

CABINET

17 JANUARY 2012

OUTCOMES OF THE CHILDREN'S SERVICES ASSESSMENT AND THE OFSTED/CQC ANNOUNCED INSPECTION OF SAFEGUARDING & CHILDREN IN CARE

Portfolio Holder: Councillor Les Wicks, Children's Services

Report from: Rose Collinson, Director of Children and Adults

Author: Sally Morris, Assistant Director, Commissioning & Strategy

Summary

The report provides Cabinet with an overview of the main findings of the recent Ofsted 'Children's Services Assessment' rating 2011 and the outcomes of the 2011 joint 'Announced inspection of Safeguarding and Looked After Children' reported by Ofsted and Care Quality Commission.

1. Budget and Policy Framework

- 1.1 The Children's Services Assessment (CSA) and the Announced Inspection of Safeguarding and Looked After Children (SLAC) are two significant elements of the national framework for managing performance and reporting on the progress of local authorities and their partners in meeting the needs of children in the locality. Monitoring and responding to such performance is a matter for Cabinet.
- 1.2 This report will be submitted to the Children and Young People Overview and Scrutiny Committee on 19 January 2012.

2. Background

- 2.1 The Children's Services Assessment (provided in accordance with the Education and Inspection Act 2006), which is published each year, draws on the findings of a number of other Ofsted inspections and regulatory visits, in addition to the SLAC, notably:
 - The annual unannounced inspection of contact, referral and assessment – exploring the arrangements for receiving and dealing with social care referrals
 - Inspections of schools and other educational settings, childminders, nurseries, children's centres, residential care establishments.
 - Inspections of arrangements for adoption, fostering and private fostering.
 - The evaluation of serious case reviews
 - Performance data.

2.2 This information is summarised in the Children's Services Performance Profile. Most weight is given in the overall Children's Services assessment to the outcomes of the Ofsted inspections and regulatory visits including:

Block A: the findings from regular and ongoing inspection and regulation of services, settings and institutions.

Block B: findings from the safeguarding and looked after children services inspections, unannounced inspections of contact, referral and assessment arrangements for children in need and children who may be in need of protection, evaluations of serious case reviews and, if a full inspection of safeguarding and looked after children services has not taken place, the findings from the joint area review inspections.

2.3 The Medway Children's Services Assessment, a strategic assessment of how children's services are performing overall, continues to be 'performing well' and this is a testament to the clarity and focus of our improvement plans and their effective implementation. Nevertheless there is more to do and the most recent inspections identify some clear areas of work for the future that are embedded in the Council Plan and particularly picked up in detail in the recently updated Children and Young People's Plan 2011. These are implemented through the service plans that guide operational delivery.

3. Recent Inspection Findings

Children's Services Assessment

3.1 The annual CSA (2011) identifies the overall judgement for Children's Services as 'performing well', with performance sustained from 2010 and summarises the strengths and areas for improvement in relation to Children's Services overall in Medway.

3.2 Key strengths identified this year include:

- Most provision for children under 5 is good or better
- Achievements of under 5s from families with low incomes have improved again and are now in line with other areas
- The large majority of secondary schools are good or better and the 2 schools in an Ofsted inadequate category from last year are now satisfactory
- Education standards for 16 year olds are improving and are now in line with other similar areas
- Attainment for 16 year olds from low income families is improving and the gap between them and others is narrowing and is narrower than in other similar areas
- Attainment of Black and Asian young people is higher than the national average
- The extent to which Looked After Children enjoy their learning and achievement is good and they have good opportunities to contribute to decisions about their lives
- The majority of provision for 16 year olds is good or better including at the FE college

- Achieving level 2 or 3 qualifications by the age of 19 has improved and are now in line with similar areas
- The special schools and special provision is judged to be mainly good or outstanding
- One PRU is judged good, the other is now satisfactory (previously good)
- Fostering and adoption services are both judged as good
- The two children's homes are judged good or better
- The large majority of commissioned placements are with good or better fostering or adoption agencies or in good or better children's homes

