

# Kent Safeguarding and Looked After Children Improvement Plan

## *Putting Children First*

Kent Safeguarding and Looked After Children Improvement Plan

Phase 2: October 2011 – April 2012



## Kent Safeguarding and Looked After Children Improvement Plan

The Improvement Plan endorsed by the Kent Improvement Board in April 2011 sets out the overall context, governance arrangements, and planned actions by partners in Kent to improve services to children and support looked after children following the OFSTED inspection in autumn 2010. In that Plan, we identified 10 Core Tasks which would be the focus of the first six months. Our progress against those core tasks are set out below:

Core Task	Progress
1. Bring in a peripatetic team to reduce the number of unallocated cases, reduce numbers of incomplete assessments and restore timely assessment timescales.	<ul style="list-style-type: none"> <li>• Peripatetic Team recruited, trained and operational from early May.</li> <li>• Team have successfully reduced the assessment backlog, and continue to undertake short-term work</li> <li>• Robust exit strategy devised. Handover date agreed, 11 November 2011.</li> </ul>
2. Strengthening the quality of work undertaken in the assessment teams.	<ul style="list-style-type: none"> <li>• Duty and initial Assessment Team improvement Programme, combining written guidance and protocols (“inspection ready” packs, Duty Manual, Practice Standards, Transfer Protocol, Duty Tracker) issued to all DIATs.</li> <li>• “Hands on” advice and coaching successfully implemented and forecast for completion by mid-November</li> </ul>
3. Restoring throughput, pruning caseloads and reducing the number of children in need.	<ul style="list-style-type: none"> <li>• Backlog of Initial and Core Assessments cleared (through deployment of peripatetic team, diversion of the Parenting Capacity Advisory Service and focus on staff across Specialist Children’s Services with ‘step downs’ of Children in Need cases to preventative services).</li> <li>• Timeliness of assessments restored.</li> <li>• Caseloads reduced caseloads from 11625 on 23/01/11 to 10438 on 28/08/11, with numbers of Children in Need are starting to reduce (there were 8369 CIN cases on 23/01/2011; figure reduced to 6884 on 28/08/11)</li> </ul>

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<p>4. Making structural changes for handling initial assessments, fixing Kent contact and assessment service and introducing specialist looked after children teams.</p>	<ul style="list-style-type: none"> <li>• County Duty Team established to take on Inter-Agency Referrals and Domestic Abuse Notifications; establishment shortly to expand to take all child phone contacts and consultations.</li> <li>• Model developed to identify how many staff are required in each district.</li> <li>• Initial plans developed to establish specialist LAC teams.</li> <li>• Wider restructuring needed to make specialist Children's Services fit for purpose; to be addressed in Phase 2 Plan.</li> </ul>
<p>5. Strengthening first line management accountability and the quality of supervision through training, development and audit.</p>	<ul style="list-style-type: none"> <li>• Supervision policy re-issued to all staff.</li> <li>• All managers gone through a comprehensive supervision training programme.</li> <li>• Analysis undertaken on management capacity and spans of control.</li> <li>• Full-scale supervision audit has been completed; action plan is being developed to structure remedial actions.</li> </ul>
<p>6. Implementing an effective management information and quality assurance framework.</p>	<ul style="list-style-type: none"> <li>• Performance Management and Quality Assurance Frameworks approved and implemented.</li> <li>• Daily, weekly, monthly and quarterly reporting has created a culture with far greater awareness of deadlines and targets, and stronger management grip.</li> <li>• From August, every social work manager from the Corporate Director to first line manager are undertaking one case audit every month.</li> </ul>
<p>7. Filling resource gaps by more effective recruitment and putting in place a compelling workforce strategy.</p>	<ul style="list-style-type: none"> <li>• Compelling workforce strategy approved in May and implemented.</li> <li>• Recruitment campaign launched, which over the next six months will target experienced social workers, team leaders and principal social workers.</li> </ul>

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	<ul style="list-style-type: none"> <li>• Vacancy rates are slowly reducing; it is expected that the 10% target will be achieved within timescale.</li> </ul>
<p>8. Building an effective commissioning framework and range of preventive services</p>	<ul style="list-style-type: none"> <li>• Families &amp; Social Care Directorate Management Team approved an overall framework that will ensure local commissioners are operating within a clear strategic framework on the basis of specific outcomes, as well as a thorough understanding of local need.</li> <li>• Early Intervention &amp; Prevention Strategy is being redrafted to be more Kent-specific and will be completed in autumn 2011.</li> <li>• Specification of services undertaken to ensure they are consistent with the strategic priorities, particularly focusing on intensive family support and targeted adolescent services.</li> <li>• Placement Support Service (one point of contact for social workers requiring external placements for looked after children) is working well and is being expanded to include residential placements.</li> </ul>
<p>9. Strengthening the Kent Safeguarding Children Board (KSCB) and the Kent Children's Trust (KCT) arrangements, Common Assessment Framework and threshold arrangements.</p>	<ul style="list-style-type: none"> <li>• KSCB and Joint Strategic Commissioning Board (formally KCT) have been reviewed and recommendations are being implemented to make them more effective.</li> <li>• The number of CAFs carried out is rising</li> <li>• CAF Action Plan is being implemented.</li> <li>• Threshold criteria have been widely promulgated</li> <li>• Extensive training and workshops for all agencies involved in referral thresholds and CAF developed and implemented</li> <li>• Plan developed to convene additional district-based sessions via the local Children's Trust.</li> </ul>
<p>10. Providing front line teams with suitable accommodation, ICT arrangements, infrastructure and support.</p>	<ul style="list-style-type: none"> <li>• Every site housing social work staff has been reviewed and outstanding issues identified.</li> <li>• Prioritised works agreed with local managers and Heads of</li> </ul>

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	<p>Service.</p> <ul style="list-style-type: none"><li>• Planned programme of costed actions is being implemented with immediate works already making a difference.</li><li>• Improvements made to the network and the memory capacity of individual laptops and PCs</li><li>• Urgent action to tender a replacement Integrated Children's System is being undertaken.</li></ul>
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Six months on, the Improvement Plan needs to be re-focussed on quality and sustainability. The themes for the next six months are therefore:

1. Maintain the timeliness of assessments and ensure all cases are allocated appropriately
2. Raise the quality of assessment casework, and recruit and retain staff with the appropriate competencies
3. Put in place a range of preventative services to avoid unnecessary family breakdown
4. Improve care planning and outcomes for looked after children
5. Reduce the numbers of looked after children
6. Reduce the number of children subject to Child Protection Plans
7. Deliver services through a locality-based integrated structure which is fit for purpose and strongly managed

