

Ofsted Inspection of Specialist Children's Services: Action Plan

Priority Area 1: Planning				
	Action	Delivery Lead	When Completed:	Progress to date
1.0	Decide and embed new action planning template to ensure effective monitoring and input	Patricia Denney, AD for Safeguarding and Quality Assurance	August 18 th 2014	An outcome focussed template has been designed and will be completed and populated, separating SMART actions into five key themes, designed to drive consistency of practice and move Children's Services forward towards 'Good'.
1.1	Ensure all CIN cases have an up-to-date assessment and SMART Plan in place	Assistant Directors (SCS)	Monthly review	This is reviewed regularly at SCSDivMT during Performance Monitoring.
1.2	QA Peer Review Online Audit – monthly auditing to focus on CIN cases (themed audit of CIN May to July 2014)	Paul Brightwell, Head of Quality Assurance	Results to SCSDivMT August 2014	This has started; all May audits to focus on CIN cases and to continue for 3 months. (See action 5.1).
1.3	All inadequate cases identified from the QA Online Audit programme to be shadowed by an Area Performance Officer to help ensure actions necessary to bring out of inadequate are put in place	Paul Brightwell, Head of Quality Assurance	In place / continuing	This is part of established practice under the QA Peer Review online audit system since September 2012. Inadequate practice is also routinely challenged via the Deep Dive programme, and by the line manager of the individual whose case was audited.
1.4	Practice Development Programme to include routine workshops on developing effective outcome based plans	Lee-Anne Farach, Head of Practice Improvement	September 2014	Performance Officers to deliver and 1 district surgery on effective CIN plans, this is part of the Practice Improvement and Development Program led by the Practice Improvement unit.
1.5	MIU to identify all cases on Liberi that are showing as not having an up-to-date single assessment and plan in place	Maureen Robinson, MIU	Regular performance monitoring to SCSDivMT and DMT	This was first scrutinised on a divisional level by SCS ADs and Director during the monthly performance monitoring discussion at SCSDivMT 24 June 2014; this was followed by scrutiny from Corporate Director of Social Care Health and Wellbeing at the Directorate Management Team (DMT) meeting 25 June 2014.
	Care Plans			
1.6	IRO Service to strengthen QA/oversight of Care Plans by introducing to the existing 12 core areas IROs look at in their	Paul Brightwell, Head of Quality	To be in place from May	The new QA feedback form has been developed. It has been discussed with IROs at their April Practice group. Further refinement

	QA work, a new (contingency planning)	Assurance	2014	of the feedback form is taking place – to include a greater focus on changes of social worker and impact on the child, in addition to contingency planning. It is expected that the new feedback form will be in place from June 2014 – with IROs ensuring that all CIC reviews include a robust oversight of contingency plans – in additions to other aspects of plan.
1.7	IRO led workshops on care planning to be provided to operational SCS teams	Tina Onuchukwu, IRO Team Leader	To be in place from July 2014	To be discussed at the County IRO meeting on 14 th May 2014. An update on this work will follow
1.8	IRO QA findings of the quality of Care Planning to be provided in quarterly reports and in the IRO Annual Management Report	Paul Brightwell, Head of Quality Assurance	Complete – IRO annual management report released June 2014	This action is an established part of IRO QA reporting. All new QA reporting will include more detail on the proportion of cases graded good or higher.
	CP Planning			
1.9	Monthly workshops for managers on how to audit and spot good practice	Paul Brightwell, Head of Quality Assurance	Action closed, please see actions 1.12 and 2.11	See 1.12 and 2.11
1.10	CP Chairs to focus QA oversight on the implementation of CP Plans between CP conferences	Paul Brightwell, Head of Quality Assurance	For review November 2014	Work is in hand between the Head of Quality Assurance and the interim Team Leader for Child Protection (CP) Chairs during regular supervision, to ensure this action is robustly implemented. This is supported by performance data from Liberi.
	Pathway Planning			
1.11	Introduction of new section for QA Pathway Plans for Care Leavers within QA Peer Review Online Audit System	Paul Brightwell, Head of Quality Assurance	In place. May 2014	This section has been developed with Catch 22 and SUASC to help ensure robust QA of pathway plans for relevant and former relevant children
1.12	QA Peer Reviews monthly audit programme to run audits for Catch 22 and SUASC focusing on care leavers (May to July 2014)	Paul Brightwell, Head of Quality Assurance	In place	This has started, please see action 2.11 for more information.
1.13	Refine Pathway Plan template on Liberi to make more practitioner and young person friendly	Paul Brightwell, Head of Quality Assurance	July 2014	Work is taking place with MIU to look at how the template provided on Liberi can be changed. This will involve Catch 22 and SUASC

		Assurance / Maureen Robinson, Management Information Service Manager		services as well as young people
Priority Area 2: Child Focussed Practice				
2.1	QA online audit system – section of child focussed has been amended to include a focus on changes of SW and impact on child	Paul Brightwell, Head of Quality Assurance	In place – May 2014	All auditing from May onwards will include a focus on this area of practice
2.2	Strengthen role of CICC (OCYPC) and links to Corporate Parenting Boards	Tony Doran, Head Teacher of Virtual School Kent/ Sarah Skinner, Business Manager VSK	August 2014 October 2014 September 2014	A number of new measures are to be put in place: 1) Introduction of challenge cards 2) An annual meeting for members of OCYPC to meet with lead elected members and senior officers within KCC 3) CPP and KCPG to produce an annual report to OCYPC setting out what has been achieved to improve outcomes for Children in Care and Care Leavers
2.3	Development of follow-on DVD from Care to Listen and launch	Sarah Skinner, Business Manager VSK	August 2014.	The new DVD is finished. CICC (OCYPC) is considering the best way to launch the new DVD, which may involve hiring local cinemas. The DVD will be presented to the County Council meeting in July; this will be followed by a launch of the DVD with children and young people's involvement in the August school holidays.
2.4	LILAC survey – September 2014 (Ensure participation and engagement survey is up-to-date and in place)	Sarah Skinner, Business Manager VSK	September 2014	The LILAC assessment has been delayed to ensure that it does not clash with a Your Voice Matters survey that was undertaken in March; using a survey questionnaire developed by children and young people. The assessment is undertaken by children / young people and will help to identify key issues that need to be out in place to strengthen the authority's approach to encouraging and enabling participation and involvements of our children and young people. The action plan will be amended to reflect the findings from the assessment
2.5	Your Voice Matters (Young Lives Foundation) survey – report setting out findings	Sarah Skinner, Business	July 2014	The survey was completed in May 2014. A report outlining the findings from the survey is to be produced and presented to the

	(Ensure participation and engagement survey is up-to-date and in place)	Manager VSK		County Council in July 2014.
2.6	IRO Service consultation booklets and exit interviews and focus groups	Paul Brightwell, Head of Quality Assurance	October 2014	This action is currently being scoped.
2.7	Extend IRO work to informing CP practice	Paul Brightwell, Head of Quality Assurance	For review September 2014	Utilise the knowledge and experience of children in care to inform the CP process and experience for children and young people. IRO surveys and focus groups to include focus on young people's experience of the CP process so that this can be fed back to CP Chairs team
2.8	Role of children and young people in interviewing and selection of SWs, IRO's, foster carers and other key staff posts	Sarah Skinner / Sue Clifton, Teresa Gallagher	In place	Children and young people routinely assist in the interview and selection of SW, IRO and CP Chairs posts and also senior management positions within the local authority, including the new Director for Early Help and Preventative Services who will start in October 2014.
2.9	Monitor impact of changes of SW on practice	Paul Brightwell, Head of Quality Assurance	June 2014	A new question has been added to the QA Peer Review Online Audit programme (under the section 'Child Focussed Practice') that requires managers to consider the impact of any changes of SW on the delivery of services and support to the child. This is in place and is being used for all cases selected for audit under the system from May 2014. In addition the IRO service is also including a specific question on changes of SW in its QA feedback form (from June 2014) and will provided QA feedback in future reports
2.10	Performance Officers to identify districts who require training and support in child focussed practice	Lee-Anne Farach, Head of Practice Improvement	For review September 2014	<ul style="list-style-type: none"> Identify districts via audits and Service Managers and Provide Child Focussed Practice workshops in selected districts
2.11	Monthly workshops for managers on how to audit and spot good practice	Paul Brightwell, Head of Quality Assurance	January 2015.	See 1.5. Courses are running June –December 2014. A report of findings will be submitted to SCSDivMT January 2015. 4 workshops are being provided in June 2014, followed by a further 2 workshops each month until December 2014. These workshops have been designed under the QA Online Audit system to audit more effectively and identify the practice issues associated with good practice or get in the way of good practice from emerging .

