



Leicester
City Council

WARDS AFFECTED
All Wards (Corporate Issue)

FORWARD TIMETABLE OF CONSULTATION AND MEETINGS:

CABINET	5 MARCH 2001
SOCIAL SERVICES AND PERSONAL HEALTH SCRUTINY COMMITTEE	8 MARCH 2001
EDUCATION AND LIFELONG LEARNING SCRUTINY COMMITTEE	13 MARCH 2001

QUALITY PROTECTS YEAR 3 – CHILDREN’S SERVICES GRANT

Report of the Director of Social Services

1. Purpose of Report

1.1 The purpose of this report is to submit the Quality Protects Management Action Plan for 2001/2002, and to outline the process of implementing the Plan.

2. Summary

2.1 Quality Protects is a national initiative intended to transform children’s social services and improve the life chances of all children in need. The key elements of the programme are:

- Eleven national objectives which set out clearly what the government aims to achieve for children in need; the Children’s Services Grant to be spent on specified priorities varying year on year.
- A requirement to submit a satisfactory annual MAP upon which the receipt of grant depends. A major emphasis is on Performance Indicators in terms of measurement and improvement;
- An important role for Elected Members

The Quality Protects programme has been extended from three to five years (1999 – 2004) in recognition of the fact that a longer time is needed to produce the required improved outcomes, and to progress the developing government agenda.

- 2.2 Since November 2000 officers from Social Services Department in conjunction with staff from City Council Departments, Health Authority and the Voluntary Sector have been preparing the Management Action Plan following the issuing of Department of Health Guidance in late November. A range of service users and carers have also been consulted.
- 2.3 Member involvement in this process has been through the cross party Quality Protects Working Party. Following the approval of the MAP by the Cabinet Lead for Social Services and Personal Health the Plan was then submitted to the Leader of the Council, Cabinet Lead for Education and Lifelong Learning, Chief Executive and Directors of Social Services and Education and the Chief Executive of the Health Authority for their approval and signature. The MAP was submitted to the DOH on 31 January 2001.
- 2.4 The Plan provides a summary of the Authority's current position with regard to meeting the needs of children-in-need in Leicester along with our aims, aspirations and targets for improving on that position. The format of the Plan is set by the Department of Health and serves as application for funding, an audit tool for the Department of Health and a management tool for the Department. As such it is not in a readily accessible form.
- 2.5 It is proposed to prepare two summaries of the Plan – an executive summary for Members and relevant professionals and a users summary for young people and their parents. It is also proposed to hold a series of presentations for Members and officers of all Departments during April/May 2001 to emphasise the corporate nature and commitment of Quality Protects.
- 2.6 The Members Working Party has been involved in developing the Plan and will continue to be involved in its development and implementation via reports to the Scrutiny Committee.
- 2.7 The provision of equality of services is a central part of the Quality Protects Programme.

3. Recommendations

- 3.1 (a) That the Cabinet endorse the Quality Protects Management Action Plan and the process of dissemination, implementation and scrutiny outlined in this report.
- (b) That the Cabinet and Scrutiny Committee receive a regular report on the Council's Corporate Parenting Strategy.

4. Financial and Legal Implications

- 4.1 The children's main special grant to support Quality Protects for Leicester is £1,355,598.

Two additional parts of the grant are to be earmarked for specific purposes; £983,648 is to be ring-fenced for the implementation of the Children (Leaving Care) Act, £136,699 is to be ring-fenced for services for disabled children. The total is £2,475,945.

- 4.2 The implementation of the Children's (Leaving Care) Bill will be an additional financial and service delivery responsibility for the Social Services Department, requiring enhancement of our current Care Leavers service.
- 4.3 The Quality Protects LAC(2000)22 Circular is issued as statutory guidance under Section 7 of the Local Authority Social Services Act 1970 (Guy Goodman, Assistant Head of Legal Services Ext. 7054).

5. Background Papers

Attachment 1: QP MAP 3

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QUALITY PROTECTS

**LEICESTER CITY
COUNCIL SSD**

**MANAGEMENT
ACTION
PLAN**

2001-2002

FOREWORD

We are pleased to submit this Plan and endorse both its ethos and contents.

Leicester City Council and its partner agencies place children at the heart of their services and joint working. Improving the life chances of Children in Need in Leicester is a major priority for the Council and its partners. This priority is reflected in both the Authority's approach to Corporate Parenting and the range of initiatives aimed at combating social exclusion of children and families in the City.

This year's Management Action Plan builds on the earlier Children's Services Plan and last year's MAP, and integrates the aspirations of the Community Plan, Behaviour Support Plan, Youth Justice Plan and Health Improvement Programme. The emphasis within Leicester on developing a range of regeneration and community partnerships including New Deal for Communities, Single Regeneration Budget programmes and Sure Start complements the aspirations of this Quality Protects Plan for Children in Need in Leicester.

An elected members cross party group and a multi-agency group, affiliated to Leicester City Children's Planning Partnership and including voluntary sector representation, meet bi-monthly to maintain members' and partners' involvement in preparing the Management Action Plan. The participation of children, young people, their families and carers is also developing within the Social Services Department and through the Planning Partnership (see Objective 8).

It is recognised that the format of the Quality Protects Plan is not readily accessible to wider audiences and a range of summaries and presentations will be undertaken in order to develop both a wider ownership of our aims and consult on an evolving plan to improve outcomes for children in need.

Cllr Ross Willmott
Leader
Leicester City Council

Cllr Farook Subedar
Cabinet member for
Education and Lifelong
Learning

Cllr Gordon Getliffe
Cabinet member for
Social Services and
Personal Health

Rodney Green
Chief Executive
Leicester City Council

Andrew Cozens
Director of Social Services
Leicester City Council

Steven Andrews
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Mike Froggatt
Chief Executive
Leicestershire Health
Authority

Kevan Liles
Director
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CONTENTS

		Page No:
OBJECTIVE 1	To ensure that children are securely attached to carers capable of providing safe and effective care for the duration of childhood	4
OBJECTIVE 2	To ensure that children are protected from emotional, physical and sexual abuse and neglect	7
OBJECTIVE 3	To ensure that children in need gain the maximum life chance benefits from educational opportunities, health care and social care	12
OBJECTIVE 4	To ensure that children looked after gain the maximum life chance benefits from educational opportunities, health care and social care	17
OBJECTIVE 5	To ensure that young people leaving care, as they enter adulthood, are not isolated and participate socially and economically as citizens	22
OBJECTIVE 6	To ensure that children with specific social needs arising out of disability or a health condition are living in families or other appropriate settings in the community where their assessed needs are adequately met and reviewed	25
OBJECTIVE 7	To ensure that referral and assessment processes discriminate effectively between different types and levels of need and produce a timely response	30
OBJECTIVE 8	To actively involve users and carers in planning services and in tailoring individual packages of care; and to ensure effective mechanisms are in place to handle complaints	33
OBJECTIVE 9	To ensure through regulatory powers and duties that children in regulated services are protected from harm and poor care standards	37
OBJECTIVE 10	To ensure that social care workers are appropriately skilled, trained and qualified, and to promote the uptake of training at all levels	39
OBJECTIVE 11	To maximise the benefit to service users from the resources available, and to demonstrate the effectiveness and value for money of the care and support provided, and allow for choice and different responses for different needs and circumstances	44
PERFORMANCE INDICATORS		48

OBJECTIVE 1: TO ENSURE THAT CHILDREN ARE SECURELY ATTACHED TO CARERS CAPABLE OF PROVIDING SAFE AND EFFECTIVE CARE FOR THE DURATION OF CHILDHOOD

SECTION A:	Describe your progress to date under this objective, including evidence of improved outcomes for children
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- 1 All placement stability Performance Indicators show positive progress although placement moves are still above average. Carer recruitment and retention activity produced a net increase of 20 foster placements including 5 black and minority ethnic carers. De-registrations were down 27%; fostering enquiries up 100%; approvals up 37%. From June'99-Dec'00 family link carers increased by 78.5%; contract carers by 116%; remand foster carers by 6 achieving target. Over the same period the accreditation profile of foster carers moved proportionately from Level 1 to Level 3. There were none at Level 4, although link, remand and contract carers would be assessed at this level or higher. 3 carers are taking NVQ with 7 more planned for 2001. The number of black and minority ethnic foster carers approved decreased from 8 in 1999 to 5 in 2000, the number of black and minority ethnic adopters approved increased from 1 to 5 (gross 9 to 10). Adoption enquiries and approvals have significantly increased to 41 approvals this year compared to 30 last year for City and County combined
- 2 The dedicated recruitment publicity officer; fostering and adoption recruitment centre, specialist pre-panel fostering team; and adoption social worker are assessed to have had significant impact on increased recruitment. Corporate Parenting support to foster carers; specialist post-panel fostering team; increased training and consultation with carers; and enhanced recognition through accreditation are assessed to have impacted on carer retention. Stability of link placements for disabled children has been promoted by co-working with housing and voluntary sector.
- 3 QP funded activities have produced the intended outputs of increased placement number and variety but these have been negated by a significant increase in the numbers of LAC: 444 in Mar'99; 464 in Mar'00; 520 in Sept'00. Placements have not kept pace with increased demand resulting in some overcrowding for mainstream children, although choice of specialist placements has improved.
- 4 Since 1999 training on permanence has been included in core courses for child care social workers. A Permanence Panel chaired by the Assistant Director progress chases plans for all children under 10 years looked after more than a year.

SECTION B:	Set out what you will achieve for children under this objective in 2001-2002 and beyond, and how you will achieve it
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- 1 Adoption recruitment and placement rates are high. Focus will be on the hard to place group i.e. boys; siblings; older children; behavioural difficulties; and dual heritage, through frequent needs review, national advertising and using national networks. The 13 children waiting longer than 6 months (see p.7) all belong to these groups and the 24 available adopters are not accepting these children although ongoing discussion is taking place. The percentage of children adopted may drop as the looked after children population increases but PSA target of maximising adoption placements remains. New QP expenditure - National advertising budget £5,000
- 2 Retention and recruitment activity will continue vigorously, targeting dual heritage adoptive parents; Asian Moslem link carers for disabled children; link carers for disabled children and kinship carers for all children.
- 3 The number of placement moves experienced by looked after children is unacceptably high, and the recent increase in number of LAC is of concern. Targeted activity to analyse the relevant causal factors has begun with a departmental seminar about causes and solutions. The research officer will be commissioned to do further work including ethnicity, gender and age of mobile young people and a strategy devised to reduce placement moves in line with target of 15% by 2004. Policy and processes for admissions to care, and targets for numbers of LAC will be reviewed. The panel process will continue to offer alternative support packages to accommodation (Obj.3A)
- 4 For hard to place children a Placements Officer will be appointed in Jan'01 to develop partnerships with independent fostering and residential providers to achieve appropriate commissioning.
- 5 National Foster Care Standards will be implemented 2002 to improve placement matching and support.
- 6 Link Carers for disabled children (Obj.6)
- 7 All black and minority ethnic young people in care are reviewed for appropriateness of care by the looked after children Black Cases Panel
- 8 A young people's team of 1 psychiatrist, 2 psychologists and 3 primary health care workers is being funded through the NHS modernisation fund and CAMHS, which will prioritise black and dual heritage LAC with mental health needs to contribute to prevention of placement breakdown. One of the primary mental health workers will be based in the Young Offenders Team (YOT) to prioritise the needs of young offenders.

