

Brent Children and Families Department

Action Plan in response to the Ofsted/Care Quality Commission Safeguarding and Looked after Children Inspection

This action plan has been produced as a response to the recommendations made as a result of the safeguarding and looked after children inspection, which took place 3-14 October 2011 and resulted in the report of 18 November 2011. It covers recommendations which are the responsibility of the local authority, as well as those which need to be followed up by the local authority together with its partners. In order to make a comprehensive response to the inspection and further improve outcomes for children and young people, this plan additionally picks up comments made by Ofsted within the text of the final report, which were not highlighted as recommendations. These additional areas for development follow the recommendations for Safeguarding, or for Looked after Children, respectively. As the plan follows the format of the Ofsted inspections, the recommendations and actions required cover all aspects of the work, from management and leadership to front-line practice.

This plan has been prepared in conjunction with the Health Action Plan which has been developed by Brent Primary Care Trust and is reported (and monitored) on a monthly basis by the Care Quality Commission. The Children and Families Plan complements the actions within that plan.

The plan has benefitted from input and quality assurance from London Safeguarding Advisors and the Local Government Improvement and Development Agency.

This action plan will be implemented alongside individual service improvement plans already in development, representing the ambition of the council and its partners to make a positive difference for children in need of safeguarding or who are in the care of Brent Council.

Monitoring, Accountability and Scrutiny arrangements:

This inspection action plan and the wider service improvement plan contain SMART objectives, with detailed actions to be carried out.

The monitoring arrangements for the plan are as follows:

1. Monthly monitoring of the action plan involving Health and Social Care colleagues chaired by the Director of Children's Services.
2. Local Safeguarding Board on a bi-monthly basis.
3. Brent Children's Partnership on a quarterly basis
4. Multi- agency child protection meeting on a quarterly basis
5. Children and Families Departmental Management team on a monthly basis.

6. Children and Families Scrutiny Committee and Corporate Parenting and Safeguarding group.
7. The Lead Member for Children and Families will have a key role in the monitoring of progress.

There are two key mechanisms for monitoring progress:

1. The Action Plan will be updated on a monthly basis and provide evidence of progress against identified actions and compliance with timescales. This will form the basis of the regular monitoring.
2. A quarterly data set and report will be prepared by the Assistant Director, Children’s Social Care, which will summarise progress and evidence how the identified actions are improving services and the difference they are making to children and their families in Brent. This will be submitted to groups identified above and form the basis of the quarterly programme of review.
3. Any concerns arising from the monitoring programmes will be conveyed directly to the Director of Children and Families.

Finally, the Department will seek external challenge of the progress against the plan in June 2012 through the Local Government Improvement and Development Agency and the intention is to arrange a process of peer challenge or review in December 2012 to assess progress against the findings of the SLAC Inspection report.


NB: A glossary of all acronyms used within this plan is included at the end of the document.

Nb. Where there are multiple leads identified, the responsible lead officer is underlined.

1. Safeguarding Recommendations:



Recommendations: Safeguarding					RAG
1. Ofsted Recommendation	Ensure that timely, supportive and reflective supervision is provided for social care staff by managers and that this is recorded promptly and to a high standard.				
Timescale: Immediate					
Required Outcome	Actions	Lead	By when/Accountable to	Evidence of progress January 2012	

<p>Staff at all levels receive regular, high quality supervision, which encompasses both performance management and reflective supervision.</p> <p>Supervision enables reflective, child focussed practice, in line with the Munroe Review of Child Protection</p> <p>All social workers will have a fully completed personal supervision file to capture casework as well as personal and professional development</p> <p>Supervision notes to demonstrate timely plans and impact</p>	<p>1. Review of all supervision materials to be conducted by external consultant working together with managers, to ensure supervision is delivered in line with best practice elsewhere and that this can be evidenced.</p>	<p>Head of Localities and Disabled Children/Head of Care Planning</p>	<p>Policy to be completed by end April 2012.</p>	<p>External consultant engaged. Focus group with managers 19.1.12.</p> <p>5 sessions for each supervisor in group sessions focusing on every aspect of supervision commencing April 12..</p> <p>Policy to be completed following training programme</p>	
	<p>2. Intensive coaching workshops for managers across children’s social care, to deliver improved expertise in supervision, including reflective supervision, and in doing so enable managers to lift the quality of practice across the service.</p>		<p>February – March 2012</p>	<p>Funding secured through Local Government Improvement and Development Agency and work programme submitted.</p> <p>Programme of supervision support starting April 2012.</p>	
<p>2. Ofsted Recommendation</p> <p>Timescale: Immediate</p>	<p>Ensure that supervision files are subject to a regular system of audit and review by senior managers</p>				
<p>Required Outcome</p>	<p>Actions</p>	<p>Lead</p>	<p>By when/Accountable</p>	<p>Evidence of progress January 2012</p>	

			to		
Managers are confident that supervision is being delivered in line with departmental policy; audit feedback demonstrates significant improvements in frequency and quality.	1. Evidence of both compliance with and impact of improved approach to supervision to be evidenced through regular audit.	Head of Localities and Disabled Children/Head of Care Planning	March 12. Audit outcome will be included in post-inspection action plan quarterly report to Departmental Management Team and Local Safeguarding Children Board	Summary report due April 2012	
	2. Conduct staff survey to gain feedback on impact of new supervision system		September 2012		
3. Ofsted Recommendation: Timescale: Within 3 months (end February 2012)	Fully implement a system of qualitative as well as quantitative performance management which links to the auditing processes				
Required Outcome	Actions	Lead	By when/Accountable to	Evidence of progress January 2012	
Service improvements are informed by learning from qualitative and quantitative measurements.	1. Develop a quality management framework aimed at delivering continuous improvement, which captures quantitative and qualitative data.	Head of Safeguarding	March 2012 – sign-off by DMT and LSCB	January 12 - Draft QMF produced, plans for overarching audit system being developed.  QAF 29.2.12 DRAFT.docx Will be launched 1 March 2012	

