

Putting Children First

Kent Safeguarding and Looked After Children Improvement Plan

March 2011

Contents

	Page No.
Commitment of Improvement Board Members	3
The Kent Improvement Plan	4
Governance Arrangements	4
Overall Context	5
National and local context - Challenges	5
Partnership Vision for Children and Young People	5
Strengths	6
Areas of Concern	7
Our Approach to Improvement	9
Our Leadership Style to Secure the Improvements	10
Our Core Strategy	11
Kent Improvement Plan detailed actions	13

Appendices

Appendix 1: Ofsted Recommendations	53
Appendix 2: Improvement Notice Targets	55
Appendix 3: Leads and Job Titles	57

Commitment of Improvement Board Members

As members of the Improvement Board, we confirm our commitment to the impacts and actions described in this Improvement Plan. We endorse the actions as appropriate and plausible. We agree to work collaboratively to secure the impacts set out in the plan and to embed the changed practices designed to ensure better and sustainable life chances for the children and young people of Kent.

List of Board Members:

Signed.....Dated.....
Liz Railton, Independent Chair

Signed.....Dated.....
Katherine Kerswell, Managing Director

Signed.....Dated.....
Jenny Whittle, Cabinet Member for Specialist Children Services

Signed.....Dated.....
Malcolm Newsam, Kent CC Interim Corporate Director Families and Social Care

Signed.....Dated.....
Alastair Pettigrew, Kent CC Interim Director of Specialist Children's Services,
Families and Social Care

Signed.....Dated.....
Julian Ward, Department for Education (observer)

Signed.....Dated.....
Maggie Blyth, KSCB Chair

Signed.....Dated.....
Ann Sutton, Chief Executive, Kent & Medway PCT Cluster

Signed.....Dated.....
Marion Dinwoodie, Chief Executive, Kent Community Health NHS Trust

Signed.....Dated.....
Maria Shepherd, Detective Superintendent, Kent Police.

Signed.....Dated.....
Lorraine Goodsell, Acting Director of Commissioning, Child Health

The Kent Improvement Plan

This document describes the planned actions to improve services to children and/or support looked after children. It outlines immediate as well as longer term actions to embed an understanding of the type of focus that should be maintained, irrespective of various ongoing external and internal challenges.

The actions in this plan are aligned with the actions in the East and West Kent Health improvement plans. Specific actions to be achieved jointly with partners are indicated throughout the plan.

Partners across a range of agencies including Health, Education, Police and Probation have contributed to this plan and will be actively involved in its achievement. See Priority 4 – Strengthening Partnership for particular details.

Governance Arrangements

An Improvement Board was established in February 2011 to support rapid and sustainable improvement of services that safeguard children and/or support looked after children. Its key roles are to agree, monitor and report progress on the actions in the Improvement Plan. This will include monitoring the targets set out in the Kent Improvement Notice issued by the Secretary of State in January 2011 and added to in March 2011. The Board has an independent chair, Liz Railton, who has been approved by the Parliamentary Under Secretary of State for Children and Families. She will report directly to the Minister and the Leader of the Council on progress on a quarterly basis. The Board will meet monthly and its membership will include:

- The Independent Chair
- KCC Managing Director
- KCC Lead Member
- KCC Managing Director Families and Social Care
- KCC Director of Specialist Children's Services, Families and Social Care
- Department for Education observer
- KSCB Independent Chair
- Chief Executive, Kent & Medway PCT cluster
- Chief Executive, Kent Community Health Trust
- Kent Police

The Board's work will also be reported to:

- Kent Children's Trust Board
- Kent Safeguarding Children's Board
- Members of Kent County Council
- NHS PCT Boards, East and West Kent and the Strategic Health Authority via Health partners

Overall Context

For some years Kent County Council (KCC) has been regarded as a good local authority in relation to children's services, and previous inspections of KCC and its partners have judged children's services to be 'good'. However, following the learning from Haringey, the nature of inspection has fundamentally shifted away from more managed, notified models such as the Joint Annual Reviews, and towards unannounced inspections.

It is now apparent that in Kent, 'good' services have not been consistently underpinned by a culture that secures appropriate levels of transparency, accountability and ownership to result in responsiveness to emerging issues of concern, including the increased demand on specialist services. As a result, safeguarding and looked after children services are currently judged by inspectors as inadequate.

These inspections (conducted by Ofsted and by the Care Quality Commission) have resulted in clarity about the collaborative partnership effort and clear focus now required.

National and Local Context - Challenges

The improvement actions outlined in the plan are being taken at a challenging time for public services, with significant pressures on resources together with new policies and strategies being formulated and implemented by the coalition government. For Kent County Council, the response to these imperatives includes council-wide organisational structural redesign. The new Families and Social Care Directorate will secure greater alignment of activity across age groups and integration of care pathways. A new strategic commissioning function will also address need and commissioning across all care services and drive a family approach to prevention and support within the council and partnership organisations. The twelve children's trust district boards will be retained, which bring partners together in localities to drive the delivery of the Every Child Matters agenda.

Whilst these contextual features pose challenges, the Council and its partners are determined to maintain a rigorous focus on vulnerable children particularly those in need of safeguarding and being looked after.

Partnership Vision for Children and Young People

Kent County Council and partners have outlined the following vision for children and young people:

"In Kent successful achievement exceeds aspiration, diversity is valued and every child and family is supported. Children and young people are positive about their future and are at the heart of joined up service planning. They are:

- *nurtured and encouraged at home*
- *inspired and motivated by learning*
- *safe and secure in the community and*
- *living healthy and fulfilled lives*

We have an additional vision that the improvement actions lead to:

- Children's needs being identified and responded to at the earliest stage possible to increase the potential for them to achieve their life chances.
- Children who are eligible for specialist children services receive a good quality service.
- Leadership, management and practice that is effective in safeguarding those children that need it.

Strengths

Despite the inspection judgement of 'inadequate' (including some serious and significant areas of concern) there are many commendable aspects of the service currently in place to support vulnerable children. Inspectors highlighted these in their feedback and report. These included:

- Feedback from children and young people (7 to 16 years olds) that they feel safer at school.
- Council Members champion the rights of children and young people through the Children's Champion Board. The Board is well established and has recently developed a clear relationship with the children in care council. As a result young people and Members meet regularly in a variety of settings, some of which are informal at the request of the young people concerned. Both groups speak positively about this process and the progress that is being made.
- The County's diversity and equality strategy and attendant policy and procedures are implemented effectively. In particular, the council and partners have responded well to the challenge of providing services to high numbers of asylum seeking young people. However, the recording of ethnicity on children's records requires attention because there are examples of occasions when this information has not been completed.
- Some good and effective services provide support to looked after children and young people. These include Catch 22, the fostering service (including the treatment and multi-disciplinary team fostering), the adoption service, the service to unaccompanied asylum-seeking children and young people, and the advocacy and support services provided by Action for Children.
- The disabled children's team provides a good service. Effective use of Aiming High investment opportunities has led to improved outcomes such as increased availability of short breaks with foster carers for disabled children.
- Improved and outcome focussed commissioning and the development of the county's own fostering service which has significantly increased choice of

placement and enabled skilled, specialist resources to become available to children and young people.

- Placement stability has increased and young people themselves report very positively about some of the help and assistance they have received from services such as the post-16 team.
- Effective Corporate Parenting focus has produced good outcomes particularly in relation to housing for care leavers.
- The proportion of care leavers in education, employment or training was higher than the statistical neighbour average in 2009 and around the same as the England average. Further progress has been made in 2010 and the proportion is now higher than the England average.
- The customer care service which manages complaints is good and provides effective reporting. Feedback is given routinely to managers and staff and the analysis of complaints is thorough and effective, lending itself to informing service development and management. Learning (*from complaints*) is integrated into training programmes including induction and managers are responsive to complaint feedback.

Strengths identified by the Care Quality Commission (in respect of Health)

- In Primary Care Trusts (PCTs) and Acute Trusts there is a strong strategic awareness of the importance of safeguarding and a high awareness across health staff.
- Safeguarding policies and procedures are sound and available to staff in all locations visited and there is an extremely good system of safeguarding supervision in place across all services inspected (West Kent).
- Learning from serious case reviews (SCR) amongst health partners is very good.

Areas of Concern

Ofsted found the following areas for attention and action:

- Action had not been taken to sufficiently address concerns identified through audits or the unannounced inspection of contact, referral and assessments in August 2010.
- There were ineffective quality assurance and performance management arrangements and inconsistency in supervision practice.
- There were capacity challenges in different parts of the County which were not addressed.

- The long term teams hold a mixture of cases (CIN, CP and LAC including cases involved in care proceedings). Priority is frequently given to cases in crisis leaving other cases without the focus required. There is a need to review the effectiveness and impact upon the quality of service provided to looked after children.
- The level of recording of interventions, case planning and reviewing is not adequate and this is compounded by poor implementation of the ICS system which is recognised as being ineffective in supporting the business processes of the organisation. Three disconnected systems including ICS are in place and running in tandem to compensate.
- The limited development of preventative and early intervention services across the partnership and the lack of consistent understanding of thresholds and eligibility for specialist social work services with limited implementation of the Common Assessment Framework (CAF) and the Team Around the Child approach.
- Insufficient level of child centred direct work including in the context of timely assessments of children, young people and their families.
- Agencies do not exercise their safeguarding responsibilities appropriately by ensuring that their referrals contain accurate and sufficient information to enable informed responses to be made.
- Although reducing now, caseloads of front-line workers have been too high. This has been compounded by the current cohort of social workers who are inexperienced and new to the UK needing a higher level of support than experienced workers. As of February 2011 there are significant vacancies at the first-line management level (16 permanent Principal Social Worker vacancies).
- The inspection by the Care Quality Commission (CQC) found that Health providers and commissioners need to secure health assessments for looked after children; screen for substance misuse given the prevalence of substance misuse in over more than half of birth families. They also found that CAMHS support is inadequate with inconsistent community provision for young people between 16 and 18 years.
- Education achievement of looked after children and young people needs to improve as well as the need for reductions in exclusions, improvements in attendance, and greater consistency in the quality of Personal Education Plans.

