The Areas for Development Plan

The Areas for Development Plan attached is a result of the Annual unannounced inspection of contact, referral and assessment arrangements within Brighton and Hove children's services. The letter was previously presented to the Children & Young People's Trust Board on 1st November 2010.

The Areas for Development Plan covers 7 areas:

Table 1

	Summary of Areas for Development	Lead responsibility
1.	Review the role of Social Work Resource Officers	Richard Hakin
2.	Review of thresholds for S47	Nigel Hancock
3.	Review of Initial Assessments process	Andy Whippey
4.	Review quality of Child Protection plans and outcomes	Jane Doherty
5.	 a. Review embedding of CAF in the social work care pathway b. Development of Children in Need Pathway 	Andy Whippey/Ellen Jones
6.	Improve quality of Initial and Core Assessments and to develop the Quality Assurance Framework	Andy Whippey/Jane Doherty
7.	Areas of Development ongoing from the Quality Assurance Framework Audits	All

- 1. Review of the role of Social Work Resource Officers Initial & core assessments being undertaken by unqualified staff (ie SWRO's).
 - Not compliant with Working Together or with Ofsted unannounced inspection of BHCC 2010 or JAR inspection findings 2006.

Source

Ofsted Unannounced Inspection

Aim

- 1) To review options to respond to the above development area regarding concerns about assessment work done by non-social work qualified staff by producing an options paper for senior management discussions.
- 2) To use this to agree a way forward to respond to this concern either by amending current assessment work allocation processes or by entirely changing them.
- 3) To then implement this new agreed plan in earliest possible timescales.

Measurable Success

- 1) Proper informed consideration of the opportunities and risks of all options for change, how it might be achieved and whether new processes are sustainable in context of long term fluctuations in availability of qualified social workers.
- 2) Senior social work managers seek agreement for our direction which allows common approach and agreed timescales for implementing.
- 3) Plan of implementing change then set out and agreed. This is then followed through successfully. Seek to both maintain or improve assessment quality and also meet national required standards and have a successful plan recognised in 10 day inspection as no longer requiring development.

Owner	Richard Hakin	
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1. Review the role of Social Work Resource Officers - Completion of assessments by qualified social workers/SWRO's

No	Action(S)	Milestone(S)	Evaluation Against Milestones	Rag Rating	Lead
1)	First discussion & options paper 14-09-10	Discussed at area managers meeting of 15-09-10	Agreed further work to be done on some options areas	GREEN	RH
2)	Second addendum paper 11-10-10	Discussed at area managers meeting of 13-10-10	Decision made to 1) - pursue business case for additional qualified social worker posts to carry out all IA's & 2) – Look at overall staff and team	GREEN	Head of Service and all AM's

No	Action(S)	Milestone(S)	Evaluation Against Milestones	Rag Rating	Lead
			structure/ configuration & potential within this for duty SWRO's to transfer to child in care and complex cin case work		
3)	Desiness case regarding qualified posts to carry out IA's Review structure and alternative role for duty SWRO's	Submitted October 2010 Ongoing – end date to be confirmed	Agreement to recruit	AMBER	Head of Service & all AM's

2. Review the thresholds for Section 47 and the comparatively low numbers resulting in ICPC.

Although significant progress has been made in reducing the caseloads of social workers, the high numbers of section 47 enquiries and their prioritisation is impacting on the management of children in need assessments. The council has yet to review the thresholds for section 47 enquiries and the comparatively low numbers of these resulting in initial child protection conferences

Source

Ofsted Unannounced Inspection Chandler IMR

Aim

To ensure that we establish a view on section 47 thresholds and to build a work programme that will enable us to respond to the findings.

Measurable Success

A service which is more responsive to children in need but ensures effective safeguarding. Improvement is seeing the appropriate children in a timely fashion within a CIN process which can demonstrates case planning.