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<b>Priority 1 – Maintain the timeliness of assessments and ensure all cases are allocated appropriately</b>				
<b>Priority Lead</b> – Alastair Pettigrew				
<b>Outcome</b> – The excellent progress made up to September 2011 is maintained or improved.				
Ref	Actions	Timescale	Delivery Lead	Targets & Measures
1.1	<ul style="list-style-type: none"> <li>• Weekly performance monitoring of timescale activity</li> <li>• Weekly review of unallocated cases</li> <li>• District specific remedial actions taken on a weekly basis where required</li> <li>• ICS practice reviewed to ensure best practice is reflected on the system</li> <li>• Ongoing work with Central Duty Team and partners to ensure appropriate application of thresholds</li> <li>• Series of workshops on the use of the audit tool in practice rolled out across districts, to ensure consistency of ratings and accurate measures of improvement across the organisation.</li> <li>• Targets set to monitor number of assessments in progress but out of timescale</li> </ul>	1 September 2011 weekly/monthly monitoring	Karen Graham, Michelle Woodward, Cathy Yates, Kathy Lambourn	<ul style="list-style-type: none"> <li>• At least 69% of Initial Assessments, 80.4% of Core Assessments to be completed within timescales</li> <li>• No more than 100 cases to remain unallocated over 28 days (current performance = 39 cases unallocated over 28 days, 07/09/11)</li> <li>• KSCB threshold audit and internal case review audit identifies appropriate threshold application in response to professional referrals in 90% of cases reviewed</li> <li>• Month on month increase in assessments judged adequate/good in monthly audits.</li> </ul>

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<b>Priority 2 – Focus on raising the quality of assessment and casework</b>				
<b>Priority Lead</b> – Donna Marriott				
<b>2.1 Outcome</b> – Deliver a robust programme to improve the quality of assessment and casework, and provide qualitative and quantitative information about the impact of services on outcomes for children and young people.				
Ref	Actions	Timescale	Delivery Lead	Targets & Measures
2.1.1	<ul style="list-style-type: none"> <li>• Review current CP procedures (Duty Manual) to ensure they reflect Best Practice</li> <li>• Develop and implement mandatory cross-county Quality of Practice audits to be undertaken by all managers</li> <li>• Review of all cases judged inadequate critical and followed up to ensure action is taken</li> <li>• Follow up processes developed and monitored for all cases judged inadequate</li> <li>• Children are seen and their views recorded in all assessments, including designated sections in KCC Case Conference reports and promoted as best practice within Health's G2 SGC training</li> <li>• Review current assessment templates</li> <li>• Develop and disseminate practice standards for practitioners (CIN/CP/LAC)</li> <li>• Implement quality standard leaflet for parents</li> <li>• CIN Procedures to be strengthened and re-launched</li> </ul>	<p>30 December 2011</p> <p>30 October 2011, monthly</p> <p>Monthly</p> <p>Ongoing</p> <p>Ongoing</p> <p>30 December 2011</p> <p>30 December 2011</p> <p>30 November 2011</p> <p>30 December 2011</p>	<p>Donna Marriott, Karen Graham, Michelle Woodward, Cathy Yates, Kathy Lambourn</p>	<ul style="list-style-type: none"> <li>• Average of 100 audits per month achieved across the County, with a minimum of 10 for each district</li> <li>• Audit results and follow up reported monthly to the Specialist Children's Services DivMT and quarterly to the Families &amp; Social Care DMT</li> <li>• Ongoing case auditing identifies that children are seen and their views recorded (as appropriate) in 90% of assessments</li> <li>• User feedback on the delivery of practice standards to be collated and used to inform delivery protocols.</li> <li>• Auditing shows the views of children are being recorded in case documentation</li> <li>• Verification of improved quality to be evidenced over time (specific targets to be developed as the programme embeds).</li> <li>• Performance in terms of numbers of children with a CIN</li> </ul>

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	<ul style="list-style-type: none"> <li>Baseline to be established to assess where performance is currently in comparison high performing authorities using KPIs as a starting point</li> </ul>			<ul style="list-style-type: none"> <li>plan improves/reduction in the numbers of CIN</li> <li>Measurements are established and attained</li> </ul>
	<ul style="list-style-type: none"> <li>Public Law Outline processes strengthened to ensure timely intervention – practice protocols to be strengthened (to include holistic overview of the child) and re-launched</li> </ul>	1 January 2012 - 30 March 2012	Donna Marriott	<ul style="list-style-type: none"> <li>Number of children with a CPP are reduced</li> <li>Length of care proceedings from first hearing to final order are reduced</li> <li>Feedback from courts reflects increased robustness of processes</li> <li>Reduction in the use of independent assessors</li> </ul>
2.1.2	<ul style="list-style-type: none"> <li>Undertake Mock inspections of Duty and Initial Assessment Teams which were judged as not being inspection ready previously</li> <li>Districts to address any points of concern/areas requiring improvement; remedial action to be recorded and evidenced</li> </ul>	1 September 2011 - 31 November 2011	Donna Marriott	<ul style="list-style-type: none"> <li>Mock inspections find children are appropriately safeguarded</li> <li>All DIAT's are inspection ready</li> <li>number of quality of practice audits ranked adequate - good increases</li> <li>Findings of unannounced OfSTED inspection are improved upon in comparison to 2010 unannounced</li> </ul>
2.1.3	District-level improvement plans to be revised and sharpened to reflect local performance issues on an ongoing basis	30 September 2011; review at monthly Performance Board from 31 October 2011	Alastair Pettigrew, Karen Graham, Michelle Woodward, Cathy Yates, Kathy Lambourn	<ul style="list-style-type: none"> <li>Plans in place in all districts with evidence of remedial action following results of the DIAT improvement programme, Deep Dive scrutiny, the mock DIAT inspections. Plans are reviewed on a quarterly basis</li> </ul>

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				<p>to ensure that progress is monitored and sustained.</p> <ul style="list-style-type: none"> <li>• District plans to be monitored by SCS Performance Board on a monthly basis in-line with Performance Management Framework stipulations.</li> <li>• Monthly performance reports evidence improvement.</li> <li>• Quality of practice audits ranked adequate to good increased.</li> </ul>
2.1.4	Regular thematic audits undertaken on specific practice areas as defined by QA Framework timetable	Rolling Programme to be drawn up by 30 November 2011	Donna Marriott	<ul style="list-style-type: none"> <li>• Regular, robust reports delivered to SCSDivMT, FSC DMT which include recommendations for remedial actions.</li> <li>• Remedial action is taken within clearly defined timescales.</li> <li>• Quality and Effectiveness Sub-Group of the KSCB to increase understanding and identification of solutions.</li> </ul>
2.1.5	<ul style="list-style-type: none"> <li>• KSCB to establish multi-agency audit programme as part of the KSCB Quality and Effectiveness Framework;</li> <li>• KSCB to establish audits of multi-agency referrals to the Central Duty Team for new cases that do not meet SCS thresholds</li> <li>• Two multi-agency audits to be undertaken on referrals and child protection planning by the end of the</li> </ul>	<p>1 December 2011 – 30 March 2012</p> <p>1 December 2011 – 29 February 2012</p> <p>31 March 2012</p>	Penny Davies, Maggie Blyth	<ul style="list-style-type: none"> <li>• Plan developed</li> <li>• Audits timetabled</li> <li>• Findings reported to KSCB and Improvement Board on a quarterly basis</li> <li>• Analysis review of performance data by the KSCB and subgroup will inform single agency audits and increase the timeliness and effectiveness of work undertaken in response to</li> </ul>

