

**“Putting Children First”
Safeguarding and Looked After Children Services
Improvement and Development Plan**

December 2010

Draft



Introduction by Paul Carter, Leader

Kent County Council (KCC) has been given an inadequate rating for our safeguarding and looked after children's services by Ofsted. We have always had a reputation for delivering quality, value for money services and we take the Ofsted judgement extremely seriously. Delivering a first class service to children in need of safeguarding and being looked after is now KCC's top priority – we will do everything possible to deliver this transformation with our public agency partners.

Let us be under no illusions that supporting and protecting vulnerable children is the most complex and challenging task. Our social workers are dedicated people who work very hard and we need to support them effectively to deliver a good front-line service. This is a service which is rooted in making judgements about the lives of families. This work entails some of the most difficult and demanding judgements that have to be made in public service.

As leaders of the service we need to re-focus our efforts so that work at the frontline is of the highest quality and well supported, not fuelled by processes and tick box procedures. Our staff will be equipped with the best support to carry out their front-line jobs effectively.

The Ofsted report has implications for all our public agency partners who work across the field of safeguarding and provide support for looked after children – strong leadership will be needed to effect the changes required. Together, we start immediately on the recovery plan to restore the level of services to good or outstanding.

My energies and those of Cabinet and our senior management team will be absolutely focused on supporting the changes essentially needed to put right the shortcomings and weaknesses that have been identified by the Ofsted inspection. KCC and our partners will implement every recommendation and we will do so in an open and transparent way.

Mission Statement – Putting Children First

We are committed to ensuring children and young people are safe and are supported to achieve good outcomes and to being good corporate parents for our looked after children.

To achieve this we will:

- Learn from our failings.
- Support our front-line staff with the very best back office support and equipment.
- Challenge partnership organisations to deliver good standards of practice and service delivery.
- Ensure manageable workloads for our staff
- Review staffing levels and rewards – re-introduce our staff care packages.
- Rigorously quality assure and performance manage all aspects of the service.
- Review all governance arrangements, making sure we challenge beyond the norm.
- Challenge unnecessary bureaucratic processes that divert valuable front-line staff time.
- Fundamental review of how we recruit and retain staff, including career development and training programmes.

Model of Improvement

- Prompt action to safeguard children, focused timescales for improvement
- Internal managers working alongside external experts to develop and embed improvements.
- Feedback from children and young people and front-line workers informing the actions taken.
- Partners, elected members and officers from across the council collaborating to secure improvements.
- Building in external challenge to secure sustained improvement.
- Creating a culture of transparency and openness to encourage staff to raise concerns/issues to improve accountability across all levels of the organisation.

Summary of key overarching actions to be taken:

Protecting children from harm – Workstream 1

- Review/audit of all live cases, c.7,000 – CIN, CP LAC including checks by external auditors by the end of February 2011.
- Risk assessment (RAG rated) of all ‘front door’ (DIAT) teams to inform the programme of improvement – end of January 2011.
- Review and make appropriate changes to duty arrangements.
- Allocate all cases to appropriate staff.
- Improve the timeliness and quality of assessments

Improving outcomes for looked after children – Workstream 2

- Improve engagement with looked after children (LAC), including the Children in Care Council with a view to refreshing the corporate parenting pledge.
- Increase capacity in the education for LAC team.
- Work with Health to achieve health assessments for LAC.

Recruitment and Retention – Workstream 2

- Recruit to Principal Social Worker posts.
- Increase administrative, social work assistant and social work capacity.
- Complete workload and capacity analysis with a view to ensuring manageable and balanced caseloads
- Restructure social worker teams to secure dedicated focus on LAC, reasonable size teams and balanced skill mix
- Review of the social worker recruitment and retention policy including social worker pay scales and make recommendations for implementation.
- Review and take action to secure better workplace conditions.
- Ensure good supervision and management.
- Implement a programme of engagement with front line staff including staff surveys to inform the improvement programme.