Owner Nigel Hancock

Area Of Development 2. Review the thresholds for section 47 and the number of section 47 investigations resulting in ICPC and a protection plan

No	Action(S)	Milestone(S)	Evaluation Against Milestones	Rag Rating	Lead
1.	Explore the hypothesis by Looking at the process and determining what percentage of Sec 47 Investigations lead to ICPC's and in turn what percentage do not lead to a Child protection Plan	One year Sept 2009 to the end of July 2010. 711 Sec 47 Events led to 406 ICPC and 352 plans 57% of section 47 events led to ICPC 86% of ICPC's led to a Child Protection Plan. Drop out rate is therefore 14%	Completed		NH
	Seek comparative data on the drop our rate in other LA	There is a very variable national picture. Drop out rates: Milton Keynes 1.4% Surrey 7% East sussex 12.5% Southampton 28 %	Completed	GREEN	

No	Action(S)	Milestone(S)	Evaluation Against Milestones	Rag Rating	Lead
	Audit 30 section 47 Events to satisfy that the threshold criteria Are met	Ten section 47 Cases from each team were audited and did not indicate any significant problem	Completed	GREEN	
	Evaluation:	This authority seems to be tracking in the middle of the comparator band and no discernable problem was identified in this area. In order to future proof this area of work the author would make some recommendations that will carry forward into other Areas for development If there were to be a tendency to put too few or too many assessments into a section 47 process too many would be the safest place to be. The evidence of continuing progress collected from the ten best authorities reflected on prompt action to investigate concerns and ensure that children are safeguarded. I recommend that we future proof this process using the other areas for development.			

No	Action(S)	Milestone(S)	Evaluation Against Milestones	Rag Rating	Lead
2.	The current Initial Assessment process needs to be reviewed in the light of the inspectors comments. If we can demonstrate that CIN cases are getting an adequate and timely response then any issue in this area of work would not be particularly relevant.	See Area for development: CIN Planning and IA's	Completed	GREEN	
3.	It is necessary to demonstrate that there is a CIN planning process which provided s a sound alternative to a CP planning process. I would recommend that we use the CP planning area for development to produce a more robust planning process for CIN cases.	See Area for development CP Planning	Ongoing	AMBER	
4.	Continue to Audit and performance manage the system		Ongoing	GREEN	
5.	Further development of the CAF/TAF process is essential to reduce the input into Social Work Duty Teams and to help make referrals	See the appropriate area for development	Ongoing	GREEN	EJ

3. Review of Initial Assessment process

Area Of Development

To address the issues within the Ofsted unannounced relating to:

- there are unacceptable delays in seeing some children in need. This delay results in potential risk to children
- in order to meet conflicting priorities and manage the pressure of work, a significant number of Initial Assessment are being signed off by managers as complete before the child, or young person, has been seen
- because of drift and delay in completing Initial Assessments, Core Assessments are being started and used inappropriately to complete what could be clearly be an Initial Assessment

Source Ofsted Unannounced Inspection

Aim

- to redefine the process of Initial Assessments and duty referrals to ensure that each Initial Assessment has a visit to the child
- to agree that no cases will be moved from Initial Assessments to Core Assessments unless the level of need/risk necessitates a Core Assessment

to redesign Duty Teams to ensure more activity is devoted to ensuring more initial contacts can be seen through to a conclusion within a 24 hour period

Measurable Success

- number of IAs where child is seen
- number of IAs completed within the statistical definition
- number of ICs completed
- number of ICs completed within the statistical definition
- reconfiguration of duty services to ensure more resources are devoted to a first response front door, enabling Initial Contacts to be dealt with within 24 hours rather than needing to become an Initial Assessment

Owner	Andy Whippey

Area Of Development 3. Review of Initial Assessment Process

No	Action(S)	Milestone(S)	Evaluation Against Milestones	Rag Rating	Lead
1	Redesign of duty front door	 number of workers on duty front door on any given day number of Initial Contacts being processed within 24 hours 	Workshops on 15 th & 22 nd March	AMBER	AW
2	IA process redesign	 number of IAs where children seen (1002) number of IAs completed within statistical definition within 10 days 	Completed	GREEN	AW
3	Audit of IAs/Cores	To identify whether any Core Assessments are being started unnecessarily as a means of trying to hit the numerical indicators	Completed	GREEN	AW