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	<p>financial year; therefore, proposal developed and submitted to the Board that one audit should be conducted per area per quarter</p> <ul style="list-style-type: none"> <li>• Effective audit tools and processes to be developed</li> <li>• Performance monitoring and analysis reports to be developed and refined with support of C4EO consultants</li> </ul>	<p>31 March 2012</p> <p>31 March 2012</p>		<p>identified areas of poor partnership working. Partner agencies will take responsibility for actioning areas of identified poor performance, reporting progress to the KSCB.</p>
2.1.6	<p>Monitor and take action to secure appropriate caseload levels for all social workers by:</p> <ul style="list-style-type: none"> <li>• Reviewing individual social work caseloads and complete work/transfer/close cases as required</li> <li>• Identify capacity needs and address as required</li> <li>• Independently review a sample of social work managers' caseloads</li> </ul>	Ongoing monthly review	Alastair Pettigrew	<ul style="list-style-type: none"> <li>• Performance reporting indicates caseload levels are a maximum of 20 cases per caseholder in each district area</li> </ul>
2.1.7	<p>Obtain feedback from staff, partner agencies and service users and use their views to inform the improvement actions including the re-design of the service</p>	1 November 2011 – 30 March 2012 (review)	Suzanna Darling	<ul style="list-style-type: none"> <li>• Feedback gathered from service users (including children and young people) and partners; feedback used when improvement actions are being undertaken and when services are being developed or commissioned</li> </ul>
<b>2.2 Outcome</b> – Excellent supervision ensures the quality of casework improves.				
2.2.1	<p>Action plan to be developed and implemented in response to the full audit of supervision to include:</p> <ul style="list-style-type: none"> <li>• Development of supervision practice guidance to compliment current</li> </ul>	31 October 2011 - 30 March 2012 (review)	Michelle Woodward	<ul style="list-style-type: none"> <li>• Full audit undertaken (complete)</li> <li>• Targets to be incorporated into district plans.</li> </ul>

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	<p>supervision policy</p> <ul style="list-style-type: none"> <li>• Further develop supervision arrangements for staff in preventative teams</li> <li>• Commissioning of supervision training for District Managers</li> <li>• Further develop observation of supervision practice as part of support to managers</li> <li>• Development of practice standards for supervision and implementation</li> <li>• Supervision Tool to be rolled out and embedded across the service to allow for the active performance management of cases and of staff delivery.</li> <li>• All actions to include clear recommendations and timescales for implementation.</li> <li>• Supervision policy to be reviewed and amended to enable increased compliance</li> <li>• Put in place appropriate spans of control to ensure compliance with supervision policy</li> <li>• Develop District based reporting of supervision to enhance accountability</li> <li>• Continue to extend SWA training to preventative staff such as Children's Centre workers and FLOs/PSAs</li> <li>• Social workers are offered support and guidance to raise standards through mentoring, reflective learning sessions and supervision</li> </ul>	<p>31 January 2012</p> <p>31 March 2012 (review)</p> <p>1 December 2012</p> <p>31 March 2012 (review)</p> <p>Ongoing</p>		<ul style="list-style-type: none"> <li>• Evidence of improvement in the quality of supervision identified in QoP monthly Audit</li> <li>• Deep dive audit to be repeated in 12 months to confirm progress</li> <li>• Feedback from supervising managers in respect of the quality of their own supervision</li> <li>• Supervision arrangements in place for preventative staff</li> <li>• Performance reporting confirms that supervision is taking place in accordance with the supervision policy. Ongoing case audit identifies that supervision is effective in promoting positive outcomes for children.</li> <li>• Staff feel supported and facilitated in improvements to their working practices</li> </ul>
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<b>2.3 Outcome</b> – Specialist Children’s Services and its partners are well prepared for the next full Ofsted inspection.				
2.3.1	Strengths and vulnerabilities reported to Performance Board for ongoing monitoring	30 January 2012; rolling programme	Donna Marriott	Reports evidence that strengths are being built on an vulnerabilities are being identified and addressed

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<b>Priority 3</b> – Continue development of a range of preventative services to support priorities set out in the Early Intervention and Prevention Strategy				
<b>Priority Lead</b> – Mark Lobban				
<b>3.1 Outcome</b> – Deliver the actions set out in the Early Intervention & Prevention Strategy in order to ensure children’s needs are met at the earliest opportunity and families get the support they need quickly.				
Ref	Actions	Timescale	Delivery Lead	Targets & Measures
3.1.1	<ul style="list-style-type: none"> <li>• Commission high level family support/family intervention in each district in accordance with the strategic framework and needs assessments.</li> <li>• Robust delivery plan produced with milestones evidenced (service specifications, provider forums, tendering exercises completed etc)</li> <li>• Impact measures to be developed</li> </ul>	<p>1 October 2011 – 30 March 2012</p> <p>30 November 2011</p> <p>30 November 2011</p>	Helen Jones	<ul style="list-style-type: none"> <li>• Service specifications in place, services procured with clear contract and performance management arrangements in place within agreed timeframe</li> <li>• Impact measures achieved</li> </ul>
3.1.2	<ul style="list-style-type: none"> <li>• Commission adolescent intervention services in accordance with the strategic framework, the Adolescent Strategy and needs assessments.</li> <li>• Robust delivery plan produced with milestones evidenced (service specifications, provider forums, tendering exercises completed etc)</li> <li>• Impact measures to be developed</li> </ul>	<p>1 October 2011 – 30 March 2012</p> <p>30 November 2011</p> <p>30 November 2011</p>	Helen Jones	<ul style="list-style-type: none"> <li>• Service specifications in place, services procured with clear contract and performance management arrangements</li> <li>• Impact measures achieved</li> </ul>
3.1.3	<ul style="list-style-type: none"> <li>• Centralise commissioning of all Tier two and three services</li> <li>• Develop commissioning strategy</li> <li>• Robust delivery plan produced and</li> </ul>	<p>1 September 2011 – 31 February 2012</p> <p>28 October 2011</p>	Helen Jones	<ul style="list-style-type: none"> <li>• Service specifications in place, services procured with clear contract and performance management</li> </ul>

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	<p>milestones evidenced</p> <ul style="list-style-type: none"> <li>Impact measures to be developed</li> </ul>			<p>arrangements</p> <ul style="list-style-type: none"> <li>Impact measures achieved</li> </ul>
3.1.4	<p>Undertaken an options appraisal to assess the optimum way of delivering an outcomes-based contract for Children's Centre provision across the county.</p>	1 August 2011 – 30 March 2012	Helen Jones	<ul style="list-style-type: none"> <li>Outcomes framework in place; options appraisal completed and future commissioning proposals agreed</li> </ul>
3.1.5	<ul style="list-style-type: none"> <li>Undertaken an options appraisal for developing a dedicated contact service</li> <li>Robust delivery plan produced with milestones evidenced</li> </ul>	30 March 2012	Helen Jones	<ul style="list-style-type: none"> <li>Outcomes framework in place; options appraisal completed and future commissioning proposals agreed</li> <li>Milestones are met</li> </ul>
3.1.6	<p>Ensure tendering processes and service specifications address the need to commission services across the county that meet need or children and families experiencing domestic violence, incorporating a range of provision that serves to prevent, protect, and support</p>	1 October 2011 – 30 March 2012	Helen Jones	<ul style="list-style-type: none"> <li>A range of DV services available across all districts</li> <li>TAC, CIN and CP plans include access to appropriate provision</li> <li>reduction in re registrations and repeat registrations and referrals linked to DV</li> </ul>
<p><b>3.2 Outcome</b> – The Common Assessment Framework (CAF) process operates effectively: the number of CAFs increases, there is greater and more effective participation by partner agencies, and the impact of CAFs is improved in terms of ensuring that children with additional needs are responded to before their needs become acute and require specialist children's services. Clear baselines and outcomes to be put in place around delivery for every Team Around the Child.</p>				
<b>Ref</b>	<b>Actions</b>	<b>Timescale</b>	<b>Delivery Lead</b>	<b>Targets &amp; Measures</b>
3.2.1	<ul style="list-style-type: none"> <li>CAF arrangements are strengthened to ensure that children with additional needs are responded to before their needs become acute and require specialist children services.</li> <li>Review CAF assessment form and</li> </ul>	<p>31 October 2011 - 30 March 2013 (review)</p> <p>31 January 2012</p>	Nikki Patient	<ul style="list-style-type: none"> <li>Strengthening CAF support arrangements and increase in understanding and confidence of partner agencies in applying the Threshold Criteria and using CAF when appropriate leading to:</li> </ul>