**SECTION C:
Part 1**

What are the key elements of your strategy to provide more family placements (a) through foster care (including recruitment and retention, training and support of foster carers) and (b) through adoption (including recruitment and post-adoption support)?

- 1 Fostering Recruitment will be progressed through:
 - Recruitment Centre and Enquiry Officer as focus of targeted local campaigns, aiming for 4 month timescale for approvals and an increase in all carer categories
 - New Policy Officer (cultural diversity) to advise and promote contact with black and minority ethnic voluntary sector and communities to develop diverse foster carer resource, informed by analysis of profile of black and minority ethnic young people
 - Specialist pre-panel team
- 2 Foster Carer retention target is to reduce carer de-registrations to 25 in 2001/2 supported by the specialist post panel team and Corporate Parenting
- 3 The Fostering strategy is to create a placement and skills mix of carers including
 - Mainstream Carers assessed and accredited from levels 1 – 4
 - Link Foster Carers to provide planned repeat placements primarily for disabled children – 1.5 specialist social workers
 - Remand Foster Carers for young offenders – 0.5 specialist post in YOT
 - Contract Foster Carers for very challenging young people at risk of placement outside Leicester
 - Promoting Independence Carers for pre-care leavers (Obj.5A) and,
 - Promotion of Family and Kinship Carers – specialist Kinship and Permanence team
- 4 Training is fundamental to placement stability and will be progressed through the link between the annual training plan and skills framework. Accreditation levels and skills mix will be regularly audited to inform recruitment strategy. Development of NVQ in foster care will continue and the Heritage Model (Obj.7) will be incorporated into Carer training
- 5 For disabled children a Policy Officer will identify and access funds for adaptations to homes and investigate strategies in other authorities, and a social worker is benchmarking how other authorities are promoting stable care for disabled children.
- 6 Adoption
 - Recruitment strategy as for fostering, with strong focus on needs of dual heritage children. Target depending on applicant's circumstances' of 3-6 month from receipt of application to completion of approvals
 - Post adoption support between placement and Adoption Order is provided by adoption team
 - Funding awaited through Adoption Act to enhance resources to meet the needs of adoptive families in need of post adoption support after Adoption Order

SECTION C: Part 2	What steps are you taking to ensure that you have the appropriate range and level of residential placements?
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- 1 Residential provision is informed by the Matching Needs and Services Research Project.
- 2 Increase in very troubled young people needing specialist placements away from Leicester will be addressed by a Placements Officer to achieve appropriate commissioning.
- 3 The Dept is actively reviewing strategies to reduce admissions to care which are increasing demand for residential placements.
- 4 HAZ proposals (Obj.6C) will assist in the review of residential services for disabled children. A small number of local respite placements are funded in the independent sector. Some young people receive residential respite care because foster carers are not available
- 5 When implemented CAMHS response line 4 will provide residential care for LAC with mental health needs (Obj.4C)
- 6 Each of our Children's Homes has/will develop 1 or 2 semi-independent living units and will arrange contracts and training packages with young people, to enable them to develop skills for managing in the community before they leave care.
- 7 All black and minority ethnic young people in residential care are regularly reviewed by the looked after children Black Cases Panel to ensure that all aspects of their care are appropriate.

Number of approved adopters at 1 January 2001 who do not have children matched or placed with them	24
Number of children at 1 January 2001 with adoption as the plan (approved by Adoption Panel or agency decision maker) who do not have an adoptive family matched with them and have been waiting more than 6 months	13

SECTION D: EXPENDITURE OF GRANT

Placement choice is a priority area for grant	
How much do you plan to spend on this in total in 2001 – 2002? (£)	£463,950
Of this total, how much will be spent on adoption ? (£)	£36,900

OBJECTIVE 2: TO ENSURE THAT CHILDREN ARE PROTECTED FROM EMOTIONAL, PHYSICAL AND SEXUAL ABUSE AND NEGLECT

SECTION A:	Describe your progress to date under this objective, including evidence of improved outcomes for children
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- 1 Re-registrations at 13.6% Mar'00 was reduced by 9% increasing slightly to Sept'00. Re-registration is most likely in the category of neglect and when a period of alternative support ceases. 71.4% Child Protection Register reviews being completed on time is unsatisfactory. Analysis of conference timescales has resulted in improved procedures including more central control of cancellations, reminders and monitoring. The proportion of children de-registered who have been on Child Protection Register for more than 2 years remains satisfactory. A slight increase in the period April to Sept is to be analysed. 100% of Child Protection Register families have a named social worker. The number of children on Child Protection Register has been reduced below 350 target to 342 in Dec'00
- 2 Improved involvement of parents/children has been progressed:
 - Minutes of CP conferences are now available to parents/carers
 - New appeals process is in operation
 - Revised protocols for core groups to include parents/children are a priority in ACPC work programme
 - Protocol on involving children in CP Conferencing process is underway
 - New monitoring of conferences includes children's views and how well they are represented
 - A Family Group Conference pilot project will start in April 2001
- 3 Quality Assurance measures include:
 - ACPC subcommittee is defining the key areas for inter-agency auditing and standards
 - Analysis of repeat registrations has been undertaken to be fed into work on thresholds
 - New black cases panel for children in need of support and protection will review services for children on the CPR
- 4 Decision making in the Child Protection process is under review:
 - Work has started on thresholds and interface with family support work
 - Section 47 protocol has explicit criteria and requirements for decision making
 - Protocol on decision making at conferences is a priority to align with enhanced role for core groups
- 5 Refocusing and the interface between Assessment Framework and Working Together is a priority:
 - Joint awareness raising day was followed by a day seminar on areas where the need/risk interface is most apparent
 - Restructuring of SSD Assessment & Resources Divisions will prepare for implementing Assessment Framework and Working Together
 - Work on thresholds and routes for support to families where exclusion/neglect issues interface is progressing

SECTION B:**Set out what you will achieve for children under this objective in 2001-2002 and beyond, and how you will achieve it**

- 1 The target is to maintain the number of children on Child Protection Register below 350
- 2 Priority for action is to improve to 100% Child Protection Reviews held on time. Procedures have been re-issued; ACPC is working on quoracy guidelines; reminders are standard, timescales are being closely monitored and performance will be reviewed
- 3 The large decrease of 9% in re-registrations Mar'00 was assessed to be artificially inflated through data inaccuracy. Prediction of an increase in 2001, followed by gradual decrease (overall 10%'99-'04) is supported by evidence to September.
- 4 Disabled children are not identified in Child Protection Register records. Analysis will review whether they are under represented on Child Protection Register. Recognition and investigation of abuse of disabled children will be given priority in ACPC review of procedure and training. New database will record disability as essential data for all children. HAZ project (Obj.6C) will consider a multi-disciplinary team for disabled children which would facilitate co-ordinated, skilled and timely assessments.
- 5 The Policy Officer (Cultural Diversity), will examine the over-representation of dual heritage children, and under-representation of black and Asian children on the Child Protection Register to inform future policy and practice. In Sept'99 the ethnicity of children on CPR was Dual Heritage -6.6%;Asian:2.8%; Black 2.1% and in Sept'00 Dual Heritage-6.3%; Asian-5.1%; Black-4.5% showing a doubling of Asian & black children, although still under-represented.
- 6 The Policy Officer (Cultural Diversity) is researching physical abuse in the Pakistani Community through an ADSS award looking at Community and Voluntary Sector perceptions of physical abuse, disciplining and physical chastisement.
- 7 Implementation of preventive family support services via Children's Fund grant of up to £4.8 million over 3 years will support this objective
- 8 Working practices will be reviewed in the light of recommendations arising from the independent government child protection review following the death of Anna Climbie

SECTION C: Part 1:	What system do you have or are you putting in place for monitoring and auditing that the timescales for child protection processes – as set out in the revised Working Together – are being met?
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- 1 The assessment teams and Child Protection and Independent Review Unit (CPIR) will monitor time lapse from referral to 1st Conference
- 2 CPIR will continue to monitor conference delays, and reasons for delay to initiate urgent action to prevent slippage and implement procedural change. ACPC QA subcommittee is to include timescales as a key area for interagency audit
- 3 Where an extended timescale is clearly in the interests of the child this will be recorded for analysis and recommendations
- 4 Monitoring completion of Core Assessment within timescales will be established within new Assessment Teams from 1.4.01 and will be monitored by Conference Chairs at 1st review conference
- 5 Independent conference chairs complete QA feedback forms of each conference. which will be analysed, providing regular reports to Divisional Management Teams
- 6 The development of core groups as a primary vehicle for work with the family is a key change for Leicester City ACPC. Monitoring of the implementation of the Child Protection plan, including whether timescales for meeting objectives are achieved will be included in procedure
- 7 The Child Protection Register will be integrated into the new database summer 2001 which will yield more sophisticated analyses including process analysis and alerting managers to delays

SECTION C: Part 2:	What progress have you made in implementing the other changes required by revised Working Together?
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ACPC timetable is:

- 1 By Feb'01 to complete key protocols as follows:
 - Child Protection enquiries and related criminal investigations
 - thresholds between S17/S47
 - resolving professional disagreements
 - attendance, quoracy and decision-making in Conferences
 - the new role of Core Groups and the inclusion of parents/children
 - child prostitution
 - protocol between YOT and ACPC
 - participation of parents and children in Child Protection conferences
- 2 To re-issue inter-agency CP procedures by Apr'01

- 3 By June'01 to complete specialist protocols on:
 - organised abuse
 - allegations against professionals and
 - responses to the Waterhouse report (Obj.9A)

- 4 After June'00 further scheduling of protocols including:
 - culturally appropriate practice
 - mental health and child protection
 - disabled children & child protection

- 5 Awareness raising sessions on new Working Together Feb/Mar to be followed by full training programme from Apr'01 with HAZ funding

- 6 Revised proformas will be developed before Apr'01 inc. SW reports to conference; conference agendas; decisions and recommendations of conference; Core Group records

- 7 Updating of Child Protection guidance will be part of the departmental programme during 2001

OBJECTIVE 3: TO ENSURE THAT CHILDREN IN NEED GAIN MAXIMUM LIFE CHANCE BENEFITS FROM EDUCATIONAL OPPORTUNITIES, HEALTH CARE AND SOCIAL CARE