Owner

Jane Doherty

Area Of Development	4. Review the quality of child protection plans and outcomes
Source	Ofsted Unannounced Inspection
Aim	To improve services to children subject to a Child Protection Plan
Measurable Success	Develop standards for CP plans and what they should contain e.g. Child Protection Plans are: Detailed Child centred, Outcome focused Properly recorded on ICS Child Protection Plans should contain: clear actions, timescales and person responsible contingency plans if change not achieved the person responsible for ensuring the actions are completed, the time-scale within which the changes must be effected, the services to be offered, by whom and for how long, in order to promote the changes, the work to be covered in the core or specialist assessment,

Area Of Development 4. Review quality of Child Protection Plans and outcomes

No	Action(S)	Milestone(S)	Evaluation Against Milestones	Rag Rating	Lead
1.	Improve the quality of child protection plans Plans to be child centred and outcome focused	Sessions with IROs planned for 22 nd September to address quality of Child Protection Plans Develop standards for child protection plans by end of November	Completed		JD
		Discussion with IROs about CP plans to raise the issue of plans needing to be outcome focused and child centred. Action	Completed		
		 Senior IRO to audit/review CP plans with HoS and identify strengths and areas for development By end of November 2010 Develop 'model' CP plans for IROs by end of November Complete team self assessment by end of November Implement QAF by end of November 	In progress	GREEN	

No	Action(S)	Milestone(S)	Evaluation Against Milestones		Lead
2.	Provide refresher training to SWs and their managers to ensure compliance with ICS recording	Initial meeting with Jo D'arcy 5.11.2010	In Progress	AMBER	JD
3.	Progress of CP plans to be reviewed at Child Protection Conferences	To be evidenced in minutes of CPCs Information from audit to be collated by end of November		AMBER	CP/JD
4.	Core groups to develop and review CP plan (to be evidenced in core group minutes)	To be evidenced in core group minutes Information from audit to be collated by end of November		AMBER	JD/Area Managers
5.	Review and monitor child protection plans systematically over a period of three months	Introduce monitoring form for IROs to complete from 1 st September Advocacy and audit manager to analyse initial results by October Advocacy and audit manager to analyse initial results by November	Complete Complete In progress	GREEN	CP/JD
6.	IROs and responsible PMs/SMs to review cases of children subject to CP plans over 18 months and over 2 years	Management information about these cases to be produced by performance team and sent to senior IRO to distribute Senior IRO to analyse cases once identified.	Complete In progress	AMBER	JD and Area managers

No	Action(S)	Milestone(S)	Evaluation Against Milestones		Lead
7.	As part of QAF CP to audit 3 CPCs per month and feedback to individual IROs on progress	Results to be analysed by A&A Manager to identify areas of good practice and areas for development	Ongoing	AMBER	JD/TJ
8.	Interim arrangement to be put in place to ensure CP plans are recorded on ICS Improve consistency between the area teams	When the IRO opens the Child Protection care Plan on the day of Child Protection Conference (or the next) the TA will cut and paste the decisions of the conference into the essential safeguarding needs section of the ICS Child Protection Plan directly from the conference report. This can then be taken as a word document for the first core meeting and the amendments taken back to the ICS document.	Ongoing	AMBER	All

Area Of Development	5a. Review embedding of CAF in the social work care pathway and the development of Children in Need pathway			
Source	Ofsted Unannounced Inspection			
Aim	To increase numbers and quality of Family CAF and TAF plans, ensuring cost effective early intervention to improve outcomes and reduce the need for higher tier services			
Measurable Success	Increase in CAF numbers from July 2010 baseline. Improve % of CAF's completed on time Increase quality of CAF's and TAF's as measured by regular audit Reduce the numbers of referrals to social care where appropriate early intervention and preventive services, as measured by CAF and TAF plans have not been offered.			
Owner	Ellen Jones			

5a. Review embedding of CAF in the social work care pathway and development of Children in Need Pathway

No	Action(S)	Milestone(S)	Evaluation Against Milestones	Rag Rating	Lead
1.	Increase in CAF activity	Targets have been set for an increase in numbers of CAF's from approximately 60 in June and July 2010 to 100 per month from August. Each service has individual targets set and monitored by service mangers. CAF activity and progress monitored for each professional by their manager. CAF activity is monitored by worker type and team to monitor progress against targets.	CAF numbers have increased over the last year and compare well to other LA's however, the target has not been reached and will remain in place	AMBER	Ellen Jones
2.	Increase in CAF quality, plus improved action planning	Audit timetable established. Each Service Manager auditing random selection of CAFs, Action Plans and Reviews against practice standards. Excellent and poor practice fed back in performance reviews and supervision. Target is increase in percentage of good or excellent judgements plus reduction in poor judgements from first audit baseline.	Quality still very mixed, but progress is being made. We have demonstrated that ongoing audit of quality and	AMBER	Ellen Jones