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	<p>action plan documentation to make more user-friendly and focus on family-centred approach</p> <ul style="list-style-type: none"> <li>• Review of the access and allocation processes (screening and Single Point of Access) to ensure efficient and timely identification of Team Around the Child/Family</li> <li>• Revised CAF guidance and protocols developed and disseminated</li> <li>• Identify top 100 families that require a TAC and put in place TAC arrangements</li> </ul>	<p>1 January 2012</p> <p>30 March 2012</p> <p>30 March 2012</p>		<ul style="list-style-type: none"> <li>○ Increase in total number of CAFs by 25% (a ratio of 58.9 per 10,000) over the 2011/12 financial year in comparison to 2010/11 CAF rates to be compared with/benchmarked against high performing authorities</li> <li>○ increase in the number of TACs from CSS step-downs as well as CAFs</li> <li>○ Reduction of contacts into social care</li> <li>○ Reduction in the conversion of contacts to referral</li> <li>○ Reduction in the proportion of referrals going on to Initial Assessment</li> <li>○ Reduction in the number of re-referrals</li> <li>• User-friendly Family CAF documentation agreed</li> <li>• Access and allocation arrangements are streamlined and guidance and protocols developed and disseminated</li> <li>• User feedback shows that CAFs are perceived as effective and as becoming successfully embedded in 'business as usual' working</li> </ul>
3.2.2	<p><b>Partner engagement</b></p> <ul style="list-style-type: none"> <li>• Establish targets for achievement by delivery partners in respect to CAFs</li> </ul>	30 March 2012		<ul style="list-style-type: none"> <li>• Targets established for delivery partners</li> </ul>

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	<ul style="list-style-type: none"> <li>Ensure strategic links with partner agencies are maintained to strengthen their engagement in the CAF process. In particular links with policy and strategy in ELS, health and the Police.</li> <li>Maintain strong relationships with schools via district teams to ensure continued engagement.</li> <li>Transfer procedures between CSS and CAF to be embedded to ensure that children and families are effectively supported in the community when they are closed to CSS</li> </ul>	<p>30 December 2011</p> <p>Ongoing</p> <p>31 January 2011</p>		<ul style="list-style-type: none"> <li>Strategic plans and priorities in partner agencies reflect actions and targets relating to CAF/TAC</li> <li>Performance data shows continued involvement of schools in CAF initiation and TAC engagement</li> <li>Evidence that CSS step down process is being used</li> </ul>
	<p><b>Quality Assurance</b></p> <ul style="list-style-type: none"> <li>CAF/TAC Quality Audit to be further developed in line with the CSS audit framework (above). Monthly district audit and detailed annual audits to be undertaken to inform the ongoing CAF/TAC Action Plan</li> <li>CSS audits to ensure rigorous assessment, analysis and planning to inform robust step-down plan to support children/young people within the community</li> <li>Ensure monthly audits are used to identify areas of weakness in practice</li> </ul>	<p>30 December 2011</p> <p>30 December 2011</p> <p>1 January 2012 onwards</p>		<ul style="list-style-type: none"> <li>Revised CAF/TAC Quality Audit in place and being used monthly</li> <li>CSS monthly audits to include analysis of the quality of step-down plans</li> <li>CSS step downs are transferred to TAC with consent and appropriate information</li> <li>Evidence that areas of weakness and good practice are identified and action taken</li> </ul>
3.2.3	<p><b>Performance Management</b></p> <ul style="list-style-type: none"> <li>Review performance management</li> </ul>	30 December 2012		<ul style="list-style-type: none"> <li>Performance management framework in place for</li> </ul>

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	<p>framework for CAFs, CSS stepdowns, and TACs, including measures of the effectiveness of TACs to ensure re-referral rates are reduced</p> <ul style="list-style-type: none"> <li>• Establish baselines for numbers of CSS contacts and the numbers of referrals and identify targets to reduce rates where necessary</li> <li>• Develop and introduce method for collection of outcome information against TAC action plans to ensure that the TAC process is making a difference to children and families</li> <li>• Monthly monitoring of CAF, CSS step downs and TACs is reported to the Improvement Board, and key Partner boards.</li> <li>• User-friendly CAF recording system to be integrated with ICS replacement and rolled out across KCC and partner agencies.</li> </ul>	<p>31 January 2012</p> <p>30 December 2011</p> <p>1 January 2012</p> <p>Dependent on new ICS system</p>		<p>CAF, CSS step downs and TACs and district reporting proforma agreed</p> <ul style="list-style-type: none"> <li>• Baselines and targets related to CSS contacts and referrals established</li> <li>• Goal-based outcome measure incorporated into TAC documentation</li> <li>• Method developed to record this data to establish baseline and ongoing monitoring</li> <li>• Regular monthly reports produced</li> <li>• Relevant Boards review reports and appropriate action taken, including Quarterly multi-agency performance management report to be sent to SCS POSC</li> </ul>
3.2.4	<p><b>Workforce Development</b></p> <ul style="list-style-type: none"> <li>• Review of CAF training in light of practitioner feedback to include e-learning, core training and practice-based workshops</li> <li>• Practice workshops/training to be further developed in light of audit findings</li> <li>• Review current training delivery and QA arrangements to ensure providers supply high quality training; action taken as required.</li> </ul>	<p>30 October 2011</p> <p>1 January 2012 onwards</p> <p>31 January 2012</p>		<ul style="list-style-type: none"> <li>• Revised training programme launched</li> <li>• Mechanisms developed to ensure feedback from audits informs training and evidence that training has been revised to reflect these findings</li> <li>• Evidence shows action has been taken to address areas of weakness and improve outcomes</li> </ul>

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				<ul style="list-style-type: none"> <li>Review of training delivery and QA shows it achieves best value and improvements in the quality of practice.</li> </ul>
3.2.5	<ul style="list-style-type: none"> <li>Service Specifications for commissioned services to embed use of CAF and engagement in TAC and include mechanisms for monitoring</li> </ul>	1 October 2011 – 30 March 2012	Helen Jones	<ul style="list-style-type: none"> <li>Service specifications embed requirements for engagement in CAF/TACs and monitoring arrangements</li> </ul>
3.2.6	<ul style="list-style-type: none"> <li>The Early Intervention and Preventative Strategy developed outlining the role of universal, targeted and specialist services and is clear about when a CAF should be completed.</li> <li>Above effectively disseminated across partners communicated using a variety of methods</li> <li>Action plan implemented</li> </ul>	31 October 2011 - 30 March 2012 (review)	Marisa White	<ul style="list-style-type: none"> <li>Staff and partner agencies have clear guidance about when CAFs should be completed</li> <li>Key partners receive and adhere to Strategy framework</li> </ul>

