

Divisional Risk Register (Children, Young People & Families Division)

Completed by (Risk Owner): Clair Pyper

V5

Date completed: 27.10.15

| Business Objective and Strategic Priority this impacts on | Risk What is the issue: whats is the root cause/ problem – what could go wrong | Consequence /effect: what would occur as a result, how much of a problem would it be ?, to whom and why | Existing actions/controls | Risk Score with existing measures (See Scoring Table Below) | | | Further management actions/controls required | Target Score with further management actions/ controls required (See Scoring Table Below) | | | Cost | Risk Owner | Target Date |
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| | | | | 5 | 4 | 20 | | 4 | 4 | 16 | | | |
| 1. Budget | | | | | | | | | | | | | |
| Improvement - changing for the better LCCIB Improvement Plan | a) Pressures on the divisional budget | Services to vulnerable children, young people and families would be reduced and affect safeguarding of children, and potentially have an adverse impact on delivering the Leicester City Council Improvement Plan | Deliver savings as part of the reviews taking place across LCC, including E&CS with clear explanations of the potential risks and impact. Deliver savings to meet the budget pressure within the CYPF Division | 5 | 4 | 20 | Identify further projects to ensure delivery of savings, assess impact and agree any further mitigating factors | 4 | 4 | 16 | | CP | 31/03/17 |
| | b) Requirements to reduce public sector funding affect the Council's ability to fund key areas of improvement work | Workforce continues to be in flux and subject to high turnover, which impairs consistent service and increases risks for vulnerable children and young people. Insufficient funding in local authority and partner services to deliver improvement work and maintain level of Early Help and statutory services. | Priorities for short and long term funding of improvement work are being considered by senior managers and elected members. Proposed savings in Early Help services are currently being developed in consideration of Leicester City Council 2015/18 budget. Impact on services to Children young people and families is being assessed as part of savings proposals. Pressures on the Out of Authority placement and increase in LAC numbers beyond allocated budget. Funding of two PA's for over 16's and retention payments for social workers and team managers in front line teams already agreed. Advanced Practitioners appointed | 5 | 4 | 20 | Further consideration of other identified improvement areas to be discussed. Further areas of the Resource Plan under consideration QA post to be advertised in September | 4 | 4 | 16 | | FC | 31/03/17 |
| | c) Increase in number of children looked after results in overspend, compensatory savings have to be made in other services | Reduced Early Help Services, resulting in less early intervention and higher numbers of children and families escalating to higher levels of need, putting additional strain on Children's Social Care budget. | Targeted work to safely and appropriately reduce the numbers of children in care and monitor the numbers of children requiring high cost externally commissioned placements. Further work to be carried out to consider future commissioning arrangements for young people who are victims of CSE. | 5 | 4 | 20 | Examination of existing controls, including social work practice, decision making, work to address young people on the 'edge of care', placement commissioning and exits from care. | 4 | 4 | 16 | | | 31/03/17 |
| | d) Cost of agency social workers, including staffing over capacity, and interim staff working on improvements results in overspend, compensatory savings have to be made in other services | Increase in overspend, due to the higher costs of agency workers; and additional staff to carry out improvement work, reduce caseloads and ensure capacity to carry out key jobs is in place. | Workforce Strategy sets out plans to attract permanent staff to Leicester and retain incoming and existing staff. Strategy includes progression and workforce development. Regular monitoring of staff appointments to agency posts. | 5 | 4 | 20 | Continued work on recruitment, retention and induction. Focus on recruitment of permanent Team Managers. | 4 | 4 | 16 | | | 31/03/17 |

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| | e) Permanent staff absence (sick leave, maternity leave, disciplinary action) results in higher costs because of the need to pay agency workers | Regular monitoring of staff performance, and absence. | Continuing to take a robust approach to managing staff absence and reduce the amount of time that is lost due to sickness. | 4 | 4 | 16 | CIN Attendance management-briefings for all CIN managers at induction and dedicated HR support put in place to support management of absence management | 4 | 4 | 16 | | | 30/06/16 |
| | f) Staff leave, resulting in the need to fill posts with agency workers | Additional expenditure on agency staff. Loss of experience and continuity. | Workforce Strategy developed and being implemented. Use of agency staff to fill vacant positions while permanent recruitment takes place. National and regional problem of availability of experienced social workers and Team Managers is impacting on LCC. | 4 | 4 | 16 | Ensure progression in place for experienced workers following appointment of new Team Managers. Individual discussions with staff wanting to progress, or dissuade them from leaving. | 4 | 4 | 16 | | | 31/03/2016 ongoing |

