Staffing Meeting spaces and time Regular once monthly slots for all staff	July 2019	The inspection report highlighted that the lines of supervision were not clear and staff did not know how to report to, supervision was not consistent and non- social work qualified staff were being	Practice lead roles now agreed who will supervise both prevention and statutory cases This will ensure consistency of supervision around both arenas of work

1) To ensure that staff are supervised appropriately by the right	Practice Lead Jay McCabe – Principal officer	supervised by other non -qualified social work staff. To ensure better outcomes for children	Social workers are being moved into one room
line manager 2) That staff receive quality supervision		and young people, this will be evidenced by1) Staff are supervised by the	Lines of supervision finalised and appropriate line management is now in place – All qualified
3) Non social work trained staff to receive supervision		appropriate line manager2) Staff are able to identify who they report to and	workers are being supervised by an appropriately qualified lead. Plans are now in
by qualified senior or practice lead 4) The right		seek support from 3) Supervisions are taking place and	place New supervision and documentation is in place across C&F
level of supervision and support is in place for all staff		the quality of those supervisions are to a good standard	service and agreeing in September 2019 Training plan devised by workforce development officer
5) Ensure accountability and reduce confusion between staff as to who		 Staff report that they feel supported and their well-being is promoted 	Senior staff to be provided with a supervision training workshop to help support them in their

	they report to					roles - this will take place in February 2021. April 2021 - Clear lines of supervision continue to be in place. Staff continue to receive supervision on a monthly basis. The quality of supervision continues to be the primary focus and workshops have been delivered to senior staff to assist them to carry out supervision more effectively
Follow up actions identified by Duncan Hodgson to be complete d.	Duncan Hodgson will email follow up actions in the agreed feedback templates to operational manager so that the necessary actions can be completed. 1) To ensure	Caroline Williams - Practice lead Richard Henderson – Practice Lead Violet Kerr – Social Worker Josette Wigley – Social worker	Staff Training costs and time Room space Ongoing training for a further 2 days	July 2019	The inspection report highlights that previous and current assessments at the time has incorrectly assessed risks, safety and well-being. To ensure better outcomes for children and young people	Feedback has been given to social workers in relation to one case on the asset plus training Executive summary to be shared with the leadership group 6 th June 2019.

 that previous assessments and plans are reviewed and improved upon 2) To promote good practice in future 3) Ensure social workers understand what needed to be improved upon and 	Caroline Gittens – Social worker Steve Poulton – Social worker Alison Martin – Social worker Duncan Hodgson – trainer - for him to review the changes that have been made.			 The improvement will be evidenced by 1) Previous assessments and plans have been update to reflect the changes required 2) Future and ongoing assessments will evidence the correct assessment of risk safety and wellbeing 3) Social work staff will be able to carry out the assessment correctly and to the right standard 4) Social workers will follow the appropriate format 	Duncan will be feeding back the summary of his findings to the new management board on the 5 th July 2019.
oint meeting to be set up to review the	Mark Robinson – Interim	Staff Meeting space	Historic cases –	The inspection reports highlighted in the	Mark Robinson has met with IRO

concerns that children are vulnerabl e to, or are victims of child sexual exploitati on, there are plans in place to ensure the safety of these children.	CSE cases raised within the inspection report. Identify mechanisms to ensure CSE risks are being managed. New Senior practitioner will work more closely CP qualified to act as the link and carry out Focus on CSE, CP, safeguarding YJS Staff need to be clear what the CE/CSE escalation process – Escalation process to be formulated 1) To ensure concerns are escalated 2) To ensure the right services are	operational manager Alison Mathias – SQU manager are reviewing the CSE cases with children services correctly and that they agree that any CSE risks are being adequately addressed	Ongoing meetings to review	checked by June 2019	 inspection that children/young people known to the YJS who were at risk of CSE, were not appropriately managed, risks assessed and closed appropriately. To ensure better outcomes for children and young people, this will be evidenced by 1) Regular review meetings of CSE cases are taking place between the CSE co- ordinator and YJS Interim manager. 2) Previous and current cases have been reviewed and risks assessed, identified and closed appropriately. 3) CSE concerns 	manager on two occasions – they are satisfied that CSE cases are – an audit of these cases has taken place and a process has been developed IRO team leader and Practice lead in CSE now have access to Child view – this ensures the process of information sharing and escalation is in place. CSE audit and Safeguarding audit to be explored – quarterly – how many SPOCK referrals PASM All cases were identified and a suitable plan/recommendation took place.
	services are being				/	 monthly meeting to look at and review all