3.3 Areas for improvement include:

- Those areas identified in the recent announced inspection of Safeguarding and LAC, see below paragraph 3.6.1
- Early Years and childcare continues to be satisfactory overall with some improvement in day care but only half of childminders are good or better
- Although overall effectiveness of primary schools has shown some improvement since the last assessment only just over half are good or better. Standards achieved by 11 year olds in national tests are lower than elsewhere
- Despite good recent improvement, fewer 19 year olds from families with low incomes achieve level 3 qualifications than nationally and they are not catching up with others in Medway

Announced inspection of Safeguarding & LAC

3.4 The announced inspection involves a thorough inspection of children's social care, health and education support for vulnerable children including LAC every 3 years. A joint team of Ofsted and Care Quality Commission (CQC) inspectors undertake the inspection over a monthly period; in the case of Medway there were 4 inspectors from Ofsted and 1 from CQC.

3.5 The overall outcome of this inspection was that Medway performs 'adequately' on safeguarding and LAC. The reports summarises where the partnership is performing well and make some specific recommendations for improvement.

3.6 The partnerships strengths include:

- children and young people in Medway are safe in schools and feel safer in the wider community.
- schools and early years provision support vulnerable children to achieve good educational outcomes
- cross party there is political support to ensure children are safe
- partners across Medway know our vulnerable children and joint working is effective between health, police, children's social care and education to keep children safe and cared for
- preventative services are wide ranging and make a real difference for children
- the views of all children, young people and parents contribute well to service design and delivery
- regulated care services are consistently good or better, eg. fostering, adoption, respite care.
- senior leadership is effective in driving improvement and managers are clear about the quality of standards they aim to achieve

- the Medway Safeguarding Children's Board and the Medway Children's Trust have clear and ambitious targets to improve life for all children, especially the most vulnerable
- plans are clear, effective and influenced by children's views
- resources are adequate across the partnership
- staff feel well supported across the partnership
- thresholds clear and generally understood
- good and effective approaches to support community cohesion and counteract discrimination.

3.6.1 Recommendations for improvement on **safeguarding** included in the Ofsted report:

Immediately

- Ensure referrals into social care are allocated promptly
- Medway Maritime hospital to ensure adequate security at A&E

Within 3 months

- Ensure thresholds are applied consistently and referrers understand why a referral is not accepted
- Improve the quality of assessment: ensuring risk and protective factors clearly identified, culture and identity are well considered, and the impact on the child of current circumstances fully explored
- Improve the quality of CP planning so families know what needs to change, how this can be achieved and how the plan will be monitored including contingency arrangements should the plan prove ineffective
- Ensure children and young people can attend/be represented at their CP conference should they wish
- Ensure employment records of all children's social care staff, including those who transferred from Kent, include copies of their qualifications
- MSCB to ensure appropriate notification are in place so that children affected by domestic violence are identified, protected and supported
- NHS Kent & Medway to ensure there is appropriate designated place of safety that all partners are aware of and available at all times (section 136)
- NHS Kent and Medway and the Foundation Trust to ensure that children and young people are seen in separate areas from adults at all times
- NHS Kent and Medway and Medway Council to ensure that access to the CAMHS single point of access is available at all times

Within 6 months

- Ensure that the children's case recording system enables accurate case recording and improves management oversight of case work

3.7 Recommendation for improvement on services for **children in care** included in the Ofsted report:

Within 3 months

- ensure all care leavers receive a copy of their health histories
- ensure that the outcomes from the strengths and difficulties questionnaires are used in the LAC health assessment
- ensure the "do not attend" rates are significantly reduced

- ensure staff in social work teams are clear about the purpose and value of life story work and that this starts sufficiently early for relevant children and becomes embedded in practice
- ensure that the council's foster carers are clear about the arrangements for linking skill development with additional fee payments and the complex needs of children placed

Within 6 months

- Ensure that all external placements are commissioned and monitored in line with proposed strategic commissioning arrangements to ensure maximum value for money and provide clarity and rigour regarding expected standards of care

3.8 Those further recommendations for improvement identified in the CQC health focused report included:

- NHS Kent and Medway must ensure that there is equality of access to forensic sexual assault services for all young people at all times
- Medway Foundation NHS Trust must ensure that there is sufficient staffing capacity to deliver the strategic priorities relating to the CAF (common assessment framework)
- Medway Foundation NHS Trust must ensure that all staff as defined by 'Working Together to Safeguard Children' who require safeguarding training receive this at the appropriate level for their role in line with this statutory guidance

