

Inspection of Safeguarding and Looked After Children Services Improvement Action Plan

SUMMARY

- 1.1 An inspection of Safeguarding and Looked After Children services took place in May 2011.
- 1.2 Overall Derby's arrangements were assessed as 'adequate' and the report included a number of areas where Derby was deemed to be performing well. However the inspection team highlighted 24 recommendations to improve services, including five which were to be implemented immediately.
- 1.3 An Improvement Action Plan detailing the 24 recommendations and actions required to address areas of improvement has been jointly produced with all relevant partners and is shown in **Appendix 2**.
- 1.4 An exercise mapping the Improvement Action Plan against the Children and Young People Plan (CYPP) and the Directorate Business Plan 2011/12 is currently being undertaken. This exercise will ensure that all the plans are aligned and any gaps are identified and incorporated into the Business Plan refresh that will commence shortly.
- 1.5 To ensure that the Improvement Action Plan recommendations are delivered and achieved within the prescribed timescales it will be important to regularly monitor the plan and for it to be owned by senior management and CYP Commission.

RECOMMENDATION

- 2.1 To note the contents of the Safeguarding and Looked After Children Services Improvement Action Plan.
- 2.2 To agree that the monitoring of the Improvement Action Plan be reported to future meetings of the Commission on a quarterly basis.

REASONS FOR RECOMMENDATION

- 3.1 Local authorities and their partners have a duty to provide appropriate services that protect children in need. They are also required to respond to recommendations made by inspectorates such as Ofsted and CQC.

- 3.2 The Council is committed to improving the quality of services and outcomes for children and young people. Monitoring of the Improvement Action Plan on a regular basis will ensure that the Council's focus remains on successfully delivering all the recommendations within the prescribed timescales.

SUPPORTING INFORMATION

- 4.1 Local authorities are subject to regular inspections by Ofsted and CQC on services focussing on safeguarding and looked after children. The most recent inspection for the Authority was May 2011.
- 4.2 Copies of the inspection report were circulated to key officers and elected members for information when it was first published, and it is was also made available on the Council's website.
- 4.3 The overall effectiveness of safeguarding services in Derby was rated as 'adequate', with capacity for improvement assessed as 'adequate'. Services for looked after children were also rated as 'adequate'.
- 4.4 The report highlighted some areas of good performance, including 'staying safe' and 'economic well-being' outcomes for looked after children and care leavers. The report included 24 recommendations for improvement, including five which were to be implemented immediately.
- 4.5 The 24 recommendations have been incorporated into an Improvement Action Plan which has been jointly produced with all relevant partners, including Health and Police. The Improvement Action Plan has been widely consulted on within the relevant partner organisations and also mapped back to the published CQC inspection report to ensure consistency and alignment.
- 4.6 To ensure that all the recommendations are aligned with other current Council plans and strategies, such as the CYPP and Business Plan 2011/12, an exercise is currently being undertaken to map any gaps. Any identified gaps will be incorporated into the Business Plan refresh that will commence shortly.
- 4.7 Progress in delivering the Improvement Action Plan will be monitored regularly. It is proposed that the CYP Commission receive regular quarterly updates at future meetings. This will ensure that the recommendations are monitored and ensure that they are delivered within the prescribed timescale.
- 4.8 Whilst there is no formal requirement for the Council to report progress on the recommendations back to Ofsted, any future inspection would request and expect to see detailed feedback of what actions were identified and agreed to address the areas of concern. Ofsted would also test that the Council had adhered to the prescribed timescales, and more importantly that there was sufficient evidence to show that the actions had been owned and monitored, and that they delivered the identified recommendations and improvements to service delivery.

- 4.9 Initial costs have been considered of the actions contained within the Improvement Action Plan and detailed costs are currently being finalised. These costs will reflect any budget considerations that arise from the Star Chamber process in September 2011.

OTHER OPTIONS CONSIDERED

- 5.1 No other options have been considered.

This report has been approved by the following officers:

Legal officer	Hannah Hogg – Head of Legal (Children and Adults)
Financial officer	Alison Parkin – Head of Finance (Children and Young People)
Human Resources officer	Jon Redfern – Interim Director of Human Resources
Service Director(s)	Jacqui Jensen – Director of Early Intervention and Integrated Safeguarding
	Katie Harris – Director of Specialist Services
	Lynda Poole – Director of Learning and Inclusion
	Rita Silvester – Director of Commissioning
Other(s)	Andrew Bunyan, Strategic Director, Children and Young People
	Heather Greenan – Head of Performance and Improvement

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Background papers:	Appendix 1 – Implications
List of appendices:	Appendix 2 – Improvement Action Plan

IMPLICATIONS

Financial and Value for Money

- 1.1 Initial costs of any actions contained within the Improvement Action Plan have been considered, and detailed costs are currently being finalised. These costs will reflect any budget considerations that arise from the Star Chamber process in September 2011.