	2. Provide quarterly QMF reports which evidence how service improvements are informed by the qualitative and quantitative information collected.	Head of Safeguarding / Head of Policy and Performance	June 2012 to be included within quarterly post-inspection action plan report to DMT and LSCB		
4. Ofsted Recommendation:	Develop effective systems for obtaining and aggregating service user views, to include key themes from complaints and advocacy services, with the purpose of informing service improvement and development.				
Timescale: Within 3 months (end February 2012)					
Required Outcome	Actions	Lead	By when/Accountable to	Evidence of progress January 2012	
An overarching framework for consulting with service users is in place and having a positive impact on service delivery. There is documentary evidence of meaningful consultation.	1. Develop range of methods for consultation with service users throughout the service, including qualitative and quantitative methods through the use of questionnaires, e-mail and text messaging, surveys, telephone interviews and focus groups. Methods to be informed through consultation with Brent Consultation Team and Complaints Team; and from best practice elsewhere.	Head of Localities and Disabled Children	Overarching system to be signed off by DMT, and in place and fully operational by June 2012.	Social work students complete a minimum of 5 focused interviews with Children/Parents in Child protection. London Regional Safeguarding Advisor is providing good practice examples from across London. Draft questionnaire has been devised and will be used to consult with families in May 2012. Results will be evaluated by end June 2012)	

The views of children, young people, parents and carers inform service improvement.	2. Further strengthen systems so that feedback from the views of children and young people, and parents and carers, including the outcomes of complaints, inform service improvement and this can be evidenced.	DMT, SCMT , Complaints Manager	Review by Complaints Manager and SCMT – April 2012.	Quarterly children social care analysis received. Service user views strategy in development (meeting March 12).	
	3. DMT and LSCB to scrutinise outcomes of feedback and complaints, and ensure actions are taken to improve services accordingly.	DMT, LSCB	Annual report to DMT and LSCB-July 12		
5. Ofsted Recommendation: Timescale: Within 3 months (end February 2012)	Ensure that the quality of child in need and child protection plans is improved so that timely, measurable and achievable outcomes for safeguarding are clear and effective.				
Required Outcome	Actions	Lead	By when/Accountable to	Evidence of progress January 2012	
Social work reports to child protection conference are of a high standard, and	1. Improve the quality of child protection and child in need plans through the following actions: a. Training on analysis of risk for	Head of safeguarding Head of	Progress report on all actions below to LSCB for scrutiny April 2012.	a. Signs of Safety training held Nov/Dec 11	

<p>will reflect the individual needs and diversity of children and their families within the primary objectives of the plan.</p> <p>Child protection plans will be SMART</p> <p>Child protection concerns will be addressed in a timely manner through the child protection conference system.</p> <p>Children in need receive a high quality service, and SMART plans with clear objectives and timescales are in place</p>	<p>social workers</p> <p>b. Multi-agency training to improve contribution of all agencies to child protection planning</p> <p>c. Together with London Councils, developing more focused set of child protection documentation templates</p> <p>d. Strengthening the quality assurance role of Child Protection Advisers through use of the Alert system, and through audit</p> <p>e. Multi-agency training on new Child In Need policy, including strengthening the role of the Team Around a Child (TAC)</p> <p>f. Improving management overview of child in need cases to ensure timely progress to meeting agreed objectives.</p>	<p>Localities and Disabled Children</p>		<p>b. Multi agency training to be commissioned via the LSCB. Completed but profile needs to be raised through the LSCB</p>	
				<p>C. workshop for social workers took place 29 February re SMART child protection plans.</p> <p>JB audits a sample of 6 child protection plans monthly. (audits have been done and shared with chairs.</p> <p> CP Plan Audit template.docx</p> <p>Template attached) Principal CPA monitors child protection plans from CPAs</p>	
				<p>d. System for ongoing audit of cases with CP plan for more than 18 months now embedded.</p> <p> CP Plans greater than 18 months 09.0:</p> <p>Alert system usage reinforced. Business case submitted to employ another CPA to bring total to 3 CPAs and a Principal. A full QA role is not possible with the current establishment.</p>	
				<p>e. 2 multi-agency workshops held January 2012.</p>	

				F . audit of CIN plans 28 th February Audit completed, report will be available to insert W/C 26.03.12	
6. Ofsted Recommendation:	The LSCB to ensure that thresholds and 'step up, step down' processes are fully understood and effectively shared across agencies in relation to children who no longer require a child protection plan.				
Timescale: Within 3 months (end February 2012)					
Required Outcome	Actions	Lead	By when/Accountable to	Evidence of progress January 2012	

<p>Managers and staff are able to focus their work on children who meet Brent's levels of need.</p> <p>Child protection plans are appropriately stepped down when indication that risk of significant harm has diminished</p>	<p>1. All families will receive the appropriate level of intervention, through the following actions:</p> <ul style="list-style-type: none"> a. Assessment of whether cases receiving appropriate level through audit b. Benchmarking of thresholds across London c. Ensure thresholds are understood across partnership d. Pilot multi-agency consultation system by Child Protection Advisers e. Strengthen screening of new work through Locality Duty systems f. Strengthen links with early help services to improve signposting g. Strengthen overview of child in need cases to ensure timely progress to meeting agreed objectives. 	<p>LSCB/Head of Safeguarding</p>	<p>Multi-agency progress report on all actions below to be scrutinised by DCS on monthly basis, and through High-Level Child Protection meeting. Report to LSCB June 2012.</p>	<p>A &C. LSCB thresholds group to sample audit 6 cases on multi-agency basis at 6-monthly intervals – starting end January 2012.</p> <p>Meeting occurred 30.01.12 JB to insert report/record of mtg</p>	
				<p>A&c. First 6-monthly LSCB thresholds meeting, led by Head of Safeguarding, January 2012. Thresholds reinforced through locality practitioner forums, CIN workshops, joint operational CP meetings.</p>	