Learning and Development – Workstream 3

- Revise the learning and development programme to achieve responsiveness to the concerns about the quality of practice.
- Implement a workforce development strategy to achieve an on-going pool of appropriately qualified, developed and supported staff delivering services to children and their families across the partnership.
- Attend to the learning and development needs of newly recruited social workers.

Culture change, leadership and management – Workstream 4

- Embed good customer care behaviours including feedback to service users and partners.
- Develop and embed quality standards within the service.
- Establish an understanding of required management and leadership competencies, values and behaviours including enforcement of must -do essentials.
- Put in place a development programme for all managers including a review of current competency and provide coaching and mentoring opportunities.
- Improve the quality assurance and performance management skill base of all managers.

Strengthening challenge – senior officers and elected members – Workstream 5

- Review all safeguarding governance arrangements including the role of the Policy Overview and Scrutiny Committees and the Children's Champion Board.
- Strengthen the performance information/management framework and include service user feedback.
- Implement the social work task-force health check evaluation tool (as part of the performance information framework). The health check is a tool used to continuously evaluate progress in relation to recruitment, retention and workloads and other factors that impact on safe social work practice.
- Capitalise on opportunities for external challenge via the Improvement Board, LGA and other arrangements.

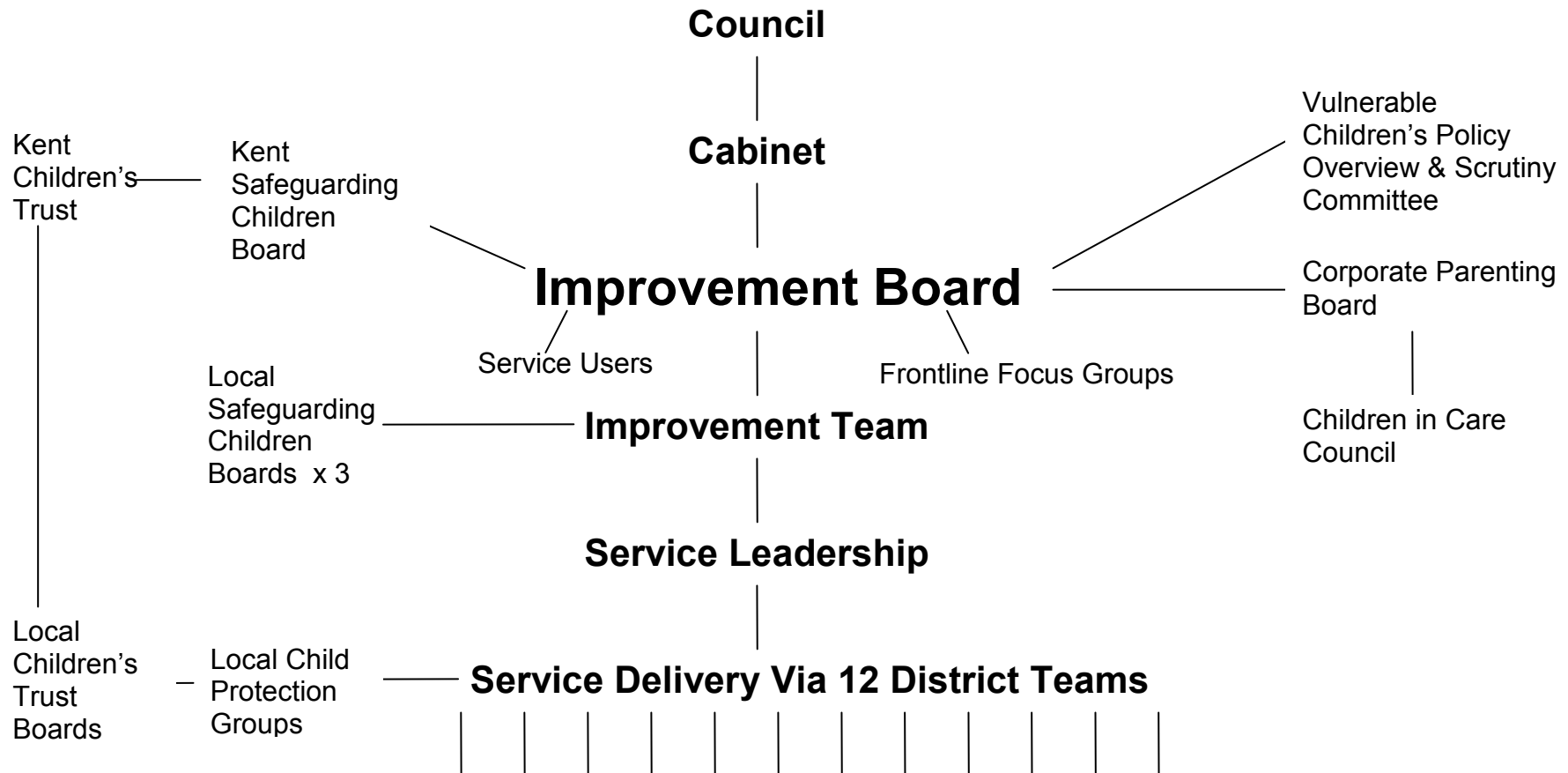
Early Intervention – Workstream 6

- Work with partners via the KSCB and the Kent Children's Trust to secure a comprehensive understanding of thresholds for universal, targeted and specialist services.
- Develop the role of the new Preventative Services managers to work with partners to embed the understanding of appropriate thresholds for social care intervention and for the Common Assessment framework (CAF),