Legal

- 2.1 The Council and its partners have a statutory duty to respond to recommendations made by inspectorates such as Ofsted and CQC. Failure to address issues adequately could result in intervention.

Personnel

- 3.1 Some of the Ofsted recommendations have implications for personnel. These will be addressed through the improvement planning process.

Equalities Impact

- 4.1 Some of the recommendations relate to fully addressing the needs of different equality groups. These will be considered through the improvement plan.

Health and Safety

- 5.1 There are no issues arising.

Environmental Sustainability

- 6.1 There are no issues arising.

Asset Management

- 7.1 There are no issues arising.

Risk Management

- 8.1 Risks will be considered as part of the improvement planning process.

Corporate objectives and priorities for change

- 9.1 Improving services for children in need directly supports a number of the priority outcomes in the Council Plan, including 'Being safe and feeling safe' and 'Achieving their learning potential'.



DERBY CITY COUNCIL



CHILDREN AND YOUNG PEOPLE IMPROVEMENT ACTION PLAN

Response to the Ofsted Inspection of Safeguarding and Looked After Children Services
carried out in May 2011

Summary of Areas for Improvement

Recommendation	Recommended timescale	Accountable Officers	Proposed timescale	Page reference for action plan
SAFEGUARDING SERVICES				
1. Develop and implement audit systems to systematically monitor the frequency and quality of child protection visits by social workers and the effectiveness of child protection core group meetings in progressing child protection plans. Auditing must ensure that full attention is given to assessing how well needs arising from a child's ethnicity and culture are being addressed.	Immediate	Nina Martin		Page 5/6
2. Ensure that all children and young people who go missing from their own home have access to a return interview by a suitably designated and trained person.	Immediate	Kev Murphy		Page 8
3. Ensure that all child protection plans include defined outcomes and the roles and levels of support to be provided by relevant professionals and agencies.	Three months	Nina Martin	September 2011	Page 9
4. Develop processes to collate information derived from quality audits of safeguarding practice for regular evaluation by senior managers, DSCB and elected members.	Three months	Jacqui Jensen	September 2011	Page 5/6
5. Ensure that all vulnerable children have timely access to appropriate school places.	Three months	Lynda Poole	September 2011	Page 9/10
6. Improve the consistency and comprehensiveness of the recording of the casework of the local authority designated officer (LADO) and ensure regular liaison between the LADO and the complaints service.	Three months	Nina Martin	September 2011	Page 10
7. Audit children's cases where there is involvement of adult mental health services to ensure effective engagement and partnership working with plans in place to safeguard children.	Three months	Stephen Edgeley/Gary Stokes/Nina Martin	September 2011	Page 11

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Recommendation	Recommended timescale	Accountable Officers	Proposed timescale	Page reference for action plan
8. Strengthen systems for Criminal Records Bureau (CRB) checks and reviews to ensure greater operational consistency and inclusion of all elected members who have contact with children.	Three months	Jon Redfern	September 2011	Page 12
9. Ensure the development of local CAMHS Tier 4 beds for Derby City children and young people assessed as being in need of this service and ensure that such services are provided in an equitable and timely manner.	Three months	Ruth Sargeant – East Midlands Specialist Commissioning Group	September 2011	Page 12/13
10. Strengthen the arrangements for user engagement in child protection processes to ensure their views and experiences are sought in order to inform service delivery and development.	Six months	Hazel Lymbery	December 2011	Page 13
11. In collaboration with corporate services ensure the electronic recording system is fit for purpose in supporting quality practice, enabling management oversight and collating data for audit purposes.	Six months	Nick O'Reilly	December 2011	Page 13/14
12. Ensure that all partners are aware of their reporting responsibilities in regard to privately fostered children and young people.	Six months	Suanne Lim	December 2011	Page 15
LOOKED AFTER CHILDREN SERVICES				
13. Ensure that all statutory visits to looked after children and young people are recorded and carried out within expected timescales.	Immediate	Nina Martin	HOS all aware and implementing	Page 5/6
14. Ensure that ethnicity and culture are fully taken account of in assessments and in direct work with children.	Immediate	Elene Constantinou	HOS all aware and implementing	Page 5/6
15. Ensure that all foster carers receive appropriate health care information when children are newly placed in their care.	Immediate	Pam Hallam		Page 16