Our Approach to Improvement

Our action plan has been built around six key themes. These are:

Priority One: Providing confident leadership and management across children's services

- A clear vision and sense of direction
- Modelling professional competence, confidence and self belief
- Providing leadership at every level
- Prioritising and pacing the actions to achieve change so that it is manageable, achievable and sustainable
- Communicating clear expectations throughout the organisation and across the Kent Children's Trust partnership
- Supporting, problem solving and listening (including high quality supervision)
- Rewarding and celebrating excellence
- At all levels, holding people to account for poor performance
- Management that is responsible, proactive and solution-focussed

Priority Two: Putting in place effective front-line practice

- Effective multi-agency early intervention and prevention
- Consistent implementation of thresholds, appropriate management of risk and confidence in knowing when to intervene
- A robust, consistent system for responding to referrals, underpinned by high quality practice standards
- A high quality child centred social work assessment service supported by timely decision making
- A high quality family support service
- Building a range of services which support families and their children at the earliest possible point

Priority Three: Creating an organisation fit for purpose

- Putting in place an effective and sustainable structure
- Ensuring accountability and compliance throughout the organisation
- Establishing clear priorities and aligning resources to meet them
- Promoting a culture that embeds the Kent behaviours and competencies
- Ensuring front-line teams receive the infrastructure support they need
- Front door services delivered from offices that are fit for purpose and adequately supported by IT and other systems

Priority Four: Strengthening partnerships to make a difference

- A shared vision by all partners and a commitment to work together to improve services to safeguard and look after children and young people
- A Children’s Trust that drives better outcomes for all children and young people
- A Safeguarding Children’s Board that supports high quality safeguarding and is open, challenging and honest across the partnership
- Joint commissioning of services that keep children safe and free from harm

Priority Five: Becoming the employer of choice in the region

- Effective source and supply of social workers and managers
- A compelling offer (reward package for recruitment and retention)
- Ongoing recruitment and retention actions
- Induction for a range of staff recruited from different countries and at different levels
- Long term focus on the growth and development of the children’s workforce
- Sufficient line management and supervision capacity to guide and support front line workers so they feel safe in carrying out their duties
- An excellent supervision, training and development programme for staff at every level in the organisation

Priority Six: Robustly managing performance

- A comprehensive performance system
- Accurate and timely management information
- A personal accountability structure
- Individual analysis and intervention
- Individual achievement measured
- An effective model of management and supervision
- Supervision and support is informed by management information
- Effective quality assurance of practice

Our Leadership Style to Secure the Improvements

Members and officers are determined to deliver rapid, visible and sustainable improvement to our children’s services. Our approach will be steered by the following characteristics:

- **A sense of urgency** – we know that the current situation is unacceptable and we will not rest until services for children are safe
- **Connection to the Front-Line** - listening, understanding, supporting and taking action to assist front-line staff to do a good job
- **An unremitting focus on what is important** - fixing the most important things first
- **Management grip** - driven by strong performance management and tackling problems as they arise in an ongoing way
- **Intolerance of the unacceptable behaviours** - the first step of our improvement journey will be to eradicate unacceptable practice and unacceptable behaviour
- **Complete transparency** - we will produce information that allows elected members, partners, government and the public to understand our progress. Creating a culture of openness to encourage staff to raise concerns/issues
- **The top priority** for KCC and its partners

OUR CORE STRATEGY – THE TEN CORE TASKS

This Improvement Plan will deliver sustained improvement across all of children’s services leading to improved outcomes for children and young people within Kent. Our core strategy, however, focuses on tackling those areas of greatest risk first and laying the foundations for more effective practice. The core tasks are as follows, and will be implemented over the next six months:

We will improve the quality of practice by

1. Bringing in a peripatetic team to
 - Reduce the number of unallocated cases
 - Reduce numbers of incomplete assessments
 - Restore timely assessment timescales.
2. Strengthening the quality of work undertaken in the assessment teams with external support, monitoring and audit
3. Restoring throughput, pruning caseloads and reducing the number of children in need
4. Making structural changes for handling initial assessments, fixing Kent Contact and Assessment Service, introducing specialist looked after children teams and ensuring we have the right amount of staff in the right locations
5. Strengthening first line management accountability and the quality of supervision through training, development and audit

We will improve the children's system by

6. Implementing an effective management information and quality assurance framework
7. Filling resource gaps by more effective recruitment and putting in place a compelling workforce strategy
8. Building an effective commissioning framework and range of preventive services
9. Strengthening the Kent Safeguarding Children Board and the Children's Trust arrangements, Common Assessment Framework and threshold arrangements
10. Providing front line teams with suitable accommodation, ICT arrangements, infrastructure and support

The detailed Improvement Plan is set out below, organised against the six key themes, but annotated with references to Improvement Notice Targets (IN 1. to IN 16. – see appendix), Ofsted recommendations (O 1. to O 23. – see appendix) and Core Tasks (CT 1. to CT 10. – as set out above) to show which actions support these targets, recommendations and tasks.

Kent Improvement Plan

DETAILED ACTIONS

Priority 1 – Leadership and management

Key Objectives:

Communication regarding the expectations of leaders and managers; Developing a culture where leaders and managers fulfil their roles and responsibilities and demonstrate recognition that they are accountable for delivering high quality services; Well targeted, clear communications that ensure all staff and stakeholders are informed and able to influence the way forward; Rewarding and celebrating high quality practice; Corporate parenting that is effective.

Priority Leads (Accountable) –Malcolm Newsam,

1.1 Outcome - Leaders and managers are clear about expectations and gaps in knowledge and management practice are identified.

Ref	Actions	Timescale	Delivery Leads	Targets & Measures
1.1	1.1.1 Across the council, put in place a programme which establishes and promotes the new leadership competencies and required behaviours and expectations of leaders, managers and staff to ensure they are clear about what is required	31 March 2011 - 31 March 2012	Rob Semens	<ul style="list-style-type: none"> • Programme timetable (including timescales) produced and implemented • Mid point review to evaluate effectiveness of the programme • Final review of the impact of the programme informed by staff feedback
	1.1.2 Set in place clear guidance for leadership and management roles, responsibilities and accountabilities for managers and staff which build on the Kent competencies and expected behaviours.	31 March 2011 - 31 May 2011	Alastair Pettigrew	<ul style="list-style-type: none"> • Leadership and management best practice guide published to all managers and supervisors to underpin other action in 1.1.1 above.
	1.1.3 Conduct and complete a leadership and management survey with senior managers. Engage managers and leaders in identifying leadership gaps and strengths in order to fulfil their roles in delivering high quality services	30 April 2011 - 31 May 2011	Rob Semens	<ul style="list-style-type: none"> • A gap analysis completed that will link guidance to practice, against which management can be assessed

	1.1.4 Validate findings from leadership and management survey with mandatory questionnaire.	1 June 2011 - 30 April 2012	Rob Semens	<ul style="list-style-type: none"> Engagement of all managers and supervisors in identifying success requirements
	1.1.5 All senior managers to complete 360 assessment based on competency in role	31 May 2011 – 1 April 2012	Rob Semens	<ul style="list-style-type: none"> Engagement of senior managers in their continuous professional development (CPD)
1.2 Outcome - Leadership and management capability is evaluated and action is taken to result in improvement as required.				
1.2	1.2.1. Assess leadership and managerial capability at the senior management level via an assessment centre to identify gaps in knowledge	1 April 2011 - 30 June 2011	Rob Semens	<ul style="list-style-type: none"> Agreed assessment centre schedule developed and implemented with details of the agreed areas of competency that are to be measured Produce report on findings within 2 weeks of assessment completion
	1.2.2 Deliver four targeted performance management workshops for senior managers, district managers and team leaders focusing on key performance themes identified through leadership and management survey and outcomes from assessment centre. The workshops will be linked to case studies pertinent and relevant to the delivery of high quality children's services	01 June 2011 - 31 July 2011	Rob Semens	<ul style="list-style-type: none"> Workshops conducted with 50 managers Managers start to personify, demonstrate and communicate high quality leadership behaviours to staff.
	1.2.3. Develop a targeted response to identified needs in relation to essential leadership and management skills (for individuals and the management team).	31 July 2011- 15 August 2011	Rob Semens	<ul style="list-style-type: none"> Action plan designed within 2 weeks of assessment completion

	1.2.4. Implement individual leadership and management development plans.	1 July 2011 – 1 March 2012	Alastair Pettigrew	<ul style="list-style-type: none"> Individual learning and development plans are updated in response to the recommendations of the assessment centre.
	1.2.5. Provide access to coaching, and/or mentoring for the management team. For example if mentoring expertise in social care is an identified need through the assessment centre	From 1 April 2011	Rob Semens	<ul style="list-style-type: none"> 6 coaching/mentoring sessions offered/delivered to individual staff. Additional sessions offered as appropriate
	1.2.6 Develop succession planning/talent management systems to nurture and utilise new leadership/managerial capabilities to meet immediate priorities and plan for continued performance improvement	1 July 2011 - 31 Sept 2011	Rob Semens	<ul style="list-style-type: none"> Existing 'talent' is utilised effectively, good practice is role modelled and shared. To be measured via staff feedback and written evidence of sharing mechanisms/activities and timetables.
<p>1.3 Outcome - Staff and stakeholders report that they are kept abreast of developments in the improvement agenda and feel able to influence future developments. Well targeted, clear communications that ensure all staff, partners and service users are informed and able to influence the way forward</p>				
1.3	1.3.1. Produce a communications and engagement strategy including face-to-face and online interaction and written information (Internal and external)	27 Jan 2011 - 30 April 2011	Jill Rawlins	<ul style="list-style-type: none"> Strategy developed and signed off with implementation plan
		1 May 2011 - 31 May 2011		<ul style="list-style-type: none"> Strategy implemented

	1.3.2. Corporate Director, to carry out a series of open forums communicating the improvement plan "Putting Children First" to all staff.	1 April 2011 - 31 May 2011	Alastair Pettigrew	<ul style="list-style-type: none"> Visible leadership in communicating expectations and desire for excellence in safeguarding children to all staff
	1.3.3. Obtain feedback from staff, partner agencies and service users (including children and young people) and use their views to inform the improvement actions including the re-design of the service.	1 March 2011- 1 Sept 2011	Ella Hughes	<ul style="list-style-type: none"> Feedback gathered from service users (including children and young people) Feedback gathered via Partners Participation Group
		Review in November 2011; final review in May 2012		<ul style="list-style-type: none"> Bi-annual review of the communication strategy (including review of implementation and effectiveness across all stakeholders) Feedback used when improvement actions are being undertaken and when services are being developed or commissioned
1.4 Outcome - Social work staff are engaged in the quality award process, have aspirations to be part of it, and report that it makes them feel valued.				
1.4	1.4.1 Re-introduce and re-invent Quality Service Awards across the directorate, as part of a KCC-wide process, to recognise and celebrate good practice including social work practice	1 May 2011 - 30 June 2011	Rob Semens	<ul style="list-style-type: none"> Proposal developed that is informed by staff survey
		30 June - July 2011		<ul style="list-style-type: none"> Corporate Management Team agree proposal
		1- 31 Dec 2011		<ul style="list-style-type: none"> Communication sent to all staff advising of quality service awards