- Develop multi-agency integrated team working – at the front door in particular

Support systems and processes – Workstream 7

- ISG to ensure that the ICS system is fit for purpose
- Social work managers to ensure good use of the ICS system
- Review of the Kent Contact and Assessment Service (KCAS)

Governance arrangements



The Improvement team

PROGRAMME OFFICE - Additional dedicated capacity to deliver the improvement plan

- Head of Service Improvement – driving the improvement actions to secure delivery – Pam Rowe
- Improvement Programme Coordination
- Front door improvement lead – Eva Learner
- Dedicated Human Resources lead officer
- Dedicated Quality Assurance lead officer
- Performance Information lead officer
- IT (ICS) systems development lead
- Workforce development lead (supported by LGSD formerly IDeA)
- Communications support
- Change team alongside SCB partners
- Corporate capacity to review of office accommodation and to assist with culture change endeavours
- Capacity to review of KCAS

The Improvement team will be supported by named senior managers within the service and across the council who will assist the delivery of the workstreams outlined on pages 3-4.

KCC Draft Improvement Plan

Under development in collaboration with partners and will be reviewed to reflect the Improvement Notice

Draft Ofsted Inspection Action Plan

Ref.	Requirements	Actions in response	Leads		Timescale		Completion/ Evidence	Governance and Accountability	Notes
			A	R	Start	End			
	Immediately								
A1.	Review the current childcare caseload and ensure that all children in need of safeguarding and protection are identified and receive appropriate services.	A1.1 Audit all Child in Need (CIN), Child Protection (CP) and Looked after Children (LAC) cases. Take any necessary actions to address any gaps and respond immediately to safeguarding issues if identified.	HD	HOS DMs TLs	Nov 2010	Dec 2010 (CP CIN) Jan 2011 (LAC)		KCC-Internal accountability frameworks Improvement Steering Group/Board	
		A1.2 Senior managers to audit a sample of cases to quality assure managerial decision making.	HD	HOS	Nov 2010	Dec 2010 (CP CIN) Jan 2011 (LAC)			