	 accessed to support young people 3) To safeguard young people and promote their safety and well- being 4) Ensure when cases are closed the risks have reduced and cases are closed appropriately 				escalated through the correct channels and concerns are being raised at the right time.	protocol, CE and CSE related cases – monthly report will be produced to share with safeguarding board (PPMG)
Review of out of court assessme nts.	Review the assessment of safety and well- being in relation to out of court cases. Review previous out of court assessments – inspection window	Jay McCabe – principal officer Mark Robinson – Interim practice manager Caroline Williams – practice lead Richard Henderson –	Staffing Meetings Space Time	Starting beginning of September 2019 and ongoing	The inspection highlighted that out of court assessments did not assess well-being, safety and risk effectively. To ensure better outcomes for children and young people, this will be evidenced by	Leadership team have agreed to use asset plus for all out of court disposals. This will ensure greater robustness for assessments. Caroline and Lisa have identified for the purposes of

 Review a particular	practice lead			reviewing previous
quarter of the	Lisa Parker –	- 1) Asset plus	out of court disposal,
•	Information	· · · · · · · · · · · · · · · · · · ·	· ·	
screenings to			assessments	we will only be
assess safety and	officer		will be carried	looking at the last
well-being			out on all out	quarter.
			of court	
Identify the out of			disposals	As part of the
court cases to look				National Standards
at quality assuring				audit – this piece of
the cases		2) Evidence that	work is ongoing and
			all factors	Caroline Williams is
Only the			have been	doing an audit of the
assessment of risk			appropriately	some cases in
or where screenings			assessed.	November 2020.
have or haven't				. <u></u>
taken place		3) That plans	April – 2021 -Audit
			and	still needs to take
			interventions	place
1) To ensure			are	Asset plus
referrals are			appropriate	assessments are
appropriate			developed to	taking place for out of
			meet the	court disposals
2) The right			needs of	
young people			young people	
receive the			who require	
right level of			YJS services.	
intervention				
		4) Regular	
3) The risk,			Q&A's of out	
safety and			of court	
well-being of			disposals	
young people				
at risk of				
offending or				

	who have offended are correctly					
New data set to be developed to report to the managem ent board to allow for the effective oversight of the services work and provide highlight areas of unmet need to partners	Partner in practice to share their good practice model in how they inform their management board of the work they do via a formal report. Data reporting to include: • Social Services referrals and follow up. • Mental & emotional health referrals. • CSE cases • MAPPA cases • Absence & sickness	Mark Robinson – Interim Practice and Jay McCabe – Principal Officer Lisa Parker – Information officer Richard Henderson – Practice Lead Caroline Williams – Practice Lead	Board meetings Report writing time Q&A of report Staff time	September 2019	The inspection highlight the need for the board to have the relevant data and information needed for the management board to have oversight of the operations of the youth justice service. To ensure better outcomes for children and young people, this will be evidenced by 1) High quality qualitative and quantitative data report will be provided 2) The board will have the right data it needs to make the necessary strategic decisions	First meeting with Mark Cox on 7 th May 2019 took place to look at new data set reporting used for Wrexham as our good partner in practice. Using Bleanau Gwent/Caerphilly performance report. Update – September 2020 - Performance reporting continues to be reviewed at every board and practice manager now provides a summary report to CMT and a summery at document at the board. Local data sets are now being produced and the opportunity to