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<b>Priority 4 – Improve care planning and outcomes for Looked After Children</b>				
<b>Priority Lead – Alastair Pettigrew</b>				
<b>4.1 Outcome</b> - 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. Members and senior officers undertake their corporate parenting responsibilities effectively.				
4.1.1	<ul style="list-style-type: none"> <li>• Develop dedicated social work teams for looked after children to ensure that appropriate priority is given to LAC</li> <li>• Undertake an audit of quality of care plans for LAC, in-line with the launch of the new ICS system</li> <li>• Review of ICS care plan template to ensure it is fit for purpose and young person friendly</li> <li>• Robust delivery plan produced with milestones/assessment points evidenced</li> </ul>	<p>30 November 2011</p> <p>30 December 2011</p> <p>31 January 2012</p> <p>29 February 2012</p>	<p>Alastair Pettigrew, Karen Graham, Michelle Woodward, Cathy Yates, Kathy Lambourn</p>	<p>Dedicated LAC services are in place and functioning effectively</p>
4.1.2	<ul style="list-style-type: none"> <li>• Independent Reviewing Officers quality assure the effectiveness of care planning and where appropriate challenge casework decisions or delays</li> <li>• Each review ensures that required actions are in place and exceptions reported to the appropriate manager and escalated where necessary for resolution</li> <li>• Escalation policy developed, implemented and monitored.</li> </ul>	<p>1 November 2011 – 30 March 2012 (review)</p>	<p>Donna Marriott</p>	<ul style="list-style-type: none"> <li>• Quarterly report by Independent Reviewing Officers service produced and submitted to the Children’s Social Services Management Team and Corporate Parenting Board for action</li> <li>• Progress on permanence planning, health assessments, core assessments, care plans and</li> </ul>

## Kent Safeguarding and Looked After Children Improvement Plan

	<ul style="list-style-type: none"> <li>• Monitor effectiveness of escalation policy and implement recommendations</li> <li>• HoS take responsibility to ensure that all LAC have care plans and assessments</li> </ul>			<p>Personal Education Plans is measured through performance reporting and demonstrates improvement in key areas</p>
4.1.3	<ul style="list-style-type: none"> <li>• Ensure that all relevant professionals are able to participate and contribute to planning for Looked after Children in line with their responsibilities</li> <li>• Performance monitoring report on agency attendance to be developed</li> <li>• Clear multi-agency escalation pathway to be developed and managed by the KSCB to ensure cohesive and consistent engagement across agencies</li> </ul>	1 April 2011 – 30 March 2012 (review)	Donna Marriott	<ul style="list-style-type: none"> <li>• Relevant professionals are invited to attend LAC reviews</li> <li>• Agency contribution to be evaluated by an Independent Reviewing Officer service and results/feedback reported to the management of the agency.</li> <li>• Findings to be reflected in quarterly Independent Reviewing Officer report</li> <li>• Concerns regarding lack of agency contribution to be reported and escalated to managers in relevant agencies, where appropriate</li> </ul>
4.1.4	<ul style="list-style-type: none"> <li>• Ensure statutory visits are monitored (via monthly/quarterly performance reports), and that there is good recording of information on LAC cases.</li> <li>• Standards to be issued to staff defining the purpose and quality levels expected during statutory visits</li> </ul>	30 December 2011 – 30 March 2012 (review)	Karen Graham, Michelle Woodward, Cathy Yates, Kathy Lambourn	<ul style="list-style-type: none"> <li>• Performance in relation to stat visits increases to 90% of cases and is maintained</li> <li>• Numbers of LAC cases with adequate/good outcomes increases</li> <li>• Performance of 16+ provider monitored, evaluated and reports produced</li> </ul>

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	<ul style="list-style-type: none"> <li>• Audits of LAC to be conducted on a monthly basis via Quality of Practice Audits</li> <li>• IRO reports produced on a quarterly basis</li> </ul>			
4.1.5	<ul style="list-style-type: none"> <li>• Contract with provider of 16+ service to be reviewed and performance against agreed standards evaluated</li> </ul>	1 January 2011 - 30 March 2012	Helen Jones	<ul style="list-style-type: none"> <li>• Improved performance standards</li> <li>• Reduction in 16+ LAC</li> </ul>
4.1.6	<p>Improve health care assessments for LAC, focussing on:</p> <ul style="list-style-type: none"> <li>• Timeliness of Health and Dental Checks, and referrals ensuring progress chasing systems are embedded</li> <li>• Capacity of providers to deliver against required standards &amp; volumes</li> <li>• Timely data inputting in relation to assessments completed</li> <li>• LAC participation groups/foster carers to be consulted in relation to quality of health assessments across age groups</li> <li>• Focused performance monitoring system to be developed and reviewed on a monthly basis</li> <li>• KCC to amend ICS to separate Health and Dental checks</li> </ul>	1 September 2011 – 30 March 2012 (review)	Lorraine Goodsell	<ul style="list-style-type: none"> <li>• Performance reporting demonstrates the % of children in care having health checks has increased to 85% by March 2012; target to be at least maintained up to March 2013</li> <li>• Performance reporting demonstrates the % of children in care having dental checks has increased to 85% by March 2012; target to be at least maintained up to March 2013</li> </ul>
4.1.7	<ul style="list-style-type: none"> <li>• Ensure all LAC are given early access to CAMHS provision, when needed and deemed clinically</li> </ul>	30 September 2011 – 30 March 2012	Lorraine Goodsell	<ul style="list-style-type: none"> <li>• Access information shows % of LAC gaining early access to CAMHS services</li> </ul>

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	<p>appropriate</p> <ul style="list-style-type: none"> <li>Revised CAMHS/LAC Strategy to be developed and implemented to include therapeutic support for foster carers</li> <li>Progress to be reported in the quarterly LAC performance monitoring report to the KCP Board</li> </ul>			<p>increasing over allotted timeframe.</p> <ul style="list-style-type: none"> <li>Foster carers report ease of access</li> </ul>
4.1.8	<ul style="list-style-type: none"> <li>Improve the attendance and educational attainment of looked after children through the development of the Virtual School for Looked After Children.</li> <li>Ensure robust monitoring of Personal Education Plans for every LAC.</li> </ul>	1 March 2012 (review)	Tony Doran	<ul style="list-style-type: none"> <li>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</li> <li>Performance reports indicate that the number of Looked After Children who miss 25 days or more days of schooling during the academic year is no more than 11%</li> </ul>
4.1.9	Reduce exclusions of Looked after Children	1 March 2012 (review)	Chris Berry, Tony Doran	<ul style="list-style-type: none"> <li>Performance reporting indicates the number and length of exclusions reduces for children in care in line with their Kent peers and/or statistical neighbours</li> <li>Performance reports indicate the percentage of children in care who miss 25 days or</li> </ul>