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Recommendation	Recommended timescale	Accountable Officers	Proposed timescale	Page reference for action plan
16. Ensure robust and systematic auditing of the quality of practice and support to looked after children and young people, taking explicit account of the impact of ethnicity and culture, and that key issues arising from these are analysed and reported to senior managers and elected members.	Three months	Nina Martin	September 2011	Page 5/6
17. Establish a corporate parenting board and ensure that elected members have training on their corporate parenting responsibilities.	Three months	Andrew Bunyan/Katie Harris	September 2011	Page 17
18. Improve participation of all looked after children and young people in service planning.	Three months	Katie Harris	September 2011	Page 18
19. Ensure the independence of reviewing officers is in line with statutory regulations and guidance.	Three months	Katie Harris	September 2011	Page 18
20. NHS Derby City and Derby City Council must ensure that all care leavers, irrespective of when they leave care, are given a copy of their health history to ensure that they are able to make fully informed health life choices.	Three months	Steve Baguley/Gary Stokes	September 2011	Page 19
21. Monitor access to services and outcomes for children and young people from minority groups.	Six months	Hazel Lymbery	December 2011	Page 5/6
22. Improve the number of looked after children and young people in schools in their local communities and ensure that the need for children to have stability of education placements is given sufficient consideration when children and young people change placements.	Six months	Katie Harris	December 2011	Page 20
23. Develop a coherent strategy to ensure that looked after young people are placed appropriately without the need to utilise bed and breakfast accommodation.	Six months	Lisa Callow/Graham Reiter/Suanne Lim	December 2011	Page 21

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Recommendation	Recommended timescale	Accountable Officers	Proposed timescale	Page reference for action plan
24. Ensure that social work capacity is improved to enable all looked after children to have a named qualified social worker.	Six months	Jacqui Jensen/Katie Harris	December 2011	Page 22

Action Plans

To address the following:

Recommendation 1 - Develop and implement audit systems to systematically monitor the frequency and quality of child protection visits by social workers and the effectiveness of child protection core group meetings in progressing child protection plans. Auditing must ensure that full attention is given to assessing how well needs arising from a child's ethnicity and culture are being addressed.

Recommendation 4 - Develop processes to collate information derived from quality audits of safeguarding practice for regular evaluation by senior managers, DSCB and elected members.

Recommendation 13 - Ensure that all statutory visits to looked after children and young people are recorded and carried out within expected timescales.

Recommendation 14 - Ensure that ethnicity and culture are fully taken account of in assessments and in direct work with children.

Recommendation 16 - Ensure robust and systematic auditing of the quality of practice and support to looked after children and young people, taking explicit account of the impact of ethnicity and culture, and that key issues arising from these are analysed and reported to senior managers and elected members.

Recommendation 21 - Monitor access to services and outcomes for children and young people from minority groups.

Ref	Action required	Outcome required	Timescale	Lead Officers	Progress made	RAG rating
1.1.	Review current Quality Framework and audit process to ensure ongoing best practice	Comprehensive QA framework that reflects good practice	December 2011 and annually	Nina Martin	Audit framework in place	Green
1.2.	Review ICS / Performance Management Processes to ensure accurate recording and monitoring of data for: * Routine statutory visiting * children seen (alone) * purpose of visits and interventions	Improved use of data to inform audit of case files	September 2011	Chris Newton/ Errol McLeary/ Nina Martin	Monitoring report for CP has been developed and incorporates timescale and 'child' seen compliance. Currently with Maureen Darbon to evaluate and provide feedback. LAC report is more complex and is in development Functionality to collect and record 'purpose' and 'interventions' within CCM is currently being scoped Separate reports available	Green

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Ref	Action required	Outcome required	Timescale	Lead Officers	Progress made	RAG rating
1.3.	Purchase and implement Self Audit (Northgate)	Improved audit arrangements	December 2011	Jacqui Jensen	Visit to evaluate Lincolnshire's self audit tool scheduled for August 2011	Amber
1.4.	Revise case file audit tool to ensure adequate challenge on: <ul style="list-style-type: none"> whether ethnicity and culture needs are identified, evidenced and addressed direct work with children effective use of translation and/or interpreter services quality of case notes, child protection plans, statutory visits and core groups	Case records reflect the child's needs and outcomes required Regular monitoring with action plans as required	August 2011	Nina Martin/ Jacqui Jensen	New audit tool drafted Monitoring currently taking place Report and analysis process started	Green
1.5.	Develop supervision arrangements to include: <ul style="list-style-type: none"> Review of how ethnicity and culture has been addressed in case files follow-up on audits 	Improved supervision of staff Regular monitoring with action plans as required	September 2011	Nina Martin/ Maureen Darbon / Chris Newton/Elene Constantinou /Libby Johnston	Refreshed supervision circulated to all HOS – to be finalised 6 September 2011 New supervision policy already written which requires senior managers to audit quality and frequency of supervision of front line staff New audit tool with service manager follow up devised	Green Green/Amber Green
1.6.	Undertake regular reporting on numbers of audits, findings and action taken	Improved monitoring and review - evidence challenge in minutes and recommendations, QA feedback and annual reports from CPMs and RO's	August 2011	Nina Martin /Jacqui Jensen	Process agreed and in place	Green

