Safeguarding and Looked After Children's Services Action Plan 22 March 2011

A) summary of the high level objectives, milestones and progress of the detailed action plan to further improve the wellbeing of Children in Need and Looked After Children in Shropshire.

Objective	Target	Date	Who	Specific action/s	Progress
1)SG: The essential role of partners in preventative work is supported and protected	Provide support to front- line staff in early intervention services' partner agencies to help them make the transition to the new organisational structure.	now	SSCB	Report to the Safeguarding Board on 24 March 2011 and ensure next steps are agreed.	Initial Action Completed Further work continuing with partners relating to the Initial Contact Team and through Multi Agency Stakeholders Group.
2) SG: Health capacity, monitoring and communication supports high quality safeguarding practice	Ensure the designated nurse has sufficient operational support to allow her to focus on the strategic element of the role.	By end June	Health	Review of current health safeguarding arrangements and resource allocation to determine best option of sufficient operational support.	Meeting arranged for the 4 th April 2011 with PCT Executive Safeguarding Lead, Telford and Wrekin PCT Deputy Director for Children services.
	Ensure that clear processes to monitor safeguarding activity by all independent contractors (such as dental practitioners, pharmacists and	By end June	Health	An audit tool for monitoring of independent contractors safeguarding arrangements to be devised and piloted locally.	Nurse for Safeguarding has devised an audit tool using the

	optometrists) are established.			Audit tool to be implemented by end of June 2011.	
	Improve the information sharing arrangements between hospital accident and emergency (A&E) departments, minor injuries units and community health professionals.	now	Health	A/E and Minor Injuries unit task and finish group implemented to improve safeguarding information sharing. Task and finish group membership includes PCT IT representative, key clinical professionals including A & E consultant and safeguarding leads across health economy. Information sharing issue requirement by CQC minuted at last HSGCC meeting in March 2011	Initial meeting of task and finish group held in February 2011. SaTH A/E department agreed that MIU staff can phone A/E departments to establish if a child is subjected to a child protection plan as flagged record on their system. PCT IT representative to liaise with business manager re: proposal of how to IT link sites as MIU a different system. The Designated Nurse asked that future IT strategic plans for new systems include safeguarding flagging systems. Fran Beck, Director of Community Services to discuss with IT senior managers as high priority.
3) SG: Outcome focused audits and CPPs and well-informed conferences enhance service delivery	Ensure that all reports to child protection conferences are shared in advance between professionals and with the family.	now	Service Managers: Assessm't & Case Mgt + Safeguard'g and Review	Remind all Assessment social workers of the requirement to share reports in advance of meetings. All Team Managers to raise with social workers in supervision and when signing off reports. Track via IRU QA return.	Initial Action completed by Service Manager and monitoring arrangements in place.

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	Revise audit processes to ensure that they have an outcome focus.	By end June	Service Managers: Assessm't & Case Mgt + Safeguard'g and Review	Discussion re current audit processes to ensure outcome focus.	,
	Improve the structure and content of child protection plans so that they are outcome focussed and contain measurable improvements that can be monitored by the core group.	By end June	Service Managers: Assessm't & LAC + Safeguard'g and Review	Inform all ASS social workers of the importance of devising outcome focussed plans. AS 09.03.11. All Team Managers to raise with social workers in supervision when discussing plans. Team Manager case file audits to review plans and records of core group. Track via IRU QA return.	Initial Action completed by Service Manager.
4)SG: SSCB have an overview of complaints and allegations	The LSCB should receive an annual report on complaints about child protection processes or decisions.	By end June	Service Manager Safeguard'g and Review	Report will be submitted on 16.06.11.	
against staff	The LSCB should receive an annual report from the LADO on the management of	By end June	Service Manager Safeguard'g and Review	Initial report presented to SSCB on 24.03.11.	Completed

	allegations against staff who work with children.				
5) SG: Embed performance management at front line	Improve the use of performance management across front line services.	By end Sept	Safeguard'g Group Manager with support of Senior Performance Advisor	Suite of regular performance reports tailored to the needs of senior staff, team managers and social workers to be provided.	Requirements raised as part of the data systems review (Carefirst).
6) SG: EDT access to Carefirst & record management	Ensure that each child has a single case record that can be accessed by the Emergency Duty Team (EDT).	By end Sept	Information Systems Manager	Access to be enabled – again as part of the data systems review (Carefirst)	
7) LAC: Private fostering improvements	Improve the quality of the private fostering service.	now	Service Manager Children's Placement Service & Joint Adoption Service	Private fostering file that is regulation compliant, to be introduced. Benchmark with other LAs whose procedures have been rated 'good; by Ofsted Limit number of professionals involved in PF assessment process Launch revised procedures Remove Fostering Panel oversight function	overseen by one CIN worker with line-manager making early decision. Checked with Beds and Walsall Councils and agreed plans to amend our PF procedures in line with theirs.

				Clarify leadership role	following BMP in order for 'decision on suitability timescales' to be met Clarified
8) LAC: Permanency policy awareness	Improve staff awareness of the permanency policy and their role in its implementation.	By end June	Service Manager Children's Placement Service & Joint Adoption Service	Arrange staff briefings to all key teams concentrating on the need for a permanency plan at the second review and reinforcing the different types of permanency Ensure procedures are compliant with new regulations and ensure any revision includes.	Arrangements / dates to be agreed asap and briefings rolled out during May. Alerted Tri-X colleagues about this requirement clear details of worker/role accountability.
9) LAC: Transition to independent accommodatio n and	Develop a minimum service specification for the supported lodgings scheme.	By end June	Service Manager Assessm't & LAC	Colin Wright and Shirley Holbrook to review current documentation and relaunch service specification by end of April 2011.	
economic activity for careleavers is further supported.	Improve the quality of provision for less academic care leavers.	By end Sept	Group Manager Learning and Skills (Plus link to Virtual Head, LAC)	Progress the work already underway with Shropshire Colleges and in relation to Apprenticeships/work placements.	
10) LAC: Health support and info for	Ensure care leavers receive adequate health related support and information	By end Sept	Health	LAC Nurse /LAC CAMHS to develop with leaving care services team / young people a health	Ellie Johnson, Designated Nurse for Looked After Children working with multi-agency partners and health managers to develop local

looked after children and care leavers is protected and enhanced				care pathway and this to include identifying any gaps in service provision. Healthy care partnership to contribute to care pathway development. Health actions to be	pathway.
	Ensure the implementation of the revised service level agreement for health care of looked after children	By end Sept	Health	Provider improvement plan in respect of revised SLA to be agreed by end April 2011. Health visitors to be trained to complete LAC health reviews by June 2011. Health visitors to complete LAC health reviews to complete LAC health reviews for Lac under 5 by July 2011 Designated Dr LAC to be identified by provider by Sept 2011	