Ref.	Requirements	Actions in response	Leads		Timescale		Completion/ Evidence	Governance and Accountability	Notes
			A	R					
		A1.3 External review of above audit and of implementation of follow up actions.	PR	Imp. Team	Jan 2011	Feb 2011	10 % of audits will be reviewed by external auditor		<i>Monthly review through performance monitoring to establish percentage of caseloads that comply</i>
		A1.4 Team leaders to review individual social work caseloads and ensure that appropriate caseloads are in place - (initial target 30 children). Further reductions to be agreed.	HD	HOS DMs TLs PSWs	Nov 2010	March 2011		KCC-Internal accountability frameworks Improvement Steering Group/Board	
		A1.5 Increase staffing levels (admin, SWA, SW, PSW and team leaders)	CY	HOS HR	Sept 2010	Ongoing			
A2.	Ensure that all partners are fully conversant with the threshold for accessing social care services and provide the appropriate levels of referral information	A2.1 Work with KSCB and Kent Children's Trust to secure a comprehensive understanding of thresholds for social care intervention, including review and re-launch of the eligibility criteria.	HD	PD	Nov 2010	January 2011		KSCB KCT Improvement Group/Board	<i>Eligibility review will be carried out in partnership with Medway Council to develop a more joined up approach for partner agencies</i>

Ref.	Requirements	Actions in response	Leads		Timescale		Completion/ Evidence	Governance and Accountability	Notes
			A	R					
		A2.2 Deliver multi-agency, localised workshops to develop understanding regarding thresholds for referrals to social care.	HD	PD EL	Feb 2011	Ongoing	Review progress and effectiveness May 2011		
A3.	Improve the quality and timeliness of initial and core assessments	A3.1 Engage with front-line staff and managers to secure an understanding of the issues that impact on the timeliness and quality of assessments.	HD	HOS DM's	Nov 2010	Nov 2010	✓	KCC - accountability frameworks Improvement Steering Group/Board	<i>Meetings/discussions undertaken and ongoing</i>
		A3.2 Re-issue guidance in relation to timescales and re-emphasise the importance of compliance with the use of the assessment tracking tool	HD	DM	Sept 2010	Sept 2010	✓		<i>Written communication disseminated</i>
		A3.3 Review the effectiveness of the tracking tool (with front line managers) & implement any changes required	DM	TLs	Dec 2010	January 2011			
		A3.4 (cross reference with A1.5) Increase administration capacity to enable social workers to focus on assessments.	HR/ CY	HOS	Sept 2010	Feb 2011			<i>Temporary staff in place whilst permanent staff recruited</i>

Ref.	Requirements	Actions in response	Leads		Timescale		Completion/ Evidence	Governance and Accountability	Notes
			A	R					
		A3.5 Implement the 12 week development programme for managers and social workers in relation to initial and core assessments to address timeliness and quality.	HD	DM EL	Nov 2010	March 2011			<i>First 3 district teams programme complete & second batch commenced</i>
		A3.6 Managers/supervisors to ensure that assessments are of a good quality, timely and provide evidence of management oversight	HD	HOS DMs TLs PSWs	Nov 2010	Ongoing			<i>Audits and routine scrutiny by managers should confirm improvements</i>
		A3.7 Team Leaders to ensure all assessments show evidence of management decision-making and quality assurance actions	HD	HOS DMs TLs PSWs	Nov 2010	Ongoing			<i>Audits and routine scrutiny by managers should confirm improvements</i>
A4.	Establish clear arrangements for the referral and treatment of young people aged 16-18 requiring a CAMHS service	A4.1 Review of current arrangements and make recommendations for improvement.	LG	KG	Nov 2010	Feb 2011		KCT PCT Board Improvement Steering Group/Board	