No	Action(S)	Milestone(S)	Evaluation Against Milestones	Rag Rating	Lead
			oversight by managers can drive up quality- see Under 5's service		
3.	Provide appropriate training to skill up the workforce to undertake good quality CAF's and Team around the Family plans	Provision of ongoing training to meet identified skills gaps in needs analysis, action planning, chairing TAF meetings. Ensure good multi agency representation by monitoring take up and targeting agencies not represented.	Regular Think Family training planned for a further 6 months plus additional focussed workshops to meet identified need	GREEN	Ellen Jones
4.	Embed a family based approach to ensure holistic and systemic approach to needs assessment and planning across children's and adults services	Launch of Family CAF on 23 rd November	Event was very well attended- 150 attendees from 60 different agencies including schools and colleges and	AMBER	Ellen Jones

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No	Action(S)	Milestone(S)	Evaluation Against Milestones	Rag Rating	Lead
			adult services. Family CAF still new and we are working to embed		
5.	Clarify thresholds for CAF and TAF in order to reduce inappropriate referrals to social work, NFA's and re referrals	Launch Brighton & Hove Continuum of Needs 23 rd November Monitor impact through numbers of inappropriate referrals to social work and referrals to social work with an existing CAF & TAF	Slow increase of numbers of referrals to SW with CAF. SW redirecting cases to CAF as appropriate	AMBER	Ellen Jones

Area Of Development	b. Development of CiN Pathway		
Source	fsted Unannounced Inspection		
Aim	 To clarify the processes by which Children in Need receive service provision. To clarify the routes by which Children in Need move in and out of the Social Work Pathway To develop a Child in Need protocol/process within the Social Work Pathway. 		
Measurable Success	more and in married of children and dagged of a contract		
Owner	ndy Whippey		
Area Of Devel	ment 5b. Development of CiN Pathway		

No	Action(S)	Milestone(S)	Evaluation Against Milestones	Rag Rating	Lead
1.	Launch event for CAF being the referral route into Children's Social Care planned for 23.11.10	 Attendance at event Attendance at training events Number of CAFs being completed 	Increase in number of CAFs by 01.01.11	AMBER	AW/EJ
2.	Development of clear CIN Planning framework	 Clear CIN framework with Action Plans/review processes Numbers of children subject to formal CIN process 	% in number of children subject to formal CIN process 01.01.11	AMBER	AW/EJ
3.	Development of document entitled support for Brighton and Hove families	Clarity re levels of intervention and the service provision at each level	Increase in number of CAFs 01.01.11	AMBER	AW/EJ
4.	Clarity re how children move in and out of the Children's Social Work framework	Clear pathway to be produced in conjunction with the continuum of need document entitled supporting Brighton and Hove families	Pathway produced by 01.01.11	AMBER	AW/EJ

6. Improve quality of Initial and Core Assessments and develop the Quality Assurance Framework

Assessments are of variable quality and some Initial Assessments are poor as the views of parents/children/young people are not sufficiently evidenced.

Source

Ofsted Unannounced Inspection

Aim

To ensure the quality of assessments is improved with greater clarity of the views of parents/children/young people evidenced. To ensure assessments contain sufficient detail and analysis as a basis on which to make future decisions.