 impact on the service. YP not in receipt of a full education entitlement. Where safety and wellbeing issues have been highlighted, evidence to is provided around the referrals to other services (section 9 of the report) Staff sickness and its impact on operational capacity. To share best 		 3) The board will be better informed of the challenges and areas of needs 4) The board will make decisions which will directly impact and improve the quality and outcomes for children and young people known to the youth justice service 	last two years is now possible and will enable to consider patterns, trends and any unmet need. April 2021 - Reviewing of the data from the performance disaggregating in April 2019. Vanguard review taking place in May/June will enable us to consider PI's and meaningful measures once the review of the service has taken place.
--	--	--	--

	 s practice 2) To develop data reporting which provides the Youth Justice Board with the informatio n it needs to make the most informed decisions 3) To help identify trends, 					
	identify trends, areas of need and inform future planning					
Ongoing monitorin g of the action plan.	Swansea YJS Strategic Lead and Operational Manager will meet with the YJB on a frequent basis to	Mark Cox – YJB advisor Mark Robinson Interim practice manager	Staff time Regular meetings and touch points Meeting space	Frequent and ongoing until the re- inspection unless otherwise	The inspection report resulted in the need for an improvement plan to be developed to address the inspection.	Meeting with Mark Cox on a fortnightly basis and management board meetings are taking place regularly.

	 review progress against the action plan. Furthermore, the management board will also act as a review point for the improvement plan 1) To ensure that the plan is continually being developed 2) To provide regular review points 3) To provide opportunities to share good practice across partners in practice 4) To see guidance and advice where necessary from the YJB 	Jay McCabe Richard Henderson – Practice Lead Caroline Williams – Practice Lead		agreed with the YJB.	 To ensure better outcomes for children and young people, this will be evidenced by 1) Regular meetings taking place to review the plan 2) Feedback from the YJB regarding the improvement journey 3) Evidence on the improvement plan that improvement is taking place. 	Update – August 2020 – this evolved and Jay McCabe set up the south wales improvement group to help continue to provide peer support as part of our ongoing improvement journey.
New	Senior managers to	All Board	Board members	First board	The inspection highlight	First management

managem ent board to created and formed – to oversee the work of the YJS	make the necessary arrangements to create the new management board and review and clarify its role and function, include all statutory partners, and work in an effective way to ensure that the service operates to a sufficient standard Also, senior managers to ensure	members David Howes – Director of Social Services Julie Thomas – Head of C&F services Jay McCabe – Principal officer Sam Pritchard – Counsellor Mark Robinson – Interim	time Meeting space Board reports	meeting by July 2019 The rest will commence on a bi monthly basis from October 2019.	the need for the board to have the relevant data and information needed for the management board to have oversight of the operations of the youth justice service. To ensure better outcomes for children and young people, this will be evidenced by	board meeting 5 th July 2019. Next Board meeting dates 7 th November 2019 14 th January 2020 3 rd March 2020 Further board meetings have now been set up for the remaining year up
	that the board is appropriately represented by partner agencies and that they provide appropriate support and services. Why are we doing this 1) To ensure that all multiagency partners have oversight of the risks,	Practice Manager Gavin Evans – Young people's Service manager Helen Morgan- Rees – Head of Education and Partnerships Gareth Prosser – Police Sian Rees – police and Crime			 have oversight of all the work taking place in the youth justice service to make strategic decisions 2) The board will be better informed of the challenges and areas of needs 3) The board will make decisions which will directly impact and 	until the end of 2020. Update – Board meetings are now set up continuously April 2021 - Dates continue to be arranged and regular board meetings are taking place.

	 needs/barrier 2) To provide active and constructive challenge to the Youth Justice management team 3) To promote the effective strategic operations of the Youth Justice Service 4) To make all accountable for the quality of the work and outcomes of the Youth Justice Service 	commissioner Declan Cahill – Police Jamie Harris – Barod Eirian Evans – Probation Joanne Abott- Davies – Health strategic lead Susan Jones – Health			improve the quality and outcomes for children and young people known to the youth justice service	
YJB to provide training to the new	Once the new management boards have been formed the YJB will	Mark Cox – YJB All Board members	Board members time Meeting room	July 5 th 2019 Follow up	The inspection highlight the need for the newly formed Swansea management board to	First introduction session was provided on the 5 th July 2019