Ref.	Requirements	Actions in response	Leads		Timescale		Compl- etion/ Evidence	Governance and Accountability	Notes
			A	R					
A5.	Ensure that all assessments of looked after children are completed to the standards required by statutory guidance, contain the necessary health and educational information and are included on the child's record.	A5.1 (cross reference to A1.1) As part of the audit of LAC cases, ensure updated core assessments, care plans, health assessments and PEPs.	PR	HOS Imp. Team	Nov 2010	March 2011		KCC - accountability frameworks Improvement Steering Group/Board	<i>Ongoing audits and routine scrutiny by managers should confirm improvements.</i> <i>Actions taken in response, by managers, will be tracked and included in the monthly performance report and IRO annual report</i>
		A5.2 Line managers at all levels to ensure that practice complies with the above requirements, through supervision, tracking and other managerial mechanisms.	HD	HOS DMs, TLs PSW	Nov 2010	Ongoing			
		A5.3 Statutory reviews to ensure that the above (A5.1) are in place and that themes and issues are reported to senior managers.	DM	PB	Jan 2011	Ongoing			
		A5.4 IRO quarterly and annual reports to be provided to Director, Managing Director and Corporate Parenting Board for response to issues identified.	DM	PB	Jan 2011	Ongoing			
A6.	Improve the quality of case planning and ensure that all relevant professionals are able to participate and contribute to the process.	A6.1 Develop and implement a multi-agency LAC Strategy which clarifies expectations of all agencies.	LT	MAG	Nov 2010	May 2011		KCT Corporate Parenting Board Improvement Steering Group/Board	<i>Further delay in issuing the national guidance will impact</i>
		A6.2 Issue the new national guidance on new care	DM	PB	Jan	Jan 2011			

Ref.	Requirements	Actions in response	Leads		Timescale		Completion/ Evidence	Governance and Accountability	Notes
			A	R					
		planning regulation following publication.							<i>on achievement of timescale</i>
		A6.3 (cross reference to A1) Case audit findings to inform practice, supervision and appraisal, training and quality assurance activity via any necessary revision to procedures, training programmes and audit tools	PR	Imp. Team	Feb 2011	Feb 2011			
		A6.4 Implement multi-agency care planning training	PR	MW	March 2011	July 2011			
	Within Three Months:								
A7.	Establish systematic performance management processes at all levels to improve the quality of practice and management across the partnership.	A7.1 Develop performance management and quality assurance frameworks	PR JW	Imp. team	Feb 2011	March 2011		KCC-Internal accountability frameworks Improvement Steering Group/Board	
		A7.2 Implement new performance management and quality assurance frameworks	JW	HD PR	March 2011	May 2011			
		A7.3 Review the new frameworks and amend as required.	JW		June 2011	July 2011			
A8.	Improve the child protection conference process to ensure that professionals are properly prepared and service user confidence is restored.	A8.1 Social workers to complete and share reports with families in line with current requirements of 5 days in advance of the conference.	HD	HOS DMs TLs PSWs	Jan 2011	Ongoing		KCC-Internal accountability frameworks Improvement Steering	<i>Percentage to be monitored and report through Independent chairs QA reporting</i>

Ref.	Requirements	Actions in response	Leads		Timescale		Completion/ Evidence	Governance and Accountability	Notes
			A	R					
		A8.2 Agencies to ensure that reports are shared with families and submitted to chair prior to conference.	KSCB		March 2011	April 2011		Group/Board	<i>KSCB Multi- agency audit to report progress</i>
		A8.3 Review the conference process in collaboration with partners and ensure guidance is provided as appropriate	PD		Jan 2011	April 2011			<i>KSCB Multi- agency audit to report progress</i>
		A9.1 Commission external training for child protection conference chairs to produce SMART plans	MW PR	Imp. Team	Feb 2011	April 2011			
A9.	Ensure that each child protection plan sets out measurable recommendations	A9.2 (cross reference to A7.2) Standards are established through the development of a quality assurance framework in respect of child protection planning	HD	DM HOS	Jan 2011	March 2011			
		A10.1 Review KCAS and DIAT interface to minimise duplication and streamline processes and make recommendations to the access and assessment board.	HD PR	Imp Team	Feb 2011	April 2011		KCC-Internal accountability frameworks Improvement Steering Group/Board	<i>Commission Independent Review</i>
A10.	Review the effectiveness and value for money of the Kent contact and assessment service (KCAS).	A10.2 Agree recommendations and begin implementation	KK RT		May 2011	June 2011			