To improve services to children, young people and their families by developing a comprehensive QAF

Measurable Success

- % of IAs/Cores identified by internal auditors as good
- numbers of Core Assessments identified by IROs as good
- % of IAs where the views of children/young people/carers are clearly recorded
- Sustained measurable improvements in: improved KPIs and improvements in practice and therefore outcomes for young people

Owner Andy Whippey/Jane Doherty

Area Of Development 6 Improve quality of Initial and Core Assessments and develop the Quality Assurance Framework

No	Action(S)	Milestone(S)	Evaluation Against Milestones	Rag Rating	Lead
1	Workshops to be held in every Duty Team re addressing issues of quality and clarity as to the level of detail/analysis which needs to go onto an Initial and Core Assessment	Dates for workshops to be set	1.12.10	GREEN	AW
2	PMs/SMs not to sign off IAs until they are satisfied that view of parents/children/young people are sufficiently evidenced	Audit of completed Initial and Core Assessments	1.12.10	GREEN	AW
3	Thematic audit re the view of children/young people/carers	Numbers of IAs/Core Assessments which have views clearly recorded, as well as level of detail/analysis	1.12.10	AMBER	AW
4	Content of Quality Assurance Framework	The Quality Assurance Framework (QAF) should include the following 1. Specificity about the areas of practice / activity / business process that are being audited. 2. General auditing activity	End of November 2010	GREEN	JDoh

No	Action(S)	Milestone(S)	Evaluation Against Milestones	Rag Rating	Lead
		3.The choice of what to focus on is likely to change over time: once we are satisfied as an organisation that a particular area of activity is working well, the focus of auditing activity should be shifted to another area. 4. In terms of the focus of auditing, the outcome of local Serious Case Reviews or locally known areas of concern could help determine the focus; for example, areas of joint concern identified by inspections. 5. The responsibility for the QAF needs to be comprehensive and ensure that managers at all levels are involved – from front line managers to senior managers, DCS, LM, and CEO.			
5	Auditing schedule	Children's Services need to agree an annual programme of audit priorities which link with those of the LSCB and other partners		GREEN	
6	Standards	There needs to be a set of standards and criteria against which the areas of practice etc are being measured. Many of these can be drawn from existing sources: the Pan Sussex		GREEN	

No	Action(S)	Milestone(S)	Evaluation Against Milestones	Rating	Lead
		Safeguarding/Child Protection procedures, Working Together, NSF, performance indicators etc.			
7	Methods	A range of methods can be used for auditing, and which method is used will in part be dependent on the content being audited. For some agencies and in some areas of			
		child protection work, the auditing of case files held by agencies is an effective method and one referred to in Working Together. Other methods include: • A range of audit tools • Scrutiny of key processes and requirements e.g. for safe recruitment checks to have been		GREEN	
		 made, training to be delivered, procedures in place. Focus groups of practitioners involved in a particular case. Observations of practice. Feedback from service users. 			

No	Action(S)	Milestone(S)	Evaluation Against Milestones	Rag Rating	Lead
8	Time-scales / frequency / extent	There needs to be clarity about how frequently auditing is done and the scale of auditing activity. This is to ensure there is a proper balance between resources allocated to auditing and resources allocated to "doing the work". Planning a time-table for auditing is essential to ensure it does happen: there is always a tendency for auditing work to not get done because of the pressures of day-to-day work.		GREEN	
9	The auditors	Consideration needs to be given to who does the auditing in terms of expertise, authority and capacity		GREEN	
10	Governance and reporting arrangements	The outcomes of auditing activity needs to be reported to the individuals / boards/services who have an overall responsibility for the quality of service in an agency / across agencies. These individuals / boards/services need to be specified so that receipt of auditing findings is built into their work programme in a systematic way.		GREEN	

No	Action(S)	Milestone(S)	Evaluation Against Milestones	Rag Rating	Lead
11	Staff involvement, Communication, Loop into practice / business and process development	One of the key reasons for undertaking auditing activity is to ensure that where areas for development are identified, appropriate action is taken. This might take various forms: • The shaping of training programmes • The development of new procedures • New working arrangements / methods.			
		Therefore, auditing activity should result in clear action plans which specify what needs to be done, and which are then monitored by those with governance responsibility. A key element of this on-going learning idea is to keep all staff concerned involved in the auditing activity so they understand why it is happening, where possible help to shape the standards and methodology, and are informed about the outcome and any changes arising. Auditing is often perceived as being a negative and critical process; in fact, it frequently highlights good practice, and		GREEN	

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No	Action(S)	Milestone(S)	Evaluation Against Milestones	Rag Rating	Lead
		part of the communication plan should be the sharing of good practice within and between agencies			