Priority Area 3: Supervision/Management Oversight				
3.1	QA supervision as per supervision policy/ management oversight (through sample audits) and supervision survey to be completed. (CP Plan 8.2)	Paul Brightwell, Head of Quality Assurance	Completed	<ul style="list-style-type: none"> See action plan in response to the Ofsted July 2013 CIC inspection (priority 1, 1.1). A survey of social workers and managers regarding their experience of supervision was undertaken in July 2013. 93% reported receiving 6 weekly formal supervision and 68% at 4 weekly intervals. There is to be a repeat of the supervision survey by March 2014. Repeat of supervision survey has taken place in January/February 2014. The data has now been put into a format for detailed analysis and recommendations to be undertaken. Data from the QA Peer Review online audit for August 2013 shows that 88.1% of cases audited had adequate or better supervision. This increased to 89.4% in September 2013 and 90.9% by October 2013.
3.2	Ensure all staff receives appropriate professional supervision in accordance with KCC's Supervision Policy, and the Practice Standards for Supervisors. (CIC Plan 1.1)	SCS Service Managers and Team Managers.	Continual management monitoring remains in place	At the end of July 2013, 93% reported receiving 6 weekly supervision and 68% received 4 weekly supervision. Data obtained from the QA online audit programme for August 2013 shows that 88.1% of cases audited had adequate or better supervision. This has increased to 89.4% in September 2013 and 90.9% in October 2013. Repeat of supervision survey has taken place in January/February 2014. The data has now been put into a format for detailed analysis and recommendations to be undertaken.
3.3	Actively ensure all managers are trained in provision of professional supervision. (CIC Plan 1.2)	Lee-Anne Farach, Head of Practice Improvement	Completed. Regular and routine training to be provided to new managers	90 supervisors have embarked on the Improving Supervision Processes in Kent programme (provided by In-Trac), in 7 cohorts. As of August 2013, 4 cohorts have completed the initial training with a further three due for completion at the end of February. In-Trac have been commissioned to continue the training programme as required for new and additional staff, as well as refresh training, in 2014.
3.4	Introduction of a Practice Development Programme, in line	Lee-Anne	Completed	Practice Development Programme (PDP) District workshops and

	with the Social Work Contract. (CIC Plan 1.3)	Farach, Head of Practice Improvement	31 st October 2013.	surgeries have been rolled out across the County. 1-2-1's and individual sessions and a series of coaching sessions are underway with social workers and managers. A review of the PDP will be presented to the SCS Divisional Management Team (DivMT) 29 TH October.
3.5	'Deep Dives' are held quarterly within the four Areas, and attended by SCS Senior Management. (CIC Plan 1.4)	Patricia Denney, Assistant Director of Safeguarding and Paul Brightwell Head of Quality Assurance.	Completed. Deep Dives to continue on a quarterly basis	Quarterly 'Deep Dive' analysis of performance data now well established, combining quantitative and qualitative information with routine reports presented to senior management groups. The next report will be presented to the Children's Services Improvement Panel at the end of November for Member scrutiny and oversight
3.6	Implementation of an online Peer Review Quality Assurance audit programme with a peer review function initiated February 2013. (CIC Plan 1.5) Further reviews of the QA Peer Review Online Audit system has taken place in June 2013 and also January 2014	Paul Brightwell. Head of Quality Assurance.	Formal review completed June 2013, and again January 2014. In place In place	The Online Audit Programme allows managers at all levels to audit individual cases robustly as part of routine practice. The audit programme is in line with KCC's Quality Assurance Framework and enables practice in individual cases to be audited with respect to referral and response, assessment, child protection, child focused practice, planning, review, recording, supervision, management oversight and transfer case closure. The review of the audit system in June 2013 led to significant changes being made; removing the formal stage of involving SWs which led to a significant increase in the competition of audits being undertaken A further review of the audit system took place in January 2014. This led to the introduction of a new care leaver section. The previous two assessment sections (initial and core) have been removed and replaced with a single assessment section. The section on child focussed practice has also had an additional question added to focus on the impact of changes of social worker and the child in care planning section has also been updated to enable greater focus on eligible children. The addition of 'themed audit' option to allow

			September 2014	greater flexibility in how the audit system can be used. A new stage is taking place (to be completed by September 2014) in order to develop specific sections for adoption and fostering to enable these teams to audit practice based on fostering and adoption case files. This update will also focus on making the audit system more user friendly for managers and encouraging greater consistency in the grading of cases.
3.7	Training for all supervisors in reflective supervision to be provided by In Trac (KCC's provider of supervision training). (CIC Plan 1.6)	Phil Doyle, Catch 22 Lee-Anne Farach, Head of Practice Improvement	In place from November 2013 August 2013	KCC agreed with relevant AD (14/10/2013) that C22 Managers should link into in-house Supervision training being organised by KCC for 6/7.01.14 and 26/27.03.14. This will provide an invaluable opportunity for relevant staff to mix and share ideas. Commission further supervision training to ensure all Team Managers are trained 6 of 7 C22 Managers have attended training on 6/7 th Jan and 26 th /27 th Jan. Remaining 1 manager to attend next available course.
3.8	Provide update from current supervision survey and QA online audit findings	Paul Brightwell, Head of Quality Assurance	October 2014	A new supervision survey was released in January 2014, to capture staff thoughts on the progress made with supervision. The survey was released to each member of staff who is social work qualified (including Social Work Assistants, Independent Reviewing Officers and Chairs of Child Protection Conferences and their supervisors). Responses are being collected back on a rolling programme. Initial findings are expected to be released in Autumn 2014.
3.9	Role of PDP and ongoing training for staff	Lee-Anne Farach, Head of Practice Improvement	Reviewed June 2014	A paper on the learning and development offer from the Social Work Contract will be submitted to Liz Railton as part of the Improvement Notice review in July 2014. This will be subject to a further review in winter 2014 following the next series of master-classes (PDP) which are currently being planned.
Priority Area 4: Establishing stability and meaningful relationships with Social Workers				
4.1	Impact of changes of SW is being monitored through QA online audit (from May 2014) and IRO's (July 2014)	Paul Brightwell, Head of Quality Assurance	<ul style="list-style-type: none"> June 2014 	<ul style="list-style-type: none"> A new question has been added to the QA Peer Review Online Audit programme (under the section 'Child Focussed Practice') that requires managers to consider the impact of any changes

		<p>Maureen Robinson, Service Manager MIU</p> <p>Paul Brightwell, Head of Quality Assurance</p>	<ul style="list-style-type: none"> • July 2014 • August 2014 	<p>of SW on the delivery of services and support to the child. This is in place and is being used for all cases selected for audit under the system from May 2014. In addition the IRO service is also including a specific question on changes of SW in its QA feedback form (from June 2014) and will provided QA feedback in future reports</p> <ul style="list-style-type: none"> • Reporting on impact of changes of SW to also be included in monthly QA online audit reports by MIU which are presented to SCSDivMT • QA data on changes of SW to be raised in quarterly Area Deep Dives
4.2	Promote and embed the Social Work Contract within the districts	Lee-Anne Farach, Head of Practice Improvement	September 2014	Performance Officers to provide update briefings on Social Work Contract via district surgeries

Children in Need

Priority Area 5: Children in Need				
5.1	Audit CIN cases to ensure that purposeful work is taking place and there are no unidentified risks. Audit all CIN cases through supervision process and through Area management oversight arrangements. Actions to ensure risks properly addressed identified and delivered (CP Plan 1.1)	All Area Managers (TM)	<p>Completed (February 2013)</p> <p>A further audit of all CIN cases is to take place for 3 consecutive months commencing in May 2014.</p>	<p>All the Areas audited their CIN cases in February 2013, commenting on whether cases have up to date assessments and plans. Those districts where information was not sent or assessments/plans were out of date where asked to take necessary action to update them. A dip sample was completed by safeguarding unit in May 2013. Of the 51 cases audited in this dip sample, 7 (14%) were found not to have an up-to-date assessment (i.e.an assessment completed within the last year) and 5 cases (10%) were found not to have a current plan in place.</p> <p>Child in need planning was not consistently recorded utilising the child in need planning tool. Whilst there was some evidence of the use of outcome based planning this was not consistently applied and evidences some confusion regarding an outcome or an activity. Following the dip-sample audit each Area was contacted by the children's safeguarding unit (July 2013) to seek assurances that any</p>

				<p>outstanding assessments or plans were updated.</p> <p>In April a full check that all CIN cases have up to date assessments plan and in date reviews will be undertaken. Cases where these are not in place will be escalated to the Assistant Director. A further audit of all CIN cases is planned to take place in May 2014 for 3 consecutive months to track progress.</p>
5.2	<p>All CIN cases to have an up-to-date assessment and SMART Plan in place. All CIN cases to have a completed plan using the existing template (CP Plan 3.1)</p>	<p>SCS Assistant Directors</p>	<p>For review by SCSDivMT August 2014.</p>	<p>A dip sample was completed by safeguarding unit in May 2013. Of the 51 cases audited in this dip sample, 7 (14%) were found not to have an up to date assessment (i.e.an assessment completed within the last year). In respect of child in need plans there remained 5 cases without a current plan (10%). There was evidence across the sample that where the lack of plan was identified at initial audit that this has been addressed and a meeting arranged, there was however some evidence that meetings had taken place but minutes had not yet been added to ICS. Further there was evidence that cases had been closed subsequent to the initial audit which would indicate a positive throughput of work.</p> <p>Although there is an encouraging picture with regard to child in need planning this was not consistently recorded utilising the child in need planning tool. Whilst there was some evidence of the use of outcome based planning this was not consistently applied and evidences some confusion regarding an outcome or an activity. An exercise under Liberi to check that every CIN case has an up to date plan that is reviewed within timescale will take place by 31/04/14. Properly outcome focussed (as opposed to output) There remains a challenge to ensure plans are activity focussed. The new Plan format within Liberi is designed to aide practitioners in this regard.</p> <p>A further audit of all CIN cases is currently underway from May 2014 for 3 consecutive months to track progress.</p>
5.3	<p>Services to track and report back to identify themes, evaluate, QA for feedback loop and identifying learning and developments needs and to steer work of PIP2 (CP Plan 3.2)</p>	<p>SCS DivMT</p>	<p>In place (May 2014)</p>	<p>As above – themes emerging re being addressed within the new Practice Development Programme.</p>