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| 2. Safeguarding | | | | | | | | | |
| Improvement - changing for the better LCCIB Improvement Palan | 2 a) Staff fail to recognise and act to safeguard and mitigate the risks of significant harm to children, | No interventions where action needs to be taken, interventions that do not make enough difference to children's lives, an increased risk of significant harm, and/or an avoidable child death. | <ul style="list-style-type: none"> • Agreed improvement plan in place, being implemented and monitored, including all Ofsted recommendations • Additional short term CIN Team in place to increase capacity • Early Help Offer re-launched with training for staff and partners • Thresholds documents re-launch • Weekly CIN Performance meetings to look at key performance areas and carry out spot checks on identified areas of work • Team Manager training to reinforce management oversight • Distribution of agreed Service Standards across the Children's Workforce • External audit of Ofsted cases • Workforce Development Programme with aim of attracting workers to Leicester City, retention programme, growing own social workers and stabilising workforce • Revised supervision and case recording policies * External auditors feedback on cases with recommendations for improvement * Feedback to CIN Service about outcomes of Ofsted support visit with actions to address | 3 5 15 | <ul style="list-style-type: none"> • Further Implementation of the Leicester City Children's improvement plan including: • Quality Assurance work by external auditors used to drive up practice and management standards, and enable managers to carry out realistic, robust audits • Principal Social Worker to be appointed to improve practice standards • Outcomes of, and learning from, Serious Case Reviews to be communicated to staff, including recommendations on practice and management work with partner organisations to ensure application of the LLR thresholds, reduce inappropriate contacts and referrals and ensure sufficient detail is given to enable robust decision making. * Appointment of 9 Advanced Practitioners (non-case holding) to take on supervisory and quality assurance functions across CIN and LAC | 3 4 12 | | Clair Pyper | 30/09/16 |
| | b) Practitioners and managers do not work to required standards | Poor quality, inconsistent service to children, young people and their families, and increased risk of significant harm | <ul style="list-style-type: none"> • Weekly performance meetings in CIN • Quality Assurance work by external auditors in conjunction with social workers and team managers, with immediate corrective action for cases identified. • Reports produced on 'Practice Analysis with results of the Quality Assurance work. • Workshops for all social workers and team managers on the outcome of the Practice Analysis in June 2015 • Workforce Development Programme in place * Briefings and rollout implementation of the Service Standards, Supervision Policy and Guidance and the Performance and Quality Assurance Framework * External auditors feedback on cases with recommendations for improvement * Feedback to CIN Service about outcomes of Ofsted support visit with actions to address areas identified as needing improvement * Induction programme in place | 3 5 15 | <ul style="list-style-type: none"> • Implementation of the improvement plan including: • Use established frontline (practitioner) Group as 'Champions' • Practice and performance quarterly workshops for all staff • Continued implementation of the Workforce Improvement Plan including recruitment, retention and induction of agency and permanent staff and action to reduce imbalance of agency Team Managers to permanent Team Managers * Equipping social workers with appropriate mobile technology * Business Analysis of the critical area (CIN teams) | 3 4 12 | | Clair Pyper | 30/09/16 |