				d. To commence April 12 when fully staffed.	
				e. Series of multi agency workshops to review threshold for referral to social care	
				f. Early support and CAF co-ordinator in post and review of step-up/step-down in process. Audit of CIN cases by regional safeguarding manager complete and recommendations to be implemented.	
				g. New, robust CIN policy launched December 2011 through multi-agency workshops. Audit of CIN 28 th Feb 2012	
7. Ofsted Recommendation: Timescale: Within 3 months (end February 2012).	Brent children's social care services, NHS Brent and Ealing Hospital NHS Trust to put in place consistent and effective arrangements to ensure the prompt sharing of information about children subject to child protection plans and children who are looked after. <i>NB: Recommendation also covered within Health Action Plan. The actions below are to be carried out in partnership, and complement the actions within the Health Action Plan.</i>				
Required Outcome	Actions	Lead	By when/Accountability	Evidence of progress January 2012	
Health partners in child protection have ready access to list of children who are subjects of child protection plans, Supervision Orders, Interim/Care Orders and placed with parents.	1. Establish of joint ICO/LA 'task and finish' group to review information exchange issues and improve process	Assistant Director Social Care; Community Services Director, Brent	Task and finish group to report February 2012. Report to DMT and to LSCB to confirm all arrangements have been put in place – April 12.	Immediate check showed that key providers receive updated information about child protection plans. Designated health staff identifying whether spread of information should be expanded.	

<p>8. Ofsted Recommendation:</p> <p>Timescale: Within 3 months (end February 2012)</p>	<p>Brent's children's social care services, NHS Brent and Ealing Hospital NHS Trust to ensure that disabled children and young people and their parents/carers are actively engaged in the quality assurance and development of services.</p> <p><i>NB: Recommendation also covered within Health Action Plan. The actions below are to be carried out in partnership, and complement the actions within the Health Action Plan.</i></p>				
Required Outcome	Actions	Lead	By when/Accountable to:	Evidence of progress January 2012	
<p>Disabled children, young people and their parents and carers are able to comment on service quality and to contribute to service development.</p>	<p>1. Ensure children, young people and their parents/carers are kept informed of any proposed changes to services which may affect them, and that their views are taken into consideration.</p>	<p>Head of Localities and Disabled Children/Head of Transitions Team, Adult Social Care</p>	<p>Immediate and ongoing. Communication will take place as part of the 2 One Council projects: Transitions into Adult Life, and Children with Disabilities 0-13 project – outcome to be reported to Programme Board April 2012.</p>	<p>Consultation with disabled children/parents regarding a. transition team, completed and b. service transformation, arranged for April 2012. Disabled children/Parents to be included in CIN survey planned for April/May 2012. Quarterly consultation meetings take place between HOS/PO and One Voice.</p>	


9. Ofsted Recommendation: Timescale: Within 6 months (end May 2012)	Brent children and families' directorate and Brent children's partnership to strengthen the coordination and integration of strategic plans, underpinning them by appropriate performance management arrangements to monitor and drive improvement				
Required Outcome	Actions	Lead	By when	Evidence of progress January 2012	
<p>A 'golden thread' will link partnership and corporate strategic priorities with all service improvement plans.</p> <p>All plans will be SMART and will establish challenging targets which can be tracked and evidenced.</p> <p>Qualitative measures will be integrated into plans to ensure that service development leads to improved outcomes for children,</p>	<p>1. Consultation processes in the development of strategic plans will be strengthened to ensure that strategic priorities reflect practice and service-user priorities.</p>	<p>Director of Children and Families</p> <p>Director of Strategy, Partnerships and Improvement</p> <p>LSCB Independent chair</p>	<p>To feed in to consultation prior to review of Children and Young People's Plan 2012</p> <p>To feed in to LSCB Annual Review 2011 and Business Plan 2012</p> <p>Scrutiny of actions within this recommendation will be undertaken through the Chief Executive's quarterly multi-agency child protection meetings; and by the members' Corporate Parenting</p>	<p>Links made between this plan and update of CYPP, which will be finalised April 2012.</p>	

<p>young people and their families.</p>			<p>and Safeguarding Board.</p>		
	<p>2. Linkages between Brent Children's Partnership, Brent LSCB, and operational managers will be strengthened, to ensure more effective scrutiny and accountability; qualitative performance information; and information-sharing which enables key priorities for the range of children and young people in Brent to be identified, prioritised within plans, and taken forward.</p>	<p>DCS LSCB Independent chair</p>	<p>April 2012</p>	<p>Agenda item for LSCB planning day.</p>	

	3. Children's social care improvement plans will be produced which will cover all key priorities, identifying their source, with clear targets which will be scrutinised by the Social Care Management Team on a quarterly basis.	SCMT	January 2012	Business plans in place. Actions to be incorporated into Safeguarding Action plan.	
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2. Safeguarding: Additional Areas for Development

Safeguarding: Additional Areas for Development					RAG
1. Area for Development:	There are insufficient monitoring and evaluation processes in place in relation to work addressing concerns about the conduct of adults working with children. This role is the responsibility of the Local Authority Designated Officer (LADO)				
Required Outcome	Actions	Lead	By when/Accountable to	Evidence of progress January 2012	
Lessons from referrals to LADO (Local Authority Designated Officer dealing with concerns about adults working with children) will be learned.	1. LADO will regularly review outcomes of investigations and highlight lessons to be learned and acted upon.	Head of Safeguarding	Quarterly report to be included with management information to the LSCB on outcomes of referrals about adults who may pose a risk to children, from December 11	Report provided December 11 Report is being prepared for the end of March 2012	
LADO role will be understood across the partnership	2. The Safeguarding in Employment sub group of the LSCB will promote the role of the LADO across the voluntary, private and statutory providers in Brent.	Chair of sub-group	LSCB	Agreed in principle by LSCB chair. Sub-group to extend TOR LSCB BME and Faith communities group to be briefed on the role of LADO Meeting with primary heads booked April 12	

