

Safeguarding & LAC Inspection Action Plan

(progress as at 22nd October 2012)

<u>Safeguarding</u>

| Area for Improvement | Action | Lead | Timescale | Outcome/ Measure | Progress note / Evidence | Reported to |
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| 1. Strengthen the management oversight and monitoring of children in need plans to ensure outcomes are achieved and monitored in a timely manner. | 1.1. Review all CiN plans held in the PLO or Care Management team over 6 months duration. | Heather Flinders | 31/10/2012 | All plans reviewed. Feedback on required actions to individual social workers. | Underway | LSCB Exec |
| | 1.2. Informed by the outcome of the review above, develop a process whereby CiN plans are robustly reviewed (similar to Permanence Panel). | Heather Flinders | 31/10/2012 | New review/monitorin g system in place. | Underway | LSCB Exec |
| 2. Ensure that chronologies are effectively used to inform assessments, particularly in longer term work, and especially in cases of neglect, to avoid drift | 2.1. ICS board action re chronology - DM to confirm. | Sue Williams | 31/10/2012 | All cases have a chronology completed. | Evidence not yet reported | LSCB Exec |
| where evidence of families achieving improving outcomes is not apparent. | 2.2. IROs to monitor all new cases coming to CP conferences and LAC reviews have chronologies. To be reported in Principal IRO report to DCS. | Maria Gilbert | 31/10/2012 | Reports to DCS show increase in number of cases with chronologies in place. | Evidence not yet reported | LSCB Exec |

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| | 2.3. CiN cases monitored through 1.2 above. | | | All cases have a chronology completed. | | LSCB Exec |
| 3. Develop a coordinated approach to using the experiences of children in need and children involved in child protection processes to measure progress against stated objective. | 3.1. Review the current LAC Participation survey and extend to include some children in need and those subject to a CP plan. | Darren McAughtrie | 31/10/2012 | Revised survey in place with timeline for next distribution. | Completed | LSCB Exec |
| | 3.2. Develop an online satisfaction survey (one for parents and one for CYP) for cases at the point of closure to specialist services with an annual report to inform the service planning cycle. | Darren McAughtrie | 31/10/2012 | Survey developed and in place for roll out. | Completed | LSCB Exec |
| | 3.3. Trial the service user feedback in the appraisal process for the 12/13 appraisal reviews within specialist services. | Darren McAughtrie | 31/10/2012 | Trial complete to inform full roll out. | Underway | LSCB Exec |
| | 3.4. Roll out the service user feedback in the appraisal process for all front line staff appraisals for year end 2012/12. | Darren McAughtrie | 31/02/2013 | Service user feedback included in all front line staff appraisals. | Not yet due | LSCB Exec |

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| 4. Ensure that the frequency of staff supervision records complies with the Council's own guidance and that supervision records contain | 4.1. Develop supervision (including formal and ad hoc) guidance/helpful hint sheet for managers and staff based on the RiP tools. | Ruth Baker | 31/03/2013 | Guidance developed and distributed | Underway | LSCB Exec |
| sufficient detailed case discussions. | 4.2. Service and Group managers to undertake observations of supervisions in line with the QA strategy. | Sue Williams | 31/10/2012 | All front line managers have been observed in supervision | Evidence not yet reported | LSCB Exec |
| | 4.3. Manager to make use of rooms other than their office or away from the team room for supervision. | All managers | 31/08/2012 | Staff have uninterrupted supervision | Completed | LSCB Exec |
| 5. NHS South Essex and Southend-on-Sea Borough Council to ensure that safeguarding referrers consistently receive feedback on the status of their referral in line with the agreed standard. | 5.1. Adapt the CareFirst referral screens to capture the response to referrers. | Mark Churchill | 31/08/2012 | Response to referrers recorded on CareFirst | Evidence not yet reported | LSCB Exec |
| | 5.2. Responses to referrers monitored through Report Manager by Service Manager First Contact . | Hilary Turner | 31/10/2012 | Managers assured that all referrers are responded to | Underway | LSCB Exec |
| | 5.3. Monitor response to referrers through the LSCB audit programme. | Helen Wilson | On-going | Evidence of all refers being responded to | Underway | LSCB Exec |