4. Next Steps

- 4.1 The council has identified an action plan to cover the recommendations set out in the Ofsted announced inspection report although there is no formal requirement to report this to Ofsted. CQC do however require a formal action plan to be produced for the recommendations in their report, which include 7 of the 17 Ofsted recommendations and 3 additional recommendations. The partnership has agreed to produce a single action plan covering the recommendations from both reports, which will be submitted to CQC in its entirety. A copy of the Action Plan is attached at Appendix 1.
- 4.2 CQC required their action plan to be submitted within 20 working days of receiving the report, which was delivered on the 23 November 2011.
- 4.3 The broad recommendations in the Children's Services Assessment are all addressed in the recently updated Children and Young People Plan 2011.

5. Risk management

- 5.1 There are some risks that the partnership may not achieve the recommendations from the Safeguarding and LAC inspection set out above and CQC monitoring of the joint action plan may pick this up.

Risk	Description	Action to avoid or mitigate risk
That the recommendations are not implemented to the agreed timescale	<p>The timescales for implementing the recommendations are tight and fall over the Christmas period so some slippage may occur over that period.</p> <p>Equally some recommendations will require investment that may take some time to secure in the respective organisations notably NHS Kent and Medway, Medway Council and Medway Foundation Trust.</p>	<p>Ensure that full planning meetings are held with all relevant parties to secure agreed actions and implementation timescales on the action plan.</p> <p>Ensure that all parties progress funding requests in a timely fashion to ensure sound financial plans underpin implementation.</p>
That the practice improvements are not consistently embedded in children's social care	The practice improvement described in the announced inspection have been difficult to secure in the past and the step change required to provide consistently good practice and meet the volume of referrals is considerable.	<p>Transform the temporary appointment of Principal Practitioner into a permanent post and advertise early in the new year.</p> <p>Ensure the specific elements of the recommendations on practice are embedded in the Medway Model of Practice and associated training.</p>

<p>That the new ICS system is not sufficiently embedded at the next point that the children's services is inspected, either through an announced or unannounced inspection</p>	<p>The new ICS system is part of the current retendering process for a new Children and Adults systems. This could be subject to delays if the process is not carried out correctly.</p> <p>Similarly the success of the new system will be dependent on a full and comprehensive implementation plan being funded by the local authority.</p>	<p>Assign the oversight of the re-tendering process to the lead procurement advisor in Children's Services who will report to the Social care Systems Board on progress.</p> <p>Secure appropriate corporate legal advice to ensure that the procurement process is sound.</p> <p>Develop a costed full implementation plan for the new system by the end of January 2012 which is likely to include a project manager to oversee the implementation process.</p>
--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------	------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------	-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------

<p>That the existing use and functionality of the current ICS and Caredirector systems will deteriorate as we progress through the re-tendering process</p>	<p>Staff are aware that the ICS system is being re-tendered and the confidence in the current system is likely to fall as a result, however it is imperative that we maintain the current functionality and use of both Raise and Caredirector throughout the re-tendering process.</p> <p>Similarly the provider is aware of the re-tendering process and as they are not a party to the framework being used for re-tendering, they are unable to tender for the work. This could result in a reduction in the service support offered from the provider.</p>	<p>Ensure that the full programme of training and support on Raise and Caredirector is maintained throughout the re-tendering process.</p> <p>As part of the Medway Model of Practice in children's services maintain support and supervision of use of ICS for recoding case work.</p> <p>Managers and supervisors are given clear instructions to maintain support and use for the current system until the new system is fully functional</p> <p>Maintain the service relationship contacts and support processes with the current provider throughout the re-tendering process.</p> <p>Oversight and management of this risk is given to the Social Care Systems Board</p>
-------------------------------------------------------------------------------------------------------------------------------------------------------------	-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------	--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------

6. Consultation on the action plan

- 6.1 The action plan from the Safeguarding and LAC will be subject to detailed consultation with all stakeholders involved in achieving the recommendations.
- 6.2 Actions in the Children's Services Assessment have already been subject to full consultation with relevant Stakeholders.