Managem	deliver training to	David Howes –	half day	have oversight of the	A further half day was
ent Board	the board on areas	Director of	session 24 th	•	
ent board				operations of the youth	provided on the 24 th
	relating to the	Social	October	justice service.	October 2019 – this
	function of the	Services	2019		was completed.
	board, induction	Julie Thomas		To ensure better	
	requirements for	– Head of C&F		outcomes for children	April – currently the
	board members and	services		and young people, this	service has a rating
	self- evaluation of	Jay McCabe –		will be evidenced by	of medium support
	the service.	Principal			from the YJB
		officer			Mark Cox continues
	(Why are we doing			1) The board will	to provide advice and
	this)	Sam Pritchard		have knowledge	attends our board
	,	– Counsellor		and oversight of	meetings
	1) To ensure	Mark Robinson		all the work	
	the	– Interim		taking place in	
	management	Practice		the youth justice	
	board feel	Manager		service to make	
	confident in	Gavin Evans –		strategic	
	their roles			decisions	
	and	Young		Gecisions	
		people's		2) The beerd will be	
	responsibilitie	Service		2) The board will be	
	S	manager		better informed of	
		Helen Morgan-		the challenges	
	2) To provide	Rees – Head		and areas of	
	board	of Education		needs	
	members	and			
	with a clear	Partnerships		The board will	
	understandin	Gareth		make decisions	
	g of the	Prosser –		which will directly	
	expectations	Police		impact and	
	within these	Sian Rees –		improve the	
	roles	police and		quality and	
		Crime		outcomes for	
	3) To make	commissioner		children and	

	board members accountable 4) To assist board member to identify areas of development al need	Declan Cahill – Police Jamie Harris – Barod Eirian Evans – Probation Joanne Abott- Davies – Health strategic lead Susan Jones – Health			 young people known to the youth justice service and this will be evidenced 4) The board members will be accountable for specific aspects of the youth justice work 5) Evidence of effective challenge and appropriate scrutiny will take place in management board meetings 	
Review the role	Swansea YJS management board	All management	Meeting space Board members	Next Board meeting	The inspection highlights the need for	Agenda'd for further discussions at

and function of the preventio n service	 will address concerns raised by the inspectors in relation to age criteria for prevention cases. Why are we doing this 1) To ensure that all multiagency partners have oversight of the risks, needs/barrier 2) To provide active and constructive challenge to the Youth Justice management team 3) To promote the effective strategic operations of the Youth Justice service 	board members	times	dates 7 th November 2019 14 th January 2020 3 rd March 2020	 the newly formed Swansea management board to have oversight of the operations of the youth justice service. To ensure better outcomes for children and young people, this will be evidenced by 1) The board will have knowledge and oversight of all the work taking place in the youth justice service to make strategic decisions 2) The board will be better informed of the challenges and areas of needs 3) The board will make decisions which will directly impact and improve the quality and 	the next management board on the 7 th November 2019. Agreed that the age criteria is for prevention services is 10-18 April 2021 - No change
---	---	------------------	-------	--	---	---

					 outcomes for children and young people known to the youth justice service and this will be evidenced 4) The board members will be accountable for specific aspects of the youth justice work 5) Evidence of effective challenge and appropriate scrutiny will take place in management board meetings 	
Improve the quality and awarenes s from staff of the referral	Develop a process and flow chart to ensure staff are aware of what the referral process into Children Services and how to use it. (why are we doing	Mark Robinson –Interim Practice Manager Jay McCabe – Principal officer Caroline Williams –	Staff time Meeting space	August 2019	The inspection highlights the need for improved referral mechanisms into child and family services and ensure that safety, wellbeing and risk is appropriately escalated where concerns exist for	First meeting took place 31 st May to agree process map for all staff to understand the work flow and how ensure all staff understand the referral process into other services.