Ref.	Requirements	Actions in response	Leads		Timescale		Compl- etion/ Evidence	Governance and Accountability	Notes
			A	R					
A11.	Ensure that ethnicity data is entered in each child and young person's electronic and paper file	A11.1 Ethnicity data to be entered for all cases	DS	HOS DMs TLs SWs	Jan 2011	Feb 2011		KCC-Internal accountability frameworks	
		A11.2 Ethnicity code to be made mandatory field on ICS	DS		Jan 2011	Jan 2011		Improvement Steering Group/Board	
A12.	Ensure that health services subscribe to a suitably independent interpreter service	A12.1 Review arrangements for the provision of independent interpreters	LG					PCT Board and	
		A12.2 Agree recommendations and Implement.	LG					Improvement Steering Group/Board	
A13.	Establish a functional performance management system and ensure that the integrated children's system is fit for purpose	A13.1 (to be addressed through A7.1 and A18.1)	JW PR DC	Imp Team				KCC - accountability frameworks and Improvement Steering Group/Board	
A14.	Ensure that all looked after children can access CAMHS up until 18 years of age	A14.1 Review arrangements for access to CAMHS for all 16-18 year old and specifically those who are Looked After	LG					PCT Board and Improvement Steering Group/Board	
		A14.2 Agree recommendations and Implement	LG						
A15.	Ensure that missing from care and missing from school policies are aligned for looked after children	A15.1 Align current missing children policies to result in a single KSCB missing children policy and procedure	CB		Jan 2011	Jan 2011		KSCB Corporate Parenting Board Improvement Steering Group/Board	

Ref.	Requirements	Actions in response	Leads		Timescale		Completion/ Evidence	Governance and Accountability	Notes
			A	R					
A16.	Reduce the numbers of looked after children who are excluded from school and ensure that policies and practices relating to excluded children are consistent across the county	A16.1 Review current policy in relation to exclusion of LAC and implement improvements.	TD					Corporate Parenting Board and Improvement Steering Group/Board	
		A16.2 Implement virtual school improvement plan	TD						<i>Proposal to extent the Virtual team to be considered by Corporate Parenting Board</i>
Within Six Months:									
A17	Review the workforce and take the necessary steps to address capacity and capability shortfalls.	A17.1 Continue to implement the recruitment and retention strategy to ensure adequate capacity to meet workload requirements	CY	HOS	Nov 2010	Ongoing		KCC-Internal accountability frameworks Improvement Steering Group/Board	<i>Measured by reduction in vacancies and monitored via performance report information</i>
		A17.2 Supervision and appraisal to be in place for all social work staff and managers to address capability and development needs.	HD HR	HOS DMs TLs PSWs	Nov 2010	Ongoing			
		A17.3 (cross reference with A7.1) Development of performance framework to include indicators to monitor adherence to the supervision policy	PR JW	Imp Team	See A7.1	See A7.1			
		A17.4 Qualitative audit of supervision to establish that supervision is in place and responding to identified need.	DM		June 2011	August 2011			<i>Report to CSSMT, SMT and Improvement Board</i>