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| | c) Abuse or injury to children and young people in the City. Also see iii and iv in the LCCIB Risk Register. | Children would be unsafe living with their parents. Where known to Children's Social Care or Early Help, services would not have protected them. Where a child suffered significant harm or death, there could be a Serious Case Review, with outcomes published nationally. | Implementation of Improvement Plans at Operational and Strategic Level. Recruitment of staff. Staff training. Supervision and management oversight. | 3 | 5 | 15 | | 3 | 4 | 12 | | | 30/09/16 |
| | d) Child Sexual Exploitation: Non-recent cases of CSE where police investigation and/or victims statements demonstrate local authority involvement or culpability in failing to protect victims. Current work on CSE where local authority/partnership working has failed to protect young people from perpetrators | <u>For non-recent and current</u> Reputational risk in a high profile area Allegations against staff or former staff Media coverage Claims against the Council | <u>For non recent cases.</u> Local authority engagement with police in non-recent investigations. <u>For current work.</u> CSE Strategy and Action Plan in place across Leicester, Leicestershire and Rutland LSCB's. Training for local authority and partner agency staff provided through the LSCB and single agency training. Communications Planning. Liquid Logic workspace in place from July 2015. Problem profile (perpetrator information) being put into place by the police. Performance Framework being established. LCC considering budget allocation to establish a CSE team in conjunction with Leicestershire. | 3 | 5 | 15 | CSE Team to be established. Audit work being carried out on young people who are 'missing' or subject of CSE, to be completed by October 2015 and actions considered. Plans for a multi-agency team across Leicester, Leicestershire and Rutland to work on CSE Work to ensure more robust approach | 3 | 5 | 15 | | | 30/09/16 |
| | f) Publication of Serious Case Reviews for cases that occurred in 2013/14 | Impact on staff morale, engagement with vulnerable families, partner confidence and public reputation | Serious Case Reviews not yet published, first set due for approval December 2015; second set in January/February 2015. LSCB partner agreement and media engagement about the messages to be released. Themes and actions arising from pre-publication messages already included in Improvement Plan, or being communicated separately to staff. | 5 | 4 | 20 | Work through LSCB groups to disseminate messages from the SCRs. | 5 | 4 | 20 | | | 30/03/16 |
| | g) Increased demand for service following the publication of the Ofsted report; or due to increasing population of the City | higher numbers of contacts and referrals diverts core role of social workers to increase time pressures to potentially affect quality of work with children at higher risks of neglect and/or abuse. | Regular checks on demands for Early Help and Children's Social Care through performance information | 3 | 5 | 15 | Continue to monitor, raise with partners through LSCB Examine through Children's Trust and consider multi-agency solutions Encouraging schools to buy in Family Support work | 3 | 5 | 15 | | | 30/09/2016 ongoing |

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| | | | | 5 | 4 | 20 | | 5 | 4 | 20 | | | |
| | h) Abuse or injury to children in a range of care placements | Children would be unsafe and have experienced significant harm while in the Council's care. | Ensure maintenance of robust safer recruitment processes and LADO arrangements. | 5 | 4 | 20 | No further controls identified. Compile and monitor critical Young people identified as being at risk of CSE | 5 | 4 | 20 | | CP | 30/09/2016 ongoing |
| 3. Workforce | | | | | | | | | | | | | |
| | a) Insufficient high quality workforce at practitioner and manager levels including: • Turnover/retention of agency staff • Poor quality agency staff • Current Permanent staff leaving • Difficulty in recruiting permanent staff to Service Manager, Team Manager and Social Worker posts due to pressure to perform to required standards • Practical problems that affect day to day work • Leicester not able to attract staff while 'inadequate' | De-stabilisation of workforce and a ripple effect from CIN Teams to other teams in social care. New agency staff struggle to pick up cases that have been through several interim social workers causes stress to new staff | Retention package has been approved • Additional CIN team in place to reduce pressure points across the 9 CIN teams • Workforce Improvement Plan in place • Implementation of recruitment and retention aspects of the Workforce Strategy and Improvement Plan • Health check by Liquid Logic Original Suppliers • Contact with Other LAs successfully using Liquid Logic *Workforce Project Officer working in collaboration with the service to recruit agency and permanent staff *Non-compliant or poor quality agency staff asked to leave *Capability/disciplinary action in relation to permanent staff *Exit interviews with departing staff *Dedicated HR support to CIN to progress capability/disciplinary action Mobile phones and laptops being supplied to staff. Search for new accommodation under way. | 5 | 4 | 20 | Continued work to implement Service Standards, address key areas of staff performance through management action, follow up findings from Performance and Quality Assurance reports | 4 | 4 | 16 | | Clair Pyper | 31/03/17 |
| | b) Insufficient high quality workforce in support services resulting in key support functions not being carried out including Business Support, Liquid Logic report writing, Liquid Logic training and floorwalking | Key tasks underpinning Improvement Plan not carried out, or delayed due to lack of staff | Continued recruitment of key staff including consideration of secondments * Business Analysis of the critical area (CIN teams) *Roll out of mobile technology to staff | 5 | 4 | 20 | Recruitment of an additional trainer for Liquid Logic, and further work to recruit report writers. Consideration of Business Support functions in business analysis work | 4 | 4 | 16 | | | 30/06/16 |