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Ref	Action required	Outcome required	Timescale	Lead Officers	Progress made	RAG rating
1.7.	Senior managers to communicate changes to audit framework and tools to all staff	Staff understand audit requirements and challenge on practice	December 2011	Nina Martin	Briefings to be prepared Training Commissioning Group being established	Green Green
1.8.	Commission Workforce Learning to deliver reflective training on ethnicity and culture in assessment; direct work and planning		September 2011	Maureen Darbon/ Elene Constantinou	Training to be confirmed	Green
1.9.	Regular reporting of use of services by minority groups, in comparison with local population	Report analysing trends and making recommendations for action	December 2011	Chris Newton	Collation of needs assessment data and information already routinely reported into a single document to be commissioned from Temporary Information and Performance Analyst once post has been filled. Expected date of appointment September 2011	Green
1.10.	Track the progress of LAC minority groups compared to peer groups and the gaps analysed, ensuring action is taken to address issues arising	LAC minority groups achieve in line with national expectations	September 2011 – July 2012	Olwyn Mills	Increased outcomes since 2010	Green
1.11.	All commissioning plans include an Equality Impact Assessment.	Clear analysis of need and requirements.	December 2011	Hazel Lymbery	All tenders for commissioned or grant funded services since May 2011 have included EIA criteria as part of the process	Green

Recommendation 2 – Ensure that all children and young people who go missing from their own home have access to a return interview by a suitably designated and trained person.

Ref	Action required	Outcome required	Timescale	Lead Officer	Progress made [date]	RAG rating
2.1.	Employ a scale 2 admin post for 3 x 0.5 days per week to support missing children activity	Improved monitoring and analysis of children who go missing	August 2011	Kev Murphy		Green
2.2.	Runaway's worker to complete home visit within 24 hours after returned home from a missing episode	<p>Ensure that all missing children have a timely return visit where they are spoken to alone</p> <p>Ensure that missing children have the opportunity to voice any concerns or issues leading to running away</p>	September 2011	Kev Murphy	<p>The working hours of the runaways workers who are located in locality MAT teams have changed to accommodate new practice requirements</p> <p>Visits will be made within an revised time of 72 hours, children will be seen alone</p> <p>A brief assessment will be undertaken on return visit to indicate need for further services</p>	Green
2.3.	A sample of case files for missing children are audited by multi agency group members on a quarterly basis	Practice is compliant with the Missing Children's protocol	September 2011	Kev Murphy /Nina Martin	The first audit will take place after the October missing children statistics have been released by the police, a report will be sent to the DSCB Q&A group	Green

Recommendation 3 – Ensure that all child protection plans include defined outcomes and the roles and levels of support to be provided by relevant professionals and agencies.

Ref	Action required	Outcome required	Timescale	Lead Officer	Progress made [date]	RAG rating
3.1.	Implementation of agreed plan structure and focus	Monitored in file audits and included in audit report	From August 2011	Nina Martin /Maggie Duggins	Currently in use	Green
3.2.	Workshop for managers including Child Protection Managers and Reviewing Officers	Managers are conversant with Planning expectations	June/July 2011	Nina Martin /Maggie Duggins	CPMs and RO's have had briefing. Briefing session booked with managers	Green
3.3.	Workshops for staff commissioned and run	Staff are conversant with Planning expectations	September/October 2011	Nina Martin		Green

Recommendation 5 – Ensure that all vulnerable children have timely access to appropriate school places.

Ref	Action required	Outcome required	Timescale	Lead Officer	Progress made [date]	RAG rating
5.1.	Virtual School Head teacher to be informed of any change of school placement for looked after children where potential difficulties may arise so that support can be accessed	The student has timely access to an appropriate school place	20 days	IRO /VSH	New system for alerting VSH of changes now in place	Green
5.2.	Promote fair access to educational opportunity, promote high standards and the fulfilment by every vulnerable child of their educational potential, secure choice and diversity and respond to parents representations	A system that provides parents/carers with clear accurate information about admissions and supports those who find it hardest to understand the system	Ongoing	Angela Cole	Information to parents currently under review	Amber