Ref.	Requirements	Actions in response	Leads		Timescale		Completion/ Evidence	Governance and Accountability	Notes
			A	R					
A18.	Review the effectiveness and value for money provided by the current computer based recording systems	A18.1 Review of ICS functionality and review of current arrangements for the storage of records to ensure that records are accurate and support social workers to record in a timely and cost effective manner.	DC PB		Nov 2010	Feb 2011		KCC-Internal accountability frameworks Improvement Steering Group/Board	
		A18.2 Implement recommendations from review	DC RT		Feb 2011				
A19.	Take steps to align training and development opportunities with service prioritised outcomes	A19.1 In response to inspection and audit findings, revise the learning and development programme to target identified service priorities	MW PR	Imp Team	Nov 2010	Jan 2011 and ongoing		KCC-Internal accountability frameworks Improvement Steering Group/Board	
		A19.2 Implement revised programme	MW	Imp Team	Jan 2011	Ongoing			
A20.	Review the effectiveness of generic social care teams for looked after children and their impact upon the quality of service that is provided	A20.1 Review the current configuration of C+F Teams in relation to their ability to manage and prioritise CIN, CP and LAC cases.	HD PR	Imp Team HOS	March 2011	May 2011		KCC-Internal accountability frameworks Improvement Steering Group/Board	
		A20.2 Restructure inline with the recommendations	HD PR	Imp Team HOS	May 2011	December 2011			
A21.	Develop a multi-disciplinary looked after children strategy and clarify management and leadership roles and accountabilities	A21.1 (Cross reference to A6.1) Strategy to clarify management and leadership roles and accountabilities.	LT		Nov 2010	May 2011		Corporate Parenting Board and Improvement Steering Group/Board	

Ref.	Requirements	Actions in response	Leads		Timescale		Completion/ Evidence	Governance and Accountability	Notes
			A	R					
A22.	Develop a screening tool for substance misuse for use with looked after children and young people	A22.1 Develop screening tool and integrate into current arrangements for LAC Health Assessments.	AS		Jan 2011	April 2011		Corporate Parenting Board and Improvement Steering Group/Board	
A23.	Strengthen the arrangements for the contribution of the voluntary sector to enable their full contribution to good outcomes for young people and care leavers	A23.1 (Cross reference to A6.1) voluntary sector to contribute to the LAC strategy	JA	PD	Jan 2011	May 2011		Corporate Parenting Board and Improvement Steering Group/Board	

Key

Safeguarding actions – white background

LAC actions – yellow background

A – Accountable

R – Responsible

Leads

AS	–	Angela Slaven, Director, Youth & Community Support Services
CB	–	Chris Berry, Head of Attendance & Behaviour Service
CY	–	Cathy Yates, Head of Children's Services Mid Kent (Job Share)
DC	–	David Cockburn, Executive Director, Strategy, Economic Development & ICT
DM	–	Donna Marriott, Head of Safeguarding
DMS	–	District Managers
DS	–	Donna Shkalla, Head of Management Information
EL	–	Eva Learner, consultant
HD	–	Helen Davies, Director of Specialist Services for Children
HOCs	–	Heads of Children's Services (CY, MW, KL, KG)
HOS	–	Heads of Service (CY, MW, KL, KG, LT)
HR	–	Human Resources
Imp. Team		Improvement Team
JA	–	Joy Ackroyd, Kent Children's Trust Partnership Manager
JW	–	Joanna Wainwright, Director, Commissioning and Partnerships
KG	–	Karen Graham, Head of Children's Services East Kent
KK	–	Katherine Kerswell, Group Managing Director
KL	–	Kathryn Lambourn, Head of Children's Services, West Kent
KSCB	–	Kent Safeguarding Children Board
LG	–	Lorraine Goodsell, Director of Commissioning, Child Health
LT	–	Liz Totman, Head of Corporate Parenting
MAG	–	Multi-Agency Group
MW	–	Michelle Woodward, Head of Children's Services Mid Kent (Job Share) & Professional Development Manager
PB	–	Paul Brightwell, Performance and QA Manager - Looked After Children
PD	–	Penny Davies, Kent Safeguarding Children Board Manager
PR	–	Pam Rowe, Head of Service Improvement
PSWs	–	Principal Social Workers
RT	–	Rosalind Turner, Managing Director, Children, Families and Education
SWs	–	Social Workers
TD	–	Tony Doran, Head teacher virtual school Kent (LAC)
TLs	–	Team Leaders