systems,	this)	Practice Lead	children and young	
so that	,	Richard	people.	
children	1) To ensure	Henderson -		A central
and	that referrals	Practice Lead	To ensure better	spreadsheet has
families	are		outcomes for children	been formulated to
receive	appropriately		and young people, this	be shared with Head
the	made to the		will be evidenced by	of service outside of
services	relevant			board meetings to aid
they need	departments/		1) Process are in	in escalation process.
	agencies		place to support	
			staff to escalate	April 2021 - Live
	2) YJS staff		concerns	tracker to be
	understand			considered – e,g, YP
	what is		2) Staff are able to	on protocol, CSE
	expected of		follow the right	
	them and		processes to	Development of a
	how to refer		escalate risk,	process chart to
	into services		needs and	identify escalation
	correctly		access support	processes
	3) Develop		3) The line	
	appropriate		management	
	escalation		support is in	
	processes		place to raise	
	and		issues where	
	accountability		staff aren't	
			satisfied that the	
	4) Ensure staff		referral process	
	across		needs to be	
	multiagency		challenged	
	partners			
	understands		4) Staff will be able	
	the role and		to report that their	
	function of		concerns have	

	YJS staff in relation to its safeguarding responsibilitie s				been responded to appropriately.	
All YJS policies and procedure s to be reviewed to reflect the needs of the newly formed YJS's	 All YJS policies /procedures and case management guidance to be reviewed. (why are we doing this) To ensure that staff are supported to carry out their roles effectively Staff understand what is expected of them in their roles To be able to refer to guidance as 	Mark Robinson – Interim Practice Manager Jay McCabe – Principal officer Lisa Parker – Information officer	Staffing Meeting space The need to review this regularly	Regional working group started October 2019 Ongoing as policies and procedures will need to be reviewed regularly The plan is to make sure that the priority polices are in place and these will be taken to the board for sign off.	The result of the inspection has meant that the decision to disaggregate and form a new Swansea YJS means that it requires new policies and procedures to be developed. To ensure better outcomes for children and young people, this will be evidenced by 1) The formation of a practice manual which contains all the relevant policies and procedures specific to the youth justice team	An operational manual is currently being developed to provide staff with a practice manual to perform their jobs roles effectively. NPT and Swansea will be setting up and joint performance sub group to look at developing YJS specific policies and procedures in line with the Western Bay safeguarding board. The Swansea Management board will then provide the oversight and approval/ratification of these policies and procedures.

	and when needed 4) To provide the fundamental standards which are expected			By end of March 2020	 2) A joint working group which meets regularly (Monthly) to look at developing policies and procedures 3) Staff feeling clear and able to refer to these policies and procedures 	Update: recent mock inspection 12/13 th December 2019 by YJB helped to identify the policies and procedures that the Youth Justice Service needed to specifically review or develop. Update – all policies and procedures have been reviewed and are now in place. There are two under
Review effectiven ess of informatio n sharing protocols to ensure all schools	Head of Education Services Director/Head of the Swansea YJB board to progress this matter via Head Education	Mark Robinson – Interim Practice Lead Jay McCabe - Principal officer Helen Morgan Rees – Head of Education	Staffing Regular meeting space Time	By end of March 2020	The inspection report highlighted the importance of all schools and workers involved have the information they need to provide tailored support to children and young people known to the	review due to the need to share these with wider C&F service partners April 2021 – all polices remain reviewed in timescale TOR developed and sent out. First working group to take place on the 17 th January 2020 – delay due to everyone's availability. Working group is