## Kent Safeguarding and Looked After Children Improvement Plan

				more days of schooling during the academic year is no more than 11%
4.1.10	Ensure that appropriate LAC are given Boarding School Placements	1 October 2011 – 30 March 2012 (review)	Tony Doran	<ul style="list-style-type: none"> <li>Virtual School Kent processes and mechanisms to support Boarding School Placements to be devised and implemented</li> </ul>
4.1.11	Strengthen voice of LAC in policy procedures and decision-making, as set out in the multi-agency LAC Strategy	31 January 2012	Liz Totman	<ul style="list-style-type: none"> <li>Drawing on the findings and framework of the LAC Strategy, LAC policy is revised to incorporate the views of LAC</li> <li>Reports provide evidence of where the views of children have influenced changes in practice/service development</li> </ul>
4.1.12	<p>Plan and deliver a mock inspection of the LAC service to identify weakness and take appropriate action.</p> <ul style="list-style-type: none"> <li>Areas of weakness identified and timely remedial actions agreed and implemented</li> <li>Changes to working practices and the impacts of these changes to be documented.</li> </ul>	1 November 2011 – 31 January 2012	Donna Marriott	<ul style="list-style-type: none"> <li>Mock inspection delivered and recovery plans in place accordingly.</li> <li>Service performance evaluated to ascertain areas in need of improvement</li> </ul>
4.1.13	<p>Targeted staff training (social work, education and health) to be developed to increase understanding of their roles and responsibilities to contribute to achieving good outcomes for Looked after Children.</p> <ul style="list-style-type: none"> <li>Review workforce development strategy</li> <li>Focus training and support on</li> </ul>	1 November 2011 - 31 March 2012 (review)	Michelle Woodward	<ul style="list-style-type: none"> <li>Current looked after children training courses reviewed to ensure the role of corporate parenting is reflected.</li> <li>Looked After young people are involved in social work training</li> <li>Improvement in evaluation of</li> </ul>

## Kent Safeguarding and Looked After Children Improvement Plan

	<p>improved analysis in assessment</p> <ul style="list-style-type: none"> <li>• Introduce regular practitioner workshops by district</li> </ul> <p>On line training package developed for use across agencies.</p> <ul style="list-style-type: none"> <li>• Access to KCC training suite to be made available to partners across agencies to promote joint training on LAC issues</li> <li>• Training programmes for social workers will be developed to include input from looked after young people and foster carers</li> </ul>			<p>social work training</p> <ul style="list-style-type: none"> <li>• Performance data shows the workforce development strategy is effective and fit for purpose</li> <li>• ‘Temperature checks’ of focus groups show staff feel training packages are improving the quality of assessments and strengthening practice standards.</li> </ul>
4.1.14	<ul style="list-style-type: none"> <li>• Across KCC, raise staff’s awareness about their responsibilities towards looked after children.</li> <li>• Action Plan with robust delivery timescales/milestones developed and implemented</li> </ul>	30 November 2011	Suzanna Darling	<ul style="list-style-type: none"> <li>• Surveys to gauge levels of current knowledge of LAC and corporate parenting to be undertaken</li> <li>• Corporate parenting and LAC information to be made available and accessible across the organisation, focusing on any ‘gaps’ identified through engagement activities.</li> </ul>
4.1.14	Review of the effectiveness of the new Corporate Parenting Group, Corporate Parenting Panel and Children in Care Council, specifically feedback from Members , children and young people	1 January 2011 – 29 February 2012	Liz Totman	<ul style="list-style-type: none"> <li>• Reviews completed and findings disseminated</li> <li>• Improvements made to address any weaknesses identified</li> </ul>
4.1.15	Elected Members and senior officers provided with information to enable them to understand their corporate parenting roles, responsibilities and accountabilities	1 April 2011 – 30 December 2011	Marisa White	<ul style="list-style-type: none"> <li>• Looked after children Elected Member’s pack devised and distributed</li> <li>• Looked after children senior</li> </ul>

## Kent Safeguarding and Looked After Children Improvement Plan

				<p>officer briefing prepared and distributed.</p> <ul style="list-style-type: none"><li>• Annual evaluation survey to ensure actions have been undertaken and information is adequate</li><li>• Annual training workshops on Corporate Parenting responsibilities</li></ul>
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## Kent Safeguarding and Looked After Children Improvement Plan

Priority 5 – Reduce the numbers of Looked After Children				
Priority Lead – Alastair Pettigrew				
5.1 Outcome – Numbers of looked after children are reduced through a range of actions aimed at achieving better outcomes for children & young people, earlier decisions and earlier intervention. Put in place an Access to Resources Team				
Ref	Actions	Timescale	Delivery Lead	Targets & Measures
5.1.1	<ul style="list-style-type: none"> <li>• Put in place a Central Placement Team (finding placements, gate keeping and monitoring of placements).</li> <li>• Access to Resource Panels to be set up in all three areas</li> <li>• Panels to produce practice guidance/protocols in relation to the scope, function and delegated authority re: the panel process</li> </ul>	<p>30 October 2011</p> <p>31 January 2012</p> <p>31 March 2012</p>	Helen Jones	<ul style="list-style-type: none"> <li>• Proposal agreed</li> <li>• Operational panel/s established</li> <li>• Access to Central Placement Team assembled and implementation</li> <li>• Relevant protocols/procedures in place</li> <li>• Children placed closer to home area</li> <li>• Reduction in placement costs</li> </ul>
5.1.2	<p>Increase the number of adoptions and Special Guardianship Orders:</p> <ul style="list-style-type: none"> <li>• District managers and adoption leads jointly monitor the progress of all children requiring adoption</li> <li>• Independent Reviewing Officers ensure that permanence plans incorporating 'best interest decisions' are in place for all LAC by the time of the second LAC review</li> <li>• Remove financial disincentives to SGOs</li> <li>• Strengthen Family Group Conferencing service to ensure targeted use of FGOs in respect to children on the edge of concern, including those subject to PLO processes</li> </ul>	<p>30 September 2011 – 30 March 2012</p> <p>31 January 2012</p>	<p>Karen Graham, Michelle Woodward, Cathy Yates, Kathy Lambourn</p> <p>Cathy Yates</p>	<ul style="list-style-type: none"> <li>• Performance reporting monitors the percentage of children adopted</li> <li>• Percentage of children adopted increases to 11% by March 2012 and to 13% over the period 2012-2013</li> <li>• Percentage of assessed adoptors increases</li> <li>• Assessments are processed in a timely manner that meets with demand</li> <li>• Positive feedback from users regarding FGOs</li> </ul>