5.4	On-line Management Units to focus on CIN work (CP Plan 3.3)	All SCS team managers, Service Managers and Assistant Directors	For assessment by SCSDivMT in August 2014.	<p>A total of 229 CIN cases have been audited between March 2013 and February 2014 under the QA online audit with an average of 80.3% having a CIN plan graded as adequate or better. Of the 196 cases audited since August 2013, 155 were found to have a CIN graded adequate or better (79.1%)</p> <p>Actions put in place in February 2013 to ensure completion of assessments and plans have meant all CIN cases have been reviewed, but this needs to be retested as outlined above and a robust audit of CIN cases is currently underway (due for completion in July 2014).</p>
5.5	Conferences to construct CIN Plan at ending of CPP in accordance with CIN Policy (CP Plan 4.1)	Conference Chair (in partnership KSCB)	In place (January 2013)	<p>108 CPP ended (Jan-Mar) and 105 resulted in CIN Plan, 1 went to TAF, 1 to care plan and 1 closed. The safeguarding unit has dip sampled 16 CP plans – overall, plans were clear and child-focussed. There is a mixed picture of CIN planning following CPCC. There were some good examples of SMART plans with measurable timescales and focus on continuing need, however this was not consistently recorded utilising the child in need planning tool. It seemed that outcome based planning was better applied in those plans that used the tool.</p> <p>Whilst there was some evidence of multi-agency planning this was not consistent.</p>
5.6	<p>CIN Procedures re-launched through KSCB with clear partner agency agreement to contribute to CIN planning and service provision supported by an inter-agency training plan and built into Quality and Effectiveness work programme to monitor impact.</p> <p>Referrals to be audited to ensure they are sent in a timely manner (CP Plan 10.1)</p>	<p>KSCB</p> <p>Karen Graham, AD South Kent and Stephen Fitzgerald, Service Manager CRU</p>	Completed (July 2013)	<p>The CIN procedures were re- launched through KSCB – signed off by the board in July 2013.</p> <p>Multi-agency deep dives (beginning in the Summer 2013) will consider multi-agency contribution to CIN planning and findings from this work will inform future audit activity-led by KSCB</p> <p>Referral/threshold audit completed by KSCB and findings being actioned.</p>

Child Protection

Priority Area 6: Referral and Response				
6.1	Management decision making arrangements and levels of delegated authority to be reviewed and re-launched to all staff (CP Plan 6.1)	AD and CDT Managers	Completed. In place (February 2013)	<p>All duty seniors in the unit now trained on chairing meetings, strategy discussions, timely defensible decision making, recording, consultations and an update on Working Together 2013. This work has enabled all current senior practitioners in the CDT to fulfil the role of Duty Senior during their working day.</p> <p>Cases requiring assessment by district teams are progressed as a priority, with an average of over 80% of these now being received by the Teams within 24 hours of CDT receiving the contact. All Child protection referrals are reviewed and progressed the same day. Referrals which remain in CDT, including those children who would benefit from a Common Assessment Framework Assessment and Team around the Family are also now progressed in a timelier manner. This is due to the fewer number of staff being involved in the decisions making process and a now well embedded partnership with CDT's two Family CAF coordinators.</p>
6.2	Review and rationalise decision making processes in CDT. Ensure clarity of management accountabilities (CP Plan 9.1)	AD and CDT Managers	Completed (May 2013)	Over 80% of these referrals are now being received by the Teams within 24 hours of CDT receiving the contact. All Child protection referrals are reviewed and progressed the same day, involving both the district teams, referrer, police and health partners in the initial Strategy discussion where this course of action is deemed appropriate.
Assessment				
6.4	Effective implementation of single assessment – (reference to QA online audit) – to ensure that assessments are timely, proportionate to risk, informed by research and historical context and significant events for each case	Lee-Anne Farach, Head of Practice Improvement	September 2014	<ul style="list-style-type: none"> Monitor via online and snap audits; performance data is presented monthly to SCSDivMT to access any assessment outside of timescale; and challenge the reasons for this. Principal Practitioners have provided training and will continue to support for staff on the Children and Families (single) assessment

Children in Care

Priority Area 7a: Children in Care				
7.1	Development of Children in Care Strategy 2014/2017	Paul Brightwell, Head of Quality Assurance	September 2014	A summary (report) of the key issues needing to be incorporated within the 2014/17 CIC strategy was presented to Kent's Corporate Parenting Group in February 2014. Drafting of the strategy is underway, which is planned to be presented to the Corporate Parenting Boards in September 2014.
7.2	Practice Development Programme to focus on assessment and critical thinking and care planning. (CIC Plan 2.1)	CAF coordinator, TM, SM,	In place (March 2013)	<p>Kent SPAs are attended by team managers as well as CAF coordinators to ensure appropriate detailed case discussion and multi-agency working.</p> <p>Some areas begun to link EIW's to lead roles in order to promote multi-agency relationships and improve the quality of multi-agency work. During the past 6 months, GP CAF Champions and representatives of the Health Trust providers on the CAF Task and Finish Group have been engaged in the development of various models to support GPs in the completion of CAFs.</p>
7.3	<p>IRO service to have robust oversight of Care Plans, and focus on promoting permanence, reducing delay and drift. A report by the Head of Quality Assurance will be on a quarterly basis (April- June; July to September; October to December; January to March). (CIC Plan 2.2)</p> <p>Quality assurance of IRO audits feedback of Care Plans to operational managers will also be undertaken by the IRO.</p>	Paul Brightwell Head of Quality Assurance.	Completed. Quarterly reporting in place.	<p>Since July 2013 IRO's have undertaken detailed quality assurance grading of care plans. Approximately 79.9% of care plans audited have been graded adequate or better in Quarter 3. Performance on the core components of the plan e.g. permanence, direct work, safety, child participation in proceedings, placements and transition are at a higher level of performance i.e. 88.5 - 91.5%. This has identified the need to strengthen practice in relation to bringing the component parts of the plan together into a coherent whole and the implementation of the plan within the child's timeframe.</p> <p>The IRO service has strengthened their focus on quality assuring care plans. After every child in care review, each IRO provides a completed quality assurance audit feedback grading of care plans to Operational Specialist Children's Service managers within 15 working days. The audit feedback form is used by managers during staff supervision to improve practice, allow all children in care plans</p>

				to be quality assured regularly and a stronger focus on reducing drift in care.
7.4	Practice Development Workshops and Surgeries are held within the Areas. (CIC Plan 2.3)	Lee-Anne Farach, Head of Practice Improvement	Completed. 6 monthly workshops.	The Practice Development Programme has delivered two workshops in each of the four Areas; 'Assessment and Critical Thinking', 'Risk Analysis and Planning'. These workshops were promoted at two county-wide Staff Briefings. In addition, Performance Officers and Principal Practitioners support staff in District Surgeries focusing specifically on assessment and professional judgment.
7.5	Repeat of Care Planning workshops. (CIC Plan 2.4)	Lee-Anne Farach, Head of Practice Improvement	Completed further workshops to be delivered by March 2014	A series of area workshops on care planning took place during the summer 2013 and feedback on these was that they were helpful in highlighting the practice requirements for effective care planning. These workshops are to be repeated in the areas and also held as part of district surgeries provided by the area Performance Officers.
7.6	Re-train all relevant staff on effective assessment and planning referencing best practice. (CIC Plan 2.5)	Martin Hazelhurst (NCAS)	Completed	Delivered on 23/24 th October at Herne Bay Office. Reflective Impact session(s) booked with Independent Consultant week of 16.12.13.
7.7	Strengthen Kent's Children in Care Council (OCYPC) to represent more fully the views of all children and young people in care and care leavers – including: <ul style="list-style-type: none"> Increasing participation at OCYPC meetings / events at county and area levels. Feedback from OCYPC of what the council is doing. Ensure OCYPC reflects the views of disabled children and UASC. (CIC Plan 3.1) 	Tony Doran, VSK Head Teacher.	VSK Progress is regularly reported to Corporate Parenting Panel for formal Member scrutiny	The series of meetings with children and young people is in place; members of the children in care council hold membership cards. Contact is being made with each Member of the OCYPC in between meetings to ensure continued interest and involvement Meetings have been altered to respond to the wishes of OCYPC Members and will include a fun activity. Feedback to be published in the Children in Care newsletter and on the Kent Cares Town Website. Young people apprentices and participation events across Kent also allow for local involvement of children and young people in the OCYPC. See also action 5.6 <ul style="list-style-type: none"> Regular on-going OCYPC meetings, county venue identified and core membership agreed and recruitment underway for areas (harder to reach cohorts) that are not as yet represented.

				<ul style="list-style-type: none"> • Recruitment underway for District 'Participation Champions' within social care teams i.e. aiming for two social workers per district'. • Residential trip planned during the summer to develop and consolidate the OCYPC – to enable the group to grow in confidence to be the voice of other children in care, as well as themselves. • Participation activity days have continued to grow in numbers attending; reaching year on year increase. A bespoke day has been arranged to include younger age children and one is being planned for disabled children. • The voice of children in care is also being captured in surveys and through 'Care To Listen 2' DVD, which children in care have been a part of planning and delivering. A coordinated approach to seeking the voice of the child/young person had been recommended. • Care Leaver Apprentices within VSK continue to support this successful work stream. • A 'You said we did' page developed and appears on the Kent Cares Town website (see action 7.13)
7.8	IRO Service; Exit interviews – available to all children / young people who leave care aged 8 to 18 years. (CIC Plan 3.2)	Paul Brightwell Head of Quality Assurance	Completed/in place.	Exit interviews began in April 2013. Work took place with National Children's Bureau to develop a survey questionnaire which has also had input from children and young people via OCYPC. An update on exit interview findings to be included in Quarterly QA IRO report
7.9	Ensuring social workers ascertain the wishes and feelings of children and record these in the Care Plans, and this is evidenced in the case records. (CIC Plan 3.3)	Area Assistant Directors.	Completed/in place. Reported on in IRO quality assurance reports. The next report is due in November	The importance of evidencing a social worker has heard and is recording the voice of the child in case work is routinely reinforced and addressed with staff in training and District Surgeries, and supervision. Since March 2013 the QA Online audit programme routinely audits the quality of child focused practice which shows 90.3% of cases audited up to February 2014 as being adequate or better. The IRO QA work of 1991 reviews between April 2013 and September 2013 found 95% with adequate or better participation