7. Financial and legal implications

- 7.1 ASC transformation grant has been earmarked for procurement of the proposed new ICS, however the remainder of the action plan will need to be delivered within existing partnership budgets.
- 7.2 The legal implications are set out in the body of the report.

8. Recommendation

- 8.1 Cabinet note the findings of the recent announced inspection for the council and its partners and the Children's Services Assessment rating and support and endorse the actions in the Action Plan, which will be overseen by the Medway Safeguarding Children Board.

9. Suggested Reasons for Decision

- 9.1 To provide Cabinet with the results of the two inspections of children's services and to highlight what action is being undertaken to address the recommendations made.

Lead officer contacts

Rose Collinson, Director of Children and Adult Services, Medway Council.
rose.collinson@medway.gov.uk

Sally Morris, Assistant Director of Children's Services, Medway Council/NHS Kent and Medway, sally.morris@medway.gov.uk Tel: 01634 334049

Background papers

- Annual Children's Services Assessment – Ofsted Nov 2011
<http://www.ofsted.gov.uk/local-authorities/medway>
- Inspection of Safeguarding and Looked After Children – Ofsted/CQC 18 Nov 2011
<http://www.ofsted.gov.uk/local-authorities/medway>
- Report on the Outcomes of the integrated inspection of Safeguarding and Looked After Children's Services in Medway – CQC Nov 2011
<http://www.cqc.org.uk/download/a-to-z/intinsp?page=2>

Joint Health and Social Care Action Plan to improve services for safeguarding and looked after children in Medway				
Outcome (Code: yellow = LA, blue = NHS, green = joint: red text = CQC additions)	Lead person (<i>working with</i>)	Date to be completed	Actions	Measures of success and progress
OPERATIONAL DELIVERY IMPROVEMENTS				
1. NHS Kent and Medway and Medway Foundation NHS Trust to ensure adequate security at Medway Maritime Hospital A&E department so that only legitimate individuals have access to patients' areas, especially where children and young people are located to maintain their safety, privacy and dignity. (OFSTED and CQC, 2011)	Gray Smith-Laing Medway Foundation Trust <i>Lorraine Goodsell NHS Kent and Medway</i>	Immediately complete	A&E security is reorganised to close the current breach and no unauthorised access to patient areas is evident NHS Kent and Medway undertake a site visit to confirm new arrangements in place (December 2011)	Security at A&E meets CQC standards on site visit in December 2011. Site visit on 13 th December. MFT have improved signage to reduce inappropriate entry/exit from the A&E department and increased policing of the area to reinforce this. Plans are in place to provide door entry systems from outside into the department, although the method used will need to be in negotiation with ambulance services. Children and young people wait and are now seen in the secure children's area and therefore any access to them is significantly reduced (see outcome 3)

**Joint Health and Social Care Action Plan
to improve services for safeguarding and looked after children in Medway**

Outcome (Code: yellow = LA, blue = NHS, green = joint: red text = CQC additions)	Lead person (<i>working with</i>)	Date to be completed	Actions	Measures of success and progress
<p>2. Ensure that all referrals accepted by children's social care services are allocated promptly rather than being 'assigned to team' and that managers clearly record further actions required (OFSTED, 2011)</p>	<p>Helen Gulvin Medway Council</p>	<p>Immediately</p>	<p>All referrals accepted by children's social care are allocated to a key worker within 24 hours</p>	<p>No unallocated cases in system for longer than 24 hours as evidenced in the Performance Digest</p>
<p>3. NHS Kent and Medway and Medway Foundation Trust to ensure that that plan for a dedicated and upgraded children and young people A&E department is not impeded and in the meantime children and young people are seen in separate areas from adults at all times of day and night, to maintain their safety, dignity and privacy (OFSTED and CQC, 2011)</p>	<p>Gray Smith-Laing Medway Foundation Trust</p> <p><i>Lorraine Goodsell NHS Kent and Medway</i></p>	<p>18-Feb complete</p>	<p>A designated area is made available in A&E for children and young people to allow children and young people to be seen in a separate area from adults at all times</p> <p>NHS Kent and Medway undertake a site visit to confirm new arrangements in place (February 2011)</p>	<p>Work is now completed on creating a separate children's area within the Emergency Department. The area is open, fully functional and access is via a swipe card system</p> <p>The site visit from NHS Kent and Medway on 13th December confirms that a designated secure A&E area for children and young people is available at all times.</p>