LADO will be adequately resourced to ensure the statutory requirements of the role are fulfilled	3. Review the LADO role against the role and capacity of CPAs and prepare a business case proposing sufficient resource.	Head of Safeguarding	February 2012	Business case for extending the number of CPAs has been prepared	
2. Area for Development	Procedures and data retention in relation to safe recruitment are in place and usually applied appropriately, but systems need to be more robust and consistently followed.				
Required Outcome	Actions	Lead	By when	Evidence of progress January 2012	
Decisions in relation to Criminal Record Bureau disclosures will be managed well and appropriately recorded, to ensure safe recruitment processes are robust and consistently applied.	1. Finalise planned work in relation to strengthening procedures and data retention.	Head of People Services/HR Services manager/Operational HOS	January 2012. Report to DMT February 12.	Completed; updated procedure enclosed  CRB policy update March 12.doc.docx	
3. Area for Development:	There is no formal evaluation of the impact of CAF on children, young people and their families.				
Required Outcome	Actions	Lead	By when	Evidence of progress January 2012	
Families have access to bespoke and coordinated multi-agency support that addresses need early	1. Review CAF processes to determine outcomes and quality. This will include an evaluation of the impact of CAF.	Head of Early Years and Integrated Services	February 2012	Evaluation report completed end of February and action plan being deployed.	

	2. Recruit a full time CAF coordinator to manage the SPA process and the CAF team.		December 2011	postholder in place January 2012.	
4. Area for Development	The process of cloning records between siblings in the same family who are children in need is not appropriate and can lead to the individual needs of each sibling not being accurately or fully identified.				
Required Outcome	Actions	Lead	By when	Evidence of progress January 2012	
Recording will reflect the individual needs of each child within the family as well as needs which apply to the whole family	1. Reinforce requirements re ensuring individual needs of children within a family are recorded by practitioners.	Head of Localities & Disabled Children	January 2012 Compliance to be tested through planned audit cycle.	Requirements reinforced.	
5. Area for Development	Assessments for disabled children brought to the multi-agency resources panel are not always fully comprehensive or multi-disciplinary				
Required Outcome	Actions	Lead	By when/Accountable to	Evidence of progress January 2012	
Assessments for disabled children are comprehensive and multi-disciplinary, maximising the potential for ensuring best outcomes. Early Support Panel	1. Incorporate improvements to assessments into current One Council 0-13 children with disabilities team project.	Head of Localities & Disabled Children	April 2012/0-13 Project Board	Workshop to streamline assessment processes took place February 2012. Assessment documentation in the 0-13 team to reflect that of Localities service. Co location of service with health colleagues being sought to maximise multi disciplinary working and implementation of a single assessment.	

Coordinator in place and supporting multi-agency key workers support to families with additional needs aged 0-5 years.	2. Early Support Coordinator appointed; attends six weekly CWD panel (led by paediatricians at Brent and Harrow PCT)	Head of Early Years and Integrated Services	Take up post December 2011. Then ongoing	Coordinator took up post Dec 2011. Attending appropriate panels, re-negotiated further 1 year contract and PCT funding. Good progress made with action plan. Embedding in role before carrying out this action.	
	3. Early Support Coordinator to identify additional funding for families with early support needs.	Head of Early Years and Integrated Services	Ongoing, as key part of role.		
6. Area for Development	The LSCB's 26 wide-ranging priorities for this year do not link clearly to the priorities of Brent Children's Partnership or Brent's Child Poverty Strategy				
Required Outcome	Actions	Lead	By when/Accountable to	Evidence of progress January 2012	
The LSCB Business plan demonstrates linked priorities for 2012-13 to Brent Children's Partnership strategies The annual report demonstrates how the LSCB BCP priorities were addressed on 2011-12	LSCB planning business planning day references, scrutinises, monitors and evaluates all key safeguarding elements of partnership strategies. Brent Children's Partnership to be consulted on the LSCB plan.	LSCB Independent Chair	Takes place March 2012 Accountable to Director of Children's Services who will ensure appropriate linkages are in place.	The LSCB Business Planning Day is when key priorities for the year will be decided upon. The annual report is also currently in draft stage and will be examined at the Business Planning Day. The Business Plan and Annual Report will be going to the BCP Executive in June. The CYPP (Currently out for consultation with the BCP) will be going to the LSCB in June as well.	
7. Area for	The LSCB to engage more effectively with the community and to recruit lay members.				

Development					
Required Outcome	Actions	Lead	By when/Accountable to	Evidence of progress January 2012	
Lay members will be in place and fully contributing to the work of the LSCB.	1. Reference group for community groups is in development, with first meeting planned.	LSCB Development Manager	Meeting planned March 2012 Accountable to LSCB Independent Chair, then to DCS	Lay members advert went out 15 th Feb	
	2. Advertisement to be placed for lay members of LSCB		February 2012 susue		
8. Area for Development	Within children's social care services the statutory guidance on the timescale for holding an initial child protection conference following the undertaking of child protection enquiries is not consistently followed, leading at times to unacceptable delay.				
Required Outcome	Actions	Lead	By when/Accountable to	Evidence of progress January 2012	
There is clear understanding of timescales required within child protection	1. Clarification about timescales within child protection processes to be sent to team managers and practitioners.	Head of Safeguarding	December 2011	Achieved  timescales to cp. conference.msg	