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| | 4. Liquid Logic | | | | | | | | | | | | |
| | Liquid Logic's children's recording system does not work effectively to ensure business processes, support good practice or evidencing children are appropriately safeguarded | Practitioner/manager training does not enhance use of the system Resistance among some staff hampers the use of the system Due to increased demand for social care requirements from the BAS team (ICT for Liquid Logic), the early help reporting roll out in September is at risk. Change is not embedded and the system is unable to discover where things are going wrong & progress is not being maintained * Turnover of staff prevents effective use of the system * Shortage of training not enabling effective use of system * ICT support for use of system is hampered by insufficient report writers and trainers * Inconsistent use of system leads to errors in recording and performance of system | <ul style="list-style-type: none"> Health check by Liquid Logic in August 2015 with recommendations communicated in September 2015 Consequence of Healthcheck remedies will be delayed implementation of LL Version 11 to February 2016 POD group meets monthly and focusses on LL issues raised by front line staff and managers Aide memoires issued to staff to assist with use Training and helpline in place Priority list in place for LL reports Contact with Other LAs successfully using Liquid Logic New staff undergo induction programme including Liquid Logic training. Floorwalker support ended in May 2015 | 5 | 4 | 20 | <ul style="list-style-type: none"> Actions taken with provider: <ul style="list-style-type: none"> Prioritisation and implementation identified through the Health check and for V11 High level project plan to be developed. Recruitment of Liquid Logic report builders and training of others in Performance team to undertake query and report building in Liquid Logic Task and finish group for Care Plans Communication Strategy and plan is being developed and used Health check and Implementation of V11 need to be linked to drive efficient use of the system. Single route for agreement of all future work. Trainers under single management. Role of champions to be reviewed. | 4 | 4 | 16 | | Liz Best | 31/03/16 |
| | Early Help Liquid Logic Module system implementation is delayed with governance arrangements not in place, training not available, partners not participating. | Lack of confidence in Early Help Assessment. Partners not engaging in Liquid Logic training or using the system. Partners not signing Information Sharing Agreement therefore information cannot be shared or partners do not take on the LP role. | Project board meets fortnightly reviewing risks and progress, Risk Assessment in place, data protection guidance drafted, options being explored to include EHA as part of the ISA for LSCB partners. | 5 | 4 | 20 | Allocation of trainers and BAS report writers to the EH system through deployment of existing resources and temporary recruitment of additional staff. Discussion at the LCCIB and the Early Help Group of the Children's Trust Board about how to increase the allocation of Lead Practitioners in partner agencies due to take place October 2015. | 4 | 4 | 16 | | JD | 31/03/16 |