**Joint Health and Social Care Action Plan
to improve services for safeguarding and looked after children in Medway**

Outcome (Code: yellow = LA, blue = NHS, green = joint: red text = CQC additions)	Lead person (<i>working with</i>)	Date to be completed	Actions	Measures of success and progress
<p>4. Improve the quality of assessments, ensuring that risk and protective factors are clearly identified, that the child's culture and identity are well considered and that the impact of the current circumstances on the child are fully explored (OFSTED, 2011)</p>	<p>Helen Gulvin Medway Council</p>	<p>18-Feb</p>	<p>All social care staff understand and implement the Medway Model of practice in assessment The senior practitioners implement the MMP with particular regard to this recommendation The principal practitioner's action plan will lead and support this work All staff have clear feedback on their assessments with identified areas for improvement if required</p>	<p>Case auditing evidences improved quality and consistency in assessment in line with the Medway Model of practice</p>
<p>5. Improve the quality of child protection planning so that families are clear about what needs to change, how this is to be achieved, how the plan will be monitored and the contingency arrangements should the plan prove ineffective (OFSTED, 2011)</p>	<p>Stephanie Goad Medway Council</p>	<p>18-Feb</p>	<p>All Child Protection Conference Chairs understand the quality standards set out in the Medway Model of Practice and are identify "required outcomes" from which good quality child protection plans with clear arrangements for monitoring can be developed by the Core Group</p> <p>The Principal Practitioner will</p>	<p>QA measures, including observations of CPCs by CISRS Manger evidences good quality CP plans and effective monitoring arrangements</p> <p>Q4 monitoring by CISRS includes evidence from observations of CPCs undertaken in January and February 2012</p>

**Joint Health and Social Care Action Plan
to improve services for safeguarding and looked after children in Medway**

Outcome (Code: yellow = LA, blue = NHS, green = joint: red text = CQC additions)	Lead person (<i>working with</i>)	Date to be completed	Actions	Measures of success and progress
			support the implementation of these proposals	
6. Ensure that children and young people are enabled to attend, or be represented at, their child protection conference should they so wish, with regard to their age and understanding (OFSTED, 2011)	Helen Gulvin Medway Council	18-Feb	Guidance on age and circumstance appropriate arrangements for engaging and supporting children and young people to attend or contribute to their CP conferences are set out The guidance will also clarify the respective roles of social workers and IROs	Improved attendance and involvement of children and young people in CP conferences as evidenced through the IRO monthly statistical monitoring
7. Ensure all care leavers receive a copy of their health histories to equip them to make effective future health choices (OFSTED, 2011)	Sally Morris Medway Council/ NHS Kent and Medway	18-Feb	New process agreed as part of the leaving care arrangements to inform all care leavers about their health histories	Care leavers report by April 2012 that they have information on their health histories when they leave care

**Joint Health and Social Care Action Plan
to improve services for safeguarding and looked after children in Medway**

Outcome (Code: yellow = LA, blue = NHS, green = joint: red text = CQC additions)	Lead person (<i>working with</i>)	Date to be completed	Actions	Measures of success and progress
8. Ensure that all staff in children's social work teams are clear about the purpose and value of life story work, that this work starts sufficiently early for relevant children and becomes embedded practice (OFSTED, 2011)	Helen Gulvin Medway Council	18-Feb	Process for who, how and when life story work is initiated and updated is agreed and implemented including adding to Medway Model of Practice.	All staff are initiating life story work at the appropriate time as evidenced in case audit work
9. NHS Kent and Medway must ensure that there is equality of access to forensic sexual assault services for all young people at all times (CQC, 2011)	Meradin Peachey NHS Kent and Medway	18-Feb	This action to be picked up by the Kent and Medway Sexual Assault Strategy Group: next meeting 10 th January 2012. SARC policies and procedures to be aligned to ensure that the same message is given re self referral	Young people in Medway have access to forensic sexual assault services at all times
10. Medway Foundation NHS Trust must ensure that there is sufficient staffing capacity to deliver the strategic	Gray Smith-Laing Medway Foundation	18-Feb	A joint Common Assessment Framework (CAF) Pilot commenced in September involving Midwives and Health	Increased number of appropriate CAFs initiated by Medway Foundation Trust staff.