<p>processes. Current appropriate level of performance of 70% within timescale is maintained, ensuring those that exceed the timescale are complex cases, receiving fuller assessment, with risks managed.</p>	<p>2. Periodic audit to identify whether cases which go beyond 15-day timescale do so in the interests of getting a fuller assessment and risks are managed, as opposed to drift.</p>		<p>Next audit: April 2012</p> <p>Outcome of audit to be reported to LSCB.</p>	<p>To be audited March 2012</p>	
	<p>3. Multi-agency strategy meetings or discussions will be held for complex cases where detailed multi-agency planning and management of risk is required from the beginning.</p>	<p>Head of Localities and Disabled Children</p>	<p>LSCB</p>	<p>Subject of a LSCB audit at present.</p>	

4. Looked After Children Recommendations:

Recommendations: Looked After Children					RAG
1. Ofsted /CQC Recommendation: Timescale: Immediate	NHS Brent to provide an effective health service to looked after children: <ul style="list-style-type: none"> To ensure the timely completion of all health assessments and reviews To develop a robust approach to monitoring actions identified in health plans To improve information exchange between health and social care professionals To provide age appropriate and comprehensive health information for looked after children Where appropriate, to ensure that health professionals are invited to or able to contribute effectively to looked after children reviews <p><i>NB: Recommendation directed at NHS Brent and covered within Health Action Plan. The actions below are either to be carried out in partnership or apply to social care, and complement the actions within the Health Action Plan. As the Health of Looked After Children received a judgement of Inadequate, this recommendation is receiving the highest priority for action and improvement, and compliance and improvement will be reported on a monthly basis to the DCS. Actions under this recommendation and in the CQC Health Action Plan will also be scrutinised through quarterly reports to the LSCB and to the Multi-Agency Child Protection Meetings, as well as to the Health and Well-Being Board. A revised set of Performance Indicators (PIs) to capture key performance areas has been agreed.</i></p>				
Required Outcome	Actions	Lead	By when/Accountable to	Evidence of progress January 2012	
Health assessments are timely and comprehensive	1. A system is being devised to ensure that all young people to have a Health Assessment within 3 months prior to their 18 th birthday.	Head of CPCIC/ Deputy Director, Nursing and Clinical Standards, Brent ICO	1 February 2012	Ursula Johnson identify YP and notify SW's	

Children's health plans will be implemented in a timely and comprehensive way, ensuring their health needs are met	2. Strengths and Difficulties Questionnaire (SDQs) to be identified as needing completion at first LAC Review, and monitored at 2 nd LAC Review.	Head of Commissioning and Resources	1 February 2012	Currently being implemented by IROs. Fully in place by April 12.	
	3. IROs to review health recommendations at each LAC review and implement escalation policy where necessary.	Head of Commissioning and Resources	Immediate and ongoing	In place and will be audited through the revised IRO performance monitoring framework.	
Through the revised service specification, to ensure robust quality assurance of the health services being delivered to LAC, both in terms of timeliness and quality	4. Improving outcomes on health assessments through: <ul style="list-style-type: none"> a. Quarterly performance monitoring meetings to ensure robust monitoring of health assessments as part of SLA b. Bi-monthly liaison meeting between social care and health to develop good practice working. 	Head of Care Planning/ Deputy Director, Nursing & clinical Standards /Head of Commissioning and Resources/Deputy Director, Strategy & Planning, NHS Brent Regular review of SLA will ensure all actions are implemented.	1 February 2012	A Fully scheduled for 12/13 One off one scheduled for March 12 to review 11/12 performance B This is in place & 3 mtgs have taken place already .	

<p>LAC Reviews will be fully informed about children's health issues, in order to best meet their needs</p> <p>Information exchange between health and social care will be consistently good, and enable children's health needs to be met in a timely way</p>	<p>5. Establish joint ICO/LA 'task and finish' group to review information exchange issues and improve process.</p>	<p>Head of Care Planning/Head of Commissioning and Resources/Community Services Director, NHS Brent</p>	<p>1 February 2012</p>	<p>In place and due to fully report at the end of March 12.</p> <p>However, immediate work has been undertaken in respect of information exchange and processes. The LAC Health team have full access to FWi and have received training.</p> <p>There is also now a shared spread sheet data base which monitors the progress of the health assessments.</p> <p>All LAC health assessments are currently up to date</p>	
<p>Children and young people will be fully informed about health issues, in an age-appropriate way.</p>	<p>6. Review current health information and develop or source appropriate health information materials in liaison with public health department.</p>	<p>Deputy Director, Nursing & Clinical Standards, Head of Health Improvement Brent, Ealing and Harrow ICO (see CQC plan)</p>	<p>December 2011</p>	<p>Underway as part of task and finish group</p>	
<p>LAC health colleagues are notified of all statutory reviews to enable their participation and attendance where appropriate</p>	<p>7. Health to be routinely informed about every LAC review, in order that up-to-date health information can be provided. Personal attendance where required to be identified by social worker.</p>	<p>Head of Care Planning/ Community Services Director Brent NHS/ Head of Commissioning & Resources</p>	<p>1 February 2012</p>	<p>a) LAC review service notifies via spreadsheet b) SW identifies when nurse needs to be invited</p> <p>This is now fully in place and is being monitored through the IRO process that health attendance occurs where required.</p>	

2. Ofsted Recommendation:		The council to ensure timely notifications of all newly looked after children to partner agencies, and to inform them of other significant changes to placement arrangements.			
Timescale: Immediate					
Required Outcome	Actions	Lead	By when/Accountable to	Evidence of progress January 2012	
Health, schools and other partner agencies as appropriate are informed promptly when children come into care, or when their placements change.	<ol style="list-style-type: none"> 1. Strengthen systems for notifying partner agencies when children come into care or change placements, through identifying problems and rectifying. 2. Follow-up audit to ensure system working well. 	Head of Children & Families Policy and Performance/Head of Care Planning/Head of Localities/Head of Commissioning and Resources	<p>Immediate.</p> <p>Audit September 2012. Outcome of audits to be presented to DMT and to LSCB as part of quarterly monitoring.</p>	Requirements reinforced.	
3. Ofsted Recommendation:		The council to draw up robust pathway and transition plans in conjunction with all those young people leaving care or who have left care.			
Timescale: Within 3 months (end February 2012)					
Required Outcome	Actions	Lead	By when/Accountable to:	Evidence of progress January 2012	
All care leavers will have a relevant , meaningful and up to date Pathway Plan	<ol style="list-style-type: none"> 1. Pathway planning to be made more robust through: <ol style="list-style-type: none"> a. Increased management involvement with Pathway 	Head of Care Planning	<p>1 February 2012</p> <p>Management information to be</p>	a. Increased management oversight has led to 94% of Pathway Plans being in place	