			2013.	
7.10	Revised review participation leaflet (developed with children/young people). (CIC Plan 3.4)	Paul Brightwell, Head of Quality Assurance.	Completed.	<p>Children in Care scorecard measures performance with respect to participation of children in care at their review meetings. This has been consistently above 95%, although further work is taking place by the IRO Service on the quality of participation including the proportion of children that attend their review meetings and/or Chair all or part of their reviews. These areas of performance are covered in the quarterly QA IRO reports and the annual IRO Management Report.</p> <p>Work took place in 2013 to revise the participation leaflet which is provided to children and young people prior to their review to assist them in preparing and thinking about the issues that they want covered. The leaflet was designed with children and young people and was distributed in July 2013.</p>
7.11	Chairing their own reviews - Continue to promote opportunities for children / young people to chair all or part of their review meetings. (CIC Plan 3.5)	Paul Brightwell, Head of Quality Assurance.	This is covered in the quarterly QA IRO reports.	There have been ongoing improvements in the proportion of children who have chaired all or part of their review. 8 from 9 in Quarter1 of 2012/13 to 48 in quarter 2 of 2013/14 and to 83 in quarter 3 of 2013/14. Annual IRO report released June 2014.
7.12	Focus groups - IRO service to maintain regular focus groups with disabled children and UASC. (CIC Plan 3.6)	IRO Service / Paul Brightwell Head of Quality Assurance.	Completed – regular focus groups taking place throughout the year.	Since 2012, the IRO Service has provided opportunities for disabled young people, Catch 22 and UASC to contribute their views about being in care via focus groups run by IRO's. A number of focus groups took place in 2012-13 and a summary of the findings from these were presented in the IRO management report and also a report to Corporate Parenting Panel in early 2013. Further focus groups will take place in the latter part of 2013/14 and the findings will be reported in the 2013-14 Annual Management Report. A detailed summary report in quarter 1 of 2012/13 outlining the findings from all the IRO surveys including exit interviews and focus groups has been produced and was provided to the Ofsted inspectors. Another detailed summary report in Quarter 2 including findings from the children's participation/consultation leaflets has been produced and was distributed to the district operational service managers.

7.13	A coordinated approach to surveys ascertaining the views of children and young people in care and to ensure the right questions are asked and that responses can be appropriately measured (CIC Plan 3.7)	Sarah Skinner, Service Manager Virtual School Kent. Richard Hallett, Head of Business Intelligence.	For review August 2014.	The review of current survey methodology is underway and feedback will be included in the process as it becomes available. Results of the Your Voice Matter's survey suggest that children and young people do not like completing surveys and would prefer to share their views in person; a "You said- We did it!" page is available on the Kent Cares Town site to show how feedback has been listened to. http://kentcares town.lea.kent.sch.uk/our-children-and-young-people-s-council/participation-day-reports-feedback/you-said-it-we-did-it
7.14	Commission the development of a survey questionnaire focused on issues important to children and young people (survey to be run annually as a compliment to the national in-care monitor survey). (CIC Plan 3.8)	Patricia Denney, Assistant Director of Safeguarding.	Completed (November 2013)	The Young Lives Foundation has been commissioned to work with children and young people to develop a survey questionnaire. This is due for completion by end of April 2014. Work will then take place to determine the best way to implement the survey on an annual basis; via VSK or IRO Service or an outside agency. It is intended that the survey will run alongside the Nation Children's in care monitor which is overseen by the Children's Commissioner and will help to provide a full picture of what it is like to be a child in Kent.
7.15	Complaints and Advocacy - Ensure all children and young people in care know how to make a complaint and access advocacy support. IROs to address this as part of every CIC review (CIC Plan 3.9)	Paul Brightwell, Head of Quality Assurance.	Completed. In place.	Representation from disabled children, UASC, 16+ young people and under 16's from each locality across Kent is being actively encouraged.
7.16	Explore commissioning of LILAC (Leading Improvements for Looked After Children) assessment. (CIC Plan 3.10) Commission National Voice to undertake LILAC Assessment	Paul Brightwell, Head of Quality Assurance. Sarah Skinner, Business Manager VSK Corporate Parenting Boards	July 2014 October 2014	<ul style="list-style-type: none"> Results of the Your Voice Matters Survey, a DVD of young people's care experiences alongside a report written by young people will be presented to the County Council Meeting in July. LILAC assessment has been commissioned to take place 29 September – 1st October 2014. Report on findings from the assessment will be presented to the corporate parenting boards and SCS DivMT Corporate Parenting Boards to set out to the Children in Care Council, what actions will be put in place in response to the Your Voice Matters Survey recommendations in order to

		– KCPG and CPP		improve participation and involvement for our children and young people
7.17	Publicising the Kent Pledge and Kent Cares Town to every child in care by creating a child In Care Pack, given at the point of entry. (CIC Plan 5.1)	VSK Head teacher, Tony Doran in liaison with Thom Wilson, Head of Strategic Commissioning.	Completed.	VSK recording that Children & Young people are given a pack within twenty working days of entering care IRO's recording in LAC Reviews that young people have received the 'pack' and have discussed this with their carer
7.18	Maintaining a mailing list of all OCYPC Members and ensuring regular opportunities for them to meet as a group and for them to meet CPP Members and Senior Officers. (CIC Plan 5.2)	Tony Doran VSK Headteacher.	Completed. Monitored monthly by VSK Headteacher.	Evidencing attendance at OCYPC meetings through attendance list, and recording attendance on Liberi. Keep an up to date "You said, we did" page on the Kent Cares Town website
7.19	Continue to organise participation activity days during every school holiday (except Christmas). (CIC Plan 5.3)	Tony Doran VSK Headteacher.	In place. Each school holiday.	Record attendance and Update the Kent Cares Town website with reports, photographs and pod casts of the days The Virtual School Kent has organised 12 participation activity days from April 2013 to March 2014 run during the Easter, May, summer, October & February school holidays for Kent Children in Care. Two hundred and thirty nine children have attended at least one activity day with 69 children attending two or more activities. The activities have been organised and run by VSK's Apprentice Participation Workers, supported by other staff within VSK, and they have covered a wide range of activities including cookery, sports, outdoor pursuits, music & dance and arts & crafts. Children are consulted about what activities they would like run and where possible their requests are met. Evaluations have been completed by the children after each event and their views have been sought with regard to the type of days they would like run to be in the future. These views have been

				taken into consideration in planning future events. 98% have stated they have enjoyed the activity, and 94% have stated they would like to attend another event.
7.20	Seek the views of young people for future days to ensure all interests are catered for. (CIC Plan 5.4)	Tony Doran VSK Headteacher.	In place. Reviewed at KCPG.	Ensure feedback forms capturing satisfaction are completed to inform future delivery
7.21	Ensure Participation Apprentices/Workers meet with the Lead Member and Senior Officers on a quarterly basis to review the OCPYC and focus on improving communication with children & young people in care. (CIC Plan 5.5)	Tony Doran VSK Headteacher.	In place. Quarterly basis.	Recording attendance at Corporate Parenting Panel and other bespoke meetings
7.22	Looked after Children's teams to include in their Area Plans how they will hear the Voice of the children in their districts addressing NMS 1.3 as a priority (regs 3.31 - 3.42) (Fostering Plan 1.1)	Service and Team Managers along with Fostering Support Managers.	In place	<p>Increase in participation of children/young people chairing CIC reviews from 9 in Quarter 1 : 48 in Quarter 2; and 83 in Quarter 3 of 2013/14. Children are attending or giving written comments to fostering panels. Participation days are being held through VSK across the county.</p> <p>Surveys are in place to ascertain the views of children and young people in care regarding the service and support they receive – updates on the findings from these surveys are presented in the IRO Management Report and presented to the Corporate Parenting Groups – CPP and KCPG.</p> <p>A commissioned survey developed by the Young Lives Foundation to ensure that children and young people have a survey that focuses on the issues they want their corporate parents to know about, is underway 11th March to 11th April 2014..</p> <p>A follow-up to the DVD Care to Listen is being produced to track the young people involved in the original DVD (2008/2010) and ascertain how their experience and views of being in care have changed. This is currently being edited with the first draft to be available later in April 2014.</p>
7.23	Child in Care Council has improved attendance by CiC. (Fostering Plan 1.3)	VSK Fostering and CiC teams	March 2014.	This is now covered in the CIC action plan. (Actions 3.1 and 5.6)
7.24	A dedicated CAMHS Children in Care Service for children in care to provide:	In partnership with West Kent	Completed. Since 1 st July	1. West Kent CCG reported to Social Care and Public Health, 4 th October 2013 that the average waiting times for assessment