**Joint Health and Social Care Action Plan
to improve services for safeguarding and looked after children in Medway**

Outcome (Code: yellow = LA, blue = NHS, green = joint: red text = CQC additions)	Lead person (<i>working with</i>)	Date to be completed	Actions	Measures of success and progress
priorities relating to the common assessment framework (CQC, 2011)	Trust		Visitors. This is being monitored monthly and will be fully reviewed in February 2012 on completion of the pilot. To date this has shown an increase in the number of CAFs.	
11. Medway Foundation NHS Trust must ensure that all staff as defined by 'Working Together to Safeguard Children' who require safeguarding training receive this at the appropriate level for their role in line with this statutory guidance (CQC, 2011)	Gray Smith-Laing Medway Foundation Trust	18-Feb	The Training Strategy for the Trust has been updated in line with this guidance. A training needs analysis has been completed on all staff identifying the level of training required for each role. The strategy has been approved by the Trust Policies committee and is in the process of being signed off.	Training strategy is signed off and implemented 100% of Medway NHS Foundation Trust staff receive the appropriate level of training for their role

**Joint Health and Social Care Action Plan
to improve services for safeguarding and looked after children in Medway**

Outcome (Code: yellow = LA, blue = NHS, green = joint: red text = CQC additions)	Lead person (<i>working with</i>)	Date to be completed	Actions	Measures of success and progress
PROCESS IMPROVEMENTS				
<p>12. NHS Kent and Medway to ensure there is an appropriate designated Mental Health Act (Section 136) place of safety that all partner agencies are aware of, accessible at all times for mental health advice and assessments to provide appropriate treatment interventions. (OFSTED and CQC, 2011)</p>	<p>Lorraine Goodsell NHS Kent and Medway</p> <p><i>Pippa Barber Kent and Medway Partnership Trust</i></p>	<p>18-Feb</p>	<p>A designated Mental health Act (Section 136) place of safety is identified at Medway Hospital and this is available and known to all staff from February 2012</p> <p>To ensure safe practice initially under 16yr olds will present to the Tier 4 facility and an age appropriate solution will be agreed and staffed by CAMHS for 16plus</p>	<p>The facility for section 136 involving children and young people is available and the NHS Kent and Medway site visit confirms this.</p> <p>KMPT have had discussions with South London and Maudsley NHS Trust (Tier 4 provider) and proposals have been agreed to provide specialist CAMHS directly to children and young people detained in 136 suites</p> <p>Additionally clinicians with special interest in this field have been identified and a training package has been worked up for delivery to colleagues in the police. This will commence in the new year</p>

**Joint Health and Social Care Action Plan
to improve services for safeguarding and looked after children in Medway**

Outcome (Code: yellow = LA, blue = NHS, green = joint: red text = CQC additions)	Lead person (<i>working with</i>)	Date to be completed	Actions	Measures of success and progress
13. Ensure that thresholds for access to children's social care services are applied consistently and that when referrals are not accepted, referring agencies understand the reasons for the decision (OFSTED, 2011)	Helen Gulvin Medway Council	18-Feb	Clear process are in place in children's social care for: a) accepting and agreeing/refusing referrals and b) informing referral agency of action taken or suggested action for referring agency c) include in feedback letters clear reasons for decision	Survey feedback from lead referring agencies indicates consistent and clear feedback from children's social care in February 2012
14. Ensure that the employment records of all children's social care staff, including those who transferred in via local government reorganization, includes copies of qualifications (OFSTED, 2011)	Trisha Palmer Medway Council	18-Feb	All relevant staff that transferred from KCC are identified and contacted to supply copies of their qualifications	All HR files of ex KCC employees have relevant and up to date case records with qualifications and CRB checks in place
15. Medway Safeguarding Children Board to ensure that the appropriate notification arrangements are in place so that children affected by domestic violence are identified, protected and supported (OFSTED, 2011)	Marilyn Hodges, MSCB Chair	18-Feb	New process arrangements for DA agreed by the MSCB including appropriate notifications for key health staff by 31 January 2012 Multi-agency Task group to be assembled to consider impact of increased notifications and response thereto	New process arrangements including notifications are evidenced in case audit work undertaken by both health commissioners and providers from 1 st February 2012