Ref	Action required	Outcome required	Timescale	Lead Officer	Progress made [date]	RAG rating
5.3.	Ensure that Looked After Children remain at the top of the Admissions and Over-subscriptions criteria	Looked after children are given top priority on admissions and over subscriptions criteria	Ongoing	Diane Whitehead	Admissions arrangements are fully compliant with the requirements of the Admissions Code respect of Looked After Children	Green
5.4.	Ensure that Derby City has sufficient school places for all children resident in its area. For example – Roma children in the Normanton area	Sufficient school place available for every child including those with complex needs	Ongoing	Hayley Millward	This recommendation links to the Council's ongoing statutory duty to secure sufficient primary and secondary school places for all children in their area	Green

Recommendation 6 – Improve the consistency and comprehensiveness of the recording of the casework of the local authority designated officer (LADO) and ensure regular liaison between the LADO and the complaints service.

Ref	Action required	Outcome required	Timescale	Lead Officer	Progress made [date]	RAG rating
6.1.	Develop process for LADO recording on ICS and other critical records	Comprehensive recording of LADO casework	September 2011	Nina Martin	Work commenced. Interim procedure in place	Green
6.2.	Quarterly auditing of LADO work for quality and consistency	Consistent practice and effective monitoring	December 2011	Nina Martin	Next quarter implementation	Green
6.3.	Quarterly meetings with complaints staff and advocacy staff	Improved liaison arrangements for discussion of issues and consistent practice	September 2011	Nina Martin		Green
6.4	Training/briefings on LADO to be provided to all managers and complaints staff	Communication of good practice	December 2011	Nina Martin /Bernard Fenton	Meeting planned	Green

Recommendation 7 – Audit children’s cases where there is involvement of adult mental health services to ensure effective engagement and partnership working with plans in place to safeguard children.

Ref	Action required	Outcome required	Timescale	Lead Officer	Progress made [date]	RAG rating
7.1.	Think Family Advisory Group constituted (Health Trust)	Embed 'think family' recommendations, strengthen joint working arrangements, establish training supervision, audit and communication strategy	August 2011	Stephen Edgerley	Complete	Green
7.2.	Joint sample of 5% of cases identified by Adult Mental Health services from CYP's LAC and SP population	Assurance that effective engagement and partnership working is in place	September 2011	Nina Martin/Stephen Edgeley	Health Trust Safeguarding Board agreement gained to ensure ethical and legislative requirements are met	Amber
7.3.	Performance assurance framework established for LAC and parents who need mental health services.	Clarity re: 'think family' expectations	December 2011	Stephen Edgerley	Work ongoing	Green
7.4.	Annual Audit cycle: Random file audits undertaken to identify health involvement and assess engagement of MH / CMS work in safeguarding referral cases and LAC.	Determine and assurance of compliance	December 2011	Stephen Edgerley	Work in progress	Green
7.5.	Audit report to be delivered to LSCB on: <ul style="list-style-type: none"> Random MH file audit findings Joint audit of LAC & SP population findings 	Audit sample referenced in audit reports	December 2011 then annually	Nina Martin/Stephen Edgerley		Amber

Recommendation 8 – Strengthen systems for Criminal Records Bureau (CRB) checks and reviews to ensure greater operational consistency and inclusion of all elected members who have contact with children.

Ref	Action required	Outcome required	Timescale	Lead Officer	Progress made [date]	RAG rating
8.1.	Review corporate CRB policy to ensure compliance with requirements	Clear and consistent requirements across the Council for use of CRB checks	September 2011	Jon Redfern	Draft policy is written following consultation with all Directorates along with list of eligible posts	Green
8.2.	Communicate policy to managers and staff	As above	October 2011	Jon Redfern	Awaiting final version of policy	Green
8.3.	Review and improve CRB recording and monitoring system on Vision	Robust process for recording and monitoring CRB checking	Start September and ongoing	Jon Redfern	List of eligible posts now agreed	Green
8.4.	Make amendments to CYP supervision policy to include responsibility for managers to keep CRB (and GSCC) dates on supervision files and check with MIPs	Evidence on CRB and GSCC on supervision files and in MIPs		KE/M Darbon	Work completed. New policy to be launched Supervision file front sheet amended	Green

Recommendation 9 – Ensure the development of local CAMHS Tier 4 beds for Derby City children and young people assessed as being in need of this service and ensure that such services are provided in an equitable and timely manner.

