

Minutes of the Children's Service Improvement Panel
Meeting Held: 20 September 2011 14:00 Medway

Present:

Mrs Whittle (Chair)
Mrs Allen
Mr Christie
Mr Cubitt
Miss Hohler
Mr Lake
Mr Smith
Mr Vye
Mrs Waters

Officers:

Malcolm Newsam
Jean Imray
Donna Shkalla
Jennifer Maiden-Brooks
Fiona Maycock (Clerk)
Beverley Clarke
Lorraine Goodsell
Andrew Coombe

Apologies:

Mr Ferrin
Mrs Dean (Mr Vye substituted)
Mr Wells

1. Previous Minutes

1.1 The minutes were agreed as an accurate record of the last meeting.

2. Progress Report

2.1 Malcolm Newsam indicated that focus is now shifting towards improved throughput, increased managerial grip and other services available to children and families.

2.2 Confirmation was given that the adoption report will be presented at the County Council meeting on 20th October 2011.

2.3 Malcolm Newsam confirmed that Members can be proud of the current numbers of children being fostered within Kent, however the number of children being fostered is linked to the number of Looked After Children (LAC). The Phase 2 Improvement Plan focuses on reducing the number of LAC and increasing the number of foster carers.

2.4 Mrs Whittle stated the purpose of Martin Narey's review is to highlight the obstacles to adoption which have an evidence base and to eliminate unsubstantiated anecdotal theories.

2.5 Mr Lake asked who decides when a child should be adopted. Jean Imray stated that ultimately the decision resides with the court; there are variances in the time it takes, and some children are harder to place than others. In some instances it can take up to 5 years for a child to be adopted.

KCC needs to ensure managerial grip retains accountability and that approaches are consistent.

2.6 Mrs Whittle reported about her recent visit to Lincolnshire with Malcolm Newsam; they were an inadequate authority in 2006 and have since been rated outstanding by Ofsted in 2010. This is a four year journey which can be accomplished by Kent.

3. DIAT Inspections Presentation

3.1 Beverley Clarke gave a presentation on her Inspections of each of the District Duty and Initial Assessment Teams.

3.2 There were 8 cases across the whole county which were flagged as being of serious concern. In some of these cases, the concern was attributed to a lack of recording onto ICS. The child was seen as a matter of urgency if the concern was justified.

3.3 Of the positive things to have come from the mock inspections was the fact that all cases have now been allocated and staff have a stronger focus on the throughput of cases.

3.4 Beverley Clarke reported the common factors of poor outcomes as being weak management, poor supervisory grip, ineffective administration and slow throughput.

3.5 There was some concern that in certain districts thinking around assessment timescales was beginning to slip.

3.6 Beverley Clarke and Malcolm Newsam assured Members that work had been commissioned urgently to rectify the conditions at the Shepway office; an additional visit has been arranged to check on the progress of this work. This indicates strongly that performance is no longer due to resource and accommodation issues.

3.6 Beverley Clarke emphasised the idea that embedding good quality social work practice does not happen overnight; intensive additional support has been given to those districts that required it and follow-up mock inspections will be carried out at a later date.

4. Audit of CDT Referrals Report

4.1 Lorraine Goodsell outlined the findings of the audit on referrals into the Central Duty Team (CDT), highlighting that the Police had the highest overall referral figures and Health had the lowest. Performance will be picked up in the Quality and Effectiveness subgroup.

4.2 Lorraine Goodsell confirmed that the referrals are not only related to cases held by CAMHS but also by the work of the preventative services. The staff within the CDT are working with preventative services managers to step down as many cases as is appropriate.

4.3 Health colleagues have now started to ensure that LAC have priority in being seen, especially within CAMHS, to ensure a solid and comprehensive service.

Joint KCC/Health CAF Report

4.4 More work is needed to fully embed the CAF process into the Health Service, although Lorraine Goodsell confirmed that this difficulty is not unique to Kent. 33 CAF's have been completed between April and August compared to 28 completed over the same period in 2010 – 2011.

4.5 This should be an area for buffering the number of referrals coming into children's services; more focus on the action plan will ensure the process is embedded within the health service.

5. Data Reports

5.1 The number of CAF's coming into the service is increasing. However, the majority are still from Education.

5.2 Referrals are continuing to reduce; this report is the first month the effect of the CDT can be seen on referrals and initial assessments. The progress of core assessments can be better seen in the weekly report.

5.3 Progress towards the adoption target will be brought to a future meeting of this panel.

6. Improvement Plan Highlight and Exception Reports

6.1 No questions were raised.

7. Any Other Business

7.1 Nothing to discuss.

Dates of future meetings

Agenda Setting*	Time	Meeting	Time	Venue
12 April	4 pm	26 April 2011	12.30	Waterton Lee
3 May	11 am	17 May	4 pm	Swale 3
7 June	4 pm	22 June	9 am	Medway
6 July	3.30 pm	13 July	3 pm	Swale 3
27 July	10 am	25 August	11 am	Swale 3
31 August	2 pm	20 September	2 pm	Medway
12 October	10.30am	24 October	2.30 pm	Cabinet Room
15 November	11am	1 December	3pm	Cabinet Room