		1 March 2012 – 30 March 2012		<ul style="list-style-type: none"> • Host award ceremony
		30 April 2012		<ul style="list-style-type: none"> • Annual review report to Corporate Management Team, including data from staff survey and levels of engagement
	1.4.2 Ensure that KCC's reward and recognition mechanisms are appropriately, fairly and transparently applied to recognise good/high performance	1 April 2011 - 30 April 2011	Rob Semens	<ul style="list-style-type: none"> • Surveys confirm that managers and staff are confident that good performance is recognised and reinforced through the reward system
	1.4.3 Identify through staff engagement events what mechanism recognise/promote high performance would provide most value & value for money	1 April 2011 - 31 May 2011	Rob Semens	<ul style="list-style-type: none"> • Recognition mechanisms are understood and supported by staff and feedback confirms this
	1.4.4 Develop Total Reward Package that reinforces achievement of business priorities	1 March April 2011 - 31 May 2011	Rob Semens	<ul style="list-style-type: none"> • Reward package supports performance improvement and recognition as well as attractive for new staff and feedback from staff confirms this
<p>1.5 Outcome - Looked after children and young people feedback that they are receiving the appropriate support and that services are responsive. Multi-agency corporate parenting responsibilities are evidenced through improved intervention, planning, appropriate challenge and engagement by Elected Members, officers and partners.</p>				
1.5 (*Joint with Partners)	1.5.1. Develop and implement a multi-agency looked after children strategy, which supports improved outcomes for children in care. The strategy clarifies the respective roles, accountabilities and overarching expectations of all agencies	1 Feb 2011 - 31 May 2011	Liz Totman	<ul style="list-style-type: none"> • Multi agency looked after children strategy developed and agreed by multi-agency Corporate Parenting Board

	IN 11. O 21	1 May 2011- 30 Sept 2011	Liz Totman	<ul style="list-style-type: none"> Children and young people are consulted, and their views inform the strategy throughout its life cycle. To be evidenced via a written report detailing how feedback has informed current and future decision making.
		1 Feb 2012 - 29 Feb 2012		<ul style="list-style-type: none"> Implementation plan outlined and delivered
	1.5.2 Revise policies and procedures to reflect changes brought about by the new looked after children's strategy and the new, statutory, care planning regulations	01 March 2011 - 31 May 2011	Donna Marriott (supported with external resource)	<ul style="list-style-type: none"> Policies/Procedures updated.
	1.5.3 Review Kent's Corporate Parenting Group's terms of reference (membership, role and function)	1 March 2011 - 1 May 2011 (review)	Liz Totman	<ul style="list-style-type: none"> Report and implementation plan agreed by the Corporate Parenting Group
		1 Sep 2011 - 30 Sept 2011		<ul style="list-style-type: none"> Implementation of the recommendations
		1 Jan 2012 - 29 Feb 2012		<ul style="list-style-type: none"> Review of the effectiveness of the new Corporate Parenting Group including feedback from members and children and young people

	<p>1.5.4 Elected Members and senior officers provided with information to enable them to understand their corporate parenting roles, responsibilities and accountabilities</p>	<p>1 April 2011 – 1 Dec 2012</p>	<p>Marisa White</p>	<ul style="list-style-type: none"> • Looked after children Elected Member's pack devised and distributed • Looked after children senior officer briefing prepared and distributed. • Annual evaluation survey to ensure actions have been undertaken and information is adequate
	<p>1.5.5 Induction pack for Elected Members developed, outlining corporate parenting responsibilities.</p>	<p>1 March 2011 – 1 April 2011</p>	<p>Marisa White</p>	<ul style="list-style-type: none"> • Induction pack produced and distributed • Induction workshops agreed and undertaken
	<p>1.5.6 Annual training programme for cross party Elected Member representatives about corporate parenting responsibilities, including those not on the Corporate Parenting Group</p>	<p>1 May 2011 – 29 Feb 2012 (review)</p>	<p>Marisa White</p>	<ul style="list-style-type: none"> • Programme of workshops devised • Workshops undertaken
	<p>1.5.7 Performance information about outcomes for looked after children and young people is analysed and reports are provided bi-monthly to Corporate Parenting Board</p>	<p>31 March 2011 - 30 April 2011</p>	<p>Liz Totman</p>	<ul style="list-style-type: none"> • Bi-monthly report and analysis submitted to officers, Elected Members and multi-agency Corporate Parenting Group.
<p>IN 12.</p>	<p>1.5.8 Develop participation plan (in consultation with the Children in Care Council) for ensuring that a wider range of children in care are routinely made aware of how they can contribute to the development of the service or make complaints</p>	<p>1 March 2011 - 31 May 2011</p>	<p>Liz Totman</p>	<ul style="list-style-type: none"> • Plan produced and implemented • Children in Council membership is extended to include a wider representation of the children in care population • Looked after children and young people

				are involved in developing services
	1.5.9 Improve children and young people's access to, and awareness of the Kent Pledge commitments	1 August 2011 - 30 September 2011	Liz Totman	<ul style="list-style-type: none"> Survey of looked after children and care leavers to obtain their views about the extent to which the Kent Pledge is being achieved
	1.5.10 Targeted staff training (social work, education and health) takes place to increase understanding of their role and responsibility to contribute to achieving good outcomes for looked after children. Across KCC, raise staff's awareness about their responsibilities towards looked after children.	1 June 2011 – 1 June 2012	Michelle Woodward	<ul style="list-style-type: none"> Online training to be developed to be disseminated across the service.
1 August 2011 – 30 June 2012 (review)				<ul style="list-style-type: none"> Current looked after children training courses reviewed to ensure the role of corporate parenting is reflected. Looked After young people are involved in social work training <p>(Cross reference to 5.5.1)</p>
1 April 2011 - 1 June 2011		Liz Totman	<ul style="list-style-type: none"> Include briefing on corporate parenting responsibilities in the KCC induction Brief the Pioneer and Challenger groups of KCC staff 	

Priority 2: High quality front-line practice

Key Objectives:

High quality, rigorous and consistent front-line practice to safeguard children and young people, including those who are looked after. Appropriate duty and initial assessment arrangements; Manageable workloads; Robust procedures, processes and actions which analyse risk and lead to consistent plans and actions to manage those risk; Front line staff and managers are clear about the arrangements regarding the throughput of work between teams; Effective child protection conference process to ensure multi-agency working which supports effective plans for children and young people; Improved Care Planning and permanence for Looked After Children, Health Needs of Looked After children and young people are addressed; Improvements in educational outcomes for looked after children.

Priority Leads (Accountable) – Alastair Pettigrew,

2.1 Outcome – Children are safeguarded as a result of high quality practice driven by robust management, underpinned by sound systems and processes.

Ref	Actions	Timescale	Delivery Leads	Targets & Measures
2.1	2.1.1 Managers review open cases and take action to safeguard children. O 1.	Completed	Alastair Pettigrew Heads of Service	<ul style="list-style-type: none"> • Open cases reviewed, including Looked After Children cases, and actions taken to safeguard children as appropriate • Completed pro-forma submitted to Director on actions taken to ensure the safety of any children identified as needing safeguarding • Heads of service report to Director on the number of cases reviewed where immediate action has been required to safeguard children and young people.

	2.1.2. Independently scrutinise the robustness of the review of cases by managers	Completed	Independent consultants	<ul style="list-style-type: none"> • Reports provided to Director and Managing Director outlining key issues
IN 3. CT 1. CT 3.	2.1.3 Action is taken to reduce the number of unallocated cases and ensure that all children who are looked after or subject to a child protection plan have an allocated social worker	1 March 2011 – 1 Sept 2011 (review)	Heads of Service	<ul style="list-style-type: none"> • Managers instructed to ensure all child protection and looked after children cases are allocated • No child protection or looked after child cases are identified as unallocated in performance report • External peripatetic (managed) team recruited to work on backlog to enable reduction in unallocated cases
		1 Aug 2011- 30 Aug 2011		<ul style="list-style-type: none"> • No more than 200 unallocated cases over 28 days
IN 3. O 3. CT1.	2.1.4 Backlog of outstanding initial and core assessments are completed	Completed	Alastair Pettigrew	<ul style="list-style-type: none"> • Performance information is used to confirm the number of initial and core assessments out of timescales
		1 February 2011, Review weekly	Alastair Pettigrew	<ul style="list-style-type: none"> • Heads of Service take action to clear the backlog • Heads of Service obtain and use performance information to monitor progress in reducing backlog
		1 March 2011 – 30 April 2011	Eva Learner	<ul style="list-style-type: none"> • Develop risk assessment and other appropriate tools to support task

		11 April 2011 - 1 Sept 2011 (review)	Alastair Pettigrew	<ul style="list-style-type: none"> External peripatetic team (managed) commissioned to assist in clearing backlog and to address any capacity deficits
		1 Aug 2011 - 30 Aug 2011	Alastair Pettigrew	<ul style="list-style-type: none"> Reduce initial assessments outside of timescales to 200 Reduce core assessments outside of timescales to 100
	2.1.5 When clearing the backlog, transfer appropriate cases for further work from Duty and Initial Assessment Teams to Children and Families Teams CT 3.	1 March – 1 October 2011	Alastair Pettigrew	<ul style="list-style-type: none"> Children and Families Teams, review cases on current caseload to confirm whether they should remain open to the specialist services Take action as a result to secure capacity to respond to work coming through from the duty and assessment teams
	2.1.6 Develop agreed transfer protocol to address the transfer of social care cases between Duty and Initial Assessment and Children and Families Teams	31 March 2011	Eva Learner	<ul style="list-style-type: none"> Transfer protocol agreed by Children's Social Services Management Team and implemented