	<p>Planning arrangements</p> <p>b. Training workshops to improve expertise of practitioners, ensuring each Pathway Plan is young-person centred</p> <p>c. Quality assurance of Pathway Planning arrangements, through the IRO role; management information; and audit.</p>		presented to DMT and to LSCB as part of quarterly monitoring.		
A Pathway Plan is drawn up in conjunction with all care leavers and a copy is given to them				b. PP training day is in L & D calendar for 12/13.	
				c. IRO's are quality assuring PP for the LAC's. This will also be a key area in the revised performance monitoring framework, quantitative audit of PP scheduled for April 2012.	
				d. Management information provided by Data Officer on monthly basis.	

All care-leavers with disabilities will have a comprehensive transition plan in place prior to leaving care.	2. Team manager of Transitions team to ensure transition plans are comprehensively updated prior to the young person leaving care.	Head of Localities & Disabled Children/Head of Transitions Service from 1.4.2012	Immediate and ongoing		
	3. This requirement will be integrated within current plans for a 14-25 Transitions Team.	Head of Commissioning and Resources	April 2012		
4. Ofsted Recommendation: Timescale: Within 3 months (end February 2012)	The council to ensure that all social workers benefit from regular, good quality formal supervision that provides appropriate management oversight of case work planning. <i>NB: All actions are the same as in Safeguarding Recommendations 1 and 2 to ensure consistent improvements across the service.</i>				
Required Outcome	Actions	Lead	By when/Accountable to	Evidence of progress January 2012	
Staff at all levels receive regular, high quality supervision, which encompasses both performance management and reflective supervision. Supervision enables reflective, child	1. Review of all supervision materials to be conducted by external consultant working together with managers, to ensure supervision is delivered in line with best practice elsewhere and that this can be evidenced.	Head of Localities and Disabled Children/ Head of Care Planning	Policy to be completed by end February 2012	External consultant engaged. Focus group with managers 19.1.12. 5 sessions for each supervisor in group sessions focusing on every aspect of supervision commencing April 12.. Policy to be completed following training programme	

<p>focused practice, in line with the Munroe Review of Child Protection All social workers will have a fully completed personal supervision file to capture casework as well as personal and professional development.</p>	<p>2. Intensive coaching workshops for managers across children's social care, funded through the Local Government Improvement and Development agency, to be provided to deliver improved expertise in supervision, including reflective supervision, and in doing so enable managers to lift the quality of practice across the service.</p>	<p>Head of Localities and Disabled Children/Head of Care Planning</p>	<p>February – March 2012</p>	<p>Funding secured through Local Government Improvement and Development Agency and work programme submitted. Programme of supervision support starting April 2012.</p>	
<p>Supervision notes to demonstrate timely plans and impact</p>	<p>3. Evidence of both compliance with and impact of improved approach to supervision to be evidenced through regular audit.</p>	<p>Head of Localities and Disabled Children/Head of Care Planning</p>	<p>March 12. Audit outcome will be included in post-inspection action plan quarterly report to Departmental Management Team and Local Safeguarding Children Board</p>	<p>Audit to ensure cases had been supervised undertaken December 2011 Summary report due April 2012</p>	
	<p>4. Conduct staff questionnaire re experience of new supervision system</p>	<p>Head of Localities and Disabled Children/Head of Care Planning</p>	<p>September 2012</p>		

5. Ofsted Recommendation: Timescale: Within 3 months (end February 2012)	The council to ensure that care plans and assessments for looked after children are focused, specific and include the consideration of all relevant background information.				
Required Outcome	Actions	Lead	By when	Evidence of progress January 2012	
Care plans for children and young people are focused, specific and include the consideration of all relevant background information Supervision to reflect active care planning Care plans implemented to ensure timely outcomes Joint working arrangements between Care Planning and Legal Services ensure a comprehensive	1. Care Planning systems to be strengthened through the following actions: a. Review of current care planning policies and processes to ensure that the care planning process is robust, timely and of a high standard. This to include workflow processes on FWI. b. Strengthen joint planning arrangements with Legal Services, to ensure timely and effective planning in care proceedings c. Managers to ensure that parallel and contingency planning is considered at each stage. d. Permanency Planning	Head of Care Planning , Head of Legal Services	All actions to be implemented by March 2012 Progress to be reported to DMT March 2012.	This is now incorporated into the L&D plan. A Completed. FWI workflow processes updated to include tracking of PPM's. B Completed. Six-weekly meetings between HoS, PO's and TM's to review all court cases & planning C. Completed- it is checked in the legal meeting D.- This supported by updated FWI process - PO re-books at IPPM if complex issues - Panels to be set up for April & May to review all cases where permanent placements not made E Sample audit undertaken in January. Themed audit scheduled for March 2012	

approach which avoids delay. Parallel and contingency planning in place from the start to avoid delays, and evidenced	Meeting processes to be strengthened to ensure plans progress in a timely way. e. Audit of care plans to be undertaken by end February 2012				
Improved practitioner expertise in care planning	2. Training and workshop sessions with the objective of improving the care planning process to be set up for staff in Care Planning, Localities, Disabled Children's Team, and Placements.	HOS –Care Planning, Locality, C&R; Head of Legal	February – March 2012	Part of L & D programme for 12/13 This is now incorporated into the L&D plan.	
6. Ofsted Recommendation: Timescale: Within 3 months (end February 2012)	The council to ensure that action is taken to improve school attendance for looked after children and reduce the numbers that are subject to fixed-term and multiple school exclusions.				
Required Outcome	Actions	Lead	By when/Accountable to:	Evidence of progress January 2012	
School attendance for looked after children is improved The number of fixed-term and multiple school exclusions for	1. Virtual Head to draft revised procedure in respect of school attendance for consultation with Brent head teachers and designated staff, and ensure implementation.	Head of Commissioning & Resources/ Head of Care Planning	February 2012	Procedure drafted and relevant consultation will be undertaken for implementation in May 12.	