SECTION A:	Describe your progress to date under this objective, including evidence of improved outcomes for children
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- 1 Less children from black and minority ethnic groups(0.78) receive a service from SSD than the proportion in the population. The assumption is that the proportion should be the same. Our hypothesis is that this may be wrong, because the causes of need are multiple (3B).
- 2 High exclusion levels, and days of schooling lost in Leicester City indicate high levels of social exclusion. Children and Family Resources Division contributes to improving education outcomes:
 - Family centres are all Ofsted registered, work to desirable learning outcomes with pre-school children and, with Adult Education service, run courses for parents in supporting their children when they enter school.
 - SENCOs in each family centre work with Special Needs teaching service and educational psychologists to ensure that the needs of disabled children are met and statements are started at age 4 where appropriate.
 - CBII teams run groups for parents and children in schools. The Department funds Home Start and Centre for Fun and Families (via CAMHS) to run parenting groups.
 - Special childminding scheme supports young people excluded from school at risk of family breakdown.
 - IST work closely with EWOs, pastoral staff in schools, and specialist education staff to try to maintain young people in school.
- 3 The Department works actively with 3 Sure Start programmes to improve health outcomes for young children through:
 - Family centre courses for parents on child health and development
 - Smoking cessation day planned
 - Family Aides working with parents on 1 to 1 basis.
- 4 The Team Manager (accommodation panels) ensures thorough assessments before young people enter Local Authority accommodation. We have reduced the number of non-panel admissions to 58 (Jan and Nov 2000), compared to 68 in the same period in 1999, and plan to further reduce in 2001. Voluntary mentoring scheme has supported 4 young people at risk of accommodation none of whom has been re-referred.
- 5 A joint duty system in Children and Family resources allows co-ordinated support plans in line with refocusing.
- 6 The review of the Resources Division will report by April on how the section can more effectively contribute to the implementation of Assessment Framework and support children in need
- 7 For disabled children a specialist team provides a range of assessment and support services (Obj.6)

- 8 Service users of Family Centres are closer to the ethnicity of children in Leicester City as a whole. In September 2000 being 59.3% White; 24% Asian; 13% Dual Heritage; 3.7% other black and minority ethnic (BME) children
- 9 Services to black and minority ethnic children in need will be monitored by the new Black Cases panel (2A) for children in need of protection or support

SECTION B:	Set out what you will achieve for children under this objective in 2001-2002 and beyond, and how you will achieve it
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- 1 The Cultural Advisory Team (MAP2) has recently been replaced by a Policy Officer and Social Worker (Cultural Diversity) to ensure that strategies are in place to deliver appropriate services to black and minority ethnic children and families. Through research and joint working with voluntary organisation; they will develop maximum participation of black and minority ethnic communities in service planning; monitor the ethnicity of all service users; and critically evaluate current services to make informed recommendations for service development. The aim is to improve the life chances of black and minority ethnic children and ensure that the needs of diverse communities are met
- 2 In preparation for Assessment Framework implementation the structure of the Assessment and Strategy Division is under review. Detailed mapping of service users has resulted in reconfiguring team areas and clustering teams for flexible response. 5 assessment teams will transfer work to 11 support teams after core assessment. The aim is an enhanced response to children in need in a refocused service
- 3 Departmental threshold criteria are now complete and will be the reference for developing interagency threshold criteria
- 4 A review of Children and Family Resources Division has begun in consultation with staff; users; communities and voluntary organisations and will identify unmet need and service requirements in order to recommend a varied menu of universal, community, voluntary and SSD services
- 5 Through Sure Start a link social worker post will co-ordinate support to families at greatest risk of social exclusion. The aim is to reduce the numbers of under-4's on the Child Protection Register and increase the proportion of families receiving family support. There will be a Family Group Conference Pilot in one of the Sure Start areas. Support to very young parents as part of Sure Start plus will continue (Obj.4C)
- 6 Leicester Children's Planning Partnership (LCPP) will explore the potential of the Children's Fund resources contributing to resolving identified unmet needs across Leicester
- 7 We will seek to extend early mental health intervention services through CAMHS strategy and will be seeking to secure the present temporary funding

SECTION C: Part 1	How are you ensuring effective linkages with Sure Start
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- 1 The Departmental lead officer links with all 3 Sure Start programmes. Staff are seconded to 2 programmes and involved in planning the third
- 2 A Nursery Officer plans integration of disabled children under 4 into mainstream community / play provision
- 3 A part-time Nursery Officer will be seconded to a health visitor team to advise parents of young children
- 4 Family centres and Sure Start will provide joint training and groupwork addressing speech and language development
- 5 Increased community resources in Sure Start areas are making it easier for children to progress from family centres into universal provision.
- 6 Parents using family centres are part of the Sure Start consultation process.
- 7 Family centres are developing services for teenage parents
- 8 Full-time pre-school teacher identifies special needs at an early age to achieve best start possible
- 9 The joint planning strategic aim is to make Sure Start city wide, with 2 or 3 more bids anticipating an increase in funding resulting in better outcomes for children

SECTION C: Part 2	How are you ensuring effective linkages with Connexions
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- 1 The local partnership will launch Connexions programme in April 2002 and planning includes linkages with YOT, looked after service and leaving care team
- 2 Connexions have made presentation to LCPP to ensure multi-agency involvement from the outset and there is overlapping membership between the two
- 3 SSD staff are involved in 3 Connexions Groups. Service Manager (fostering and care leavers) is lead officer on the multi-agency contact group; policy officer CSP is on the group mapping services for 13-19 year olds; and QP research officer on the data exchange group
- 4 Connexions are part of the Transitions Planning Working Group for disabled children
- 5 The Careers team are part of the Teenagers to Work group and Care Leavers Bill implementation group

SECTION C: Part 3	How are you ensuring effective linkages with On Track
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Leicester did not bid for “On Track” funding for work with 4-12 year olds to prevent early offending. Joint Review noted the need to reduce the number of initiatives undertaken by the department to ensure sustainable improvements. Now that Sure Start is well established we are ready to enter into partnerships to develop services for this group and hope to do so using the Children’s Fund

SECTION C: Part 4	How are you ensuring effective linkages with Health Improvement Plans and Health Action Zones
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- 1 The umbrella group for strategic planning for children’s services is the Leicester Children’s Planning Partnership (LCPP) on which Health Authority and HAZ are represented
- 2 The LCPP is the key central body for planning/prioritisation for the children’s chapter of the HimP, and the SSD is also represented at the District level on the Children’s HimP Board.
- 3 The HAZ has identified disabled children as the early priority for children’s services, and in conjunction with QP and the application of Health Act flexibilities this is likely to be one of the first areas where services are jointly provided
- 4 HimP and HAZ funding supports several QP objectives including:
 - Obj4 - HimP funding for consent to data exchange and health promotion leaflet for looked after children in 3 Local Authorities
 - HimP funding of lead nurse for foster children to train and support designated GPs to promote positive health outcomes for LAC
 - Obj 6 - HAZ Disabled Children’s Co-ordination Project to co-ordinate and develop services for disabled children
 - HimP funding for respite day care for disabled children
 - Obj 7 - £70,000 HAZ funding of multi-agency implementation of Assessment Framework

SECTION C Part 5	How are you ensuring effective linkages with The Joint CAMHS Development Strategy
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- 1 SSD is co-funder of CAMHS and is represented on Joint Steering Group and other response line working groups (see MAP2)
- 2 SSD administers the CAMHS Innovation Fund and other CAMHS grants
- 3 CAMHS staff participate in Leicester Children’s Planning Partnership
- 4 Re.Line1:SSD staff were consulted in preparation of training programme for multi-agency frontline staff and will be recipients
- 5 Re.Line2:SSD have staff as members of, refer to and have close links with 3 CBII Project, which interface with Children and Family Resources Division (Obj.3A)

- 6 Re.Line3:The young people's mental health team of one psychiatrist, 2 psychologists and 3 primary mental health workers is in place and will prioritise black and dual heritage LAC with mental health needs. One of the primary mental health workers will be based in the Youth Offending Team to prioritise their needs
- 7 Re.Line4:Implementation of proposals for joint commissioned projects (4C) await appointment of a project manager.
- 8 SSD will participate in Leicester University evaluation of the role of mental health services for young people looked after.

OBJECTIVE 4: TO ENSURE THAT CHILDREN LOOKED AFTER GAIN THE MAXIMUM LIFE CHANCE BENEFITS FROM EDUCATIONAL OPPORTUNITIES, HEALTH CARE AND SOCIAL CARE

SECTION A:	Describe your progress to date under this objective, including evidence of improved outcomes for children
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1. Educational outcomes for looked after children remain well below national and local targets. Sept 2000 SATs results vary slightly up or down; GCSE A-G results deteriorated for the "OC2" cohort but improved for Sept'00 year 11 group
2. School absences and exclusions have been recalculated since MAP2 from revised data. Absences revised from 25% to 13.5% in 1999 improved to 8.75% for year to Sept'00, and exclusions are recalculated as 4.1% 1999 and 3% 2000. This data is assessed as more reliable and gives a better picture for LAC
3. The MAP2 plans for educational support have been progressed but have been insufficient to effect the necessary change in the short term. The City Council and QP elected members group have pledged full support to plans to joint fund with the education dept a radical plan for improvement
4. The data collection of timeliness of LAC reviews indicates little improvement this year. Due to data problems the figure will be recalculated in Feb/Mar.
5. Health monitoring completion at 76% missed our 85% target deflated by the low rate of dental checks and incomplete reporting
6. Timeliness of reviews and completion of health checks are likely to have been adversely affected by a large increase in the looked after population impacting on social worker workloads (Objs:1,11)
7. The proportion of black and minority ethnic children looked after relative to Leicester population was 0.38 in Mar '00, with over-representation of dual heritage children (10.5%) and under representation of other groups (5.3%). Dual heritage teenagers are regularly part of the residential population and to meet their needs there is a staff recruitment policy to employ black staff, the LAC black cases panel regularly reviews their care plans, and a poster competition in the residential units to combat racism has recently taken place
8. The number of LAC who offended reduced in 2000 from 25% to 11.25% (Obj.4C5)
9. Promoting positive health outcomes for young people in children's homes is well developed (MAP 2) and, through HimP funding, plans are evolving for foster children (Obj.4B)
10. Participation is promoted through the QP consultation officer for LAC with newsletters, 'speakeasy' social events, and specific topic consultation such as a young people's centre
11. Further work is needed to include disabled children with communication difficulties in consultation (Obj.6)
12. Leisure and cultural activities are promoted through Corporate Parenting and the QP leisure fund

SECTION B:	Set out what you will achieve for children under this objective In 2001-2002 and beyond, and how will you achieve it.
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- 1 Through benchmarking and joint seminars the SSD and Education Departments are developing a joint funded plan for a multi-disciplinary team to:
 - secure full-time education for LAC, wherever possible in mainstream school
 - to support looked after pupils in school, targeting years 10 and 11, and the transition from primary to secondary education.
 - to develop a comprehensive policy and practice framework
 - provide ongoing carer, social worker and teacher awareness raising and training
 - provide resource packs to foster carers to support home learning
 - with a guiding principle of social inclusion the team will consider extending its remit to young offenders and refugees at a later stage
- 2 SSD will contribute approximately £110,000 QP funding from main and care leavers budgets with Education Dept matching or exceeding this figure
- 3 The draft plan includes a project manager, advisory teachers, learning mentors, EWO, project worker(s), a clerk and a budget for direct support for individual young people
- 4 Implementation of PEPs are underway with a PEPLAC group to review the plans of all young people out of education
- 5 The LAC advisory teacher will consult with young people about the draft model the Authority intends to adopt
- 6 Through HimP funding, recruitment of a lead nurse for children in family placements to train and support designated GPs to complete health assessments and promote positive health outcomes will proceed in 2001. Processes for health assessment completion will be reviewed and procedures improved, including awareness raising for social workers and carers, and process monitoring on the new database to achieve 100% completion of assessments.
- 7 QP budget will fund Viewpoint software to facilitate participation of disabled young people in service planning to improve their life chances (Obj.6)
- 8 Leisure and cultural activities will continue to be promoted through Corporate Parenting and the QP leisure fund (Obj.4C4)

SECTION C: Part 1:	What will you do to improve the educational attainment of LAC (with reference to the original and new PSA targets)
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- 1 New PSA targets to increase the proportion of children leaving care with 5 GCSEs grades A-C to 15% in 2004 is very challenging given a 0% percent achievement in Sept 2000. As part of current joint planning with education, (Obj.4B) interim targets will be agreed as well as a matrix of personal, academic & vocational targets for young people who could not obtain GCSEs including

learning disabled children, and those who have missed SATs or GCSE curriculum for defined reasons.

