

Slough YJS HMIP Improvement Plan – revised March 2026

July 2026 update

KEY

Complete

On track

At risk

Off track

Area of focus	Specific action	How	By who	By when	Notes
A) Governance, Leadership	1. Develop Board's knowledge and understanding of Youth Justice	1. Partnership development programme to be agreed	Board Chair, HoS, Service Manager	Complete	1:1 meetings held with all YJMB members in May/June 2026 and will become BAU in between Board meetings. These form part of a 12 month development programme now in place. Board development meeting with YJB set for 23/07/2026. Next steps: Quarterly reporting to Board on progress, learning and further development

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	2. Develop Board's understanding of their purpose and the partnership responsibilities	1. Regular board development sessions	Chair and HoS	Sep 2026	Plan as part of development programme, following one to one's – sign off at YJMB in September Document is complete and to be signed off by YJMB by 31/07/2026 Contact has been made with Camden YJMB and West Berks for shadowing – agreed for September 2026
		2. Board Induction pack	HoS	31/07/2026	
		3. Observation/ shadowing opportunities of YJMB's in other areas	Chair	30/09/2026	
	3. Increase Board's operational oversight	1. Ensure board are sighted quarterly on QA findings, disproportionality data, custodial episodes	HoS and Service Manager	Complete	Reporting to Board has been developed to cover all areas and is consistently shared – move to BAU

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		2. Ensure all policies are annually reviewed and approved by board	Service Manager	31/07/2026	Policies are all on track for approval; ROSH; OOC; Resettlement; Bail and Remand; Work with Victims; Appropriate Adults
		3. Ensure board are sighted on staff vacancies, performance management and any barriers to service delivery.	HoS	Complete	Reporting to Board has been developed to cover all areas and is now consistent – move to BAU
B) Workforce development	1. Develop a multi-year training programme, including refresher training on key areas. Focus on Risk of harm and victim safety; Restorative justice; OOC Assessment and planning; Court, bail and remand; HSB; exploitation	1. Analyse skills audit and identify training needs 2. Identify current opportunities in place and work with Academy to develop where needed	Service Manager Service Manager and TM's	31/07/2026 (for August onwards)	All staff training for 25/26 is being analysed alongside skills audit and appraisals Initial training needs identified include SEND, NRM, Victims conditions and

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		3. Costings to be sought and business case to be completed	Service Manager and HoS		interventions, Disproportionality
C) Assessment, Review and Planning improvement	1.Embed high quality assessment standards across all areas: - Analyse causes of offending - Include victim perspectives - Address identity, diversity and motivation - Draw on multi-agency information	1. Ensure that QA and audit documents include these	Team Managers and Service Manager	Complete	All QA and audit tools include these. Minimum of 3 Internal monthly deep dive audits completed as BAU. Embedded A new tool Standards Audits Tool was introduced in June 2026 – move to BAU Next steps: ensure link to staff development programme
	2. Implement structured planning templates requiring: - Clear, sequenced actions - Multi-agency roles - Safety planning and victim protection	1. Current planning template to be reviewed and updated in line with suggested structure	Team Managers	Complete	Planning template was reviewed and in place from July 2025 – remains BAU

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		2. Ensure QA and audit documents include these	Service Manager	Complete	Audit tool covers these areas
		3. Supervision to include focussed review of children's assessments and plans	Team Managers and Service Manager	Complete	Supervision template updated to include assessments and plans
D) Public Protection and Victim Safety	1. Introduce risk of harm standards and clear practice standards for staff	All assessments include: who is at risk, the nature of the risk; 1. clear contingency actions 2. All plan targets correspond to areas of risk	Service Manager and Team Managers	31/07/2026	Standards have been reviewed as part of the Risk of Harm Policy review – draft is now to be signed off
	2. Ensure the victim voice informs: - OOCR outcomes, planning and risk management	1. Allocated TM to review current practice and processes 2. Focussed review on Victim practice	TM HoS and partnership lead	31/07/2026 Complete	Victims Policy and processes including practice standards have been reviewed will be signed off by end July Full review of Victim practice provided to YJMB in June 2026 and a

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					focussed 12 month action plan
F) Multi agency working together	1. Establish clear pathways for joint planning with: a. Social care b. Education/PRU c. Exploitation teams d. Probation e. Police	1. Review current practice and formalise pathways with partners agencies	Service Manager and HoS	31/07/2026	Formal pathways are established with Police, Probation, Education and SEND. Pathways are in place for Education, SC and Exploitation teams but require formalising.
	2. Standardise processes for staff seeking and recording partner information.				
	3. Ensure YJS plans align with CIN/CP plans.	2. Internal joint supervisions	Team Managers	31/10/2026	Joint supervisions are now included in SCF supervision standards to strengthen co-working and co-ordination of plans, pilot is being reviewed by Principle SW
		3. Identify learning from QA and act	HoS, Service Manager,	30/09/2026	

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		on findings, including auditing of CiN/ CP	TM's, HoS for QA and partners		QA in YJS has moved to BAU Reporting and triangulation with wider SCF QA to be embedded by September 2026
	4. Develop joint safety plans where children remain near victims.	1. Develop template to align with wider CSC 2. Ensure consistent use of current template for all children 3. Dip sampling of Safety plans for children with clear response to actions	HoS, SCF Academy Service Manager and TM's HoS and Service Manager	Complete Complete 31/07/2026	Current template for SCF is used by YJS and covers areas required