and workers involved have the informatio n they need to provide support tailored to children and young people's individual needs	 (why are we doing this) 1) To ensure that the children and young people known to the YJS are getting the right support from education links 2) To reduce any barrier to accessing 	and partnerships Julie Thomas – Head of Child and Family Services	outco and y ,this	 nsure better mes for children young people be evidenced by Information sharing protocols in place The relevant school staff have the necessary information they need to provide the service that the child or young 	being re set up in November 2020 due to movements within education. Task and finish group is in place and positive relationships have been developed with education partners. PO sits on educations PRU committee and Harder to place operational working group.
	 education 3) To ensure education partners are aware of the children and young people known to the YJS 4) Provide timely and effective communicati on and 		3) 4)	 person needs That there is evidence of improved outcomes and the child and or young person is getting the right support or achieving better outcomes Evidence that regular communication is 	YJS continues to sit on Harder to Place Operational Group with Education Partners Communication flowchart is being developed to ensure all staff know who and where to escalate any Education related worries or concerns.

	resolution where barrier s have been identified				taking place between the YJS and education divisions/services	
Develop effective strategies to encourag e children and young people who speak Welsh, to access services in their preferred language	Swansea Local Authority review the current arrangements in place regarding promoting the (why are we doing this) To ensure that 1) Children and young people who speak Welsh have the right to access Youth Justice services through their medium of choice 2) That services are planned for this cohort for children	Swansea local authority education lead – Simon jones Helen Morgan- Rees – Head of Education and Partnerships Julie Thomas – Head of Child and Family Services Jay McCabe – Principal officer	Meetings Staff Time	By end of December 2020	The inspection report highlighted the importance of developing a strategy that encourages children and young people who speak Welsh to access services in their preferred language. To ensure better outcomes for children and young people, this will be evidenced by 1) The development of a strategy that addresses the needs of this cohort 2) Evidence that children and young people who speak	Update - Audit of Welsh language offer has taken place and an action plan has been developed to address what needs to be implemented. April 2021 – Welsh Audit Action plan in place and reviewed annually.

	 and young people 3) That the Welsh language is promoted in all areas of Youth Justice Services 4) Youth Justice Services are incorporated into the wider council strategies in relation to promoting the active offer 			 Welsh have been offered YJS services in their preferred language 3) A pathway is in place which supports staff and children and young people to access the right support 4) Staff understand and know how to access these services 	
To develop a literacy and numeracy strategy to support children and	Education leads to review and update their strategy in relation to literacy and numeracy (why are we doing)	Swansea Education leads Dave Howes and Julie Thomas to take forward	By end of March 2020	The inspection report highlighted the importance of developing a strategy that encourages children and young people who speak Welsh to access services in their	Jay McCabe recently attended YOS manager Cymru on the 27 th June and it was agreed that a national approach to this would be beneficial.

young	To ensure that		preferred language.	Links have been
people to			preferreu language.	made with the
develop	1) Children and		To ensure better	relevant strategic
these	young people		outcomes for children	lead to help begin the
skills to	who have		and young people, this	process of
improve	literacy and		will be evidenced by	developing a strategy
the	numeracy			developing a strategy
chances	needs and		1) The	TOR developed and
of a future	known to YJS		developme	sent out. First
free of	are able to		nt of a	working group to take
offending	access the		strategy	place on the 17 th
- - -	right support.		that	January 2020 – delay
	5 11		addresses	due to everyone's
	2) That services		the needs	availability.
	are planned		of this	
	for this cohort		cohort	Update - Literacy and
	for children			Numeracy policy has
	and young		2) Evidence	been developed in
	people		that	conjunction with
			children	education and will be
	That the		and young	shared at the next
	development		people	task and finish group
	of literacy		who have	in November 2020
	and		additional	(this was postponed
	numeracy is		literacy	due to covid).
	promoted in		and	
	all areas of		numeracy	April 2021 – Literacy
	Youth Justice		support	and Numeracy Policy
	Services		that need	has been finalised
				and is going to be
	4) Youth Justice		3) A pathway	shared and ratified
	Services are		is in place which	with Education
	incorporated			partners in May 2021.
	into the wider		supports	