- 2 Building on the analysis of the advisory teacher, further understanding of the barriers to educational achievement will be developed, to inform compensatory actions to raise educational attainment. The budget for individual support is likely to purchase tuition for young people who have gaps in their education or special needs requiring 1 to 1 help.
- 3 A primary target for the education team is to ensure that every looked after child has full-time education appropriate to their needs within the target that no excluded child should be without a school place for longer than 20 days. The team will also focus on prevention of exclusion through early intervention, and support to school and young people.
- 4 The PSA target to achieve by 2004 75% take up of education, training and employment by 19 year old care leavers is well above our PAF target of 55% and will require the same strenuous effort to achieve as for the younger age group. This outcome will depend on educational success at an earlier age therefore the care leavers budget will contribute to the team focusing on years 10 and 11 to ensure that care leavers have been engaged with education and are self confident and motivated when they leave care(Obj.6).
- 5 Support to pregnant teenagers will try to retain the young people in education pre- and post-natally through flexible packages of support.

SECTION C: Part 2	What will you do to improve access and delivery of health care – including CAMHS – to children looked after
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- 1 The residential sector is resourced through a Community Medical Officer and designated nurses (MAP2). A lead nurse to promote and co-ordinate services for foster children is to be recruited (4B). Targets are to ensure 91% completion of health monitoring by 2004 producing health care plans as appropriate, with an infrastructure of healthy living advice for all looked after children.
- 2 CAMHS Level 3 developments will lead to the establishment of a young person's mental health team (Obj 1B). The team will support and train residential staff and foster carers and provide direct support to some young people
- 3 CAMHS Level 4 strategy will support some looked after young people currently placed out of city because of behavioural or mental health needs through:
 - 12 bed, 7-Day In-Patient Facility for young people with severe mental health needs.
 - Crisis Response Service, with 2 emergency admission beds and outreach service.
 - Learning Disability Service for 11-19 year olds.
 - Service for young people with Severe Behavioural Problems or Conduct Disorders – 6/8 bedded unit.

- Multi-Agency Solutions Group – to co-ordinate assessment and bed purchase.

SECTION C: Part 3	What will you do to reduce teenage pregnancy and support teenage parents into education, training or work
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- 1 The Teenage Pregnancy plan covers two areas, prevention and support, and links with Sure Start Plus
- 2 Guidance is completed for Residential Homes for direct work with young people re sexual health/substance misuse.
- 3 Plans include:
 - Mandatory training in 2001 for residential staff and key foster carers
 - Individual assessments of young people's needs
 - Specific family planning services in residential homes
 - Sessional advice to care leavers about sexual health care services
 - A pilot of 'baby doll' experience
 - Targeting looked after teenage parents and care leavers for "Teenagers to Work" placements
 - Linking looked after children to Connexions services during and post pregnancy
 - Liaising with advisory teacher to support young mothers to return to education or employment through a follow up appointment 6 weeks after birth
 - Ensuring young people are linked to Surestart/Surestart Plus programmes and services in the local community
 - Assisting Education Department to provide child care places for young people to return to education or training
 - A project manager has been seconded to progress Sure Start Plus from mid January (HAZ funded)

SECTION C: Part 4	What will you do to increase opportunities and support for children and young people in care to participate in leisure, cultural and sporting activities
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- 1 The Department has established a Quality Protects Leisure Fund to improve the skills, confidence and self-esteem of LAC through sport, cultural and leisure activities. Funding is directed to either an individual or group and will focus on:-
 - providing sessional workers to give 1 to 1 support to young people with behavioural difficulties to enable them to participate.
 - to give instruction to either an individual or group of LAC in a particular sport or art/craft activity.
 - to run workshops for LAC in art, drama and music, in order to improve skills and confidence.

- 2 Funding has been given to individual young people aimed at making a qualitative difference in their lives and aiding social inclusion. In 2001, the priority will be disabled and black/dual heritage young people - each Children's Home is consulting with young people to ensure appropriate leisure activities.
- 3 Corporate Parenting initiatives provide large scale social activities for foster families, individual leisure and cultural opportunities and targeted leisure activities for disabled children. See access and inclusion officer Obj 6 B

SECTION C: Part 5	What you will do to narrow the gap between the proportions of children in care and their peers who have had a final warning or are convicted
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- 1 The very positive reduction of the proportion of looked after young people offending from 20% to 11.25% demonstrates the shared commitment of YOT and SSD to achieving the PAF target of 10% by 2001. A detailed protocol defining mutual responsibilities is in place with joint commitment to high quality service for this group of young people.
- 2 The strategy to reduce offending of LAC includes:
 - Enhanced remand fostering to reduce use of residential care where peer influence may encourage offending
 - Field social workers attending Court and co-working with YOT for young people looked after
 - Monitoring of trends and data exchange
 - Linking "Asset" and children in need assessments to produce shared service plans
 - YOT police officers contributing programmes on offending behaviour for LAC
 - YOT managers reviewing all looked after young people monthly
- 3 To enhance outcomes for black young offenders, a black cases panel to review service provision and 4 SW posts exempted under the Race Relations Act. Half of 12 SW posts were occupied by black and minority ethnic workers in 2000
- 4 The education support team for LAC intends to include young offenders in its remit (Obj.4B)
- 5 The primary mental health worker based in YOT from the CAMHS Young People's Team (Obj.1B) will support looked after young offenders with mental health needs

SECTION D: EXPENDITURE OF GRANT

Life chances of LAC is a priority area for grant	
How much do you plan to spend on this in total in 2001 – 2002? (£)	£113,500

OBJECTIVE 5: TO ENSURE THAT YOUNG PEOPLE LEAVING CARE, AS THEY ENTER ADULTHOOD, ARE NOT ISOLATED AND PARTICIPATE SOCIALLY AND ECONOMICALLY AS CITIZENS

SECTION A:	Describe your progress to date under this objective, including evidence of improved outcomes for children
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- 1 All young people have Leaving Care Plans very similar to Pathway Plans
- 2 Partnership with The Careers Service supports care leaver attendance at annual regional Jobs Fair
- 3 Teenagers To Work Initiative/Corporate Parent support creating work experience placements for young people on an ongoing basis.
- 4 Divert Trust Mentoring Project working with 19 substance abusing young people.
- 5 Data exchange with Careers Service to ensure no young people miss training and employment opportunities
- 6 Leaving Care Guide produced and distributed, including 'Contact' postcards to encourage keeping in touch
- 7 Pilot of "Drop In", in partnership with YMCA providing sessional activities and learning opportunities
- 8 Feasibility study commissioned from Barnardos to assess options and present findings to LCPP for multi-agency "centre" for young people. Young people were consulted about plans for the centre
- 9 YMCA Life Skills Accommodation Project running successfully for 3 young people requiring high level of support and preparation.
- 10 Fostering Independence – 1 approved carer and 2 in assessment – to provide pre-leaving care preparation
- 11 Continuing strong partnerships with 7 supported housing projects and protocol with Housing Department including SSD/Housing funding to 4 projects
- 12 Multi-agency working group has started work on transition planning for disabled children, to identify appropriate group of children at a much earlier age
- 13 One young person with very severe learning disability and challenging behaviour has been enabled to live in own home with significant input from all agencies where previously would have needed lifelong institutional care. Will form 'blue-print' for working with similar young people.
- 14 All residential units have/will develop independent living unit(s) and through contracts and training packages with young people, will enable them to develop skills before leaving care for managing in the community.

15 For black care leavers the leaving care black cases panel reviews individual service plans and general service provision. There are 2 exempt posts in the team, 1 social worker and 1 project worker, to ensure culturally sensitive services. The social worker is researching the educational needs of, and options for, black young people leaving care.

SECTION B:	Set out what you will achieve for children under this objective In 2001-2002 and beyond, and how will you achieve it.
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- 1 To achieve positive education and employment outcomes for care leavers, education support must start early. Education/SSD are planning a joint funded multi-disciplinary team to support LAC to impact on current poor education outcomes. (Obj.4B)
- 2 Corporate partners will encourage and support work experience and placements for young people
- 3 Partnership with Connexions will ensure that LCT is geared to exploit the wider range of employment and training opportunities which will be available from 2002
- 4 QP grant to the Peer Health Project will provide accessible healthy living advice and support for young people in transition and independence, and Divert Trust offers support to substance abusing young people
- 5 The teenage pregnancy project is focusing on the needs of LAC and Care Leavers (4C)
- 6 Barnardos is engaged in a needs analysis, stakeholder consultation and feasibility study of the possibility of establishing a young people's centre which would provide learning, social, leisure and advice opportunities for Care Leavers and other young people in need. This potentially could lead to a project funded by multiple stakeholders. Young people were consulted about plans for young people's centre
- 7 Preparation for leaving care will be facilitated by the fostering independence scheme, residential homes independent living units, YMCA accommodation project, and other supported housing projects
- 8 Inter-agency and Corporate preparations for the Children (Leaving Care) Act implementation will gain pace, with particular input from Housing Dept

SECTION C: Part 1:	What are the key elements of your plans for the suitable accommodation and support for young people leaving care, and those in transition to independence, in line with the legislation on care leavers and in light of the new PSA target?
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- 1 New PSA targets of 15% of 16 year old care leavers achieving 5 GCSE's, A-C and 75% achieving the same level of education, training and employment as their peers will depend on a matrix of support and major change agenda.

- 2 The exact expenditure of the ring fenced budget is dependant on detailed guidance but will include:
 - Establishing and implementing pathway plans and personal advisors
 - Developing and delivering benefit systems
 - Educational support to 14-16 year olds (Obj.4B) and support for continuing education to 21 years
 - Accommodation for 16 and 17 year olds and students in vacation
 - Help with employment and general assistance to 21 years
 - A multi-agency centre for young people
 - A possible project officer and additional workers to co-ordinate and implement the care leavers programme
- 3 Interagency transitional planning for disabled children involving voluntary and statutory partners (Obj.6) will develop further through HAZ project
- 4 The essential support of elected members for this development agenda is achieved through bi-monthly meetings with a cross party working group and Quality Protect lead and policy officers.