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| 6. NHS South Essex and South Essex partnership trust to ensure that all transitions for young people with learning disabilities and/or mental health conditions are smooth and meet individual's needs. | Detailed plan for this action being developed by NHS South Essex | Sharon Connell | 6 months | | Not yet due | LSCB Exec |
| 7. Southend University Hospital Trust and NHS South Essex should ensure that the children and young people's emergency department provision is safe, audio-visually separate, and fit for purpose. | SUHT to put in place a plan to ensure the children and young people's emergency department provision complies with standards. | Gina Quantrill | 6 months | Development plan in place | Underway | LSCB Exec |

Looked After Children

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| 1. Ensure that all cases of children who are looked after under section 20 of the Children Act 1989 have up to date records including chronologies, core assessments and care plans which clearly identify the outcomes to be achieved, actions to be taken and timescales. | 1.1. Review all section 20 cases. | Heather Flinders | 31/07/2012 | All cases reviewed with an individual action plan for each SW. | Completed | Success for All Children Group |
| | 1.2. Section 20 cases to be monitored through the permanency panel following the second LAC review. | Maria Gilbert | 31/08/2012 | All S20 cases reviewed at permanency panel have chronologies, assessments and SMART plans. | Evidence not yet reported | Success for All Children Group |
| | 1.3. All fieldwork SW reminded in team meetings of the need to ensure all children plans are SMART and clearly identify the outcomes. | Ruth Baker | 31/08/2012 | All plans signed off by team managers clearly identify the outcomes to be achieved. | Completed | Success for All Children Group |
| 2. Ensure that all the statutory requirements contained within the IRO's handbook are implemented so that, in particular, looked | 2.1. Development session with IROs to ensure guidance is clear on accountability for monitoring of plans between reviews. | Maria Gilbert | 31/12/2012 | All LAC plans are monitored by IROs between reviews. | Evidence not yet reported | Success for All Children Group |
| after children and young people's plans continue to progress between their reviews, and the service undertakes its quality assurance role | 2.2. Responsibility for the Specialist Services audit programme to be allocated to Group Manager Specialist resources & Quality Assurance | Heather Flinders | 31/07/2012 | IRO service undertaking the quality assurance role | Completed | Success for All Children Group |

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| 3. Ensure the needs and views of care leavers are fully taken into account in terms of the | 3.1. Care leavers to be included in the revised annual participation survey. | Darren McAughtrie | 31/10/2012 | Revised survey in place with timeline for next distribution. | Completed | Success for All Children Group |
| services provided for them and that service planning also takes account of these issues. | 3.2. Care leavers are offered the opportunity to complete the satisfaction questionnaire at the point of case closure. | Darren McAughtrie | 31/10/2012 | Survey developed and in place for roll out. | Underway | Success for All Children Group |
| | 3.3. Feedback from previous 2 actions is available for service planning. | Darren McAughtrie | On-going | Service planning takes into account the views of service users. | Not yet due | Success for All Children Group |
| 4. Ensure that looked after children and care leavers are able to contribute to the training and | 4.1. Present the guide to involving children and young people in recruitment to extended SSMG | Darren McAughtrie | 31/10/2012 | All manager aware of the guidance. | Completed | Success for All Children Group |
| recruitment of staff. | 4.2. All recruitment requests questioned whether young people will be involved in the recruitment process. | Relevant HoS | 31/07/2012 | Increase in young people involvement in recruitment | Underway | Success for All Children Group |
| | 4.3. To investigate commissioning Total Respect Training for Southend | Darren McAughtrie | 31/12/12 | Decision made whether to commission Total Respect Training | Underway | Success for All Children Group |
| 5. Ensure that all looked after children and care leavers benefit from records which include up to date chronologies, thorough assessments and care | Actions in 1.1 - 1.3 | | | | Completed | Success for All Children Group |