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G) RJ and Victim work	1. Ensure all practice includes clear focus on victims	1. Introduce a victim-centred pathway including: a. Restorative contact b. Safety planning c. Tailored victim awareness work	TM with responsibility and Service Manager	September 2026	Recent full review of victims work has highlighted areas for development included in 12 month action plan
	2. Ensure compliance with the Victim Code is embedded in all policies.	1. Update all policies to reflect this	Service Manager	31/07/2026	Actioned in all policy updates
H) Custody, Remand and Resettlement	1. Define partner responsibilities in ETE, accommodation, health and social care within resettlement policy	1. Review current Resettlement Policy in line with outstanding authorities and update to reflect practice required in Slough 2. Consult with partners 3. Bring to YJMB for sign off	Service Manager and HoS	September 2026	Policy has been drafted June 2026, to be agreed at SMT and SLT in July 2026, for YJMB sign off in September 2026
	2. Formalise transition pathways with probation.	1. Review current processes and ensure	Service Manager	September 2026	Link Probation Officer now in place with direct

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		documentation is in place with set practice standards and procedures			work with the team. Transitional Safeguarding panel is being extended to include YJS children – involving MA support beyond 18
	4.Address gaps in ETE for 16+ and ensure realistic post-release offers.	1. T+F group to be set up to focus on this area of service for our children, with links to Slough Skills Strategy and Skills Hubs	HoS, ETE Practitioner	September 2026 – to have a plan/strategy in place	Initial meetings held with Skills Strategy leads, First T+F group meeting planned 01/06/2026 Opportunities for Skill Mill is being considered – challenges with finance are currently preventing this moving forward

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I) Equality, diversity and inclusion	1. Improve staff and service competence for working with: - Girls - GRT communities - Neurodivergent children - Children with English as a second language	1. Identify opportunities for training	Service Manager and HoS	October 2026	Training for GRT communities and speech and language completed in 2025 Further training is planned for September and October 2026 includes disproportionality, Neurodiversity and working with girls.
	3. Analyse disproportionality in statutory and OOC pathways.	1. Monthly data to include disproportionality in statutory and OPC pathways 2. Quarterly reports to Board to include analysis in this area 3. Review and update Disproportionality action plan	Service Manager and Data Analyst	Sep 2026	Monthly disproportionality reporting in place. To be extended to reflect OOC pathways. Action plan is being updated and will be signed off at YJMB in September 2026 Analysis work will then follow

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	4.Ensure EDI is reflected in all policies, including remand and resettlement.	1. Add EDI statement to each Policy and ensure this is referenced throughout	Service Manager	Complete	EDI Statement prepared and included in all Policies
	5.Ensure the voices and experiences of children and families influence service design and improvements	1. Monthly participation opportunities for children who have been or are being supported by the YJS are shared with the YJS Management Team, staff team and YJMB, ensuring clear agenda at Board, team and management meetings consider their views 2. Regular you said, we did updates provided to children and families 3. End of intervention phone surveys are offered to all children and parents/carers and	Team Manager with responsibility, Participation Lead SCF Participation Lead SCF AQA Assessor	September 2026 September 2026 Complete	Forward plan created for monthly participation opportunities, from June 2026 Initial draft created for quarterly use on Social Media pages and in YJS room BAU since January 2025

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		reported quarterly to YJMB 4. Develop a YJ Ambassador role to represent YJ children at YJMB and other relevant partnership and strategic forums	Service Manager, Participation Lead, Head of Participation	December 2026	Included in forward plan
J) QA, Data and Learning	1. Strengthen QA process to ensure it gives an accurate picture of frontline practice; ensure it is scheduled and prioritised	1. Diarised monthly deep dive audits including deadlines set for year	Service Manager and TM's	Complete	BAU
		2. Increase dedicated capacity to support auditing across all areas of the service	Director of Ops, HoS	Complete	Permanent QA and practice Lead in post from 22 nd July 2026
		3. Develop MA Auditing process to understand quality of whole system support for children	HoS, QA Lead	31/07/2026	MA Audit framework developed YJS led bi-monthly thematic audits commence from 21/07/26

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	2. Develop analytical capacity to improve: - Data integrity - Performance reporting - Reoffending analysis - OOCR effectiveness	1. Continue specialist data analyst support	HoS	Complete	Data Specialist extended for 6 months, giving additional capacity
K) OOC Reform	• Redesign the JDMP to ensure: - <i>Joint decision-making</i> - <i>Recorded rationales</i> - Clear roles for YJS, police, social care • Streamline OOCR processes to eliminate unnecessary delays.	1. Observations of JDMP to be completed and areas of development to be identified	TM with responsibility and Service Manager	Complete	Observation undertaken by YJB oversight manager with clear feedback and changes made. Next steps: follow up arranged on 28/09/26
		2. Dip sampling of decision making at JDMP 3. Use of Magic Notes to capture discussion and rationale in detail	HoS	September 2026 Complete	Minutes are captured on Beam notes and Teams Transcript

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	• Develop consistent thresholds for use of prevention vs OOCR. • Strengthen oversight through quarterly OOCR performance and impact reports. • Analyse disproportionality and reoffending patterns.	4. Clear practice standards and process to be set 5. Develop performance and impact reporting for OOCR, disproportionality and reoffending patterns	Service Manager Data analyst	September 2026	Rationale recorded within the PDA before the PDA is completed.
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