	<p>1. Mental health assessment (uni-and multi-disciplinary) and a range of evidence-based short, medium and longer term treatment.</p> <p>2. Mental health consultation to the child's social worker and carer.</p> <p>3. Consultation and in-reach to children in care and adoption support social care teams where there are concerns about the mental health of a child/young person who is adopted or in care. (CIC Plan 6.1)</p>	<p>Clinical Commissioning Group.</p> <p>Sue Mullin, Commissioning Manager is the KCC lead on this.</p>	<p>2013 – routine monitoring in place</p>	<p>had reduced from 19 weeks to 9 weeks (based on June figures) with a further reduction expected over the summer months to reach a target of 6-9 weeks by end of October 2013.</p> <p>2. On 1st July soft launch (1st September full-launch) of dedicated Children in Care CAMHS service which includes a dedicated service for social workers needing advice and consultation on mental health issues for young people.</p> <p>3. New CIC service within the CAMHS service has been redesigned and eligibility increased to service young people up to 18 years, all children in care and those adopted with a social worker. From the report paper: <i>The CAMHS-CIC service has been re-designed to provide a wider reach and an effective and timely service to this group of children and young people. In June 2013, the service was working with 202 Kent CIC. In addition the mainstream CAMHS teams were working with 316 CIC, some of whom would also be receiving a service from CAMHS-CIC, but others are children and young people placed in Kent by other local authorities. CAMHS teams were also working with 90 adopted children and young people.</i></p>
7.25	<p>C22 to monitor speed of response to their referrals to CAMHS and report to Contract Performance Meetings. (CIC Plan 6.2)</p>	<p>Phil Doyle, Catch 22</p>	<p>Completed. October 2013</p>	<p>Built into revised KPI reporting presented by KCC via Contract Performance Monitoring meeting on 31.10.13. Data sourcing and monitoring in progress.</p> <p>Now reported as part of the performance dashboard</p>
7.26	<p>Reduce timescales for care proceedings. (CIC Plan 9.1)</p>	<p>Mairead MacNeil, Director of SCS/ Ben Watts, Head of Litigation.</p>	<p>Monitored monthly at SCS DivMT.</p>	<p>Work with in-house legal team and the judiciary is underway. Ongoing monitoring will be via the Legal Monthly Monitoring meetings and Children in Care meetings.</p>
7.27	<p>C22 to scope with KCC options for securing more Supported Lodgings providers (CIC Plan 9.2)</p>	<p>Phil Doyle, Catch 22</p>	<p>July 2014</p>	<ul style="list-style-type: none"> • C22 lead on SL meeting with relevant providers to scope options for the future and at the same time is advertising for additional providers. To be fed into relevant KCC housing

				<p>sufficiency meetings and contract review meetings</p> <ul style="list-style-type: none"> • 10 new supported lodging providers continue to be assessed. Assessments are ongoing and the gathering of all relevant reports and information required is continuing. Papers will then be provided and presented to the fostering panel for approval. Estimated time 3months. As they are approved the PIP will be updated. • A paper detailing Supported Lodgings progress will be taken to the Children's Social Care Cabinet Committee 9th July 2014 (see actions 8.17 and 8.21).
7.28	C22 to assist KCC training of recruited Foster Carers for older YP. (CIC Plan 9.3)	Sarah Hammond, Assistant Director West Kent	October 2014	This is currently under review as part of the wider CIC/ Care leaver integration, and Children's Transformation work-streams.
7.29	Increase capacity of permanent staff within the IRO Service. (CIC Plan 12.1)	Paul Brightwell, Head of Quality Assurance.	December 2013.	<p>Recruitment to 2 vacant IRO posts, 1 post has been appointed to, with an expected start date of January 2014. Further advertising is taking place October/ November 2014 for the remaining post.</p> <p>Recruitment to vacant IRO posts is continuing, further interviews took on 1st April 2014</p>
7.30	Strengthen focus on reducing drift of children in care through robust planning. (CIC Plan 12.2)	Paul Brightwell, Head of Quality Assurance.	Monthly reviews.	Performance targets for IROs and IRO teams have been introduced and are monitored by the Management Information Unit (MIU). Performance targets to address drift in care will be in place from April 2014.
7.31	Increase flexible working capacity of IROs (in line with New Ways of Working). (CIC Plan 12.3)	Paul Brightwell, Head of Quality Assurance.	Completed.	Maintain and increase additional IROs under zero hour contracts to assist in chairing of initial reviews and cover during emergency due to vacancies / absence
7.32	Permanency – Reunification home/adoption	CYPsMs and Assistant Directors	For review by SCSDivMT August 2014	An audit is currently underway to identify children who could be reunified with additional support from the Early Help and Preventative services division.
7b: Fostering				
7.33	A range of demand and control mechanisms have been introduced as core business. (CIC Plan 10.1)	Thom Wilson, Head of Children's Commissioning	Reviewed at monthly Transformatio	Activities include increased emphasis on adoption or long term fostering as a route out of care, improved commissioning and purchase of placements by the Access to Resources Team (ART) and

			n Board meetings.	focus on care planning by the managers and IROs.
7.34	C22 to support KCC in identifying and developing a range of suitable accommodation for care leavers. (CIC Plan 10.2)	Sue Clifton, Catch 22	For review October 2014	A paper detailing progress was submitted to the Children's Social Care and Health Cabinet Committee.
7.35	Fostering Support Managers to set up tracking system to ensure requested feedback forms at the end of placements and at Annual Reviews are returned by Area Social Workers. (Fostering Plan 1.2)	Fostering Support Manager with CiC manager, Mark Wheeler	In place (30th September 2012)	Forms are not being returned consistently. Tracking sheets are being developed and issues raised with team/service managers. The Children's Transformation Programme has a targeted work-stream to ensure feedback, annual review processes and placement information is more stream-lined, in partnership with ART.
7.36	Young people involved in assessing and recruiting Foster Carers, young people involved in recruitment of staff, C&F, Adolescent Resource, 16+. (Fostering 1.4)	Centralised Managers, Recruiting managers	In place	Young people are involved in the assessment process for new carers and in the recruitment of staff. Former CIC are now recruited as Fostering Panel members.
7.37	Review current training delivery (Fostering Plan 2.2)	Fostering Training Group with Lisa Fitzpatrick,, fostering service, disabled children.	In place	Team Teach; KEEP; Fostering Changes; Safer Caring; Conflict and Management courses have been held to raise awareness for new and existing carers and number of courses has increased. On-going monitoring.
7.38	Continue with the Risk Management Meetings. (Fostering Plan 3.1)	District/Area teams.	In place	
7.39	Supervising fostering social workers to discuss at supervision session following missing episode to discuss the Foster Carers strategy for dealing with missing child and ensure risk assessments are update. (Fostering Plan 3.2)	Fostering social worker (support).	In place	Foster carers are aware of the procedures for missing children and who to contact. Risk management meetings are held locally and steps to minimise children going missing discussed as part of the matching process, within supervision; and the CiC review process and push and pull factors. Return interviews are completed and the foster carers role in minimising the risks are highlighted. Strategies to minimise running away episodes are included in the Safe Care Plan. Foster carers are aware of the CSE and trafficking tool kit to recognise early signs and report this.
7.40	Include in Children/Young person's guides re keeping themselves safe. (Fostering Plan 3.3)	Pritpal Sodhi, Performance Officer	In place	The Children/Young Persons Guides were updated and a further review underway and now due for sign off (end March 2014).
7.41	Training Manager to review current Health & Safety training	Fostering Training	In place	Health and Safety is addressed in the Safe Care Plan. Baby care;

	and ensure health and safety issues are Incorporated into safe care plan. (Fostering Plan 4.1)	Group all Supervising SW's	(October 2012)	sleep safe and first aid training has been held.
7.42	Fire safety plan to be addressed in family's safe care plan. Home fire plan to be amended specific to each new placement and discussed with the child. (Fostering Plan 4.3)	Fostering Support Teams	In place	Fire safety forms part of foster carers Safe Care Plan and updated to each new placement.
7.43	12 monthly unannounced visits undertaken and health & safety inspection undertaken/reviewed at that time. (Fostering Plan 5.1)	Fostering social workers.	In place	Monitored in case supervision.
7.44	Tracking system to show each carers unannounced visits/dates. (Fostering Plan 5.2)	Mark Wheeler	In place	Completed. Tracking systems are in place within each Fostering Support Team and monitored in case supervision.
7.45	Focused recruitment on sibling groups/permanence, BME, P&CH - working with the support teams/hot spots (Fostering Plan 6.3)	County Manager Team Managers, Recruitment Co-ordinator (recruitment and support & assessment teams) District CiC team.	In place	Sufficiency strategy in place. New recruitment strategy implemented in June 2013. Targeted recruitment against PID categories has been successful in most categories,(57 sib households recruited/target 48. 10 solo recruited – target 8. 30 Permanence placements achieved – target 30. 16 short breaks achieved – target 10). Stretch targets set in March 2014 of 30 placements for challenging/complex; 48 placements for sib groups of 3 or more; 8 solo placements; 20 disabled children; 12 parent & Child ; 35 Permanency; 30 16 plus; 118 standard new placements; 20 Unaccompanied Minors placements; & 10 Short breaks. . Review of recruitment strategy is taking place (March 2014) with the success of the Winterbust campaign to be built on, and website redevelopment in hand to allow a more streamlined application process. Assessment team process including block training, and reduced visits under review. There has been close work with the Communications Department to target recruitment and focused recruiting including carers for 16+. Monthly Information Evenings (and additional targeted ones) have been held alongside additional Skills to Foster courses (including weekend ones) taking place. Conversion rate from enquiry to approval is 10% and from application to approval 35%. Vacancies are monitored weekly and the Single Placement Team has covered the county since January 2014, with a reduction in new IFA placements, and

				monitoring/reporting to Senior Managers & IROs.. ISWs recruited to do specific assessments within the PID categories: permanency; 16 plus. All areas have action plans which are reviewed at the CiC meeting. Savings targets for 2014-2015 have been reviewed.
7.46	Continue seeking advice from panel re: matters of concern. (Fostering Plan 7.4)	Teresa Vickers, County Manager, Fostering	In place	This is in place
7.47	All significant incidents of concern, complaint or allegation in a foster home to be logged and kept centrally by area team. (Fostering Plan 8.1)	Teresa Vickers, County Manager, Fostering	In place	Records are logged by each team. Cases are reviewed in supervision (paper and electronic recording) and also form part of the foster carers annual review. Removals are to be tracked and reported 6 monthly to CiC meeting (from March 2014)
7.48	Supervisor of fostering social work staff to examine quality of individual's supervision records and case files. Ensure Liberi takes account of fostering recording (Fostering Plan 8.2)	Information reviewed quarterly by area CiC teams and fostering support management.	Completed. In place	Case supervision regularly reviews the quality of supervision records. The new computer system includes fostering recording requirements and staffs are currently receiving training.
7.49	Implementation of themed and monthly auditing of fostering case files	Paul Brightwell, Head of Quality Assurance/ Mark Wheeler, Transformation Consultant	For review September 2014	<ul style="list-style-type: none"> • Work is taking place to develop a bespoke section within the QA Peer Review Online Audit system to enable Fostering Teams to QA practice from Fostering case files. An initial meeting took place in May 2014 with Fostering Managers in order to identify the work needing to be undertaken for this. • A new section within the QA online audit system will be developed and put in place by August 2014. • Workshops / training to Fostering managers will be arranged in autumn 2014 to raise awareness of the online audit system and how to quality assure. • Fostering Team Managers are now being included in monthly auditing of CIN cases (May to July 2014 as part of their training / development in using the QA Online audit system.
Priority 7c: Adoption				
7.50	<ul style="list-style-type: none"> • Independent Reviewing Officers to maintain robust monitoring and oversight of timescales for achieving 	Paul Brightwell Head of Quality	In place	The IRO's Service monthly tracking from Adoption Tracking spreadsheet is in place.