SECTION C: Part 2:	How are you ensuring appropriate support for Young People who will not be covered by the new Act?
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- 1 The Leaving Care Team (LCT) will continue its range of services to young people who currently qualify, regardless of their status after the implementation of the Act.
- 2 Leaving Care Plans develop for each young person at around their 16th birthday, or later if there are clear indications that a young person is to remain looked after. The plan is drawn up in consultation with the young person, and progressed by LCT social worker, child care social worker, and primary caregiver. The plan covers the major issues of accommodation, employment/training, health, and social skills and represents the tasks to be achieved during this period of transition.
- 3 The young person remains allocated to a Leaving Care worker until he/she is satisfied that the Plan has been achieved, usually around 19 years. A duty system also deals with young people who may present as care leavers from other authorities and are given advice and assistance under existing regional protocols.
- 4 Young people with significant disabilities who will require adult Community Care provision remain allocated up to age 19 years with child care SW. LCT provides consultation and ensures that the Leaving Care grant is used to enhance whatever adult provision is made.

SECTION D: EXPENDITURE OF GRANT

16+ year olds in and leaving care is a priority area for grant	
How much do you plan to spend on this in the first 6 months of 2001-2002? (£)	£84,000

OBJECTIVE 6: TO ENSURE THAT CHILDREN WITH SPECIFIC SOCIAL NEEDS ARISING OUT OF DISABILITY OR A HEALTH CONDITION ARE LIVING IN FAMILIES OR OTHER APPROPRIATE SETTINGS IN THE COMMUNITY WHERE THEIR ASSESSED NEEDS ARE ADEQUATELY MET AND REVIEWED

SECTION A:	Describe your progress to date under this objective, including evidence of improved outcomes for children
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- 1 The proportion of LAC in repeat short-term placements increased by 1.1% in 1999-2000
- 2 Link carers increased from 14 to 25 (38 placements) from Jun'99-Dec'00. In Dec'00 the ethnicity of children in respite was 59.5% Wh; 21.6% Asian; 16.2% Dual Her; other black and minority ethnic children 2.7%
- 3 7 young people (14.5%) are unplaced and 3 await better matched carer, most needing major ground floor adaptations
- 4 15 children are in residential placement, 5 children placed out of city await stable foster placements for holiday periods
- 5 Funding Cross Roads to provide overnight sitting service offers a positive alternative to overnight respite
- 6 Disabled Children's Team (DCT) continues to assess and support children with significant and permanent disability. There are 2 exempt posts for Asian social workers because of high proportion of Asian disabled children, 24.6% in Dec'99 and 22.9% - Dec'00
- 7 Carers Grant and Community Fund Grant have been used to fund a variety of specialist and inclusive activities (6C)
- 8 Corporate Support includes:
 - Housing Dept adaptations to tenant foster carer homes
 - Arts and Leisure activities for disabled children
 - Education department statementing at age 4 co-ordinated by a pre-school teacher, and a number of specialist primary and secondary schools with close links with DCT including shared reviews
- 9 Interagency work is progressing well:
 - The "Care Co-ordination for children with Complex Health Needs" pilot, positively assessed by Leicester University, awaits full report later this year
 - "Transitions Planning" working group includes Connexions. Brochures and leaflets have been produced for young people and carers
 - The HAZ Service Manager (6C) will start Mar'01 to co-ordinate services for disabled children.

- The Home Intervention Project will be funded long-term on an expanded basis through the 2001 HimP
- The 2001 HimP includes funding for a respite daytime sitting service for children with complex health needs, aged 6-8, to build on existing scheme for 0-5 yrs.
- The LCPP has strong representation for disabled children (Obj.6C)
- CAMHS tier 4 development strategy is to establish a unit for children and young people with learning disability and mental ill health.(Obj.4C)
- Disabled LAC will have access to new multi-skilled psychology team (Obj.1B).

SECTION B:	Set out what you will achieve for children under this objective In 2001-2002 and beyond, and how will you achieve it.
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- 1 Targets
 - to reduce by 2004 the no of children waiting for respite, assuming adaptations funding can be resolved
 - 14.5% of LAC receiving respite care by '04
 - Recruitment-focus on Asian Moslem carers; friends and extended family; older children with challenging behaviour and young people needing school holiday placements, through specialist fostering social workers
- 2 Policy officer will research funding streams, benchmark practice in other authorities, progress contracts and protocols
- 3 QP funded clerk will speed up statementing and transitional reviews
- 4 QP pilot scheme using Home Helps to administer care under the health and social care protocol for daytime respite for carers
- 5 0.5 QP social worker post in the child and family social work team to provide post-abuse and other therapy for disabled young people.
- 6 OT to be seconded from SSD adult services to facilitate timely child assessments
- 7 Corporate and voluntary partners to increase access to leisure/services with 0.5 QP funded access and inclusion officer to work with Mencap, Red Cross and Arts and Leisure staff to develop accessibility. QP funded 0.5 equipment clerk to be based in voluntary agency
- 8 Jointly with Leicestershire to part fund Mencap Information Officer to work with Red Cross
- 9 Carer/young people participation to be actively promoted through
 - Consultation Officer in HAZ team
 - DCT training in Makaton early '01
 - DCT to increase effective inclusion at reviews using Viewpoint software

- Voluntary Action Leicester participation project to include disabled children (Obj.8A)
- Independent visitors to be recruited for disabled young people in out of City placements
- Closer links to be created with advocacy groups including Red Cross

10 Young people in respite can have reduced quality of life because their non-essential equipment cannot be moved with them. QP grant will purchase items if not available from Red Cross resource of 8600 items

11 £5,000 QP grant to cover potential expenditure on implementation of direct payments

SECTION C: Part 1:	How will you work with partners including Disabled Children and family, to assess needs and commission services with partner agencies?
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- 1 LCPP is an increasingly dynamic forum including Red Cross, Voluntary Action Leicester and parent representative for disabled children in which disabled children's services receive high priority
- 2 SSD has service level agreements with 5 voluntary organisations for disabled children (see MAP2)
- 3 The HAZ funded Service Manager will be managed by AD, SSD and LCPP subgroup
- 4 Needs of autistic children will be audited through membership of "Shared Care UK".
- 5 Liaison with neighbourhood projects promotes support to disabled children (Obj.3)
- 6 Carers' Grant enables Commissioning of additional services
- 7 Proposal will be developed with Corporate partners to extend support to non-looked after disabled children
- 8 Multi-agency training through ACPC and Assessment Framework implementation will address child protection issues regarding disabled children (Obj.2C2)
- 9 VAL Children's Project includes Red Cross Special Needs Family Support Centre as 1 of 7 groups being consulted (Obj.8)

SECTION C: Part 2:	Provide increased family support services (including any linked use of Carers Grant monies)
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- 1 Carers grant and Community Fund will continue to support: day care; child minding; sitting service (Mencap); playschemes; after school clubs; holidays and one to one support to enable inclusion in main stream activities.
- 2 This includes
 - £ 7,000 to Mencap sitting service for young people with learning disability
 - £12,000 to Voluntary Agencies – sitting service for others (tendering underway)
 - £ 1,300 Holidays for disabled children (and families)
- 3 SSD budget supports participation in playschemes; special childminding (Obj.3A) and Family Centre provision

SECTION C: Part 3:	Provide inclusive play and leisure facilities
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- 1 SSD representative on each of 3 Surestart Management Boards (Obj.3C)
- 2 Nursery Officer seconded to Surestart programme to promote opportunities for disabled children under 4 to be integrated into community/play provision (Obj.3C)
- 3 SSD and Carers' Grant to provide 1 to 1 support to enable participation in main stream play/social schemes, leisure activities and after school clubs
- 4 Arts and Leisure disabled access officer; 0.5 QP access/inclusion office; 0.5 QP equipment clerk and Red Cross integration development worker to facilitate disabled children access to community leisure services.
- 5 QP leisure fund (Obj.4C) to support inclusive activities
- 6 1.8% of children receiving Family Centre services have complex health needs. Level of service to disabled children will be part of current review
- 7 EYDCP provision includes ring fenced monies for disabled children

SECTION C: Part 4:	Provide joint information services for service users
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- 1 HAZ Disabled Children's Project Team will co-ordinate and develop information on services, building on the work of the joint funded Mencap information officer, to ensure information on services and access to them is widely disseminated.

- 2 Planning for the provision of joint information services will be included in the LCPP participation project, enabling children and young people to contribute to the design and delivery of service information. Results of consultation, including awareness of available services, will be published.
- 3 The HimP funded children's information website will include information on services to disabled children and their families.
- 4 A range of briefings, such as the Children's Services Plan briefings planned for early summer '01, will include results of service mapping exercises.
- 5 Lottery funding for a Red Cross information officer and an advocacy officer/sessional advocacy has been granted for 2001-04.
- 6 Early Years Development and Child Care Partnership have developed a Child Care Information Service which includes Disabled Children's Integration Development Worker
- 7 The multi-agency transitions group is collating and will publish information about mainstream and specialist services for children and young people at the key points of transition.

SECTION D: EXPENDITURE OF GRANT

Disabled children is a priority area for grant	
How much do you plan to spend on this in total in 2001-2002? (£)	£136,700

OBJECTIVE 7: TO ENSURE THAT REFERRAL AND ASSESSMENT PROCESSES DISCRIMINATE EFFECTIVELY BETWEEN DIFFERENT TYPES AND LEVELS OF NEED AND PRODUCE A TIMELY RESPONSE

SECTION A:	Describe your progress to date under this objective, including evidence of improved outcomes for children
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1. The Access Review found that nearly 30% referrals were repeats. It was assessed that many were from families whose emotional, social and financial resources were limited, and for whom this “top up” of often simple support prevented serious deterioration, suggesting that repeat referrals were not always negative.
2. No figures of assessment completion within 7 days are available for 1999. In 2000 the proportion of non-complex assessments completed within 7 days were 67% in Jun; 77% in Jul and 62% in Aug exceeding PAF predictions

We have used the format for initial assessments since Dec 2000, staff training begins on 01.02.01.

3. Core assessments will be used from 1.04.01 and timescales audited
4. A referral and screening desk has provided a swift and consistent response, signposting referrals to other agencies when appropriate which has increased by 15% referrals appropriately redirected or screened out; 60% of the latter are screened within 24 hrs.
5. A Departmental Implementation Group is preparing for launch of the Assessment Framework on Apr'01. Awareness of the framework has been achieved through publicity and staff briefings.
6. Electronic forms will be used and linked to new database.
7. 2 further dimensions have been added to the Assessment Framework—‘the Heritage Model’ to enhance assessments of black and minority ethnic children, and ‘Carer’s Specific Needs’ to improve assessments of carers, including those of disabled children. A specific Initial / Core Assessment Plan has been designed for disabled children
8. We use qualified interpreters where worker and service user do not share a common first language including recent arrivals e.g. Albanian, Bosnian, Bravanees, Somalian and Tamil. Recently recruited Asian staff speaking between 2 and 4 languages each will substantially improve accessibility
9. The Assessment Framework has been shared with partners. £70,000 has been identified from HAZ for multi-agency implementation.