<p>CT 3</p>	<p>2.1.7 Monitor and take action to secure appropriate caseload levels for all social workers</p>	<p>1 March 2011 (monthly review)</p>	<p>Alastair Pettigrew</p>	<ul style="list-style-type: none"> • Review individual social work caseloads and complete work/transfer/close cases as required. • Identify capacity needs and address as required • Independently review a sample of social work managers' caseloads • Performance reporting indicate caseload levels • Undertake workforce analysis, see section 3.1.2
<p>CT 2.</p>	<p>2.1.8 Develop and implement practice standards in collaboration with front line staff and managers</p>	<p>1 March – 31 May 2011</p>	<p>Eva Learner</p>	<ul style="list-style-type: none"> • Workshops take place with practitioners and managers across the county to establish agreed standards • Agreed practice standards distributed to managers and staff and incorporated into; procedures, learning and development programme, local learning sets framework, the supervision policy and framework and is used to inform appraisals • Audits identify whether agreed practice standards are being embedded across the service
<p>IN 10. CT 5.</p>	<p>2.1.9 Supervisors have robust oversight of case work, ensuring that management oversight and decision making is set out in writing on case files and focuses on timely actions and throughput of work</p>	<p>1 March 2011 (Review at weekly and monthly intervals)</p>	<p>Heads of Service</p>	<ul style="list-style-type: none"> • Supervisors to record guidance and decisions on each child's electronic case record • District managers and team leaders check that management oversight is occurring and this is recorded on case records • Head of Service monthly report to Director outlines progress being made

	2.1.10 Staff receive supervision, in accordance with the supervision policy which reflects the recommendations of the Social Work Reform Board and is child focused and reflective	1 April 2011 – 1 March 2012 (review)	Heads of Service	<ul style="list-style-type: none"> • Supervision policy re-issued to all staff. • Managers supervise staff in line with policy • Survey undertaken to establish that staff are receiving supervision as per the policy • Independent audit of supervision is conducted to establish whether supervision takes place in accordance with the supervision policy.
<p>IN 10. CT 5.</p>				
<p>2.2 Outcome- Duty and initial assessment arrangements are effective in responding to referrals of need and action is taken in a timely manner to ensure that children's needs are responded to as evidenced in improved performance outcomes.</p>				
2.2.	2.2.1 Evaluate the quality of case work being undertaken in the Duty and Initial Assessment Teams and take immediate action to secure clear understanding of the day to day actions required by managers to safeguard children	Completed	Alastair Pettigrew	<ul style="list-style-type: none"> • Report provided to Director on effectiveness of all Duty and Initial Assessment Teams to respond to children that are referred • Action taken by Heads of Service in response to any identified concerns reported to Director
	2.2.2 Recruit external practice and management experts to review caseloads, progress cases and ensure timely throughput.	1 March 2011 – 31 August 2011	Alastair Pettigrew	<ul style="list-style-type: none"> • Recruit external practice and management experts • Delivery models agreed, including supervision of experts • Mobilisation achieved • Target of reducing the number of children in need established • Increase in number of Initial Assessments
	IN 7. CT 3.			

				<p>of children in need per 10,000 population under 18 to be in line with statistical neighbour averages</p> <ul style="list-style-type: none"> • Increase the percentage of referrals that go on to initial assessment from the 2009-2010 baseline of 46% to 65% (between Jan – March 2012) and an average of at least 65% (over the period 2012-13)
	<p>2.2.3 In collaboration with relevant partners, managers and staff, re-establish and implement appropriate duty and assessment arrangements to respond to children that are referred.</p> <p>IN 4. CT 4</p>	<p>1 March 2011 – 31 Dec 2011</p>	<p>Alastair Pettigrew</p>	<ul style="list-style-type: none"> • Evaluate current arrangements and produce a plan for approval and implementation • Plan approved • Plan implemented that includes; structure (duty and assessment), function, roles, business processes, responsibilities, tools and focus on partnership working. <p>Link to 3.1.5</p>
2.2	<p>2.2.4 Scope the viability of developing a joint referral service with Police.</p> <p>CT 4.</p>	<p>21 Feb 2011 - 31 May 2011</p>	<p>Maria Shepherd</p>	<ul style="list-style-type: none"> • Meeting with Director of Specialist Children’s Services. • Models of delivery to be considered and decision made as to viability of joint referral service. • If viability is established, actions to be taken forward. To be initiated by the stated date.
	<p>2.2.5 Ensure that referrals are acted upon within 24 hours, that decisions are consistent with threshold and eligibility criteria and that referrers are notified of the outcome of their referrals</p> <p>IN 4.</p>	<p>1 March 2011 - 31 May 2011</p>	<p>Heads of Service</p>	<ul style="list-style-type: none"> • Performance report monitors referrals actioned within 24 hours • Managers use performance reports to take action to ensure decisions are being taken within 24 hours • Performance report monitors feedback to

				<p>referrers</p> <ul style="list-style-type: none"> • Managers use performance reports to ensure that written feedback is sent to referrers. • Performance reports shows evidence and outcomes the actions being taken by managers to achieve this
	<p>2.2.6 Children are visited and assessments written up and signed off by a manager within timescales as defined in Working Together (within 7-day timescale for initial assessments and 35 for core assessments)</p> <p>IN 4. IN 6.</p>	<p>1 March 2011– 1 March 2012</p> <p>1 April 2012– 1 April 2013</p>	<p>Heads of Service</p>	<ul style="list-style-type: none"> • Performance report provides information regarding whether children are visited during assessments • Performance report provides information about assessment timescales being achieved • Initial and Core Assessments are completed in timescales - at least 69% Initial Assessment 80.4% Core Assessment
	<p>2.2.7 Kent Contact and Assessment Centre (KCAS) effectively screens contacts to ensure that referrals meet the eligibility and threshold criteria</p> <p>IN 4. CT 4.</p>	<p>1 April 2011 - 30 April 2011</p>	<p>Alastair Pettigrew</p>	<ul style="list-style-type: none"> • Social work managers with expertise of children’s social care are employed/deployed in KCAS <p>(Linked to 3.1.1 and 3.1.5)</p>

	<p>2.2.8 CAF arrangements are strengthened to ensure that children with additional needs are responded to before their needs become acute and require specialist children services.</p> <p>CT 9.</p>	1 Jan 2011 – 31 March 2012	Alastair Pettigrew	<ul style="list-style-type: none"> • The Early Intervention and Preventative Strategy outlines the role of universal, targeted and specialist services and is clear about when a CAF should be completed. (Link with 4.3.1) • CAF support service developed to result in the achievement of percentage increases in the number of CAFs completed
<p>2.3 Outcome - Child protection planning processes are effective, responsive to children and young people's needs, facilitate multi-agency working and are robust in ensuring that children are safeguarded.</p>				
2.3	<p>2.3.1 Strengthen child protection investigation processes (including strategy meetings, section 47 investigations) to ensure that decisions are clear, evidence based and result in risk being minimised</p>	1 March 2011 - 30 April 2011	Alastair Pettigrew	<ul style="list-style-type: none"> • Tracking sheet used as a managerial performance tool to monitor and drive throughput of child protection work • Performance report monitors section 47s with missing initial and core assessments • Managers ensure action taken to ensure robust management of child protection work • External management experts recruited to work alongside existing managers to raise standards
	<p>2.3.2 Conduct a multi-agency review of the child protection conference process in collaboration with partners</p> <p>O 6.</p>	1 March 2011 - 31 May 2011	Penny Davies	<ul style="list-style-type: none"> • Consult partners regarding the current child protection conference process • Amend Kent and Medway child protection procedures to reflect changes <p>Provide training to support amended procedures</p>

	<p>2.3.3 Develop outcome focused child protection plans that are measurable</p> <p>O 7.</p>	<p>1 April 2011 – 1 October 2011 (Review)</p>	<p>Donna Marriott</p>	<ul style="list-style-type: none"> • New child protection plan developed and built in Integrated Children’s System • Independent conference chairs trained • Safeguarding Children Board procedures amended
	<p>2.3.4 Support implementation of strengthened child protection planning processes through multi-agency training</p>	<p>1 August 2011 – 1 Jan 2012 (Review)</p>	<p>Penny Davies</p>	<ul style="list-style-type: none"> • Multi-agency training programme developed and implemented
	<p>2.3.5 Strengthen the independent child protection conference quality assurance framework to assess the quality of child protection planning and to incorporate user feedback</p>	<p>1 March 2011 – 30 April 2011</p>	<p>Donna Marriott</p>	<ul style="list-style-type: none"> • Child protection conference quality assurance framework developed and implemented across the County • User feedback obtained and used to inform the quality assurance framework • Quarterly report about safeguarding, which includes a focus on care planning, submitted to Children’s Social Services Management Team
	<p>2.3.6 Reduce the number of children subject to a child protection plan for 2 years or more</p> <p>IN 8.</p>	<p>1 June 2011 – 1 March 2013</p>	<p>Donna Marriott</p>	<ul style="list-style-type: none"> • Report to Children’s Social Services Management Team setting out plan for how to reduce cohort to below 6% • Plan agreed and recommendations implemented • Performance reporting monitors the number of children who are progressing towards, or have, a child protection plan for 2 years or more
	<p>2.3.7 Reduce the number of children who become subject to a child protection plan for a second or subsequent time</p>	<p>1 June 2011 – 1 March 2013</p>	<p>Donna Marriott</p>	<ul style="list-style-type: none"> • In collaboration with operational managers, produce a report to Children’s Social Services Management Team setting out a plan for how to reduce the

	IN 8.			<p>number of children made subject to a child protection plan for a second or subsequent time below 13.6% (by March 2013)</p> <ul style="list-style-type: none"> • Plan agreed & recommendations implemented • Performance reporting monitors the number of children who are made subject to a plan for a second or subsequent time
	<p>2.3.8 Reduce the number of children subject to a child protection plan for 2 years or more</p> <p>IN 8.</p>	1 June 2011 – 1 March 2013	Donna Marriott	<ul style="list-style-type: none"> • Report to Children’s Social Services Management Team setting out plan for how to reduce cohort to below 6% • Plan agreed and recommendations implemented • Performance reporting monitors the number of children who are progressing towards, or have, a child protection plan for 2 years or more
<p>2.4 Outcome – Care planning is effective, with rigorous planning for permanence. Looked after children and young people receive the appropriate level of support and services, through effective multi-agency intervention, which they report is responsive to their needs. The health needs and well being of looked after children and young people are assessed and result in appropriate intervention. Educational outcomes for looked after children and young people are improved.</p>				
	<p>2.4.1 Improve the quality of assessment and care planning for Looked After Children, ensuring that all plans contain health and education information, and includes decisions about permanence where appropriate</p> <p>IN 13. O 14.</p>	1 April 2011 –31 June 2011	Heads of Service	<ul style="list-style-type: none"> • All Looked After Children have an up to date care plan (including appropriate permanence plans), Personal Education Plan and health assessment and core assessments where required • Managers check that the above is in place for every looked after child • Permanency plans are regularly reviewed by supervisors and this process is monitored by district managers