Ref	Action required	Outcome required	Timescale	Lead Officer	Progress made [date]	RAG rating
9.1.	CAMHS Tier 4 inpatient provision is the responsibility of the Specialised Commissioning Groups from 1 st April 2011	East Midlands Strategic Commissioning Group is to shadow local PCT Commissioning agreements	September 2011	Tina Smith - East Midlands Strategic Commissioning Group	Through shadowing of contracts	Green
9.2.	EMSCG to review current care pathways and provision across the region	To ensure needs are met	Ongoing	Tina Smith - East Midlands Strategic Commissioning Group	Through contract management	Red

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Ref	Action required	Outcome required	Timescale	Lead Officer	Progress made [date]	RAG rating
9.3.	Local protocols will be established with local Commissioners and Clinicians	To ensure that all placements are equitable and timely	September 2011	Tina Smith - East Midlands Strategic Commissioning Group	Through contract management	Red
9.4.	Quality audits are being carried out to ensure that providers are meeting the expected standard	Every placement is: - as close to home as possible - timely - equitable - appropriate to need	Ongoing	Tina Smith - East Midlands Strategic Commissioning Group	Through contract management	Red

Recommendation 10 – Strengthen the arrangements for user engagement in child protection processes to ensure their views and experiences are sought in order to inform service delivery and development.

Ref	Action required	Outcome required	Timescale	Lead Officer	Progress made [date]	RAG rating
10.1.	Develop commissioning plan and contract for user engagement in CP processes/consultation model for Derby, Procure and implement for April 2012	CYP and their families involved in safeguarding processes feel their voices contribute to decisions and outcomes	Tender by December 2011	Nina Martin/Tim James	Draft being drawn up	Amber
10.2.	Develop a mechanism where views of Children and Young People can be collated and fed back to commissioners, enabling decision-makers to look at emerging themes and key issues	Mechanism piloted Mechanism rolled out	September 2011 November 2011	Christine Collingwood	Draft outlines being worked up	Amber

Recommendation 11 – In collaboration with corporate services ensure the electronic recording system is fit for purpose in supporting quality practice, enabling management oversight and collating data for audit purposes.

Ref	Action required	Outcome required	Timescale	Lead Officer	Progress made [date]	RAG rating
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Ref	Action required	Outcome required	Timescale	Lead Officer	Progress made [date]	RAG rating
11.1.	Commission Northgate to develop improvement plan for current system	Have an action plan for what we can do with existing system by December	July 2011	Nick O'Reilly	Initial proposal received; awaiting detailed proposal	Green
11.2.	Review and agree action plan	Agree action plan and schedule defined activities	August 2011	Nick O'Reilly, Jacqui Jensen, Perveez Sadiq, Colyn Kemp	Initial proposal circulated, will need quick review of detailed proposal	Amber
11.3.	Deliver new servers to improve performance and processing capacity ¹	Improve performance and response times	August 2011	Nick O'Reilly	Servers built, testing underway	Green
11.4.	Renew/replace old thin client technology ¹	Improve log on times and local response	October 2011	Nick O'Reilly	Four sites completed, schedule to complete all sites with over 5 users on track	Green
11.5.	Implement action plan	Specific improvements achieved by December	Commence August Review October Complete December	Nick O'Reilly/ Janice Allen Jacqui Jensen / Errol McLeary		Amber
11.6.	Business decision regarding single system across Adults and Children or children's only	Agree future strategy allowing us to move on to longer term options	October 2011	Jacqui Jensen/ Perveez Sadiq	Initial consideration given	Green
11.7.	Decide on longer term ICT business options ³	Led by 11.4 determine process and timescale for sourcing new system(S)	December 2011	Nick O'Reilly	None as yet	Green

Notes

1. Actions 1.3 and 11.4 are focussed on systems performance and technology and not on the functionality, use, and navigation of the system; whilst these should contribute to the required improvement they will not address the data management or audit requirements – Actions 11.1 and 11.2 are designed to do that.
2. The initial plan from Northgate suggests no cost for consultancy support and they will contribute up to £ 50,000 effort, however we may need additional capacity and resources in Derby in order to implement changes, this will only be quantified once initial workshops and discovery activity is completed.
3. It is accepted that even if the business decided they wished to remain with Northgate (which appears unlikely) there is a need for a proper contract renewal process. The reality is that we cannot change the ICT system between now and December as the time and the resources required to specify, procure and implement any new system would take much longer. Therefore the short term focus remains on improving what is in place now whilst ensuring we are in a position early in 2012 to move on to the longer term plan. There is however a risk that if Northgate concludes we have decided to exclude them from any future

opportunity they will reign back on their offer to help in the short term, therefore we need to avoid any public statements that we have decided to change systems/suppliers.

Recommendation 12 - Ensure that all partners are aware of their reporting responsibilities in regard to privately fostered children and young people.