**Joint Health and Social Care Action Plan
to improve services for safeguarding and looked after children in Medway**

Outcome (Code: yellow = LA, blue = NHS, green = joint: red text = CQC additions)	Lead person (<i>working with</i>)	Date to be completed	Actions	Measures of success and progress
16. NHS Kent and Medway and Medway Council to ensure access to the CAMHS single point of access referral system throughout the working day to enable timely referrals to be made by all health practitioners. (OFSTED and CQC, 2011)	Sally Morris Medway Council/ NHS Kent and Medway	18-Feb	The on-line electronic SPA form is available for all referrers to use and the telephone support is consistently available between 9 and 5 pm (Feb 2011) GPs report better access via SPA by April 2012	These arrangements are tested by the Medway lead commissioner in February 2012
17. Ensure that outcomes from the 'Strengths and Difficulties Questionnaires' (SDQs) are used within looked after children health assessments (OFSTED, 2011)	Sally Morris Medway Council/ NHS Kent and Medway	18-Feb	Agree a new process with social care to ensure that SDQs are received in time to inform the health assessments of LAC Health assessments are informed by the SDQs	A sample of health assessments is checked by the social care commissioner to ensure that the new system is working in April 2012
STRATEGY IMPROVEMENTS				
18. Ensure that the 'did not attend' rates for looked after children health assessments are significantly reduced (OFSTED, 2011)	Sally Morris Medway Council/ NHS Kent and Medway	18-Feb	Medway Foundation Trust agree a new approach to reduce the DNA rates in the LAC health service is agreed in consultation with children and young people January 2012	Close monitoring of the DNA rate by the corporate parenting group demonstrates reducing DNA rates in the LAC health service

**Joint Health and Social Care Action Plan
to improve services for safeguarding and looked after children in Medway**

Outcome (Code: yellow = LA, blue = NHS, green = joint: red text = CQC additions)	Lead person (<i>working with</i>)	Date to be completed	Actions	Measures of success and progress
19. Ensure that the council's foster carers are clear about the arrangements linking skill development with additional fee payments and the complex needs of children placed. (OFSTED, 2011)	Helen Gulvin Medway Council	18-Feb	Contact all foster carers to remind and clarify the arrangements linking skills to child's complexity and payments as specified in Foster Carers Handbook. Discuss issue with Executive Committee of Foster Carers Association.	A focus group with a sample of foster carers report improved understanding of these arrangements by February 2012
20. Ensure that the children's case recording system enables accurate case recording, and improves management oversight of case work. (OFSTED, 2011)	Rose Collinson Medway Council	18-May	New system procured by March 2012 and a full implementation plan agreed with all key stakeholders by March 2012.	New system procured and being implemented according to agreed timetable and to agreed standards

**Joint Health and Social Care Action Plan
to improve services for safeguarding and looked after children in Medway**

Outcome (Code: yellow = LA, blue = NHS, green = joint: red text = CQC additions)	Lead person <i>(working with)</i>	Date to be completed	Actions	Measures of success and progress
21. Ensure that all external placements are commissioned and monitored in line with proposed strategic commissioning arrangements to ensure maximum value for money and provide clarity and rigour regarding expected standards of care. (OFSTED, 2011)	Sally Morris Medway Council/ NHS Kent and Medway	18-May	A new strategy and resources for supporting commissioning of all external placements is agreed with children's social care and Children and Adults management team by January 2012. The strategy is starting to be implemented from March 2012	Feedback from performance monitoring (ADQs) indicates the new system is effective in maintaining standards and value for money.