				<ul style="list-style-type: none"> • Performance reports outlines progress on Personal Education Plans, health assessments, permanency plans and core assessments (where required)
	<p>2.4.2 Improve the percentage of children who are adopted</p> <p>IN 14.</p>	1 March 2011 – 1 March 2012	Heads of Service	<ul style="list-style-type: none"> • District managers and adoption leads jointly monitor the progress of all children requiring adoption • Independent Reviewing Officers ensure that, where appropriate, 'best interest decisions' are being made by the time of the second looked after children review • Performance reporting monitors the percentage of children adopted – 11% by March 2012 and 13% over the period 2012-2013
	<p>2.4.3 Independent Reviewing Officers quality assure the effectiveness of care planning and where appropriate challenge casework decisions or delay</p> <p>IN 13.</p>	1 March 2012 – 1 March 2013 (review)	Donna Marriott	<ul style="list-style-type: none"> • Each review ensures that required actions are in place and exceptions reported to the appropriate manager and escalated, if necessary, for resolution • Quarterly report by Independent Reviewing Officers service produced and submitted to the Children's Social Services Management Team for action • Progress on permanence planning, health assessments, core assessments, care plans and Personal Education Plans is measured through performance reporting
2.4 <i>(*Joint with</i>	2.4.4 Ensure that all relevant professionals are able to participate and contribute to planning for looked after children in line with their responsibilities	1 April 2011 – 1 March 2012	Donna Marriott	<ul style="list-style-type: none"> • Relevant professionals are invited to attend looked after children reviews • Agency contribution evaluated by

<i>Partners</i>)	O 15.	(review)		Independent Reviewing Officer service and reflected in quarterly Independent Reviewing Officer report <ul style="list-style-type: none"> Concerns regarding lack of agency contribution is reported and escalated to managers in relevant agencies, where appropriate
(*Joint with Health)	2.4.5 Ensure arrangements are in place for looked after children to receive Child and Adolescent Mental Health Service support and timely health assessments, ensuring records are available to confirm that they have been completed. O 17.	1 March 2011 – 30 April 2011 1 May 2011 – 30 June 2011	Lorraine Goodsell/ Caroline Friday Tony Doran	<ul style="list-style-type: none"> Outline plan submitted by Health ICS adapted to record health assessments for looked after children by looked after children nurses Performance reporting monitors the completion of health assessments for looked after children
(*Joint with Health)	2.4.6 Ensure a Child and Adolescent Mental Health Service for 16-18 year olds O 4.	1 Feb 2011 – 31 June 2011	Lorraine Goodsell	<ul style="list-style-type: none"> Funding approval obtained for a pilot to begin in April 2011 for CAMHS service to newly presenting 17 year olds in west Kent and the Swale part of east Kent – February 2011. Plan to ‘Operationalise’ the pilot approved – February 2011 Recruitment of staff secured from April 2011 Further development of the service and transition arrangements agreed for those young people already receiving a CAMHS service who will turn 17 over the next 12

				months – March – June 2011
(*Joint with Health)	2.4.7 The health needs of looked after children are responded to IN 16.	1 March 2011 – 31 March 2011 1 May– 1 March 2013 (year on year)	Lorraine Goodsell	<ul style="list-style-type: none"> • Report to management team and corporate parenting group outlining plans to achieve improvement in health assessment produced • Performance reporting demonstrates percentage of children in care having health and dental checks has increased to 85% by March 2012 and is at least maintained up to March 2013.
(2.4.8 & 2.4.9 Joint with Health: delivery to be measured via the NHS West Kent Action Plan)	2.4.8 Ensure that health services subscribe to a suitably independent interpreter service O 10.	1 March 2011 – 30 Sep 2011	Lorraine Goodsell	<ul style="list-style-type: none"> • Review arrangements for the provision of independent interpreters. • Agree recommendations and implement
	2.4.9 Develop a screening tool for substance misuse for use with Looked After Children and young people O 22.	1 Feb 2011 – 31 May 2011	Lorraine Goodsell	<ul style="list-style-type: none"> • Develop screening tool and integrate into current arrangements for LAC Health Assessments.

<i>(Joint with Schools)</i>	<p>2.4.10 Improve the attendance and educational attainment of looked after children through the development of the Virtual School for Looked After Children</p> <p>IN 15. O 19.</p>	<p>1 March 2011 – 1 March 2012 (Review)</p>	<p>Tony Doran</p>	<ul style="list-style-type: none"> • Business Plan which outlines engagement with schools, for the Virtual School service reported to the Board of Governors for the Virtual School and the Corporate Parenting Board and implemented • Individual looked after children’s educational attainment and attendance information is accessible and used to target appropriate interventions • Performance reports indicate that children in care’s attainment is no more than 36% points difference Achieving 5 A* - C , 34 % (English L4 KS2) and 33% (Maths L4 KS2) points different to their peers by the end of the academic year 2011/12; The number of Looked After Children who miss 25 days or more days of schooling during the academic year to no more than 11%
	<p>2.4.11 Reduce exclusions of looked after children</p>	<p>1 March 2011 – 30 Sep 2011 (review)</p>	<p>Chris Berry</p>	<ul style="list-style-type: none"> • Performance reporting indicates the number and length of exclusions reduces for children in care in line with their Kent peers or statistical neighbours • Performance reports indicate the percentage of children in care who miss 25 days or more days of schooling during the academic year to no more than 11%

Priority 3: An organisation fit for purpose

Key Objectives:

Appropriate decisions about the responses required to referrals; Functioning ICT infrastructure that enables effective use of systems that support practice (including the Integrated Children's System); Logistical working arrangements and office accommodation support social work task; Effective commissioning, procurement and contracting.

Priority Leads (Accountable) – Alastair Pettigrew

3.1 Outcome – The organisational structure supports appropriate decision making about the responses required to referrals.

Ref	Actions	Timescale	Delivery Leads	Targets & Measures
3.1 (*Joint – Also in Health Plans for relevant Health structures)	3.1.1 Review the effectiveness of the current initial screening arrangements for social care cases (the Contact Centre and the Kent Contact and Assessment Service – KCAS) O 8. CT 4.	1 March 2011 – 31 May 2011 30 June 2011	Amanda Honey	<ul style="list-style-type: none"> Report with recommendations presented to management groups (Children's Social Services Management Team, Senior Management Team and Corporate Management Team) and decision made about appropriate actions in response. Implementation plan developed and agreed recommendations implemented (Links with 2.2.7, 3.1.3 and 3.1.5)
	3.1.2 Map existing social work establishment against demand and need and ensure there is a coherent and sufficient distribution of fieldwork resources to provide an effective service. Produce a report with outcome of analysis and recommendations for action with clear implementation plan. O 11. CT 4.	1 March 2011 – 31 May 2011	Marisa White	<ul style="list-style-type: none"> Report submitted to Managing Director outlining recommendations Agreed recommendations implemented

	<p>3.1.3 Decide on a model and structure for children's social care to enable effective support for children in need and looked after children (also addressing administrative capacity)</p> <p>O 20. CT 4.</p>	<p>1 March 2011 - 30 June 2011</p>	<p>Alastair Pettigrew</p>	<ul style="list-style-type: none"> • Report on recommendations submitted to Managing Director • Agreed recommendations implemented being mindful of the need for safe transfer to the new arrangements
	<p>3.1.4 Protocol document developed outlining roles and responsibilities of new teams as well as transfer arrangements.</p> <p>CT 4.</p>	<p>1 July 2011 – 31 October 2011</p>	<p>Alastair Pettigrew</p>	<ul style="list-style-type: none"> • Protocol agreed by Children's Social Services Management Team, approved by Managing Director, used as part of implementation of the new structure.
	<p>3.1.5 Implement new structure supported by appropriate protocols and procedures</p> <p>CT 4.</p>	<p>1 December 2011 – 1 May 2012</p>	<p>Alastair Pettigrew</p>	<ul style="list-style-type: none"> • New structure in place and work safely managed during restructuring • Procedures/protocols published for all staff • Performance reporting indicates that caseloads, staffing levels and supervisory capacity are at appropriate levels • Performance report confirms new arrangements are facilitating timely assessments and good practice

3.2 Outcome - Kent ICT systems effectively support practitioners and managers to carry out their role. Practitioners and managers are accountable for recording case work decisions and ensuring that this is used to influence decision making.