Ref	Action required	Outcome required	Timescale	Lead Officer	Progress made [date]	RAG rating
12.1.	Private Fostering leaflets to be circulated to schools, Health and Housing staff	Partners inform social care of children living in PF arrangements	September 2011	Suanne Lim/Maureen Darbon	Leaflets sourced and awaiting to be sent	Green
12.2.	DCSB strategy to be developed to include communication and staff training/awareness programme	City-wide communication re private fostering responsibilities	December 2011	Suanne Lim/Maureen Darbon	Strategic group now in place	Green
12.3.	Partner agency self assessment benchmarking exercise to ascertain current practices and procedures	Training provided is targeted and relevant	July 2011	Suanne Lim/BN	Template designed and sent to partners 29.7.11	Green
12.4.	Breakfast briefing for head teachers	Schools inform social care of children living in PF arrangements	December 2011	Maureen Darbon	Meeting date arranged for late September/early October	Green
12.5.	Article to be included in schools and health circular	Schools and health inform social care of children living in PF arrangements	September 2011	Maureen Darbon/ Jane Elinor	Article written and to be circulated	Green
12.6.	Awareness raising for MATs through HOS meeting	PFs reported through VCM	September 2011	Maureen Darbon	Standard agenda item from September on EISS Heads of Service team meeting	Green
12.7.	Data and referrals monitored	Improved identification and assessment	October 2011	Chris Newton	Reporting requirements and format agreed	Green

Recommendation 15 - Ensure that all foster carers receive appropriate health care information when children are newly placed in their care.

Ref	Action required	Outcome required	Timescale	Lead Officer	Progress made [date]	RAG rating
15.1.	Audit of timeliness of Initial Health Assessments (IHA) to understand reason for delay	IHA done within 4 weeks of coming into care	Completed by December 2011	Liz Webster/Corina Teh	Audit to be undertaken by December 2011 and then annual audit	Green
15.2.	Increase flexibility in provision and improve timeliness of IHAs	As Above		Liz Webster/Corina Teh	Quarterly monitoring via social care database	Green
15.3.	Social worker (SW) to give foster carer essential health information form which includes health needs when they receive child and red book if available	Timely information	September 2011	Maureen Darbon/Elene Constantiou	Sample of foster carers to be asked annually if they have received health information	Green
15.4.	At IHA and Review Health Assessment (RHA) foster carers are given health advice to care for the child	As above IRO annual review o include compliance	September 2011	Nina Martin	As above	Green
15.5.	Health to send a copy of the Health Care Plan directly to child's placement following IHAs and RHAs		August 2011	Liz Webster		Green
15.6.	All Foster Carers to retain a copy of individual child health record file	Corporate parent to hold a copy of health record	September 2011	Rod Jones	All fostering social workers have reviewed carers documentation	Green

Recommendation 17 - Establish a corporate parenting board and ensure that elected members have training on their corporate parenting responsibilities.

Ref	Action required	Outcome required	Timescale	Lead Officer	Progress made [date]	RAG rating
17.1.	Create a Corporate Parenting Forum	Improved oversight and understanding of corporate parenting responsibilities across the city	August 2011	Andrew Bunyan/ Katie Harris	Report submitted 12/07/11 Progressing through COG and Cabinet by mid September 2011	Green
17.2.	Training to be provided for Corporate Parenting Forum – including elected members	As above	First part of programme to be delivered September 2011	Andrew Bunyan/ Katie Harris	Training day arranged. To be delivered 21 September 2011	Green
17.3.	Undertake evaluation of effectiveness of Corporate Parenting Forum	Improvements to arrangements (if required)	September 2012	Andrew Bunyan/ Katie Harris	Report September 2012	Green

Recommendation 18 - Improve participation of all looked after children and young people in service planning.

Ref	Action required	Outcome required	Timescale	Lead Officer	Progress made [date]	RAG rating
18.1.	Maintain contract advocacy and Independent Visitor Scheme for CIC	CiC experience services that keep them safe and healthy and achieve more	September 2011	Nina Martin /Tim James		Green
18.2.	Ensure Children in Care Council undertake wider participation work	Highly representative range of views informing service planning	September 2011	Katie Harris	Contract established with CSV Planning meeting with all stakeholders to be agreed Delivery ongoing	Green
18.3	Increase contribution through LAC reviews and feedback to IROs and advocates/ Independent visitors	Greater involvement of CIC	September 2011	Nina Martin	Monitoring format being developed	Green

Recommendation 19 - Ensure the independence of reviewing officers is in line with statutory regulations and guidance.

Ref	Action required	Outcome required	Timescale	Lead Officer	Progress made [date]	RAG rating
19.1.	Review reporting arrangements for Head of QA, outside operational management structure	IROs line of reporting is independent to operational structure	September 2011	Andrew Bunyan	Proposals made	Amber

Recommendation 20 - NHS Derby City and Derby City Council must ensure that all care leavers, irrespective of when they leave care, are given a copy of their health history to ensure that they are able to make fully informed health life choices.