<p>looked after children is reduced</p> <p>All aspects of education for looked after children, including attendance and exclusions, will be improved, in line with the objectives within Brent's LAC Strategy 2011-2014</p>	<p>2. To monitor on termly basis</p>		<p>Monitoring to be reported to DMT so that DCS can ensure that this is implemented and improves educational outcomes for looked after children.</p> <p>As a central improvement area within the LAC Strategy, improvements in attendance and exclusions will be taken forward and monitored by the LAC Strategy group.</p>	<p>Plans are progressing for the implementation of Welfare Call; this will become operational during the summer term and there will be a clear measurement of impact at the end of the summer term.</p>	
<p>7. Ofsted Recommendation:</p> <p>Timescale: Within 6 months (end May 2012)</p>	<p>The council to ensure progress is made in providing stable placements for children on admission to care, and the timely provision of permanent homes for children with a plan for adoption.</p>				
<p>Required Outcome</p>	<p>Actions</p>	<p>Lead</p>	<p>By when/Accountable to:</p>	<p>Evidence of progress January 2012</p>	
<p>Children will not be subjected to unnecessary</p>	<p>1. Placement stability will be improved through: a. Strengthening systems for</p>	<p>Head of Care Planning/ Head of Commissioning and</p>	<p>Will be included within quarterly data set to be</p>	<p>A Support plans are being continuously reviewed. This area will also form a part of the audit of the disruption of placements (h) below.</p>	

<p>placement moves following admission to care</p> <p>Children will experience much improved placement stability</p>	<p>matching, including support plan</p> <ul style="list-style-type: none"> b. Ensuring Brent foster-carers are available to the Emergency Duty Team c. Consider referral to LAC CAMHS for each child/placement d. Hold annual professionals meetings are held to ensure team around the child actively reviewing child, needs and placement e. Expand pool of foster-carers to meet more complex needs f. Review Adoption Panel processes to strip out delay g. Clarify respite arrangements h. Analyse disruptions of placements to inform improved arrangements 	<p>Resources</p>	<p>scrutinised by LSCB and DMT. Improvements will also be made and monitored through the Social Care Transformation Project and Board. Report on progress to go to Corporate Parenting and Safeguarding Board September 2012.</p>	<p>B Brent F/C's are available to EDT. This is being reviewed by HoS Placements and C&R</p> <p>C This is in place and monitored at LAC reviews and CPP</p> <p>D Managers are reviewing all cases in supervision to identify where this will be appropriate. Additionally, IROs are also considering the need for professionals meeting at LAC reviews</p> <p>E Meeting scheduled for April between Ros, Hilary & CAMHS to take forward</p> <p>F completed</p> <p>G Revised arrangements drafted and to be implemented with staff.</p> <p>H Current scoping underway and will progress from April. Management information to be reviewed.</p>	
<p>8. Ofsted Recommendation:</p>	<p>The council to improve monitoring arrangements for individual children to measure educational progress relative to their starting points.</p>				

Timescale: Within 6 months (end May 2012)					
Required Outcome	Actions	Lead	By when/Accountable to:	Evidence of progress January 2012	
<p>Children's individual educational progress will be identified and tracked so that they can better achieve their full educational potential.</p> <p>To have greater impact in respect of new LAC adolescents and KS4</p> <p>To continue to develop work on respect of 16+ and those in EET</p>	1. Systems to be established to track and monitor LAC from their starting points	Head of Care Planning/ Head of Commissioning and Resources	Monitoring to be reported to DMT so that DCS can ensure that this is implemented and improves educational outcomes for looked after children. It will also be monitored by the LAC Strategy group. Report to go to Corporate Parenting and Safeguarding Board September 12	1 Completed. Full data obtained from schools and inputted into Fwi. A full progress report of LAC will be provided for Sept 12.	
	2. NEET/EET strategy to include the identification of young people with potential to benefit from higher education so that they can be supported in accessing relevant courses.		February 2012	2 Completed	

	3. Identify actions to support new LAC adolescents and KS4 to achieve their educational potential		February 2012	3 Attendance by LAC Ed at monthly res panel is in place. Immediate LAC notifications now go to the LAC Ed team, with early prioritisation of PEPs for new LAC adolescents.	
	4. To continue to develop work in respect of 16+ and those in EET		Ongoing. To be reviewed for impact August 2012 (post exam results)	4 Actively addressed through F4F; Apprenticeship scheme. One dedicated caseworker in LAC Ed team, now focuses on this area	

5. Looked After Children: Additional Areas for Development

Looked After Children: Additional Areas for Development					RAG
1. Area for Development	The LAC Strategy Review Group has yet to meet so it is not possible to evaluate the impact of the LAC Strategy... present arrangements for accountability, monitoring and challenge of the looked after children strategy are not sufficiently robust as there is no line of report or accountable to the Brent Children's Partnership or other strategic forum.				
Required Outcome	Actions	Lead	By when/Accountable to:	Evidence of progress January 2012	
Progress on the LAC Strategy is regularly reviewed to ensure objectives are being met in accordance with the action plan, and outcomes for children in care and care-leavers are improving.	1. LAC Strategy Review Group to implement and monitor strategy on multi-agency basis; with 6-monthly scrutiny meeting to be chaired by AD Social Care	Head of Care Planning/AD Social Care	Meeting of LAC Strategy Review group February 2012, then on quarterly basis	1. Meetings scheduled.	
	2. Set up systems for scrutiny of the progress on the LAC Strategy with Brent Children's Partnership			2. BCP review date set	