	<p>adoption and to take appropriate action where necessary to prevent drift.</p> <ul style="list-style-type: none"> • IROs to ensure at the 2nd (4 month) review that all children with a plan for adoption are referred for early family finding • IROs to utilise management information to identify and resolve issues for children who do not have a permanency plan in place at the 4 month review. • Reviewing Officers to ensure that for those children where the adoption plan has been agreed at the four month review, are referred for early family finding (Adoption Plan 1.1) 	Assurance.		
7.51	Training for all relevant staff in Permanency Planning (Adoption Plan 1.2)	Lee-Anne Farach Head of Practice Improvement	Completed. In place	KCC Permanency procedures have been in place on Tri-X since March 2013 The Performance Development Program has already run a series of workshops across SCS on outcome based planning – including permanence planning. Further workshops to be incorporated into current program.
7.52	Ensure all staff receives appropriate professional supervision in accordance with KCC's Supervision Policy, and the Practice Standards for Supervisors. (Adoption Plan 2.1 – CIC Plan 1.1)	SCS Service and Team Managers.	Continual management monitoring remains in place	At the end of July 2013, 93% reported receiving 6 weekly supervision and 68% received 4 weekly supervision. Data obtained from the QA online audit programme for August 2013 shows that 88.1% of cases audited had adequate or better supervision. This has increased to 89.4% in September 2013 and 90.9% in October 2013. Repeat of supervision survey has taken place in January/February 2014. The data has now been put into a format for detailed analysis and recommendations to be undertaken. Supervision training will be picked up, and carried forward in the new, revised Ofsted action plan being worked on the Practice Improvement Unit.
7.53	Actively ensure all managers are trained in provision of professional supervision (Adoption Plan 2.1 – CIC Plan 1.2)	Lee-Anne Farach Head of Practice Improvement	Completed. Regular and routine training to be provided	90 supervisors have embarked on the Improving Supervision Processes in Kent programme (provided by In-Trac), in 7 cohorts. As of August 2013, 4 cohorts have completed the initial training with a further three due for completion at the end of February. In-Trac

			to new managers	have been commissioned to continue the training programme as required for new and additional staff, as well as refresh training, in 2014.
7.54	Appointment of manager to Adoption Panel Team, permanent Agency Advisor to adoption panel, and permanent administrative staff (Adoption Plan 2.3)	Yashi Shah, Interim Head of Adoption	Independent review of the service being conducted 2nd-16th July 2014.	<ul style="list-style-type: none"> • Interim Panel advisor in post March 2014 and now upgraded to Team Manager. • Further advertising for additional, permanent positions is regularly re-issued in partnership with HR. • Adoption will be subject to a Service Review as part of Phase 2 of Facing the Challenge.
7.55	Tracking of children at every stage of adoption process (Adoption Plan 3.1)	CIC Service Managers / Adoption Manager / IRO Service	Completed. In place	Performance Surgeries and Joint tracking meetings with Service Managers established, some challenges remain in switch over to Liberi.
7.56	Monitor percentage of children who do not have agency decision within two months of review agreeing adoption as the preferred plan (Adoption Plan 3.2)	Maureen Robinson, Head of MIU, Paul Brightwell, Head of Quality Assurance, CIC Service Managers and Adoption Manager	From December 2013; regularly reviewed moving forward.	Ofsted finding 31.66% of children sampled failed to meet timescale (March 2013). September scorecard shows improvement, down to 25% of children out of timescale. Reviewed by CPP in Children's Adoption Journey Annual Report June 2014
7.57	Training for all relevant staff in Permanency Planning (as per 10.8 above) (Adoption Plan 3.3)	Elaine Peace, Independent Consultant- to be transferred to the Head of Practice Improvement upon appointment.	Completed. In place	The Performance Development Program has already run a series of workshops across SCS on outcome based care planning (including permanency). Further workshops to be incorporated into current program.
7.58	Workshops on Communicating and Direct Work with	Lee-Anne Farach,	October 2014	This will be added to the Practice Improvement and Development

	Children, and Life Story Work (Adoption Plan 4.4)	Head of Practice Improvement		work-plan.
7.59	ASYE training on Life Story Work (Adoption Plan 4.5)	Tim Conroy, Learning and Development Manager	Completed. In place	Now part of ASWE program, and will need to be included in main training program.
7.60	Equip teams with up to date material and tools to be able to undertake direct work effectively (Adoption Plan 4.6)	Mairead MacNeil, Director of SCS	Complete.	The audited, Adoption Support Grant usage report was submitted to the DfE May 2014.
7.61	Use media post available in adoption for children's profiles etc., to develop resources for Life Story Work (Adoption Plan 4.7)	Yashi Shah, Interim Adoption Manager	Completed. March 2014	Media post now filled
7.62	Standard set so that Life Story format is clear to social work practitioners. Later Life letters demonstrate an understanding of how to communicate effectively with children & young people. (Adoption Plan 5.1)	Children in Care Service Managers	Completed. In place (October 2013)	Tri X currently holds procedures and guidance and example of background letters. The Deep Dives now routinely offer good examples of life-story work, demonstrating more embedded good practice.
7.63	Training for all relevant staff in Permanency Planning (Adoption 5.2)	Lee- Anne Farach, Head of Practice Improvement	First round completed by March 2014, further workshops to be delivered Autumn 2014.	The Performance Development Program has already run a series of workshops across SCS on outcome based care planning (including permanency). Further workshops to be incorporated into current program.
7.64	<ul style="list-style-type: none"> Joint monthly tracking meetings set up between Children in Care Service and Team Managers, and adoption family finding to regularly monitor timescales, family finding activity and take necessary action Monthly and 6 monthly reports provided to Adoption Improvement Board and Corporate Parenting Panel in relation to timeliness of placements Set up a family finding champion system for those children who have not been placed within 12 months of the agency decision maker (Adoption Plan 6.1) 	<p>Maureen Robinson – MIU</p> <p>Maureen Robinson - MIU</p> <p>Yashi Shah, Interim Adoption Manager</p>	<p>In place</p> <p>In place</p> <p>In place</p>	<p>Improvements in timescales for children becoming Looked After to placement from 718 days (June 2012) to 592 days (last report August 2013)</p> <p>Dedicated posts (3) established in the family finding team to focus on early family finding – i.e. before the granting of the placement order – continue to monitor whether the capacity will need to increase depending on the children requiring adoptive families. The</p>

				Media post has now been filled (March 2014)
7.65	Joint tracking meetings established with Children in Care Service Managers (Adoption Plan 6.2)	Yashi Shah, Interim Adoption Manager	In place (Autumn 2013)	Monitoring of timescales and early identification of drift has helped achieve better outcomes for children.
7.66	<ul style="list-style-type: none"> Continue to implement the yearly marketing plan with the marketing and media team to deliver targeted and general recruitment activities – current examples of success include successful adoption activity day, much improved website, monthly preparation groups scheduled at different times, information events organized every ten working days. Preparation groups and information events undertaken in conjunction with adopters Monitoring of adherence to customer service standards set including through tracking of all enquiries, and mystery shopping Evaluation of preparation group feedback, and customer feedback from information events. Another adoption activity day planned for June 2014 and a local adoption week to take place in May 2014 (Adoption Plan 6.4) 	Andrew Bose, Communications Account Manager for Children's/ Yashi Shah, Interim Head of Adoption	For review July 31 st 2014	Successful marketing campaigns have taken place throughout the year, particularly for harder to place children. A further, targeted campaign will roll-out in July 2014, utilizing radio advertising, and additional phone support for new, prospective adopters. Evaluation reports on Preparation Groups, and Information events were presented to Corporate Parenting Panel on 19 th June 2014.
7.67	Priority 3.3 Children In Care Action Plan – ensure social workers ascertain the wishes and feeling of children and record these in care plans, and this is evidenced in the case records (Adoption Plan 7.1)	Assistant Directors (SCS)	In place.	<ul style="list-style-type: none"> The importance of evidencing a social worker has heard and is recording the voice of the child in case work is routinely reinforced and addressed with staff in training and District Surgeries, and supervision. Reported and scrutinised via IRO quality assurance reports. The annual IRO report was released in June 2014.
7.68	Ensure that all staff receive appropriate professional supervision in accordance with KCC's Supervision Policy, and the Practice Standards for Supervisors. (Adoption Plan 7.2)	Paul Brightwell Head of Quality Assurance.	Continual management monitoring remains in place	At the end of July 2013, 93% reported receiving 6 weekly supervision and 68% received 4 weekly supervision. Data obtained from the QA online audit program for August 2013 shows that 88.1% of cases audited had adequate or better supervision. This has increased to 89.4% in September 2013 and 90.9% in October 2013. The supervision survey undertaken in May/June 2013 was