SECTION B:**Set out what you will achieve for children under this objective
In 2001-2002 and beyond, and how will you achieve it.**

1. Through reorganisation of Assessment Services the intention is to incorporate the principles and practice of the Assessment Framework. Non-SSD work will be rapidly referred to other service providers through the referral and screening desk. Assessment teams will complete initial and core assessments, including S47 enquiries, and refer all further work to Child Care Support Team clusters.
2. Management Information and audit will rely on accurate inputting of data into the new database. The referral team will record referrals directly on to computer.
3. Pre-referral discussions will facilitate screening and routing. Multi agency training will emphasise this.
4. The structure of new staff guidance is agreed and detailed revision of procedure will be progressed in 2001.
5. A cross divisional group will clarify when adult workers will assess children in need and vice versa
6. The Data Protection Act 1998 and Human Rights Act will inform practice although initial referral response time of 24 hrs may be delayed by the need to gain consent.
7. The Assessment Framework training plan is complete and will ensure that good practice for black and ethnic minority and disabled children is integrated into training
8. Recruitment and retention of qualified and experienced staff remains a challenge. We will continue an active recruitment and retention policy (Obj.10)
9. Work is underway [Obj.6] to ensure co-ordinated assessments for disabled children, which are likely to exceed 35 days because of multi-agency input. Eligibility criteria for DCT enables appropriate cases to be transferred to DCT at an early stage
10. The review of Children and Family Resources Division will aim to complement these changes to provide the variety of services needed to provide support to all children in need in their neighbourhood and in partnership with other statutory and voluntary agencies.
11. A 3 month pilot in Access using unqualified workers for a range of administrative/social work tasks will increase the skill mix and flexibility of response and is geared to helping to meet new timescales and improve throughput.

SECTION C:**Ensure that services provided to children following assessments are producing beneficial outcomes**

- 1 The new Assessment Service will survey children three months after assessment to measure outcomes and will identify the views of black and disabled children.
- 2 A questionnaire will be designed to collect the views of referrers on whether their referral has produced beneficial outcomes for children.
- 3 We will be implementing a system to review family support plans with multi-agency, child and carer participation. Regular social worker supervision will remain central to monitoring outcomes for service users and progressing family support plans.
- 4 All users of Children's Resources Division services receive a questionnaire about the service and the majority report positive outcomes.
- 5 The new database is planned to produce analyses of service needs and responses to inform service planning; and quality audits of service plans and outcomes for individual families, although this will only yield data in future years.
- 6 The Policy Officer and Social Worker (Cultural Diversity) will research and measure outcomes for black and minority ethnic Children and Families
- 7 Information on areas of service deficit will also be collected through an email address and telephone line for staff. Returns will form the basis of a bi-annual briefing for senior managers and will be fed into multi-agency planning groups. One of the first areas will be to identify service deficits for dual heritage children.

SECTION D: EXPENDITURE OF GRANT**Assessment is a priority area for grant****How much do you plan to spend on this in total in 2001 – 2002? (£)**

£293,250

OBJECTIVE 8: TO ACTIVELY INVOLVE USERS & CARERS IN PLANNING SERVICES & IN TAILORING INDIVIDUAL PACKAGES OF CARE; & TO ENSURE EFFECTIVE MECHANISMS ARE IN PLACE TO HANDLE COMPLAINTS

SECTION A:	Describe your progress to date under this objective, including evidence of improved outcomes for children
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1. Participation structures & processes:
 - A departmental Participation Group is developing a strategy which will co-ordinate all activity and develop feedback mechanisms for service planning
 - A resource library has been developed containing literature & equipment for staff to consult with YP, including laptops & Viewpoint software
 - The newly formed Parents Council for Parents of Disabled Children is represented on LCPP
2. For looked after children we have a children’s consultation officer who has established “Speakeasy” consultation events and newsletters; has taken a group of YP to a participation conference; raised staff awareness through training and briefings; and held 3 awareness raising sessions for foster carers.
3. For disabled Children a mapping exercise is being carried out by Voluntary Action Leicester at request of LCPP to avoid ‘overlap’ and a consultation Officer for Disabled Children will be funded by HAZ.
4. For black and minority ethnic children & families the policy officer & SW (Cultural Diversity) will develop a participation action plan and promote participation of black & ethnic minority children & families; communities & voluntary sector organisations. 16–17 yr old unaccompanied asylum seekers were consulted about accommodation & support received to inform services.
5. An LCPP pilot Children’s Participation Project for 10-19 yr olds, run by the VAL children’s policy officer, funded from £8,000 HAZ grant will consult with a wide range of ethnic groups, disabled children (through specialist support workers), young carers, looked after children & children living in poverty. The aim is to sustain an ongoing dialogue & establish young people as crucial participants in service planning & delivery

SECTION B:	Set out what you will achieve for children under this objective in 2001-2002 & beyond, & how will you achieve it.
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- 1 For looked after children:
 - Consultation Officer to run 2 courses for child care workers with staff development section based on the “Total Respect” training pack.

- Shortly to survey LAC to establish level of knowledge about the project.
- It is planned that LAC will be part of the selection process for recruitment of staff to residential homes.
- The QP consultation budget has been enhanced to enable the development of group work & other initiatives

2 For black and ethnic minority children & families

- Policy Officer to complete a detailed user & community participation strategy & action plan
- Establish black & minority ethnic voluntary sector bi-monthly forum
- Develop exit questionnaire at point of case closure/transfer, & other user satisfaction measures
- Implement anti-racism audit tool summer 2001.
- In accordance with McPherson report, a questionnaire on racism is being distributed to all staff in community homes about racism between YP & from YP to staff.
- Through LCPP & consultation officer, to support VAL Children Participation Project

3 For Disabled Children

- Through the HAZ project & consultation networks in voluntary organisations a detailed user & community participation strategy will be completed & implemented
- Communication/participation methods & skills to be developed & training provided for staff, including Makaton training & promotion of complaints procedures
- Specifically target disabled children placed in residential schools away from home area to reduce isolation, including increased use of independent visitors
- Exploration of use of advocates for children within planning meetings especially where views may be different from carers' views
- Special Viewpoint software for disabled children will be developed via QP grant

**SECTION C:
Part 1:**

How are you ensuring that children & young people & their families & carers are enabled to participate effectively in discussions & decision-making about their own care?

1. "Viewpoint " Software & laptops have been purchased, & the system is to be piloted within 3 childcare teams & leaving care team to allow YP to express their views & opinions in a "safe" way through interactive software.
Further modules to be implemented for disabled children
2. Makaton Training will facilitate inclusion for disabled YP
3. A working group has been formed to consider the use of "I'll Go First", a pack for working with disabled children around care planning.
4. Children & families using family support services such as family centres, & IST are asked in reviews about their experiences of the service they received, & their views incorporated into service developments.
5. Questionnaires were sent to all families participating in a family Support Meeting & the results collated; parents all felt more able to participate than in a traditional case conf & felt that their views were listened to.
6. Post to recruit independent visitors has been established & will prioritise disabled children placed outside Leicester.

**SECTION C:
Part 2:**

How are you involving children & young people & their families & carers in service planning?

1. The new Children's Assessment Service will survey children who have received assessment / services after 3 months to measure outcomes & will identify the views of black and disabled children
2. LCPP participation project co-ordinated by Voluntary Action Leicester.
3. A working group of LAC is currently being consulted about the Leaving Care Bill.
4. Another group, involving children in foster & residential care as well as care leavers were involved in redrafting the complaints leaflet to make it more accessible to young people.
5. A group of care Leavers was consulted about the type of resource centre they would want for ongoing support.
6. The Children & Families Resources Section continues to run monthly consultation sessions for parents of children using its services. Service evaluation questionnaires are sent to all recipients of services from Children & Family Resources & the results collated on a quarterly basis. Parents' forum is to be established as part of the imminent review of this section.

7. Review of Disabled Children's Register is intended to enhance communication with families & enable them to inform planning of services through fuller & more representative consultation. HAZ funding agreed for relevant staff to achieve this
8. Parents & Carers of Disabled Children Forum is fully represented on LCPP

SECTION C: Part 3:	How are you ensuring more effective & quicker complaints procedures?
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1. A principle of the complaints procedure is that resolution should be achieved speedily, informally & as close to the point of service delivery as possible. First line managers mediate stage 1 complaints therefore to gain consistency detailed guidance has been issued; and the Complaints Officer has delivered 3 training sessions with 2 more planned.
2. Auditing of stage 2 timescales is established showing a 7% improvement in completion within 3 months, from 33% in the first 6 months '99-'00, to 40% in the third quarter.
3. The departmental complaints officer is part of the children's consultation group
4. Children were involved in redesigning the complaints leaflet (Obj.C2)
5. Complaints made by children in care are investigated by a designated officer within looked-after service & reported to member panel.
6. The Complaints Service will be commissioned to establish better ways of promoting the right to complain for 'hard to reach' children. Training in communication will also be provided for the investigators.

SECTION D: EXPENDITURE OF GRANT

Listening to children & young people is a priority area for grant	
How much do you plan to spend on this in total 2001-2002? (£)	£57,550

OBJECTIVE 9: TO ENSURE THROUGH REGULATORY POWERS AND DUTIES THAT CHILDREN IN REGULATED SERVICES ARE PROTECTED FROM HARM AND POOR CARE STANDARDS

SECTION A	Describe your progress to date under this objective, including evidence of improved outcomes for children
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- 1 The statutory inspection targets were met fully in 1999/2000 and are on target to be met this financial year.
- 2 An enhanced inspection process is in place with two officers undertaking each inspection. It is likely that all community homes will have more than the statutory minimum number of inspections to ensure that all regulatory aspects are inspected in a twelve-month period.
- 3 The Standards upon which inspections are based have required criteria, recommended criteria and outcomes for children. Children and young people's views are sought on each inspection. This is applied to both the private and local authority sectors.
- 4 Inspection reports are presented regularly to Members. They are also addressed in supervision with Team Managers. The Residential Service has adopted Performance Indicators from Inspection Standards, which are reviewed annually
- 5 In addition to the inspection process, the Looked After Service has developed a thorough action plan in response to the Waterhouse report. All 72 recommendations have been considered in detail. The Service has run a Safer Care Conference, delivered to our corporate parenting partners, the Police, Health Authority, Trade Unions and Voluntary Sector colleagues. The materials used are to be included in training packages for all staff to the Department.
- 6 Disabled children in residential units managed by Social Services Department are subject to mandatory checks. These have been carried out fully
- 7 Disabled children in educational establishments where Social Services Department are joint funding placements are visited by social workers and by representative of Looked After Service. Independent review officers also chair review of arrangement meeting.

SECTION B:	Set out what you will achieve for children under this objective in 2001-2002 and beyond, and how will you achieve it.
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- 1 The key challenges in terms of regulation and inspection is the transfer to the National Commission for Care Standards in 2002. As a unit which also inspects under eight's, there may be some instability in staffing if generic inspectors choose to transfer to Ofsted. There are also additional demands in terms of transfer of information. However, the inspection programme is closely monitored with monthly reports to the Director. A small pool of contract inspectors has been established to cover if necessary, for any staff shortages.

- 2 It is intended that the 100% completion of inspections will be maintained.

SECTION C: Part 1:	What action have you taken to implement the Chief Inspector's letter on private fostering?
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- 1 Existing policy has been checked for compliance with new requirements
- 2 Practice relating to Private Fostering and the Inspectors letter was discussed in Management Teams within the Child Care Services during the seminar in June 2000
- 3 A review of policies is being undertaken with a view to compliance with the new Assessment Framework. This work will be completed in April 2001 and include Private Fostering.
- 4 Professor Holman undertook a study in Leicester/Leicestershire in 1973 ("Trading in Children. A Study of Private Fostering". Routledge 1973). He has through local advertising contacted private foster carers in July 2000 for a follow up study in his role as visiting professor at Glasgow University using a grant from The Cadbury Foundation. The Department is seeking to collaborate with Professor Holman in this follow up study.