Ref	Action required	Outcome required	Timescale	Lead Officer	Progress made [date]	RAG rating
20.1.	Adopted children: Ensure adopters given comprehensive medical report and red book if available Advise to access GP for more information	Young People (YP) are able to make fully informed health life choices	August 2011	Elene Constantinou	All SW's/IRO's notified	Green
20.2.	Returning to birth family: Ensure carer and young people given red book if available, copy of healthcare plan following health assessment Advise to access GP for more information	Young People (YP) are able to make fully informed health life choices	August 2011	Elene Constantinou / Maureen Darbon	All SW's/IRO's notified Frontline staff to be regularly reminded in team meetings IROs to recommend in final review of arrangements meetings	Green Green
20.3.	Leaving care as a Young Person: Ensure YP have a copy of the healthcare plan which includes immunisation status. At final review YP and Independent Reviewing Officer (IRO) determine any outstanding health issues. Advise YP to have dental, optician check Ensure registered with a GP	Young People (YP) are able to make fully informed health life choices	August 2011	Liz Webster/ Steve Baguley	Annual snapshot consultation audit with YP at Aspire to check they have received health information and know where to get more information if needed	Green

Recommendation 22 - Improve the number of looked after children and young people in schools in their local communities and ensure that the need for children to have stability of education placements is given sufficient consideration when children and young people change placements.

Ref	Action required	Outcome required	Timescale	Lead Officer	Progress made [date]	RAG rating
22.1.	Virtual School Head teacher to be involved in discussions to ensure that all decisions are needs led	Each child has an appropriate school placement	December 2011	Olwyn Mills	New system in place	Green
22.2	Improve communications with exit and receiving schools	Schools are aware of the reasons for the decisions that are made	December 2011	Olwyn Mills	Training provided by VSH adapted	Green
22.3	Change procedure to ensure Senior Manager scrutinises a change of school in Key Stage 4	Decisions made are supportable and are needs led	December 2011	Elene Constantinou / Maureen Darbon	Systems for issuing change in circumstances forms approved	Green

Recommendation 23 - Develop a coherent strategy to ensure that looked after young people are placed appropriately without the need to utilise bed and breakfast accommodation.

Ref	Action required	Outcome required	Timescale	Lead Officer	Progress made [date]	RAG rating
23.1.	Review Homeless 16/17 year old strategy/policy	Current policy reviewed and supported by partners Strategy ensures best practice informs decision making and young people receive a well supported care plan	December 2011	Suanne Lim/Graham Reiter	Initial review of policy undertaken on 12.08/11 and strategy proposals drafted for consultation Further meeting planned to be held in September 2011	Green
23.2.	Bed and Breakfast strategy and data is monitored quarterly by CFLB and monthly by locality HOS group	Youth Task Force are assured that young people are well supported and any emerging barriers to high quality care are unblocked	December 2011	Elene Constantinou/ Maureen Darbon	Monitoring requirements have been specified and reporting format agreed	Green
23.3.	6 monthly report to strategic LAC group/Commissioning	Strategic LAC group is assured that best practice is followed	December 2011	Elene Constantinou/ Maureen Darbon	Monitoring requirements have been specified and reporting format agreed	Green

Recommendation 24 - Ensure that social work capacity is improved to enable all looked after children to have a named qualified social worker.

Ref	Action required	Outcome required	Timescale	Lead Officer	Progress made [date]	RAG rating
24.1.	Vacancy, recruitment and retention of social workers are monitored monthly and reported to service directors and core group	Recruitment and retention is monitored and early action taken if required	September 2011	Jon Redfern/Jacqui Jensen / Katie Harris		Green
24.2	Review current action plan to reduce social work workload and increase capacity	Ensure that the plan is achieved	December 2011	MD/LJ/ Elene Constantiou	Social work case loads currently increasing due to vacancies/maternity leave	Amber
24.3	Increase social work capacity through: <ul style="list-style-type: none"> • Replace 18 social care worker posts with qualified social workers as posts become vacant • The LAC improvement plan 	Social workers have workload capacity to meet LAC requirements	September 2011 and ongoing	Katie Harris/Jacqui Jensen HR support		Amber
24.4	Social work traineeship's are focussed on children's practitioners with LAC caseloads: 3 x CIC 2 x Localities	Five additional Children's Practitioners join programme	December 2011	Katy Elliott	Plans to identify/recruit new trainees are progressing	Green
24.5	Explore models of team management which offer different options for case holding/management	Options explored	December 2011	Jacqui Jensen/MD	Consideration of Hackney and other similar models under way	Green

