Recommendation	Progress /Action	Completed	RAG Status
The regional management board should review the arrangements relating to the implementation of agreed actions and ensure there are vice chairing arrangements in place.	Arrangements for implementing actions reviewed and New Chair and Vice Chair appointed at Board meeting on 14.5.18.	14.5.18	Green
Consideration should be given to how improvements in adoption support can be more systematically developed across partner agencies.	• Meetings with three LA intake teams to be planned. This will help with a common approach, signposting and sharing (both ways) what universal services are available**. Nov 2018 update still to be completed** • Joint work with VAA's around support groups, training opportunities to be further developed. **Nov 2018 Update-AUK providing support groups in the region some have been funded by the region. The region has contributed to development of the Tessa Big Lottery Bid which is aimed to develop and improve support across Wales and will assist in further development/improvement in the provision of support services. Discussions continue on Joint work re support groups** • Access for adopters to a secure members page on the new website will aid access, improve consultation and feedback on what is needed and what is working. **Nov 2018 Update-New Website went live during NAW October 2018 members page delayed due to security issues which are in process of being resolved. Access to members secure page on website has been designed and content ready. Have notified adopters that this is ready but awaiting technicalities outside of our control – ie contracts**	Ongoing Ongoing Ongoing	Amber

A quality assurance framework should be implemented across the service and consideration given to linking into the associated functions which are completed by children's services. i.e. CAR/B; life journey work and later life letters.	Draft QA report is in process of being developed with the Senior Manager Group representing each LA. QA checklists are to be developed to help managers undertake, in line with the QA framework, regular QA audits.	Ongoing	Amber
	Nov 2018Update • **A checklist has been developed for CAR/B quality and has been rolled out to all three LA's as part of workshops** • **LJW quality framework launched and includes workshops for S/W's, Adopters and manager briefings**	Nov 2018 Oct 2018	Green
All operational regional adoption service staff should complete relevant Safe guarding training every two years.	Majority of staff have now completed this training and this is included in the TNA each year. Each member of staff will have an individual learning plan developed which will include safeguarding training. This will then be monitored in their personal supervision of staff on a monthly basis and explored in appraisals. **Nov 2018 Update- Those outstanding and any new staff starting are tasked with completing by 31.03.18**	May 2018	Green
The process for assessing and agreeing financial support for adopters should be reviewed to ensure the system is working appropriately.	The process for assessing and reviewing allowances is now robust and all on Oracle. This also enables early notifications of reviews and enables detailed recording of decision making and budget monitoring. There have BEEN and continue to be challenges due to manager capacity but this will be rectified with the appointment of the 3rd manager for Adoption Support. **Nov 2018 Update-This has been completely reviewed and all processes are in place. All cases are now on Oracle, the NPT computer system which enables monitoring of allowances to ensure applications for new assessments are progressed in a timely manner and reviews are dealt with in advance of the end date for payment. The issue**	Jul 18	Green

	of manager capacity had been problematic but this will change in early 2019 with the new manager for AS taking up post		
The timeliness and quality of supervision should be reviewed to ensure there is a consistent approach to case management and staff support and development.	• Supervision frequency and process has been reviewed and is required to take place monthly for all social work staff. Supervision templates have also been reviewed and updated. All staff have both personal and case supervision and have opportunity to comment on the supervision process. **Nov 2018 Update -Templates for personal supervision have been kept under review. These have been updated to reflect GDPR/ training/ and data issues as well as developments and any capacity pressure / ideas to improve services thus ensuring staff are able to feed into manager group ideas for continuous improvement.**	Completed Jan 2018 and updated again September 2018	Green
	• **Supervision is monthly for all SW staff and managers. In order to monitor this more closely there are two proposed developments. Firstly all supervision and appraisals will be logged on central register in order to provide management board with analytics re number of completed supervision both cases and personal and secondly, a QA framework for supervision so manager can dip sample staff supervision. Will be refined and launched in early 2019**	Spring 19	Amber
Consideration should be given to how staff can be provided with a more suitable working environment.	Raised and discussed at Management Board in May 2018. Also raised at the PTCC Accommodation group. Matter is being considered. **Nov 2018 Update – Desk dividers have been ordered to test whether this will assist in reducing the noise levels but they have yet to be installed**	Ongoing	Red

Panel members should be provided with an appraisal and training opportunities.	• Panel training scheduled in for the year. Training undertaken on 25.4.18 & 18.6.18 covering quality assurance, panel's roles and responsibilities, evidenced based practice and considering two disruption reports and the lessons that can be learnt from these. • Joint training is proposed for the autumn term and this will include panel members, family finding workers and recruitment workers. Aim of this will be to review the matching process and consider evidenced based practice, analysis and the impact of the LJF and Transition process. **Nov 2018 Update-Training has been provided to panel members. This has been around roles, responsibilities, evidenced based practice and inviting panel to consider the matching paperwork and how this could be improved. All recommendations have been implemented and the new forms have been completed and are being used. Panel feedback is that they are excellent and much improved**	Completed April 2018 Completed September 2018	Green
	• Appraisals will be rolled out in the Autumn Manager capacity has delayed these being undertaken **Nov 2018 Update-Appraisals will be rolled out from January 2019 now that the manager / panel advisor capacity has been addressed**	Ongoing	Red
Consideration needs to be given to provide the panel members with occasional business meetings and bring information and reports about placement breakdowns to panel. Panel member need to be provided with relevant policies and procedures.	• Business meetings now scheduled in for the year. In both training events (April and June) a business meeting component was added to the training. Panel members have agreed that, given the way panels are convened across the region and with a fluid attendance, business meetings will be managed in two ways. Updates on children's cases and disruptions will be quarterly and shared in	Completed May 2018	Green

	each of the three panels in a specific month (next one is September) and , where a panel has a number of cases pulled, the time will be used to hold business meetings. **Nov 2018 Update-A formal business meeting has been held and panel have been consulted on how to manage these. It has been agreed that where there are training events, a portion of the event will include business issues. Secondly, where a panel is shorter due to pulled cases, the time will be utilised with business meeting issues. This has been the case this year and has enabled panel consultation on documents and QA issues.**	Completed September 2018	
Monitoring arrangements need to be put in place to ensure review of support plans.	• In adoption support, support plans to be reviewed when an assessment of support needs has been completed, when interventions are completed or when there is long term work they are reviewed by social worker and manager on a quarterly basis. • For family finding, it was agreed that every support plan should be reviewed by the FF manager on granting a placement order and as part of the case closure / transfer process. Transfer protocol to be updated to reflect this latter point **Nov 2018 Update-Open cases within adoption support – support plans are reviewed as part of supervision/reviews of cases at key times such as change of provision/completion of assessment or intervention. This is not as robust as it could be due to manager capacity and the absence of a system on Oracle to aid with this task. It has been discussed with ICT who can set up a ragging system however; capacity of manager has meant this has not been progressed. This will be a key focus when the new manager is in post at the end of the calendar year.**		Amber

	Support plans are not being reviewed formally on a routine basis with each application to court or granting of the adoption order. Discussions have taken place on how this will be undertaken. In addition, the court are now increasingly requesting an updated support plan is provided with the application / annex A and this has meant considerable changes to how the process works. Initial discussion have taken place to examine how to ensure this is completed and it has been agreed that the case closure / transfer process is to be reviewed so that, where there are identified needs a referral will be made for adoption support prior to application for the adoption order so that the named adoption support worker and letterbox co-ordinator can be adequately prepared. This will significantly improve with the appointment of the adoption support manager. The review of closure/transfer process planned for January 2019 if not sooner.		