				repeated in Jan/Feb 2014, and is currently under analysis.
7.69	Actively ensure all managers are trained in provision of professional supervision. (Adoption Plan 7.3)	Lee-Anne Farach, Head of Practice Improvement	Completed In place.	90 supervisors have embarked on the Improving Supervision Processes in Kent programme (provided by In-Trac), in 7 cohorts. As of August 2013, 4 cohorts have completed the initial training with a further three due for completion at the end of February. In-Trac have been commissioned to continue the training programme as required for new and additional staff, as well as refresh training, in 2014.
7.70	Ensure provider is able to access information when adoption becomes the preferred plan (Adoption Plan 8.2)	Karen Graham, Assistant Director of South Kent (SCS)	For review October 2014	The Adoption service is now fully 'live' on Liberi. There is ongoing support from MIU to ensure all staff are utilising the system to best effect. This will be reviewed in October 2014.
7.71	Tendering process underway for delivery of service. (Adoption Plan 8.3)	Thom Wilson, Head of Strategic Commissioning (Children's)	Review July 2014	Coram contract is regularly reviewed by the Commissioning Unit. A partnerships seminar and evaluation is happening 2 nd July 2014.
7.72	Implementation of themed and monthly auditing of adoption case files	Paul Brightwell, Head of Quality Assurance	August 2014	<ul style="list-style-type: none"> • Work is taking place to develop a bespoke section within the QA Peer Review online audit system to enable Adoption Teams to QA practice from Adoption Case files. An initial meeting took place in May 2014 with Adoption Managers in order to identify the work needing to be undertaken for this. • A new section within the QA online audit system will be developed and put in place by August 2014. • Workshops / training to Adoption Managers will be arranged in June / July 2014 to raise awareness of the online audit system and how to quality assure.

Care Leavers


Priority Area 8: Care Leavers				
8.1	In consultation with KCC QA lead/Catch22 Leaving Care practice development group, implement Care Leavers	Sue Clifton, Catch 22	Completed	<ul style="list-style-type: none"> • C22 met with KCC SCS QA lead Paul Brightwell on 18.10.13. • There is already generic LAC KCC QA peer review audit tool and


	Auditing Tool. (CIC Plan 1.7)			<p>process that Catch22 are part of.</p> <ul style="list-style-type: none"> Agreed with PB that KCC will be implementing a new themed audit tool for Care Leavers in Jan 14, utilising aspects of C22 Audit Tool adding gradings and descriptors. See 1.3 below. SC report back to next C22 Leaving Care Practice Group on 19.12.13 recommending the addition of grading's and descriptors for C22 Tool. SC met with Paul Brightwell on 30th Dec and care leavers Audit tool has been drafted and forwarded to KCC MIU to be put on KCC system to be used electronically from Feb 14. Currently Liberia is not ready and we continue to use a hard copy system. C22 audit tool has been trialed by C22 QA consultant.SC to report back to next scheduled C22 Leaving Care Practice Group on findings.
8.2	Update auditing programme to reflect engagement of senior managers and managers from other Catch22 leaving care services (CIC Plan 1.8)	Phil Doyle, Catch 22	Completed	<ul style="list-style-type: none"> QA lead using C22 auditing tool during visits to road test tool. C22 Auditing programme being updated to include C22 cross org audits, KCC audit and manager audits. Final additions to be made week of 11.11.13 by Patricia Denney (AD Safeguarding). Audit programme now in place
8.3	Ensure quality of supervision and management oversight of cases is tested through regular observed supervision sessions – annual timetable to be updated. (CIC Plan 1.9)	Sue Clifton, Catch 22	Completed with routine monitoring in place	<ul style="list-style-type: none"> Programme outlined in draft to be agreed by C22 mid-November. QA lead undertaking observation of supervision. QA Consultant observed 2 sessions in Nov and 3 in December. Annual Programme updated and now in place. Post KCC supervision training observations included in the programme for February 2014.
8.4	Appoint a quality assurance practice lead to work alongside the manager and staff to support cultural change and monitor impact of training (CIC Plan 1.10)	Sally Morris, Catch 22	Completed	<p>Appointed - commenced 14 to 18 Oct. Booked for: 11th to 15th November 16th to 20th December. Initial report from week one received 23.10.13 for C22 comment. Actions to be agreed during November QA visit.</p> <p>WORK AGREED COMPLETE – May continue once Liberi work</p>

				embedded
8.5	Ensure sufficient management capacity through the review of caseloads in actions under 7 below (CIC Plan 1.11)	Phil Doyle, Catch 22	Completed	<p>Paper submitted to C22 Performance and Monitoring meeting held on 31.10.13 but KCC have requested that this is not progressed due to their revised commissioning intentions.</p> <p>Catch22 intend to make short term team arrangement to respond to Ofsted recommendations in the short term but action delayed due to KCC response on 31 Oct. Short term actions TBA in November 2013.</p> <p>Currently two KCC team leaders and Assistant TLs in place. One Assistant due to leave in March – agency recruitment underway. Caseloads being reviewed between Service Manager and TLs at least monthly. Recruitment will be an ongoing issue if resignations continue to take place during the transition of the service.</p>
8.6	Re-train all relevant staff on effective assessment and planning referencing best practice (CIC Plan 2.5)	Martin Hazelhurst (NCAS)	Completed	<p>Delivered on 23/24th October at Herne Bay Office.</p> <p>Reflective Impact session(s) booked with Independent Consultant week of 16.12.13.</p>
8.7	Convene meeting with KCC QA lead with regards to the Pathway Planning system, specifically for 18+ care leavers. (CIC Plan 2.6)	Sue Clifton, Catch 22	In progress completion by April 2014	<p>Initial meeting on 18.10.2013</p> <ul style="list-style-type: none"> Action: Paul B, Sue Clifton and Theresa Gallagher (UASC Service Manager) to review the C22 audit format and to merge with the KCC audit format for Care Leavers, with aim of rolling out Jan 14. Paul B to meet with C22 managers in Dec 13 TBC, to explain themed audit process and training available. See also action 1.2 <p>Work is taking place to add a pathway planning section into the QA Online Audit. This has been delayed due to the workload in Communications Team although this work is now being undertaken and should be completed by early April 2014</p> <p>Pathway planning guidance for Practitioners, now on hold until April as advised by Paul Brightwell.</p> <p>On Line Care Leavers Audit tool has been developed with input from</p>

				Catch22 via Paul Brightwell and KCC MIU. The implementation of this has been delayed by Liberi implementation and therefore hard copy audit recording continues.
8.8	Agree good practice model examples for Care Plan/PWP with KCC for managers to use in coaching staff. (CIC Plan 2.7)	Phil Doyle , Catch 22 (in consultation with Paul Brightwell/Sue Clifton/ NCAS)	Completed 18 th October 2013	To be sourced from recent Ofsted Inspection and via C22 Independent QA lead.
8.9	Training all relevant staff re: Permanency Planning and Connected Persons Placement for all C22 Social Workers and Managers. (CIC Plan 2.8)	Lee-Anne Farach, Head of Practice Improvement; Sarah Hammond, AD West Kent	Completed 17 TH September 2013	Incorporated into Practice Improvement Development Programme; further training for care-leaver staff will be reviewed and delivered as part of the CIC/Care leaver service integration. A six month programme of further training is planned for 2014-15.
8.10	Monitor impact of training through supervision and audit feedback. (CIC Plan 2.9)	Sue Clifton, Catch 22	Completed Quarterly monitoring now in place	<ul style="list-style-type: none"> • C22 independent QA lead addressing via further service visits during Nov and Dec 2013. • This is also being addressed through manager/C22/KCC driven audit work. • QA lead undertook pathway plan audits week of 16th Dec, which were circulated Jan 14. 6 audits were completed in February by team managers and Operations Manager resulting in 34 to date (Oct13-Feb14) • 4 managers and 1 social worker have been observed in supervision by Intrac. 4 other supervision observations have taken place by managers with assistant team leaders and staff.
8.11	Ensure that actions relating to Care/Pathway Planning training above incorporate the voice of the child as a key dimension. (CIC Plan 3.11)	Phil Doyle, Catch 22	Completed	See also actions 2.5 and 2.9
8.12	C22 to enhance recording and monitoring system of care leavers' involvement in pathway plans (PWPs) with IRO service lead. Develop a QA for care leavers in line with IRO QA for Children in Care. (CIC Plan 3.12)	Phil Doyle, Catch 22	Completed	<ul style="list-style-type: none"> • Linked to Actions/issues outlined in 1.2 above • Information collected in new KCC audit tool covers this requirement going forward from Feb 14, hard copy being used until available. • New QA tool is being developed by KCC and Catch22 16plus