SECTION C: Part 2:	What action are you taking to implement the new provisions to regulate small private children's homes (LAC (2000) 21)?
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At present there are no known small private children's homes in Leicester.

Should we be notified by another Authority, in accordance with LAC(2000)21, that a child is placed in a small private children's home in Leicester we will immediately initiate the registration process.

OBJECTIVE 10: TO ENSURE THAT SOCIAL CARE WORKERS ARE APPROPRIATELY SKILLED, TRAINED AND QUALIFIED, AND TO PROMOTE THE UPTAKE OF TRAINING AT ALL LEVELS

SECTION A	Describe your progress to date under this objective, including evidence of improved outcomes for children
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- 1 A human resource strategy is implemented including:
 - Initial workforce analysis
 - H R planning groups to link training to workforce planning
 - Bi-annual workforce profile
 - 6 monthly analysis of staff attendance, grievance and disciplinary reports
 - Analysis of data systems to improve workforce information
- 2 The recruitment and retention policy has had success with reduced number of social worker vacancies and the creation of senior practitioner grade and child care support worker grade for flexible skills mix: 8 senior practitioners training as practice teachers
- 3 Successful reassessment for Investors in People confirms that individual learning needs inform staff development programme. A workbased induction process is linked to new workers probationary assessment
- 4 A management development strategy is agreed with introductory management training including employment policies
- 5 Increased levels of qualification include:
 - NVQ3 in working with children and young people – 10 residential social workers qualified, 10 in progress and 3 enrolled
 - PQ1 – 6 social worker's qualified
 - National Child Care award – 5 social workers enrolled
 - 2nd stage PQ Child Care – 5 social workers qualified including 1 in the Disabled Children's Team
- 6 All field social workers have dipSW including DCT team. All nursery officers have NVQ3 or equivalent early years qualification
- 7 A range of core courses provided by staff development include:
 - Child Protection
 - Disabled children and child protection
 - Assessment Framework
 - Permanency planning
 - Solution-focused interventions
 - Working with black children and families
 - Race equality
- 8 Makaton training is planned for the Disabled Children's Team

- 9 Foster carer training is considerably enhanced through the promotion of NVQ and the structured accreditation scheme
- 10 A conference for councillors, departmental staff and other professionals was delivered on "towards safer care"
- 11 ACPC delivers a multi-agency package of training in child protection and LCPP and CAMHS are increasingly offering multi-agency training. HAZ funding is provided for the implementation of the Assessment Framework
- 12 Annual Departmental Conference

SECTION B:	Set out what you will achieve for children under this objective in 2001-2002 and beyond, and how will you achieve it.
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- 1 The staff recruitment, retention and development policy will continue to be refined with the aim of improved outcomes for children through continuity and consistency of staff, with improved staff morale improving service delivery
- 2 Training priorities for this year are:
 - Major programme in preparation for new database
 - Major programme for Assessment Framework implementation
 - Maintenance of basic training modules
 - Responding to staff development needs identified through Investors in People processes
- 3 The QP funded staff development officer will lead on:
 - The implementation of the Assessment Framework
 - Dissemination of messages from "Research in Practice " to which we will subscribe through QP
 - Other QP initiatives for which training is required e.g. the implementation of the Children (Leaving Care) Bill
- 4 With the exceptional change agenda currently being promoted through QP consideration will be given to a matrix of training delivery including:
 - Introducing financial support for existing unqualified staff to undertake courses and to provide cover for their absence
 - Using large scale fora for awareness raising on new initiatives e.g. external speakers and/or departmental seminars
 - Staff focus groups to develop and own the implementation of new developments
- 5 The specific training courses described are designed to produce better outcomes for children:
 - children at risk through in-house and ACPC training
 - all children in need through the Assessment Framework implementation and solution-focused intervention

- Looked after children through permanence planning
 - black and disabled children through courses focused to their needs
- 6 All service users will benefit from improved service management and efficiency through management training and training for the new database (Obj.11)

SECTION C: Part 1:	What are you doing to recruit and retain an adequate supply of appropriately skilled staff?
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Human Resource Strategy includes:

1. Adoption of a workforce analysis and planning approach
2. Financial incentives for new social work appointees and existing staff
3. Introduction of skills mix teams including increased number of practice teachers
4. Provision of a range of training opportunities to staff in all settings including in-house courses and qualifying programmes, with a planned approach to the release of workers for external training and the introduction of a scheme of financial support for existing unqualified staff to undertake dipSW
5. Continuation of co-operation with both local universities to provide dipSW programmes
6. Planning the introduction of an induction course for new starters to supplement the work based induction.
7. An established career progression in residential service linked to NVQ which will incorporate the Registered Managers Award (Children Homes) when this is available.
8. Training for staff covering a range of health and safety issues
9. Promotion of family friendly policies and employee benefits

SECTION C: Part 2:	What are the key elements of your interagency training strategy to ensure that new guidance and requirements are integrated into joint working practices? You should cover in particular safeguarding children, including utilising Towards Safer Care; undertaking assessments in accordance with the Assessment Framework; and improving the participation of children, young people, their families and carers (including your use of the Total Respect training pack)
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- 1 ACPC training programme will provide multi-agency training on the new Working Together and is scheduled during 2001. Existing Child Protection courses are being modified to integrate Working Together and Assessment Framework.
- 2 The Departmental Assessment Framework training programme will be completed in 2001/02.
- 3 A project funded by HAZ to research and map family support services and deliver Assessment Framework training across agencies on a locality basis aims to facilitate joint working on the assessment of need and appropriate intervention. Multi professional training will include Sure Start, CBII and YOT staff
- 4 Training on "Towards Safer Care" will follow on from the inter agency conference, and on "Total Respect" will be included in 2001/02 Training Plan.
- 5 The appointment of a service manager and consultation officer to co-ordinate services to disabled children will recommend an interagency training strategy designed to meet the needs of disabled children.

SECTION C: Part 3:	What steps are you taking to engage multi-agency staff in all relevant groups and at all levels in the design, delivery and evaluation of Quality Protects
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- 1 The Leicester Children's Planning Partnership shares the principles and objectives of Quality Protects and incorporates them into all service planning
- 2 QP Core group including Statutory, Voluntary and Corporate colleagues meets bi-monthly to participate in planning the delivery of joint services for the QP programme and evaluating outcomes.
- 3 Quarterly meetings of the QP policy officer, voluntary organisations, and relevant SSD staff enables full briefing of the vol. sector and opportunities for their participation in and assessment of service delivery plans
- 4 The policy officer, Voluntary Action Leicester, is a primary channel of communication between voluntary organisation staff and all main planning fora which she attends including LCPP, QP Core Group, Consultation Steering group and CSP planning group
- 5 QP policy officer meets regularly with Health Authority and Trust colleagues to address mutual plans to achieve QP objectives

- 6 ACPC is pivotal to planning for children in need of protection and involves staff from all agencies in awareness raising sessions, discussion and training
- 7 The Assessment Framework implementation training will have strong inter-agency input and ownership

SECTION D: EXPENDITURE OF GRANT

Managing change is a priority area for grant	
How much do you plan to spend on this in total in 2001-2002? (£)	£98,250

OBJECTIVE 11: TO MAXIMISE THE BENEFIT TO SERVICES USERS FROM THE RESOURCES AVAILABLE, AND TO DEMONSTRATE THE EFFECTIVENESS AND VALUE FOR MONEY OF THE CARE AND SUPPORT PROVIDED, AND ALLOW FOR CHOICE AND DIFFERENT RESPONSES FOR DIFFERENT NEEDS AND CIRCUMSTANCES

SECTION A	Describe your progress to date under this objective, including evidence of improved outcomes for children
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1. Proportion of children in family placements is well above average and the proportion under 10 slightly above. Expenditure per looked after child and per foster child is well below average but for residential placement is above due to the operation of minimum standard staffing levels

PAF E45-research to be undertaken (Obj.3)

2. It is assessed that the balance of family and residential placements is appropriate and the above average investment in a small number of residential placements is justified for the most disadvantaged young people. However the recent rise in the number of LAC is concerning and immediate analysis is underway to establish whether care is the best response for all these young people (Obj.3B)
3. The Children's Services Planning Unit, and new Performance Management Unit have been established to progress analyses of all service provision and to develop a co-ordinated Quality Assurance Framework
4. A review of Children and Families Access is complete and a review of Children and Family Resources begun to ensure that the department discriminates effectively between different levels and types of need, and provides appropriate support services. A work force strategy is agreed for staff retention and development, including a skills mix which will promote service responsiveness, especially for children in need.
5. Leicester Children's Planning Partnership is established to promote a co-ordinated matrix of planning and services and will plan the local utilisation of the Children's Fund.
6. Independent chairing of reviews of looked after children is extending to placements in contract care, mother and baby units, with parents, and children moved 3 times in 1 year, including disabled children in respite. Monitoring of reviews focuses on child and family participation and unmet need.
7. The case file monitoring system is being reviewed to provide ongoing service monitoring and focused targeted analyses
8. Four black cases panels for young offenders, looked after children, children in need of support and protection, and care leavers, monitor appropriateness of service for black and minority ethnic young people and audit unmet needs

SECTION B:**Set out what you will achieve for children under this objective in 2001-2002 and beyond, and how will you achieve it.**

- 1 QP grant will be used for QP Policy Officer to retain strategic link between children's services planning and quality of outcomes; Independent Chairs to develop Quality Assurance functions of the Child Protection and Independent Review Service; Systems Support Officers to assist in the implementation of the new database in 2001 and provide management information on delivery of key objectives and targets; a Research Officer to undertake analysis of causal factors underlying performance trends and 0.5 Finance Accountant to assist with unit costing and provide QP budget support.
- 2 The Performance Management Unit will monitor and audit performance in all the key areas of service provision, contributing to the Best Value Review process, progressing unit costing and financial analysis, and providing Benchmarking information for the department.
- 3 Departmental seminars have begun to consider the increasing number of looked after children, and its impact on placement choice, resources available for children in need, and assessment and refocusing issues, to produce recommendations for strategic planning.
- 4 Multi-agency threshold criteria and protocols will be established by April '01 and incorporated into Assessment Framework implementation to improve assessment processes and service responses. This will include planning for carers' assessments and for young carers as identified by the department's Joint Review Action Plan. The multi-agency implementation project will phase in from April '01 to 31 March '02.
- 5 A project manager for the CAMHS Strategy will be appointed to further develop co-ordinated responses to children's mental health needs at all response lines across all agencies.
- 6 HAZ Disabled Children's Project Manager from March '01 will plan and co-ordinate a multi-agency matrix of services for disabled children.
- 7 LCPP will continue to co-ordinate joint planning activity to maximise investment and improve the life chances of children in need, including the opportunities presented by the Neighbourhood Renewal Strategy and the Children's Fund.
- 8 Resource and needs mapping, and analysis for the Children's Services Plan is progressing, linking with Connexions and Children's Fund mapping
- 9 The further development of Sure Start within the City and the Family Group Meeting Pilot Project in Beaumont Leys, provide opportunities to develop services which are responsive to children's and families' needs.