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| Improvement - | 5. Inspections | | | | | | | | | | | | |
| | Impact of poor outcomes from Ofsted Inspections. Also see LCCIB Risk Register. | Poor quality, inconsistent service to children, young people and families. Additional expenditure for improvement work. External scrutiny from Ofsted and DfE. Potential difficulty in attracting staff. Reputational damage to the Council. | Ofsted inspection of Children's Social Care under the Single Inspection Framework took place in January/February 2015, report published March 2015, judgement of 'inadequate'. Inspections and monitoring visits of Children's Residential Homes are carried out regularly and tracked through the 'Residential Improvement Plan'. Preparation work in place for inspection of Children's Centres. | 4 | 5 | 20 | Performance and Quality Framework in place. Regular monitoring of performance and quality of service. Meet key targets set by the Improvement board | 4 | 2 | 8 | | All | 31/03/2016 Ongoing |
| | 6. Early Help | | | | | | | | | | | | |
| | Risk is : Failure of services and processes to identify and meet the needs of vulnerable young people. Extent and gearing of department budget cuts for 2012-15 compromises operations and generates a higher safeguarding failure. | <ul style="list-style-type: none"> The number of children and young people vulnerable to poor outcomes increases resulting in reduced life chances, subsequent high reliance on specialist high cost services and potentially death. Poorer outcomes overall, children's plans priorities compromised, loss of education, reliance on higher cost services, death etc. Reduced management and admin cover will reduce the capacity of existing staff to complete the data analysis required to identify and track families/children at risk of poor outcomes. * Partners are not engaged with Early Help or contribute to the offer | <ul style="list-style-type: none"> Early Help and Prevention protocol in place underpinned by the Early Help and Prevention Strategy. Launch of the EHA, resources and website (Mar 15) Training programme and comms plan in place Initial stakeholder analysis completed (Jan 15), more detailed one underway (May 15) Partnership Performance Framework drafted and EH reports for SEG that evidence impact and progress CC & FS business care project group meets fortnightly to ensure the implementation of recommendations are on track Health Check underway with cyp, families, staff and partners (May/June) results to be published Aug 15 Increase Traded Family Support services within schools | 5 | 4 | 20 | Embedding the Early Help Assessment with all service providers including schools. Deployment of newly redesigned Family Support role. Complete identified work post implementation of the review . Task and Finish group to be set up to oversee the implementation of the recommendation of the Business case | 4 | 4 | 16 | | JD | 30/09/17 |
| | 7. School Attendance | | | | | | | | | | | | |
| | Risk of failure to address children not attending school | Children out of school on an 'unauthorised' basis could be at risk of safeguarding harm, or becoming a victim or perpetrator of crime. Legal action against LA possible for failure to fulfil statutory duty of enforcement of regular school attendance (s.437-446 EA 1996) | EWS holds regular Pastoral Referral meetings with all schools, using threshold list of pupils to identify any pupil attending below 95% & then determines appropriate action. Education Welfare services now integrated under one division . | 3 | 3 | 9 | Regular supervision of EWO managed caseload to identify where legal action against parents is appropriate. | 2 | 2 | 4 | | David Thrussell Ellen Collier | 31/03/2016 Ongoing |
| | Risk of failure to identify and address Children not receiving education (CNRE) cases | Child(ren) could be at risk of safeguarding harm, for which LA could face litigation for failure to fulfil its statutory duties. (s.11 Children act 2004 & s.436A EA 1996) and potential claims re failure to develop to full potential due to loss of access to educational opportunities. | ONE team data officer specifically appointed to effectively identify, track and locate whereabouts of YP and refer onto EWS for more in depth investigation work where necessary. | 3 | 3 | 9 | Work within LA monitored on a termly basis by the Attendance Strategy Group. | 2 | 2 | 4 | | | 31/03/2016 Ongoing |

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| | 8. Placements for children and young people who are looked after | | | | | | | | | | | | |
| | Ability to recruit and retain foster carers | Insufficient internal foster care placements leading to greater use of Independent Fostering Agencies and greater cost to the Council. | Targeting resources to focus on mainstream foster carers. Foster carer allowances report to be considered by DMT to review payment. Foster carer scheme for teenagers to be considered as part of an 'invest to save' bid. | 4 | 4 | 16 | Consideration of raising foster care allowances to national requirement. Consideration of teenage fostering scheme. | 3 | 4 | 12 | | | 30/06/16 |
| | Ability to find sufficient suitable residential placements for children and young people with complex needs | Insufficient/unsuitable residential care that does not meet children and young people's needs and leads to higher costs for the council and poor outcomes for children and young people. Council's statutory responsibilities as a Corporate Parent are not fulfilled | Management decision making. Placement Commissioning service. | 4 | 4 | 16 | Proposals for invest to save for young people 'on the edge of care'. Increased use of Wigston Lane for young people moving into independence. | 3 | 4 | 12 | | | 30/06/16 |
| | 9. Access to records | | | | | | | | | | | | |
| | Delay in the process in dealing with subject access requests & police disclosures leading to ICO fines and negative LA public attention | Reputational damage and fines issued by the ICO | Clear action plan in place and situation monitored by senior managers. New manager in place. | 3 | 2 | 6 | Plans to increase the number of staff to ensure backlog situation does not reoccur | 3 | 2 | 6 | | EB | 31/03/2016 ongoing |
| | 10. Elected Members | | | | | | | | | | | | |
| | Failure to engage Elected Members and secure their commitment to delivery of the Improvement Plan | *Partial improvements which will not secure the improvements required for Leicester City Children's Services to improve from Inadequate. *Escalation of DfE intervention *The risk of harm, neglect and/or abuse for children and young people is increased. | <ul style="list-style-type: none"> Lead Member for CYPF is Board Member. Lead Member is briefed on a weekly basis. Lead Member sends progress updates to members * Regular 1-1 meetings between Strategic Director and City Mayor | 2 | 4 | 8 | * The Improvement Plan is regularly scrutinised by Elected Members, via Children's Scrutiny arrangements. Corporate Parenting Forum has revised terms of reference and is considering key areas of performance related to LAC * Training will be delivered to CYP members from November 2015 | 2 | 3 | 6 | | Frances Craven | 31/03/16 |