	council strategies in relation to promoting the development of a literacy and numeracy strategy				 staff and children and young people to access the right support 4) Staff understand and know how to access these services 	
To provide relevant and timely physical, sexual, emotional and mental health services	The Swansea Bay University Health to regularly attend the management board meetings and set out its plans to ensure these services are in place without any unnecessary delay (why are we doing this) 1) To ensure that the children and young people who require physical,	All Board members Mark Robinson – Interim Practice manager Jay McCabe – Principal officer Joanne Abbot Davies – Strategic health lead	Staff Meeting space Time	Ongoing Initially started in April 2019	The inspection report highlighted the need for Children and Young people known to the Youth Justice Service to have access to timely physical, sexual, emotional, and mental health services. To ensure better outcomes for children and young people, this will be evidenced by 1) Evidence of referrals to these services are being made by Swansea YJS	Dr Isobel Davey from CAMHS has agreed to provide a once monthly clinic for half a day which NPT and Swansea are currently sharing this resource. The first clinic session started Monday 13 th May. Discussions are underway to look to secure a CAMHS nurse which could be shared between Swansea and NPT. Recent meeting with Health (SALT) on 9 th

sexual,	June has identifie	d
emotional	2) That staff in and secured two	su -
and mental	Swansea YJS Speech and	
health	staff are chasing language posts w	hich
services are	up referrals will be jointly fund	
	by NPT and Swar	
receiving them and at		
the right time	being and language the	гару
	appropriately service.	
2) To ensure	escalated	
that	'outside' and Swansea principa	
communicati	'within' the board office has submitt	
on and	as and when an ICF bid for cap	oitai
access to the	needed. to support the	
services is	development of th	
prompt	4) Concerns are SALT service- this	
	being greased has bene agreed	in
3) To develop	promptly and principal.	
improved	escalated	
ways of	through the Joanne Abbot Da	vies
working to	appropriate line has proposed a	
address	management working group	
these specific	structure between health a	
needs for	NPT and Swanse	
children and	5) Evidence that YJS to look at this	
young people	children and particular area of	
	young people are strategic	
4) To develop	getting the development.	
stronger links	services they	
with health	need without any Working group is	
services	undue delay in place to addres	SS
	this area. First	
5) To advocate	6) Where delay is meeting took place	
for the needs	occurring, that is 28.10.2019 – this	

	of this cohort of young people due to their level of vulnerability				being recorded clearly with the reasons why	continues on a quarterly basis. CAMHS nurse identified to offer post for 2.5 days a week. Post has been recruited to and we are awaiting the final start date April 2021 – CAMHS nurse is now in post and started as of March 2021. SALT service is due to begin at the beginning of May 2021
To ensure the Board is adequatel y represent ed by all partner agencies	Management Board to keep an attendance log of every board meeting held. (why are we doing this) 1) To ensure the right representatio n at the	All Board members David Howes – Director of Social Services Julie Thomas – Head of C&F services Jay McCabe – Principal officer	Board members time Meeting space	30 th May 2019 onwards.	The inspection report highlighted the need for the Youth Justice management board to be appropriately represented by multi- agency partner due to poor representation previously. To ensure better outcomes for children and young people, this	First management meeting was on 5 th July 2019. Back to back board meetings are taking place to promote greater commitment from joint board members. Business support will be recording this as part of the board meeting minutes and

management	Sam Pritchard	will be	evidenced by	providing the
board	– Counsellor		Criticities by	principal officer with
meetings	(recently	1)	All identified	details.
meetings	changed to		board members	uetalis.
	•			Follow up letters to
2) To ensure	Counsellor		will attend or a	Follow-up letters to
that the right	Elliot King)		suitable	be sent after each
level of	Mark Robinson		representative for	Board meeting to any
decision	– Interim		that agency	partner agency who
making is at	Practice			does to attend.
the board	Manager		A register will be	
	Gavin Evans –		collected	Board meetings are
3) To ensure	Young			now booked up until
where there	people's	3)	The right level	the end of December
are specific	Service		strategic decision	2021.
needs/issues	manager		makers will	
that need	Helen Morgan-		attend the	April 2021 – Board
working	Rees – Head		meetings	representation has
through, all	of Education		Ŭ	been consistently and
the	and	4)	Decisions made	attendance has been
multiagency	Partnerships	/	will result in	good. A register is
partners are	Gareth		prompt outcomes	taken and reminders
in attendance	Prosser –		prompt outcomod	are sent to board
to address	Police	5)	Improved	members if they don't
those	Sian Rees –	,	outcomes will be	attend.
barriers.	police and		evidenced by	attend.
Damers.	Crime		having the right	
4) To improve	commissioner		representatives	
shared	Declan Cahill –		•	
			for each agency	
accountability	Police			
	Jamie Harris –			
5) To develop a	Barod			
greater	Eirian Evans –			
understandin	Probation			
g of partners	Joanne Abott-			