				together, which will monitor care leavers involvement in their pathway plans. Plans to incorporate this into the auditing tool have been delayed due to agreement of QA standards in line with the Charter not yet being reached.
8.13	Ensure all service delivery changes are discussed directly with young people and these discussions are recorded on their case file. (CIC Plan 3.13)	Sue Clifton, Catch 22	Completed	Practice on this discussed and agreed with all managers at a meeting on 17 th October 2013, to implement practice changes going forward i.e. all individual service changes to be discussed with YP via SW's/Case workers and file records updated accordingly. Implementation monitored via supervision and auditing programme moving forward.
8.14	Monitor the engagement and involvement of children and young people in Care Planning and service delivery through supervision of casework (CIC Plan 3.14)	Sue Clifton, Catch 22	Completed – routine monitoring	Monitored via supervision of casework ongoing. Team progress checked via auditing programme. Supervision monitoring and manager reviews demonstrate that YP are involved in decisions about their care plan and service delivery e.g. where YP have been involved in Monthly Action Groups it is recorded on YP case files as is other involvement.
8.15	Ensure 6 monthly questionnaires are sent to all Catch22 YP. YP's action group to monitor responses and suggest actions to management team (CIC Plan 3.15)	Phil Doyle, Catch 22	Completed – routine monitoring	Last questionnaire circulated Feb 13 next 6 monthly questionnaire sent out 21.10.13. Responses to be discussed at appropriate management team meetings and recorded in minutes.
8.16	Establish effective communications between the Children in Care Council, Kent Cares Town and C22 Young People's Action Group to increase YP's opportunities for participation and impact (CIC Plan 5.6)	Sue Clifton, Catch 22, Sarah Skinner, VSK Business Manager	Completed November 2013	http://kentcares town.lea.kent.sch.uk/leaving-care-and-transferring-to-16 Information on leaving care and transferring to the 16+ service is available now on the Kent Cares Town website. Care Leavers are now better represented on the OCYPC (Care Council), particularly through the Participation Apprentices. OCYPC views are shared with the Kent Corporate Parenting Group (KCPG: Officer-led); and Council staff routinely join Activity Days. Two of the three VSK Participation Apprentices are care-leavers. http://kentcares town.lea.kent.sch.uk/our-children-and-young-people-s-council It was discussed at KCPG that there should be a joint meeting of the

				Group and Corporate Parenting Panel that Care Leavers will attend. Sarah Skinner and Sue Clifton (Catch 22) are working closely to identify a suitable date for this to happen.
8.17	Review of 16plus services. (CIC Plan 7.1)	Sue Mullin, Commissioning Manager Sarah Hammond, AD West Kent	Initial report to Corporate Board 21 st October 2013. Implementation of an integrated CIC/ Leaving Care service due October 2014.	 <p>Final Performance Improvement Plan 16</p> <ul style="list-style-type: none"> Attached action plan from Catch22 detailing the response to the full Ofsted recommendations. Increased investment (£40,000) into the care leaver's element of the Catch22 contract – resulting in increased staffing and all Care Leavers with up to date pathway plans. <p>As part of the transformation agenda, Kent County Council are changing the way services for young people aged 16 plus are designed and delivered. A work programme has been developed under the Children's Social Care Transformation work stream which is to deliver the following:</p> <ul style="list-style-type: none"> A Children in Care Service which is integrated (i.e. provides a service for both indigenous and asylum seeking children aged 0 – 18 years) An 18+ Leaving Care Service which integrates indigenous and asylum seeking services Sufficient and suitable accommodation and support under Other Arrangements. <p>A report detailing progress of this work, with specific regard to supported lodging accommodation arrangements will be presented to the Children's Social Care and Health Cabinet Committee 9th July 2014.</p>
8.18	Catch22 to review caseloads and present findings to KCC at October performance meeting ensuring sufficiency of support for all young people and management oversight. (CIC Plan 7.2)	Phil Doyle, Catch 22	Completed October 2013	Proposal sent to KCC for discussion at Contract meeting on 31.10.13. KCC response was to delay due to changes in commissioning approach. C22 to undertake an interim solution asap to increase management and case management capacity where possible. No new posts to be secured through this process.

				Following agreement from KCC to progress short-term contract appointments 4 temporary case workers have been interviewed and appointed due to commence employment April. 3 new social workers appointed following recent recruitment campaign. 1 vacancy covered by agency social worker. This will result in new appointments plus agency worker bringing service back to agreed social worker level. Recruitment will be an ongoing challenge if resignations continue with social workers leaving to gain the £3k market premium with KCC rather than TUPE without this benefit.
8.19	Continue to implement agreed staffing adjustments with regards to meeting Reg. 8 and report on progress. (CIC Plan 7.3)	Sue Clifton, Catch 22	Completed September 2013	New staff secured and in post
8.20	Review sufficiency strategy to ensure that it is meeting the needs of Care Leavers fully. (CIC Plan 8.1)	Sue Mullin, Commissioning Manager.	Completed.	Draft Sufficiency Strategy Action Plan was discussed at the Children in Care meeting September 10 th 2013. Amendments were agreed by the Board, final strategy and progress to be agreed and monitored at the November 2013 meeting.
8.21	In individual practice with care leavers – ensure Personal Adviser visits young person within 7 days of moving to new accommodation and liaise closely with the young person and their housing support worker to identify and resolve any problems. (CIC Plan 8.2)	Catch 22, SUASC and CDS.	Completed.	In addition – as a response to the Sufficiency Strategy action plan, scoping work now underway to strengthen Kent’s response to 16-24 sufficiency and suitability of accommodation. Attached is the initial scoping document with timeframes.  16 - 24 Needs and Rec Scoping.docx A report on the Sufficiency Strategy is due to be presented to the Children’s Social Care Cabinet Committee 9 th July 2014.
8.22	Assess all B&B to ensure that it provides safe care. (CIC Plan 8.3)	Catch 22, SUASC and CDS.	Completed.	Catch22 have reported that all B&B accommodation where young people were currently placed had been reviewed. And no further placements will be made in B&B accommodation by KCC.
8.23	All YP in B&B visited and YP Risk Assessments updated and suitable accommodation plan developed. (CIC Plan 8.4)	Sue Clifton	Completed August 2013	All B&B placements risk assessed and copies of those assessments requested by KCC for review. No BB placements for under 18 year olds made since July 13, as

				reported to Sarah Hammond in Dec. B&B post 18 years being closely monitored via Contract Management meetings and is new KPI for C22 to report on.
8.24	Establish joint protocol with KCC with regards to the circumstances under which B&B is accessed, (to include alert protocol for transfers made into 16+ where young person already in B&B). (CIC Plan 8.5)	Phil Doyle, Catch 22	Completed November 2013	Emergency Placements Protocol discussed at Contract meeting 31.11.13.
8.25	Identify in consultation with KCC suitable enhanced B&B that can be converted into Supported Lodgings (SL) and make transfers. (CIC Plan 8.6)	Sue Clifton, Catch 22	Completed November 2013	Discussions have taken place with providers - plans in place to transfer 2 enhanced B&B to supported lodgings. 1 transferred on 31.10.13. From the 2 18+ placements in B&B that Catch22 inherited, neither are suitable to be converted into Supported lodgings. 1 new private provider of supported accommodation approved and now being used.
8.26	Placements in B&B to be continued to be reported on and monitored by KCC via Contract Performance meetings. (Including length of stay.) (CIC Plan 8.7)	Phil Doyle, Catch 22	Completed In place	Data reporting requirements in place. Since 1.10.13 - 3 new placements of young people 18plus in bed and breakfast. All 3 placements have been made by local councils. Full details and risk assessments has been prepared and presented to KCC Commissioners for February 14 contract meeting, Verbal update also given by Operations Manager.
8.27	Scoping document - produced setting out issues and actions needed. (CIC Plan 11.1)	Sue Mullin, Commissioning Manager.	Paper to Corporate Board 21 st October.	Further actions to be put in place following recommendations of the scoping report.
8.28	Increase opportunities for work experience / apprenticeships throughout the whole local Authority and partner agencies	Tony Doran	Completed In place	VSK has recruited three Participation Apprentices. They have had significant involvement There are plans in plan to recruit further apprentices.

Leadership/Management and Governance

Priority Area 9: Leadership/Management and Governance

9.1	Recruitment and retention of SWs and IROs	Karen Ray- HR Business Partner for Social Care/ Mairead MacNeil, Director of SCS	Reviewed every two months at CSIP	The Children's Services Improvement Panel receives regular updates on the progress made with recruitment and retention. A report was also submitted to the Kent Integrated Children's Services Board (KICSB)- statutory DCS role 26.06.2014
9.2	Corporate Parenting Boards	Paul Brightwell, Head of Quality Assurance and Mairead MacNeil, Director of SCS	Completed In place	Minutes of the KCPG have been shared with the Corporate Parenting Panel since April 2014. This has helped to ensure a shared agenda of key priorities, and create a more consistent dialogue between them multi-agency officer led Board and the Formal Member Scrutiny Panel.
9.3	Quality Assurance	Paul Brightwell, Head of Quality Assurance	Action closed, please see actions to the right:	Various actions are in place, which are detailed throughout the Action Plan. See 1.1; 1.2; 1.5; 1.7; 1.10; 1.11; 2.1; 2.10; 3.1; 3.7; 3.9; 4.1; 5.4; 6.7; 7.3; 7.49; 7.75; 8.1; 8.2; and 8.9
9.4	Practice Improvement	Lee-Anne Farach, Head of Practice Improvement	Review November 2014	A permanent Head of Practice Improvement moved into post March 2014. Two Principal Practitioners have been in post since November 2014. Both Principal Practitioners have made significant contact, and have a strong presence in the Districts via 1:2:1s, coaching and development sessions.

The effectiveness of the Local Safeguarding Children's Board

Priority Area 10: The effectiveness of the Local Safeguarding Children's Board				
10.1	Effectiveness of KSCB	Mark Janaway, Business Manager for KSCB	July 2014	<p>KSCB have developed an action plan, and a series of strategic priorities which have in turn has shaped a Business Plan of actions for the 2014-15 year ahead.</p> <p>The KSCB Annual Report has been circulated for comment ("3.06.2014) and is due for formal sign off in July 2014.</p> <p>Work is underway to ensure a closer coherence and alignment between the strategic priorities of the KSCB and the JSNA.</p> <p>A multi-agency LSCB Ofsted Preparation workshop is taking place 11th July 2014.</p>