## Kent Safeguarding and Looked After Children Improvement Plan

5.1.3	<ul style="list-style-type: none"> <li>• Increase the number of foster carers and adoptive parents</li> <li>• Survey current foster carers and adoptive parents to gauge how to promote the benefits of taking on these roles</li> <li>• Review the fostering and adoption service's marketing and recruitment strategies to ensure it is effective and fit for purpose</li> <li>• Report on identified areas of weakness and development, with recommendations and timescales for action</li> <li>• Add other issues highlighted by Independent Review</li> </ul>	30 September 2011 – 31 March 2012	Liz Totman	<ul style="list-style-type: none"> <li>• Effectual promotion of the role of foster carer and adoptive parent</li> <li>• Robust marketing and recruitment strategies which function effectively</li> <li>• Numbers of foster carers and adoptive parents increase</li> </ul>
5.1.4	<ul style="list-style-type: none"> <li>• Continue to promote the use of the LAC Tracker to ensure it is utilised consistently across all teams and Districts</li> <li>• Placement panels to be set up to monitor progress of any LAC who is not long term linked or placed for permanency</li> <li>• Panels prioritise s20 arrangements by age (oldest first)</li> <li>• LAC, CP and CIN projections to be tracked via monthly performance monitoring reports to reduce the risk of drift and increase throughput and performance to be actively reviewed by the performance board</li> </ul>	30 November 2011 – 31 January 2012	Karen Graham, Michelle Woodward, Cathy Yates, Kathy Lambourn	<ul style="list-style-type: none"> <li>• Identifying and monitoring of end dates to be completed</li> <li>• Increase in long terms linkings</li> <li>• Increase in incidence of reunification with birth families</li> <li>• Increase in other forms of permanence e.g.SGO</li> <li>• Performance in relation to HA's and PEPs routinely addressed</li> </ul>
5.1.5	<ul style="list-style-type: none"> <li>• Reduce number of children placed</li> </ul>	31 October 2011 –	Donna Marriott,	<ul style="list-style-type: none"> <li>• Increase in application for</li> </ul>

## Kent Safeguarding and Looked After Children Improvement Plan

	<p>with parents</p> <ul style="list-style-type: none"> <li>• Review all current placements with parents</li> <li>• Develop targets for rates of reduction</li> <li>• Track targets via quarterly performance monitoring reports</li> <li>• Develop revised policy guidance to discourage application for FCO for placement with parents.</li> </ul>	<p>31 January 2012</p>	<p>Karen Graham, Michelle Woodward, Cathy Yates, Kathy Lambourn</p>	<p>revocation</p> <ul style="list-style-type: none"> <li>• Reduction in LAC placed with parents</li> </ul>
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## Kent Safeguarding and Looked After Children Improvement Plan

<b>Priority 6 – Reduce the number of children subject to Child Protection Plans</b>				
<b>Priority Lead</b> – Alastair Pettigrew				
<b>6.1 Outcome</b> – Child Protection Plans are only in place when there is a clear need for them. 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.				
Ref	Actions	Timescale	Delivery Lead	Targets & Measures
6.1.1	<ul style="list-style-type: none"> <li>• Support implementation of strengthened child protection and CIN planning processes through multi-agency training. (2.3.4 in April plan)</li> <li>• Strengthen and re-launch CIN procedures</li> <li>• Review CIN Plan template, in-line with implementation of new ICS system</li> <li>• Support implementation of step down to Team Around the Child/Family through awareness raising in district team meetings</li> </ul>	<p>1 August 2011 – 30 March 2012 (review)</p> <p>31 January 2012</p> <p>31 January 2012</p>	Penny Davies	<ul style="list-style-type: none"> <li>• Multi-agency training programme developed</li> <li>• Programme implemented</li> <li>• Increased confidence of agencies resulting in CIN plans replacing CP plans where appropriate</li> <li>• Better quality step downs and fewer families being re-referred</li> </ul>
6.1.2	<ul style="list-style-type: none"> <li>• Reduce the number of children subject to a child protection plan for 18 months or more.</li> <li>• Policy to be developed requiring a review of every case beyond the third conference (at the 9 month stage) to ensure that robust decisions are made to prevent as many cases as possible from going into conferences beyond 15months.</li> <li>• LBP to be issued by the second review</li> <li>• Improve the management of cases of children subject to dual CP and LAC</li> </ul>	1 September 2011 – 31 December 2011	Karen Graham, Michelle Woodward, Cathy Yates, Kathy Lambourn	<ul style="list-style-type: none"> <li>• Review and undertake change promotion work on current cases where children have been subject to a child protection plan for over 18 months</li> </ul>

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	plans			
6.1.3	Reduce the number of children who become subject to a child protection plan for a second or subsequent time	1 June 2011 – 31 March 2012 (review)  31 May 2011 – 31 March 2012 (review)	Donna Marriott, Lorraine Goodsell  Donna Marriott	The number of children subject to a CPP for a second or subsequent time reduces to below 13.6%  <ul style="list-style-type: none"> <li>• Plan agreed &amp; recommendations implemented</li> <li>• Performance reporting monitors the number of children who are made subject to a plan for a second or subsequent time.</li> <li>• The number of children subject to a child protection plan for a second or subsequent time reduced to below 13.6%</li> </ul>
6.1.4	Ensure there is a consistent approach to the application of thresholds: <ul style="list-style-type: none"> <li>• Robust thresholds to be agreed with CPP conference chairs</li> <li>• Thresholds are consistently applied in CPP conferences</li> </ul> Policy to be developed and signed off by multi-agency partners regarding thresholds for ending plans where children are subject to CPP	1 October 2011 – ongoing	Alastair Pettigrew, Donna Marriott	<ul style="list-style-type: none"> <li>• Consistent standards are applied to all CPPs</li> <li>• Agency expectations around thresholds are coherent and constant</li> <li>• The number of children being taken off a CPP increases</li> <li>• Reduction of contacts into social care</li> <li>• Reduction in the conversion of contacts to referral</li> <li>• Reduction in the number of</li> </ul>

## Kent Safeguarding and Looked After Children Improvement Plan

				<p>referrals going on to Initial Assessment</p> <ul style="list-style-type: none"> <li>• Increase in the conversion rates of referrals to IAs</li> </ul>
		31 May 2012 – 31 March 2012 (review)	Donna Marriott	<ul style="list-style-type: none"> <li>• Plan agreed &amp; recommendations implemented</li> <li>• Performance reporting monitors the number of children who are made subject to a plan for a second or subsequent time.</li> <li>• The number of children subject to a child protection plan for a second or subsequent time reduced to below 13.6%</li> </ul>
<p><b>6.2 Outcome</b> - 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>				
6.2.1	Implement the multi-agency audit and performance framework and audit plan	From 1 April 2011 – 1 March 2012 (review)	Penny Davies & partners	<ul style="list-style-type: none"> <li>• Audit programme implemented and audits carried out in each district</li> <li>• Audit findings reported to KSCB and used to inform multi-agency response to safeguarding</li> </ul>