	roles and responsibilitie s 6) To share practice and information	Davies – Health strategic lead Susan Jones – Health				
Managem ent of staff sickness levels both short and long term	The Board and operational manager to monitor staff sickness on an ongoing basis to ensure it is aware of how staff sickness may be impacting on operational capabilities. (why are we doing this) 1) Ensure that pressures and risks to the service delivery are identified and board members are aware of these 2) Management team and	Mark Robinson – Interim Practice Manager Jay McCabe – Principal officer Caroline Williams – Practice Lead Richard Henderson – Practice Lead All management board members	Staffing Board members time Meeting space	Ongoing	 Inspection report highlighted the need for the management and oversight of sickness levels in Swansea Youth Justice Service To ensure better outcomes for children and young people , this will be evidenced by 1) The board have regular reports on sickness and staff well-being 2) The practice manger is managing sickness appropriately 3) Workload is being managed and cases are 	Recent service meeting on 7 th May to address the culture and gave clear direction moving forward. Also discussed sickness and procedures. HR will be attending YJS meetings shortly to support operational manager. Practice manager will be providing the board with a summary of the last quarter at each board meeting. Practice manger continues to provide the board with a highlight report which focuses on the

	 board understand where the staffing challenges are, and have identified next steps and are managing the demands appropriately 3) To enable management team to respond appropriately 				 being covered when staff are poorly 4) Any risks to service delivery are being highlighted to board members through management board meetings. 	management of staffing and sickness. April 2021 – No change in the sickness monitoring processes.
To create a culture that supports learning and continuou s improvem ent	In addition to the Youth Justice Information Learning Service (YJILS) a Learning Resource Library to be developed identifying all intervention packages that are used by staff with children and young people.	All team members	Commitment and staff time to their ongoing learning and development	Ongoing work/To be started in October – ongoing 2019	The inspection report highlighted the importance of ongoing development and learning To ensure better outcomes for children and young people, this will be evidenced by 1) Staff will be able access relevant training to	Mark has set up an 'On line research folder' for learning resources. To be incorporated into the weekly meetings. Staff development day is was booked for a date in February 2020.

In addition, a staf learning resource				improve their performance	Further training and development took
library to be creat				within their roles	place
resources from internal and exter	nal			Staff will be able to access	Team attended a virtual Signs of Safety
training courses a any research that				appropriate materials	workshop
may help inform practice and supp				research and support them in	Assessments, report writing and plans
staff with their continued				• •	workshops are being rolled out in
professional development (CP				Evidence that staff are	November 2020, December and
	<i>D</i>).			committed to a culture of	January 2021.
1) To ensure that staff a				continuous	Staff have also been
continually developing				improvement	expected to completed data
their knowledge			,	Improved wellbeing of staff	protection modules and child protection
and understand				evidenced in team meetings	modules on line.
g within the field.	əir				April 2021 - Recent training analysis was
2) To promot	e a			self-evaluation	completed and additional training
culture of continuous	;			An improved experience for	has been identified for the team. This
learning ar developme				Young People as	includes county lines, criminal exploitation,
3) For the sta	ff			5	AIM 3 and supervision skills.
to be able	to			learning and	

access up to date research and information	innovation developed by the staff	