3.2	3.2.1 Develop an ICT strategy which includes a single integrated recording system supported by effective infrastructure and technology (including scanners, laptops and /notebooks) CT 10.	1 March 2011 - 30 June 2011	Peter Bole	<ul style="list-style-type: none"> ICT Strategy developed and presented to the Children, Families and Education, ICT board.
	3.2.2 External review of the current functioning of the technical aspects of the Integrated Children's System O 12. O 16.	Completed	Peter Bole via -Price Waterhouse Cooper	<ul style="list-style-type: none"> Consultant report to Children, Families and Education, ICT Board, outlining the roadmap to achieving a case management system which meets the agreed business requirements.
	3.2.3 Review and outline the business processes underpinning ICS, create procedures/practice guidelines that stipulate responsibilities across all levels of the organisation O 16. CT 6.	1 March 2011 – 31 August 2011	Donna Shkalla	<ul style="list-style-type: none"> Business requirement for the recording of children's case information is embedded in Kent's Information recording system
	3.2.4 Review the function and role of administrative staff in relation to the use of ICS and address capacity implications if applicable O 16. CT 6.	1 March – 31 August 2011	Donna Shkalla	<ul style="list-style-type: none"> Report to be produced with recommendations for implementation Recommendations implemented and monitored quarterly
	3.2.5 Train staff including managers and provide on-site support to make better use of ICT and the Integrated Children's Services O 16. CT 6.	1 April – 30 Sept 2011	Donna Shkalla	<ul style="list-style-type: none"> Review of the Integrated Children's System training (including content, method for delivery, technical support) completed and agreed Training courses developed and

				<p>implemented</p> <ul style="list-style-type: none"> • Training schedule released
	3.2.6 Activate management sign-off functions in ICS with the agreed business process	1 April – 1 July 2011	Donna Shkalla	<ul style="list-style-type: none"> • All exemplars are signed off by the relevant social work staff and manager
	<p>3.2.7 Performance reporting is utilised to confirm that the systems are being used to support effective recording and managerial oversight</p> <p>O 16. CT 6.</p>	1 July - 31 July 2011	Donna Shkalla	<ul style="list-style-type: none"> • Audit reports on system usage are produced quarterly on agreed areas (logins, user generated reports, signoff, field completion) • Data quality reports on errors or blanks in data recording are reported monthly. • Data quality errors/blanks do not exceed 5% of the total number of entries per field
3.3 Outcome: Logistical working arrangements and office accommodation support social work task				
	<p>3.3.1 In collaboration with operational managers, review the accommodation needs of social work staff across the county</p> <p>CT 10.</p>	1 March 2011 - 30 April 2011	Tom Molloy	<ul style="list-style-type: none"> • Report with recommended actions (including risk assessment) submitted to Corporate Management Team
	<p>3.3.2 Taking into account the needs of Children's Social Services staff identified through engagement with operational managers, review the current plans for accommodation in the context of the corporate strategy.</p> <p>CT 10.</p>	1 March – 31 May 2011	Tom Molloy	<ul style="list-style-type: none"> • Report to Corporate Management Team including options regarding potential actions. • Produce a plan to respond to CMT's decision. • Implement required changes.

	3.3.3 In collaboration with operational managers, review the current service access arrangements and provision of reception areas and its impact on Children's Social Services and service users CT 10.	1 March – 31 May 2011	Tom Molloy	<ul style="list-style-type: none"> • Report to Corporate Management Team outlining the options for reception access, outlining actions and timeframes for steps to be undertaken •
	3.3.4 In collaboration with operational managers, ensure there is a comprehensive understanding the current parking facilities available to staff across the county to enable them to effectively undertake their work CT 10.	1 April – 30 June 2011	Tom Molloy	<ul style="list-style-type: none"> • Report to be produced with recommendations to address any issues/concerns raised • Required changes implemented • A staff survey undertaken to ascertain views of progress being made
<p>3.4 Outcome - Commissioning, procurement and contracting arrangements in respect of placements of looked after children are streamlined, resulting in reduced burden for social workers. All placements for children and young people are of a high quality and offer value for money.</p>				
	3.4.1 Develop a commissioning, procurement and contracting framework to secure appropriate placements for looked after children and young people in order to secure better value for money and greater responsiveness to need CT 8.	1 March - 31 May 2011	Cathi Sacco	<ul style="list-style-type: none"> • Report proposing the new framework produced and presented to Children's Social Services Management Team and Managing Director • Commissioning framework implemented which results in reduction of spot purchasing
	3.4.2 Joint Commissioning Framework developed for commissioning early intervention and family support services CT 8.	31 May 2011 - 31 August 2011	Cathi Sacco	<ul style="list-style-type: none"> • Consult with partners • Report on draft framework to Kent Children's Trust for agreement and sign off

Priority 4: Strengthening partnership

Key Objectives:

Development of the Kent Children's Trust (KCT) and the Kent Safeguarding Children Board (KSCB) to meet their statutory requirements; Improve the effectiveness of the Safeguarding Children Board; Secure Multi-agency understanding about the range of services available and when they should be used to respond to children and their families; Clear multi-agency referral pathways that are responsive to children's needs; Regular and robust auditing of multi-agency practice including good use of performance information.

Priority Leads (Accountable) – Malcolm Newsam, Alastair Pettigrew

4.1 Outcome - Kent Children's Trust is effective in ensuring improved outcomes for children and young people as a result of the joint efforts of partners.

Ref	Actions	Timescale	Delivery Leads	Targets & Measures
CT 9.	4.1.1 Review the structure of the Children's Trust in the light of changes to legislation and the development of the Health and Well-being Board.	1 April - 1 June 2011	Chair of Children's Trust – Amanda Honey	<ul style="list-style-type: none"> Plan with clear outcome measures consulted on, agreed by Kent Children's Trust and local boards and published
O 23. CT 9.	4.1.2 Building on the priorities within the Children and Young People's Plan, agree the outcome measurements that will be used by the Children's Trust and the performance framework for measuring progress against these outcomes	1 March 2011 - 31 July 2011	Marisa White	<ul style="list-style-type: none"> Performance management and reporting requirements in place and operational Resources aligned to priorities Kent Children's Trust and partners committed to and resourcing the implementation of the Early Intervention and Prevention Strategy Strengthen the contribution of the voluntary sector to enable their full contribution to good outcomes for young people and care leavers.

Ref	<p>4.1.3 Building on the National Commissioning Support Programme review of the Children's Trust, recommend further changes to increase its effectiveness including strengthening of partner engagement in addressing priorities</p> <p>CT 9.</p>	<p>1 March 2011 - 31 July 2011</p>	<p>Marisa White</p>	<ul style="list-style-type: none"> • Implementation plan to address Children and Young People's Plan priorities, with resources committed in place • Strengthened interface between Kent Safeguarding Children Board and Kent Children's Trust with linked performance reporting
<p>4.2 Outcome - The Safeguarding Children Board is compliant with statutory requirements, supported by a robust performance framework which enables it to hold agencies to account in ensuring the children of Kent are safeguarded</p>				
	<p>4.2.1 Develop a plan which responds to the areas for development identified in the Ofsted Inspection, including:</p> <ul style="list-style-type: none"> • The appointment of a new independent chair • The appointment of 2 lay members • The appointment of a representative from the voluntary sector • Identify and reflect representation from schools <ul style="list-style-type: none"> • Develop and agree a multi-agency performance framework <ul style="list-style-type: none"> • The alignment of missing from care and missing from education policies with the missing children policy <p>CT 9. O 18.</p>	<p>Complete</p>	<p>Maggie Blyth and Penny Davies</p>	<ul style="list-style-type: none"> • Plan developed and submitted to KSCB members for sign off
		<p>1 March - 30 June 2011</p>	<p>Penny Davies</p>	<ul style="list-style-type: none"> • Report on progress to KSCB on appointment of new chair, lay members, schools and voluntary sector reps.
		<p>1 March 2011 - 31 April 2011</p>	<p>Penny Davies & partners</p>	<ul style="list-style-type: none"> • Performance framework agreed by Board Partners • Multi-agency performance information submitted on quarterly basis to KSCB
		<p>1 March 2011 - 15 April 2011</p>	<p>Penny Davies</p>	<ul style="list-style-type: none"> • Missing from care and missing from education policies are aligned with the KSCB missing children policy

	<p>4.2.2 Implement the audit and performance framework and audit plan</p> <p>CT 9.</p>	<p>From 1 April 2011 – 1 March 2012 (review)</p>	<p>Penny Davies & partners</p>	<ul style="list-style-type: none"> • Audit programme implemented and audits carried out • Audit findings reported to KSCB and used to inform multi-agency response to safeguarding
	<p>4.2.3. Agree constitution, including membership, function and structure, of the Safeguarding Children Board, to include consideration of the partnership culture and challenge required to develop effective behaviours by Board members.</p> <p>CT 9.</p>	<p>30 June 2011</p>	<p>Maggie Blyth and Partners</p>	<ul style="list-style-type: none"> • Report presented to KSCB and agreed • Agreed recommendations implemented
	<p>4.2.4 Define resources required to enable delivery of core functions, with particular focus on the performance framework and quality assurance framework</p> <p>CT 9.</p>	<p>30 June 2011</p>	<p>Maggie Blyth and Penny Davies</p>	<ul style="list-style-type: none"> • Report presented to KSCB and agreed • Agreed recommendations implemented
	<p>4.2.5 Implement required changes agreed by partners.</p> <p>CT 9.</p>	<p>30 June - 30 September 2011</p>	<p>Maggie Blyth and Penny Davies</p>	<ul style="list-style-type: none"> • New structure and constitution Implemented

4.3 Outcome - Practitioners are able to access information on range of interventions and services available with clear indications of when best to use (e.g age group; universal, targeted or specialist), evaluation findings and cost effectiveness. Secure multi-agency understanding about the range of services available and when they should be used to respond to children and their families

4.3 <i>(*Joint with Partners)</i>	4.3.1 In collaboration with partners, complete the development of the Early Intervention and Preventative Strategy which outlines the services available at universal, targeted and specialist levels IN 1.	1 March 2011 - 31 May 2011	Marisa White	<ul style="list-style-type: none"> Report on proposals and implementation plan submitted to Kent Children's Trust Recommendations agreed and implemented
	4.3.2 Address the accessibility of the multi-agency Directory of Services (which outline services at county and district levels) and make it available to all professionals and parents in Kent	1 March - 31 May 2011	Jennie Landsberg	<ul style="list-style-type: none"> Web based resource directory implemented which ensures existing resource directories are joined and replaced
	4.3.3 Develop a commissioning register and keep it up to date and available to Children Services practitioners	1 March - 30 Sept 2011	Helen Jones	<ul style="list-style-type: none"> Register established with links to Adult Services Register

4.4 Outcome -Staff across all agencies are clear about referral pathways and report that these are responsive to children's needs

4.4 <i>(*Joint with Partners)</i>	4.4.1 Kent Safeguarding Children Board and the Children's Trust agree thresholds for intervention at various levels, including those for social care intervention IN 2. O 2. CT 9.	Completed	Alastair Pettigrew	<ul style="list-style-type: none"> Eligibility and threshold protocol agreed and signed off by the Children's Trust and KSCB, including implementation plan
	4.4.2.Launch of the eligibility criteria for specialist children services and secure understanding of thresholds, eligibility, referral and assessment processes (Including linkage with CAF) through multi-agency, localised workshops IN 2. O 2. CT 9.	1 April – 30 September 2011 (review)	Penny Davies	<ul style="list-style-type: none"> Eligibility and threshold criteria implemented Multi-agency staff survey undertaken