2. Area for Development	Commissioned advocacy services are accessible for those who wish it but no detailed evaluation of the service's impact has been undertaken as yet.				RAG
Required Outcome	Actions	Lead	By when/Accountable to:	Evidence of progress January 2012	
Performance monitoring & management in respect of all SLAs will be tighter, with a particular focus on outcomes for children and young people.	1. To ensure that appropriate performance monitoring arrangements are in place for all relevant commissioned services and that they focus on outcomes.	Head of Commissioning and Resources	February 2012 Report to DMT covering all commissioned services.	1 Completed via quarterly monitoring meetings. Outcomes are incorporated into the performance monitoring reports.	
	2. The provision of a complaints-related advocacy service will be considered within the Aidhour SLA (service provider for LAC Reviews).			2 This is still under development given the restructuring within the complaints dept and also needs to explore work being undertaken in respect of advocacy both within adults and across WLA.	
3. Area for Development	The targeted use of the Crisis Intervention and Support Team.....is successful at maintaining children on the edge of care at home...However, there is no longitudinal review to evaluate effectiveness.				
Required Outcome	Actions	Lead	By when/Accountable to:	Evidence of progress January 2012	
The CIST will successfully divert young people from the care system, and enable them to continue to remain with, or return to their	1. Following an external review in Summer 2011, the CIST has been operating with a tighter focus, and clearer performance monitoring.	Head of Localities and Disabled Children	September 2012 Evaluation report to go to DMT and to Corporate Parenting and Safeguarding Board.	Performance monitoring demonstrates positive diversion from care rate Evaluation of service to take place as part of Early Help One Council project.	

families, whenever it is safe to do so.	2. The impact of the CIST, including the lasting impact of diverting young people from care, will be evaluated one year from the implementation of the changes.				
4. Area for Development	While an appropriate escalation policy is in place (for use by IROs), this has not been used in the last 12 months and not all reviewing officers are familiar with it.				
Required Outcome	Actions	Lead	By when/Accountable to:	Evidence of progress January 2012	
The escalation policy is fully and meaningfully implemented, its effectiveness monitored and themes identified in order to contribute to continuing service improvement.	1. Ensure all IROs are clear about the use of the escalation policy, and to use this instead of emailing or otherwise communicating concerns.	Head of Commissioning and Resources	February 2012	The escalation policy is currently being revised and is to be re-implemented by 30/04/12. The will be undertaken in conjunction with the revised performance monitoring framework and analysed for the Annual Report.	
	2. The effectiveness of the escalation policy will be analysed prior to the IRO Annual Report, and issues identified will be communicated through the report.		October 2012 IRO report will be presented to the Corporate Parenting and Safeguarding Board		
5. Area for Development	Locality teams have benefitted from Advanced Practitioner posts, but the role has not been included within care planning teams and so				

	practitioners do not have the same opportunities to develop expertise in such a focused manner.				
Required Outcome	Actions	Lead	By when/Accountable to:	Evidence of progress January 2012	
Care Planning teams are assisted to develop expertise.	1. In view of current resource constraints, consideration will need to be given about how this can be achieved.	AD Social Care/Head of CPCIC	April 2012 Any proposals to be considered by DMT in first instance.	To be considered	
6. Area for Development:	The management board overseeing children missing, including those missing from care, needs to undertake further work in order to effective analyse any patterns or trends that are emerging, and the board has yet to submit a report to the LSCB for scrutiny and challenge				
Required Outcome	Actions	Lead	By when/Accountable to:	Evidence of progress January 2012	
Children Missing from Care are managed effectively and the Board is able to analyse patterns and trends	1. The Missing Children Risks and Needs group collate and analyse data from Frameworki about Children missing from Care on a quarterly basis.	Chair of Missing Children Risks and Needs group	Report to LSCB February 2012 then on quarterly basis.	<p>The report of the Missing Children: Risks and Needs group was presented to the Board on the 7th February.</p> <p>The remit of the RAN group is to be reviewed to ensure missing children at risk of sexual exploitation is captured. A new chair for the RAN group will be sourced as a result of the promotion of the current chair and membership reviewed with the new group meeting in April.</p> <p>An audit is currently underway to try to quantify numbers and risk with a view of developing a targeted action plan.</p> <p>The management information presented to the Board will be revised to ensure information presented includes children missing from home as well as care. This will be analysed by the Monitoring and Evaluation group to provide a more holistic</p>	
	2. Police data and data from other agencies concerning missing children to be analysed				

				oversight on an ongoing basis commencing in May. The next report to the Board will be in June and thereafter , September, December and March	
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Key to Acronyms:

LA – Local Authority

LSCB – Local Safeguarding Children Board

BCP – Brent Children’s Partnership

ICO – Integrated Care Organisation (health providers for Brent, Ealing and Harrow)

DMT – Departmental management team

SCMT – Social Care Management Team

CPCIC – Care Planning and Children in Care Service

CQC – Care Quality Commission (health inspectors who worked with Ofsted on this inspection)

AD - Assistant director

HOS - Head of Service

CPA – Child Protection Adviser

LADO – Local Authority Designated Officer (responsible for dealing with concerns about the conduct of adults towards children)

IRO – Independent Reviewing Officer (responsible for chairing regular reviews for looked after children)

LAC – Looked after children (children in the care of the council)

CWD – Children with disabilities

QMF – Quality Management Framework

SLA – Service Level Agreement

SMART – Specific, Measurable, Achievable, Relevant and **Timebound**