## Kent Safeguarding and Looked After Children Improvement Plan

<b>Priority 7</b> – Deliver services through a locality-based integrated structure which is fit for purpose and strongly managed				
<b>Priority Lead</b> – Jean Imray				
<b>7.1 Outcome</b> – Develop an overall structure for Specialist Children’s Services which is fit for purpose and ensures resources are deployed to reflect need and deliver value for money.				
Ref	Actions	Timescale	Delivery Lead	Targets & Measures
7.1.1	Develop and secure agreement to implement proposals for restructuring Specialist Children’s Services which will incorporate all the elements set out below (2.2 – 2.6). Proposals need to set out functions, roles, responsibilities, and business processes (e.g. transfer protocols), and use the establishment model to determine distribution of staff.	1 November 2011 – 31 January 2012	Jean Imray	<ul style="list-style-type: none"> <li>• Proposals developed, consulted on and approved</li> <li>• Implementation of arrangements</li> </ul>
<b>7.2 Outcome</b> – Contacts are dealt with efficiently and effectively, and referrals made to the appropriate service with sufficient information for the right action to be taken.				
7.2.1	Phase 1 <ul style="list-style-type: none"> <li>• Central Duty Team configured to take all children’s phone contacts, and responsibility for consultations.</li> <li>• Referrals to be assessed by competent staff and thresholds appropriately applied</li> </ul>	30 November 2011	Karen Graham	<ul style="list-style-type: none"> <li>• Division of child contacts and consultations to the CDT completed</li> <li>• Numbers of referrals reduced from 22,701 to 16,600</li> <li>• Greater integration between partner agencies leading to reductions in inappropriate admissions into care</li> </ul>
7.2.2	Phase 2 <ul style="list-style-type: none"> <li>• Central Referral Unit is established, incorporating the County Duty Team in collaboration with relevant partners, managers and staff</li> <li>• CRU deals with all contacts to CSC,</li> </ul>	1 December 2011 – 30 March 2012	Karen Graham	<ul style="list-style-type: none"> <li>• Reduce rate of referrals to 533.1 per 10,000 child population</li> <li>• Increase the percentage of referrals that go on to initial assessment from the 2009-</li> </ul>

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	<p>regardless of source</p> <ul style="list-style-type: none"> <li>Joint strategies to be developed with Police and Housing to reduce inappropriate admissions into care</li> </ul> <p>Phase3</p> <ul style="list-style-type: none"> <li>Establish a Multi Agency Screening Hub modelled on best practice nationally (Munro Review)</li> </ul>			<p>2010 baseline of 46% to 65% (between Jan – March 2012) and an average of at least 65% (over the period 2012-13)</p> <ul style="list-style-type: none"> <li>Quality measure to be established.</li> </ul>
<b>7.3 Outcome</b> – Establish specialist Looked After Children teams which ensure that Looked After Children get a good quality service which enables them to achieve their full potential.				
7.3.1	Building on work already done, develop an implementation plan for the establishment of dedicated LAC teams, which is synchronised with other planned structural changes within this theme.	1 October 2011 - 30 December 2011	Jean Imray	<ul style="list-style-type: none"> <li>Proposals developed, consulted on and approved</li> </ul>
		1 January 2012 – 31 March 2012	Jean Imray	<ul style="list-style-type: none"> <li>Implementation</li> </ul>
<b>7.4 Outcome</b> – Maintain focus on District delivery, and integrate early intervention and children’s centres with District Management				
7.4.1	Develop proposals and an implementation plan for the role of District teams, including integration of early intervention and Children’s Centres within District Management. This needs to be synchronised with the other planned structural changes.	30 December 2011	Jean Imray	<ul style="list-style-type: none"> <li>Proposals developed, consulted on and approved</li> </ul>
		1 January 2012 – ongoing	Jean Imray	<ul style="list-style-type: none"> <li>Implementation</li> </ul>
<b>7.5 Outcome</b> – Centralise commissioning, procurement and resource allocation				

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7.5.1	<ul style="list-style-type: none"> <li>• Undertake a review of current arrangements affecting integrated processes at Tier 2</li> <li>• Develop and implement strengthened multi-agency arrangements to ensure timely and effective access to commission resources at Tier 2/3</li> <li>• Develop an implementation plan for the centralisation of commissioning, procurement and resource allocation, which is synchronised with other planned structural changes.</li> </ul>	<p>30 December 2011</p> <p>31 March 2012</p> <p>1 January 2012 – 31 March 2012 (review)</p>	Helen Jones	<ul style="list-style-type: none"> <li>• Access to Tier 2 services is consistent across the county</li> <li>• Positive feedback from agencies regarding access to appropriate and timely Tier 2 services</li> <li>• Proposals developed, consulted on and approved</li> <li>• Full Implementation</li> </ul>
<b>7.6 Outcome</b> – Kent recruits and retains a balance of experienced and newly qualified staff, and has a qualified social work vacancy rate of 10% or less.				
7.6.1	<p>Monitor the impact of the recruitment and retention strategy, compelling offer and marketing campaigns to ensure there is adequate capacity to meet workload.</p>	<p>30 September 2011 – 30 March 2012 (review)</p>	Karen Ray	<ul style="list-style-type: none"> <li>• Performance reports show a consistent reduction of qualified social work vacancy rate to 10% or below</li> <li>• ‘Temperature checks’ conducted to gauge the impact of the compelling offer with staff</li> <li>• Bi-monthly reports tracking impact to be submitted to improvement governance bodies</li> </ul>
<b>7.7 Outcome</b> – Leaders and managers are clear about expectations of them, and gaps in knowledge and management practice are identified and addressed				
7.7.1	<ul style="list-style-type: none"> <li>• Develop a programme across the organisation to promote competencies expected of leaders and managers.</li> <li>• New job descriptions and person</li> </ul>	<p>1 Sep 2011 – 30 March 2012</p>	Karen Ray	<ul style="list-style-type: none"> <li>• Programme developed (in-line with Kent Manager Programme SORPs)</li> <li>• Programme timetable implemented, including</li> </ul>

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	specifications for leaders and managers to be issued with the new structure			<p>evaluation and review</p> <ul style="list-style-type: none"> <li>• Job descriptions will be fit for purpose and reflect required competencies and behaviours</li> </ul>
7.7.2	Validate findings from leadership and management survey with mandatory questionnaire.	1 June 2011 - 30 March 2012	Karen Ray	<ul style="list-style-type: none"> <li>• Engage staff in assessment of leadership and management</li> <li>• Feedback obtained to inform amendments to leadership and management programme</li> </ul>
7.7.3	All senior managers (KR13 and above) to complete 360 assessment based on competency in role	31 May 2011 – 30 March 2012	Karen Ray	<ul style="list-style-type: none"> <li>• Engagement of senior managers in their continuous professional development (CPD)</li> <li>• Findings of assessments used to structure management development plans</li> </ul>
7.7.4	Implement individual leadership and management development plans.	1 July 2011 – 1 March 2012	Alastair Pettigrew	<ul style="list-style-type: none"> <li>• Individual learning and development plans are updated in response to the recommendations of the assessment centre.</li> </ul>
<p><b>7.8 Outcome</b> – Kent’s 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.</p>				
7.8.1	<ul style="list-style-type: none"> <li>• A new and accessible Integrated Children’s System is procured and implemented</li> <li>• Procedures/practice guidelines that stipulate responsibilities across all levels of the organisation developed and disseminated</li> </ul>	<p>30 September 2011 – 31 March 2012 (review)</p> <p>Embedding dependent on timescales for roll out of new ICS system</p>	ICS Board	<ul style="list-style-type: none"> <li>• Fit for purpose ICS system is embedded</li> <li>• Practitioner and managers roles and responsibilities are clarified</li> <li>• The number and quality of recorded casework decisions</li> </ul>

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	<ul style="list-style-type: none"> <li>• Review of the function and role of administrative staff in relation to the use of ICS undertaken and capacity implications addressed</li> <li>• Comprehensiveness and quality of recorded casework to be assessed through monthly audits</li> <li>• Areas of weakness identified to be escalated to managers for action</li> </ul>			<p>increases, evidenced in audit findings, and monthly updates to the Performance Board.</p>
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