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| plans, and that this is regularly checked to ensure standards are maintained. | | | | | | |
| 6. The Council ensure that the Pledge is embedded in its work and is understood and valued by all making a daily difference to the lives of looked after children and those who work with them. | 6.1. Voice for All to review the Pledge and identify ways in which it should be monitored & publicised to all children | Lucy Bissell | 31/10/2012 | Increased awareness of the Pledge amongst all LAC. | Underway | Success for All Children Group |
| | 6.2 Report to Corporate Parenting on the monitoring of the Pledge | Sue Williams | 31/10/2012 | Corporate Parenting Group fully informed of the impact of the Pledge on children and young people. | Evidence not yet reported | Success for All Children Group |
| 7. Implement the revised terms of reference for the corporate parenting meeting and | 7.1. Head of Specialist Services to assume Chair of Corporate Parenting Group. | Heather Flinders | 31/07/2012 | Chairing arrangements revised. | Completed | Success for All Children Group |
| ensure that the meeting is attended by senior officers from all | 7.2. Revised terms of reference to be approved by the Group . | Heather Flinders | 31/07/2012 | Terms of reference agreed and understood. | Completed | Success for All Children Group |
| agencies and that they are held to account as corporate parents for the services to looked after children and care leavers and the implementation of the looked after children | 7.3. Establish a Members sub group. | Heather Flinders | 31/07/2012 | Increased awareness, understanding and ownership of corporate parenting across a wider number of Members. | Completed | Success for All Children Group |
| and care leavers strategy. | 7.4. Review the group membership. | Heather Flinders | 31/10/2012 | Increased seniority of group members with decision making | Completed | Success for All Children Group |

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| | | | | authorisation. | | |
| | 7.5. Forward plan for the group to be driven by the LAC strategy & priorities | Heather Flinders | 31/10/2012 | LAC Strategy is monitored by the Corporate Parenting Group. | Completed | Success for All Children Group |
| 8. Ensure the role of the virtual head teacher is understood by all schools, looked after children and foster | 8.1. Implement a strategy to raise the profile of the Virtual Head Teacher and improve communication about the Virtual School. | Jane Theadom | 31/10/2012 | Strategy implemented. | Completed | Success for All Children Group |
| carers and that the virtual head teacher gives robust challenge in order to further raise the attainment of all looked after children. | 8.2. Include the Virtual Head in the network of Head Teachers across the borough. | Jane Theadom | 31/10/2012 | Virtual Head included in the Heads network. | Completed | Success for All Children Group |
| 9. Ensure all those involved in PEPs have a full understanding of their role and take responsibility for ensuring targets are suitably challenging so that all looked after children make good progress from their starting points. | 9.1. Refresh the expectation for the writing of high quality PEPs with designated teachers and social workers. | Sarah Beales | 31/10/2012 | All PEPs contain suitably challenging targets. | Completed | Success for All Children Group |
| 10. NHS South Essex should ensure that the outcomes of the Strength and | 10.1. Ensure copies of SDQs are provided to SEPT with all requests for review health assessments. | Ruth Baker | 31/07/2012 | SDQ outcomes are available for consideration as part of review | Completed | Success for All Children Group |

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| Difficulties Questionnaires are used in the looked after children health | | | | health assessments. | | |
| assessment process. | 10.2. Staff undertaking review health assessments to be trained in understanding the SDQ questionnaire and outcomes. | Diana Cattermole | 31/10/2012 | Staff undertaking review health assessments understand the SDQ and can use this within their assessment. | Underway | Success for All Children Group |
| 11. Southend on Sea Borough Council and NHS South Essex should ensure that care leavers receive a full copy of their health histories. | 11.1. Develop a Heath Passport | Sarah St Pierre | 31/10/2012 | Health histories are available in a suitable format for care leavers. | Underway | Success for All Children Group |
| | 11.2. IROs to monitor whether health passports have been made available at the review prior to young people leaving care. | Maria Gilbert | 31/10/2012 | All care leavers have copies of their health histories when leaving care. | Evidence not yet reported | Success for All Children Group |
| 12. The NHS South Essex should ensure that the provider arrangements (including contingency arrangements) for undertaking initial health assessments for children who become looked after, including those placed by other Councils, address the demand so that | 12.1. Health assessments are undertaken by Paediatricians from Southend University Hospital Trust. (SUHT) Contingency plan currently being formulated with GP's with Special Interest to undertake Initial Health Assessments if Hospital unable to appoint within timeframe. | Joy Edwards | 31/12/12 | Contingency plan in place. | Completed | Success for All Children Group |

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| timescales are met. Southend on sea Borough Council should ensure that appropriate consent is secured for all its looked after children | 12.2. Review the process for GM Specialist Resources & QA giving consent for health assessments after 2 unsuccessful attempts to get parents' consent. | Heather Flinders | 31/10/2012 | Process reviewed, all new entrants to care have swift consent for a health assessment. | Completed | Success for All Children Group |