	<p>4.4.3 Work with multi- agency partners to ensure the correct understanding about what constitutes appropriate referrals to Specialist Services (making use of the new eligibility and threshold criteria)</p> <p>IN 2. O2. CT 9.</p>	1 April – 30 September 2011	Alastair Pettigrew	<ul style="list-style-type: none"> • Multi-agency referral form and clear guidance about criteria for referral to Specialist Services produced, launched and action taken to ensure that it is embedded • Workshop with the KSCB resulting in plans being produced by represented agencies about the actions they will take to communicate the criteria for referrals to Specialist Services
	<p>4.4.4 Embed multi-agency implementation of the Common Assessment framework including the Lead Professional role.</p> <p>CT 9.</p>	1 March 2012 (review) – 1 March 2013	Karen Graham & partner reps	<ul style="list-style-type: none"> • The number of CAFs undertaken increase across a variety of partner agencies • (Linked to 2.2.8)
<p>4.5 Outcome - Kent has a strong multi-agency performance framework, agreed by partner agencies. Regular and robust auditing of multi-agency practice including good use of performance information</p>				
4.5 <i>(*Joint with Partners)</i>	<p>4.5.1 Develop, agree and implement a multi-agency audit programme, alongside strengthening the performance framework, ensuring a focus on testing the consistency of thresholds being implemented across the partnership and implementation of the eligibility criteria.</p> <p>IN 2. CT 6.</p>	30 April 2011 - 1 September 2011	Penny Davies in consultation with LSCB Board partners	<ul style="list-style-type: none"> • Report to KSCB and Improvement Board for agreement • Audit programme implemented • Findings reported to KSCB

Priority 5: Becoming the employer of choice

Key Objectives: Permanent staff are attracted to working and remaining in Kent, actions to find and supply locum social work staff are prompt when there are temporary gaps in permanent staffing levels, high calibre front-line staff are selected by managers with the appropriate standards and expertise, induction is responsive to the different cohorts of new recruits, professional development and opportunities are effective in addressing areas for development.

Priority Leads (Accountable) – Alastair Pettigrew, Amanda Beer

5.1 Outcome - Kent is an employer of choice, able to attract and retain high calibre social work practitioners and managers. Vacancy rates are reduced as a result.

Ref	Actions	Timescale	Delivery Leads	Targets & Measures
5.1	5.1.1 Review Total Reward Package including Pay CT 7.	Reports in 31 March 2011 & 31 July 2011	Rob Semens	<ul style="list-style-type: none"> Pay and benefits are competitive
	5.1.2 Create and maximise Public Relation opportunities for social work in Kent CT 7.	Monthly until 1 March 2012	Ella Hughes	<ul style="list-style-type: none"> Social work in Kent seen as attractive employment option Children’s Champions board supportive of social workers Use of “Social Networking” provides opportunities for transparent professional exchange
	5.1.3 Make Kent offer compelling CT 7.	1 Feb 2011 - 31 March 2011 30 April 2011 30 September	Rob Semens	<ul style="list-style-type: none"> Development of robust Recruitment and Retention Strategy Implementation of the Strategy Kent offer to applicants is clear and attractive, and increases number of

		2011 (review)		applicants for posts. To be measured via management information data and applicant survey.
	5.1.4 Review recruitment process to ensure positive experience for applicants. CT 7.	1 Feb 2011 - 31 March 2011 31 March 2011 - 01 November 2011	Rob Semens	<ul style="list-style-type: none"> Review of the recruitment process to be undertaken. Applicants either accept job offers or receive positive image of KCC as an employer. To be measured via management information data and applicant feedback data.
	5.1.5 Act on exit interview feedback	Review monthly	Rob Semens	Information from exit interviews helps improve recruitment and retention
	5.1.6 Review the workforce and take the necessary steps to address capacity and capability shortfalls. IN 9. O 11. CT 7.	Jan 2011 – Sept 2011 (review)	Rob Semens	<ul style="list-style-type: none"> Assess the recruitment and retention strategy to ensure KCC is maintaining adequate capacity to meet workload requirements. Success to be measured by a consistent reduction of qualified social work vacancy rate to 10% or below; to be monitored via performance report information.
5.2 Outcome- Managers are proactive in responding to anticipated vacancies and take timely action to recruit locum staff when necessary.				
5.2	5.2.1 Achieve cost effective service through Kent Top Temps	Completed	Alastair Pettigrew	<ul style="list-style-type: none"> Kent Top Temps to negotiate discounts for selected agencies
	5.2.2 Managers alert Kent Top Temps to service needs	Completed	Heads of Service	<ul style="list-style-type: none"> Kent Top Temps responding to managers needs
	5.2.3 Use single recruitment panel to interview temporary staff	28 Feb – 29 April 2011	Rob Semens	<ul style="list-style-type: none"> Consistent approach to locum recruitment

5.3 Outcome – Recruitment timescales are reduced and recruitment processes result in the recruitment and retention of high calibre staff

5.3	5.3.1 Review recruitment process CT 7.	Completed	Rob Semens	<ul style="list-style-type: none"> Review of ‘Rolling Advert’ process reduces time from application to job offer. Changes to KCC job website to provide faster access to social work adverts. Single central recruitment panel for <u>all</u> applications reduces time from application to start date
	5.3.2 Review selection process CT 7.	Completed	Rob Semens	<ul style="list-style-type: none"> New structure for selection process provides more opportunity to “sell” KCC to applicants New structure allows applicants to give feedback on process and improve it New ‘standard’ based assessment provides more consistency and quality in appointment decisions
	5.3.3 Review recruitment planning CT 7.	1 March - 30 April 2011	Rob Semens	<ul style="list-style-type: none"> Vacancies and staff turnover monitored monthly, and action plans amended to improve progress Monitoring data used to develop annual recruitment plan

5.4 Outcome – Induction programme aligns with expectations and approaches in practice.

5.4	5.4.1 Review current arrangements, and materials including staff booklets, and report with proposals	1 March – 29 April 2011	Michelle Woodward Rob Semens	<ul style="list-style-type: none"> Induction process fit for purpose including induction of overseas staff
	5.4.2 Arrange lunch and/or informal meeting with Managing Director and CSSMT for all new starters	1 March - 30 April	Rob Semens	<ul style="list-style-type: none"> Induction is seen as important for the whole organisation

		2011		
	5.4.3 Reinforce workplace induction to ensure staff have reasonable facilities	1 March - 30 April 2011	Heads of Service	<ul style="list-style-type: none"> • New staff feel valued and retention rate improved
	5.4.4 'Temperature' check every month in first six months	30 April 2011	Rob Semens	<ul style="list-style-type: none"> • New staff feel valued and retention rate improved
<p>5.5 Outcome - The learning and development programme is needs driven and is responsive to new and existing areas for improvement, identified risk and new developments in social work practice.</p>				
5.5	5.5.1 Complete a training needs analysis that is informed by information about the areas for attention outlined by inspection findings and other information IN 10. O 13.	28 Feb - 31 July 2011	Michelle Woodward Rob Semens	<ul style="list-style-type: none"> • Analysis produced and new development programme for implementation developed

Priority 6: Managing Performance

Key Objectives: Practice and management across the Council and partners is supported by an effective performance and accountability framework to ensure business intelligence and information is shared and exploited in order to achieve better outcomes for children, young people and their families in Kent; Managers understand accountabilities and ensure tools are used effectively to meet performance requirements; Strong performance management culture and an understanding of how performance management is used effectively.

Priority Leads (Accountable) – Malcolm Newsam,

6.1 Outcome – A comprehensive framework is developed in consultation with managers and is supported by clear governance arrangements

Ref	Actions	Timescale	Delivery Leads	Targets & Measures
6.1 <i>(*Joint with Partners)</i>	6.1.1 Develop a comprehensive children's services performance management framework which links with the wider Council's and partnerships' performance frameworks IN 5. O 5. O16. CT 6.	1 March 2011- 30 April 2011	Donna Shkalla	<ul style="list-style-type: none"> • Senior and operational managers consulted in development of performance framework • Performance framework developed to include governance arrangements • Performance framework developed and signed off by Managing Director and Senior Management Team
	6.1.2 Develop an operational model (report card) for the delivery of the performance framework, which includes the quality assurance, data quality and reporting principles framework IN 5. O 5. CT 6.	1 March 2011 - 30 April 2011	Donna Shkalla	<ul style="list-style-type: none"> • Operational model developed, with corporate input, and agreed by Managing Director, Senior Management Team and Children's Social Services Management Team

	6.1.3 Implement operational model for the delivery of the performance framework IN 5. O 5. CT 6.	1 March - 30 June 2011 30 June - 30 November 2011	Donna Shkalla	<ul style="list-style-type: none"> • Implementation programme developed • Operational model is implemented • Consultation (including workshops and survey) with managers/Elected Members to refine operational model • Model refined accordingly
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6.2 Outcome - Performance measures are in place and managers know how to access reports to support strategic and operational actions. Staff, managers and Elected Members are provided with performance information with analysis, which enables them to understand the impact of service delivery on outcomes for children and young people.

6.2 O 5. CT 6.	6.2.1 In collaboration with managers, develop an agreed set of targets and measures which reflect appropriate aspects of practice and management	28 Feb - 31 May 2011	Alastair Pettigrew	<ul style="list-style-type: none"> • Targets and measures are established and reflected in the report card
	6.2.2 An agreed suite of performance monitoring reports is developed	Completed	Donna Shkalla	<ul style="list-style-type: none"> • Performance monitoring reports developed and made available to managers at all levels
	6.2.3 Within the performance framework, incorporate the requirement to analyse the data to inform actions taken to improve and develop services	Completed	Donna Shkalla	<ul style="list-style-type: none"> • Performance framework incorporates requirement to analyse data
	6.2.4 Delivery of training to managers on the use of data and the importance of good data quality. Training to include focus on how to formulate questioning, analyse information and take action	1 June 2011 (rolling programme)	Donna Shkalla	<ul style="list-style-type: none"> • Training delivered and needs analysed to result in action being taken to prevent any ongoing difficulty • Ongoing support is provided to address any technical difficulties with obtaining performance reports/information

6.3 Outcome - A strengthened quality assurance framework is in place which ensures rigorous quality assurance processes across the service and across the range of agencies responsible for safeguarding and looking after children and young people. The framework ensures transparent reporting to operational managers, senior managers and the Safeguarding Children Board.

6.3	<p>6.3.1 In collaboration with managers develop a comprehensive quality assurance framework (as part of the overall performance framework) which includes peer and multi-agency auditing and audits of referrals. Supervision is incorporated in all aspects of quality assurance.</p> <p>IN 5. CT 6.</p>	1 March-30 June 2011	Donna Marriott (and external resource)	<ul style="list-style-type: none"> Quality assurance framework agreed by the Children's Social Services Management Team
	<p>6.3.2 Implement new quality assurance framework, supported by appropriate audit tools</p> <p>IN 5. CT 6.</p>	1 April - 30 June 2011	Donna Marriott	<ul style="list-style-type: none"> The quality assurance framework and guidance is published on Kent trust web and cascaded to staff and managers Relevant managers are alerted to the new quality assurance arrangements and to expectations about the actions they are required to take The system for auditing and reporting is established to result in regular reports about findings Action taken to progress any concerns
	<p>6.3.3 Audit schedule implemented to inform ongoing actions to improve the quality of front line practice</p> <p>IN 5. CT 6.</p>	Start June 2011 - as per audit schedule	Heads of Service Donna Marriott	<ul style="list-style-type: none"> Report on audits submitted to Children's Social Services Management Team, the Improvement Board and KSCB as per the agreed schedule.

<p>IN 5. CT 6.</p>	<p>6.3.4 Audit findings responded to and monitored on quarterly basis via Children's Social Services Management Team</p>	<p>After each audit</p> <p>Quarterly</p>	<p>Heads of Service</p> <p>Heads of Service Donna Marriott</p>	<ul style="list-style-type: none"> • Audit actions are responded to in line with the agreed timescales and action is taken by managers if appropriate progress/ improvement is not being achieved • Post audit review of actions is conducted to ensure actions are completed and to assess impact.
<p>IN 5. CT 6.</p>	<p>6.3.5 Audit findings incorporated into professional development training programme</p>	<p>After each audit</p>	<p>Michelle Woodward</p>	<ul style="list-style-type: none"> • Training is amended to reflect audit findings (Link to 5.5.1)
<p>O 9. CT 6.</p>	<p>6.3.6 Ensure that ethnicity data is entered in each child and young person's electronic and paper file</p>	<p>1 March - 30 April 2011</p>	<p>Heads of Service Donna Shkalla</p>	<ul style="list-style-type: none"> • Ethnicity data to be entered for all cases. • Ethnicity code to be made mandatory field on ICS.

Ofsted Recommendations

Areas for improvement for SAFEGUARDING

Immediately:

1. Review the current childcare caseload and ensure that all children in need of safeguarding and protection are identified and receive appropriate services.
2. Ensure that all partners are fully conversant with the threshold for accessing social care services and provide the appropriate levels of referral information
3. Improve the quality and timeliness of initial and core assessments
4. Establish clear arrangements for the referral and treatment of young people aged 16-18 requiring a CAMHS service

Within three months:

5. Establish systematic performance management processes at all levels to improve the quality of practice and management across the partnership.
6. Improve the child protection conference process to ensure that professionals are properly prepared and service user confidence is restored.
7. Ensure that each child protection plan sets out measurable recommendations
8. Review the effectiveness and value for money of the contact centre
9. Ensure that ethnicity data is entered in each child and young person's electronic and paper file
10. Ensure that health services subscribe to a suitably independent interpreter service

Within six months:

11. Review the workforce and take the necessary steps to address capacity and capability shortfalls.
12. Review the effectiveness and value for money provided by the current computer based recording systems.
13. Take steps to align training and development opportunities with service prioritised outcomes.

Areas for improvement for LOOKED AFTER CHILDREN

Immediately:

14. 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.
15. Improve the quality of case planning and ensure that all relevant professionals are able to participate and contribute to the process.

Within three months:

16. Establish a functional performance management system and ensure that the integrated children's system is fit for purpose
17. Ensure that all looked after children can access CAMHS up until 18 years of age
18. Ensure that missing from care and missing from school policies are aligned for looked after children
19. 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

Within six months:

20. Review the effectiveness of generic social care teams for looked after children and their impact upon the quality of service that is provided
21. Develop a multi-disciplinary looked after children strategy and clarify management and leadership roles and accountabilities
22. Develop a screening tool for substance misuse for use with looked after children and young people
23. Strengthen the arrangements for the contribution of the voluntary sector to enable their full contribution to good outcomes for young people and care leavers

Improvement Notice Targets

1. Working with partners to develop preventative and early intervention services across the partnership;
2. Preparing documentation, in agreement with Kent Local Safeguarding Children Board and Kent's Improvement Board, that sets out clear thresholds and criteria for access to children's social care which ensure that children at risk of harm receive intervention identified in the assessment of need in order to minimise risk and that such thresholds and criteria are implemented by all partners and agencies of the Council consistently across the County;
3. Reducing the number of unallocated cases over 28 days to 200 or less, the number of initial assessments out of timescale to 200, and the number of core assessments out of timescale to 100 by August 2011 and thereafter minimising the number of each;
4. Ensuring that the responsiveness and quality of assessments and child protection investigations improve, are clear and evidence based minimising risk and meet the standards set out in 'Working Together to Safeguard Children 2010', ensuring that in all cases referrers are informed of the outcome of all their referrals;
5. Ensuring that a written performance management and quality assurance framework is prepared and implemented by all staff with a view to driving up the quality of social care practice. The framework should include regular auditing arrangements of the quality of case files, the frequency of which should be agreed by the Improvement Board, and ensure that results of audits inform ongoing actions to improve the quality of frontline practice;
6. Ensuring that children in need receive a timely service, minimising risk, by at least maintaining the percentage of initial and core assessments carried out on time as set out in 'Working Together to Safeguard Children' at the levels prevailing when this Improvement Notice was issued;
7. By ensuring that partner agencies have a clear understanding of children's social care thresholds and by ensuring that clear definitions of 'contact' and 'referral' are in place, increase the number of initial assessments of children in need per 10,000 population aged under 18 to be in line with statistical neighbour averages such that the percentage of referrals to children's social care going on to initial assessment increases from the 2009-10 baseline of 46% to 65% over the period January to March 2012 and an average of at least 65% over the period 2012-13;
8. Implementing a programme of review and taking action as a result to reduce the percentage of child protection plans lasting two years or more to 6% over the period 2012-13 whilst ensuring that the percentage of those children who become subject to a child protection plan who do so for a second or subsequent time reduces to the statistical neighbour average;
9. Ensuring that there is sufficient capacity and capability within children's social care and actions are taken to improve the retention and stability of the workforce, in particular by reducing the vacancy rate of qualified social workers to 10%;

10. Developing and implementing a comprehensive programme of induction, training, mentoring and continuous professional development for all social care staff, ensuring effective supervision of child protection social work practice is in place and ensuring that all management oversight and decision-making on individual cases is set out in writing on the case files, that these activities are reviewed and the results inform the ongoing development of practice;
11. Developing and implementing a multi agency looked after children strategy which clarifies the respective responsibilities of all agencies and which supports improved outcomes for children in care;
12. Working with the children in care council and others as the Council thinks is appropriate to ensure that all children in care are routinely made aware on a regular basis about how they can contribute to the development of the service or make complaints;
13. Improving the quality of care plans, by improving the assessment of looked after children and ensuring that all plans contain health and education information and that Independent Reviewing Officers are used to assure quality and challenge casework decisions and unacceptable delays in meeting statutory requirements;
14. Improving the percentage of children adopted to 11% by March 2012 and to 13% over the period 2012-13;
15. Working with schools and others as appropriate to develop and implement a strategy to improve the educational achievements of children in care, such that the following quantitative targets are met:
 - Narrow the gap in attainment (as measured by the percentage of children achieving level 4 in English at the end of Key Stage 2) between children in care and their peers such that it is no more than 34 percentage points by the end of the academic year 2011/12
 - Narrow the gap in attainment (as measured by the percentage of children achieving level 4 in maths at the end of Key Stage 2) between children in care and their peers such that it is no more than 33 percentage points by the end of the academic year 2011/12
 - Narrow the gap in attainment (as measured by the percentage of young people achieving 5+A*-C at GCSE including English and Maths) between children in care and their peers such that it is no more than 36 percentage points by the end of the academic year 2011/12
 - Reduce the percentage of children in care who miss 25 days or more days of schooling during the academic year to no more than 11%
16. Working with local health commissioners and providers to ensure that the percentage of children in care having health and dental checks increases to at least the England average of 85% by March 2012 and to at least maintain that over the period 2012-13.

Leads and job titles

Alan Day	Head of ICT Strategy, Children, Families and Education (now in Business Strategy & Support)
Alastair Pettigrew	Interim Director of Specialist Children's Services
Chris Berry	Head of Attendance & Behaviour Service
Caroline Friday	Commissioning Manager Vulnerable Children
Cathi Sacco	Interim Director of Strategic Commissioning, Families and Social Care
Donna Marriott	Interim Head of Safeguarding
Donna Shkalla	Head of Management Information
Ella Hughes	Interim Internal Communications Manager
Eva Learner	Consultant
Karen Graham	Head of Children's Services East Kent
Lorraine Goodsell	Director of Commissioning, Child Health
Liz Totman	Head of Corporate Parenting
Maggie Blyth	Chair, Kent Safeguarding Children Board (KSCB)
Malcolm Newsam	Interim Corporate Director, Families and Social Care
Marisa White	Head of Strategic Planning, Partnerships & Democratic Services (now in Business Strategy)
Michelle Woodward	Head of Children's Services Mid Kent (Job Share) & Professional Development Manager
Peter Bole	Head of ICT Commissioning
Penny Davies	Kent Safeguarding Children Board Manager
Jill Rawlins	Interim Director of Communication, Consultation and Community Engagement
Rob Semens	Directorate Personnel Manager, Children, Families & Education (now in Business Strategy & Support)
Tony Doran	Head teacher Virtual School Kent (LAC)
Tom Molloy	Programme Manager - Office Transformation

The Heads of Service for Children's Services are Karen Graham – East Kent, Kathy Lambourn – West Kent, Michelle Woodward – Mid Kent (job share), Cathy Yates – Mid Kent (job share)

* Actions in the plan referred to as *joint* – are also actions in the Health Improvement Plans in response to the CQC inspection.