**SECTION C:
Part 1:**

What are the main elements of your strategy to develop management information to improve service delivery – particularly in relation to adoption, children with disabilities and care leavers?

1. A major project involving more than £1 million investment in a new database will be implemented in July'01 with the capacity to produce
 - information to assist in effective planning and service delivery
 - effective performance management data
 - and more effective devolved budget monitoring.
2. Hardware investment will improve PC ratio to 1 per 2 workers, considering alternative systems to improve the effectiveness of front line staff in the future
3. Initial training will be completed in summer'01 with continuing training for existing and new staff
4. IT skills as an essential requirement for all posts will be phased in with the final aim of full electronic recording and process management
5. New ethnic origin categories will be implemented from April '01 and incorporated into the database, which will have the capacity to analyse service provision and process management by service user group including ethnic origin, disability, care leavers and adoption.
6. As part of the preparation for the implementation of the Children (Leaving Care) Bill finance section are investigating appropriate modules to facilitate the necessary payment systems.

**SECTION C:
Part 2:**

What are you doing to exploit the data collected during the census for the Children in Need Data Collection?

1. The collation and development of unit costs using CIN data collection will be a high priority for the Performance Management Unit in '01. and will inform Best Value Reviews and strategic planning
2. Departmental Revenue Strategy 2001-04 will set challenging but realistic budgets for children's services, and over the 3 year financial cycle will be increasingly informed by unit cost information.
3. CIN data was very useful in the preparation of the Sure Start delivery plan and will inform the CSP review
4. We await comparative CIN data from the DoH for further analysis and anticipate refinements in the next collection which will make future data more reliable

**SECTION C:
Part 3:**

What quality assurance and audit systems have you put in place?

1. A quality assurance framework, based on models used in other authorities e.g. Wolverhampton is being developed
2. The new Performance Management Unit will recruit a Performance Review Officer for children's services in early 2001
3. Service user feedback through the participation programme (Obj.8) will inform service review
4. Cultural Diversity posts will audit feedback from black case panels and consult with communities to review the quality and value of services for black and minority ethnic children and families
5. A detailed case file monitoring system will enable management overview and targeted monitoring of service standards
6. All senior managers have attended EFQM training
7. Work with ACPC will develop inter-agency quality assurance system.
8. The Complaints Service will move to PMU and collate service quality issues raised through complaints
9. Commendations of staff and services are brought to every Directorate meeting and disseminated through the staff fortnightly bulletin

SECTION D: EXPENDITURE OF GRANT

Management Information and Quality Assurance is a priority area for grant

How much do you plan to spend on this in total in 2001-2002? (£)

£245,100

QUALITY PROTECTS

MAP 3

2001 /

2002

Leicester: 509

PERFORMANCE INDICATORS AND PROJECTIONS

(Autumn 2000 Position Statement)

OBJECTIVE 1

	1998/99 Outturn	31/3/00 Provisional	31/3/01 Planned	31/3/02 Planned	31/3/03 Planned	31/3/04 Planned
PAF A1	<i>The proportion of children looked after who have three or more placements in one year</i>					
	30	24	23	20	16	15
PAF C23	<i>Adoptions of children looked after</i>					
	5.3	6.5	6.0	6.0	6.0	6.0
PAF D35	<i>Long term stability of children looked after</i>					
	49.3	59.5	60.0	62.0	64.0	66.0
PAF E44	<i>Relative spend on family support</i>					
	42.7	36.3	39.0	40.0	41.0	42.0
QP 1.1.2	<i>Proportion of children looked after with a named social worker other than team leader/family support</i>					
	97.1	100.0	100.0	100.0	100.0	100.0
QP 2	<i>Average duration of time looked after before adoption.</i>					
	26.5	2.1	1.9	1.8	1.7	1.7
QP 2a	<i>Number of children looked after for under 1 year before adoption</i>					
	4	2	2	2	3	4
QP 2b	<i>Number of children looked after for a duration of 1 year to under 2 years before adoption</i>					
	7	12	13	15	17	19
QP 2c	<i>Number of children looked after for a duration of 2 years to under 3 years before adoption</i>					
	11	12	12	10	8	5

QP 2d	<i>Number of children looked after for a duration of 3 years to under 5 years before adoption</i>					
	1	4	4	3	2	1
QP 2e	<i>Number of children looked after for a duration of 5 years and over before adoption</i>					
	1	0	0	0	0	0

OBJECTIVE 2

	1998/99 Outturn	31/3/00 Provisional	31/3/01 Planned	31/3/02 Planned	31/3/03 Planned	31/3/04 Planned
PAF A3	<i>Re-registrations on the Child Protection Register</i>					
	22.7	13.6	17.0	15.0	14.0	13.0
PAF C20	<i>Reviews of child protection cases</i>					
	N/A	71.4	85.0	95.0	98.0	98.0
PAF C21	<i>Duration on the child protection register</i>					
	11.8	7.5	7.0	8.0	5.0	4.0
QP 2.3.5	<i>The percentage of children on the child protection register who have a key worker</i>					
	98.5	100.0	100.0	100.0	100.0	100.0

OBJECTIVE 3

	1998/99 Outturn	31/3/00 Provisional	31/3/01 Planned	31/3/02 Planned	31/3/03 Planned	31/3/04 Planned
PAF E45	<i>Ethnicity of children in need</i>					
		0.78	0.85	0.90	0.95	1.00
QP 4	<i>Number of children permanently excluded from school Position at end of school year</i>					
	106	106	88	78	78	78
QP 5	<i>The proportion of schooling lost in the local authority through unauthorised absence. This refers to both primary and secondary schools. Position at end of school year</i>					
	1.3	2.6	1.6	1.4	1.2	1.2

OBJECTIVE 4

	1998/99 Outturn	31/3/00 Provisional	31/3/01 Planned	31/3/02 Planned	31/3/03 Planned	31/3/04 Planned
PAF A2	<i>Educational qualifications of children looked after</i>					
		17.4	20.0	25.0	30.0	35.0
PAF C18	<i>Cautions and convictions of children looked after [from 1st June 2000 becomes "Final Warning and convictions of children looked after"]</i>					

	<i>Final Warning and convictions of children looked after"]</i>		11.5	10.0	10.0	10.0	10.0
PAF C19	<i>Health of children looked after</i>		82.0	85.0	87.0	89.0	91.0
PAF C24	<i>Children looked after absent from school [joint working]</i>		25.0	20.0	10.0	8.0	5.0
QP 4.0.1	<i>The proportion of reviews of LAC within the preceding six months that were completed within the required timescale</i>	78.8	79.0	85.0	95.0	96.0	98.0
QP 8	<i>The proportion of looked after children achieving 5 or more GCSE grades A-C, expressed as a ratio of all children in the local authority achieving these standards</i>		9.5 :1	4.9 :1	4 :1	2.1 :1	1.4 :1
QP 9	<i>The percentage of children who had been looked after continuously for at least 12 months and were of school age, who were permanently excluded from school at any time during the previous school year</i>	7.6	12.0	10.0	8.0	6.0	4.0
QP 10	<i>The proportion of children looked after from ethnic minorities divided by the proportion of children from ethnic minorities in the local authority.</i>	5.00	0.38	0.42	0.47	0.53	0.56

OBJECTIVE 5

	1998/99 Outturn	31/3/00 Provisional	31/3/01 Planned	31/3/02 Planned	31/3/03 Planned	31/3/04 Planned
PAF A4	<i>Employment, education and training for care leavers</i>					
		35.9	45.0	50.0	53.0	55.0
QP 5.1.2a	<i>Of children who were looked after on 31/08/99 aged 16 or more and who subsequently left care, the proportion who are engaged in education or training or who are employed at 30/09/00</i>					
	35.9	35.9	45.0	50.0	53.0	55.0
QP 11	<i>The proportion of children looked after on 1 April aged 16 with whom the SSD are in contact on their 19th birthday</i>					
		66.7	70.0	75.0	78.0	80.0
QP 5.2.1a	<i>Of children who were looked after on 31/08/99 aged 16 or more and who subsequently left care, the proportion with whom the SSD are in contact at 30/09/00</i>					
	66.7	66.7	70.0	75.0	78.0	80.0
QP 12	<i>The proportion of children looked after on 1 April aged 16 who at the age of 19 are known to have suitable accommodation</i>					
		69.2	75.0	80.0	84.0	90.0
QP 5.3.1a	<i>Of children who were looked after on 31/08/99 aged 16 or more and who subsequently left care, the proportion known to have suitable accommodation</i>					

	<i>at 30/09/00</i>					
	69.2	69.2	75.0	80.0	84.0	90.0

OBJECTIVE 6

	1998/99 Outturn	31/3/00 Provisional	31/3/01 Planned	31/3/02 Planned	31/3/03 Planned	31/3/04 Planned
QP 13	<i>The number of disabled children looked after during the year under an agreed series of short-term placements, as a percentage of all children looked after at any time during the year</i>					
	10.9	12.0	13.0	13.5	14.0	14.5

OBJECTIVE 7

	1998/99 Outturn	31/3/00 Provisional	31/3/01 Planned	31/3/02 Planned	31/3/03 Planned	31/3/04 Planned
QP 7.1	<i>The proportion of referrals which are repeats</i>					
	40.6	70.0	65.0	45.0	40.0	35.0
QP 7.2	<i>The proportion of initial assessments completed within seven working days of referral</i>					
	?	30.0	40.0	70.0	85.0	95.0
QP 7.3	<i>The proportion of assessments completed within 35 working days of completion of the initial assessment</i>					
		60.0	65.0	75.0	85.0	95.0
QP 7.4	<i>The proportion of completed assessments that set out objectives and appropriate service responses within the child's time-scales</i>					
	?	40.0	80.0	90.0	95.0	95.0

OBJECTIVE 8 - no Performance Indicators

OBJECTIVE 9

	1998/99 Outturn	31/3/00 Provisional	31/3/01 Planned	31/3/02 Planned	31/3/03 Planned	31/3/04 Planned
PAF C25	<i>Inspection of Children's Homes</i>					
	100.0	100.0	100.0			

OBJECTIVE 10

	1998/99 Outturn	31/3/00 Provisional	31/3/01 Planned	31/3/02 Planned	31/3/03 Planned	31/3/04 Planned
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QP 14	<i>The proportion of residential childcare workers who have achieved level 3 in the NVQ Caring for Children and Young People at 31 March</i>					
	0.0	0.0	13.9	27.0	41.0	55.0
QP 15	<i>The proportion of social workers and residential managers working with children who need to obtain the new childcare PQ and who have obtained the PQ1 award in childcare</i>					
	0.0	0.0	14.0	33.0	47.0	71.0

OBJECTIVE 11

	1998/99 Outturn	31/3/00 Provisional	31/3/01 Planned	31/3/02 Planned	31/3/03 Planned	31/3/04 Planned
PAF B7	<i>Children looked after in family placements</i>					
	77	76	80	80	80	80
PAF B8	<i>Cost of services for children looked after</i>					
	337	322	348	348	348	348
PAF B9	<i>Unit cost of children's residential care</i>					
	1680	1693	1800	1800	1800	1800
PAF B10	<i>Unit cost of foster care</i>					
	144	170	183	185	187	190
PAF C22	<i>Young children looked after in family placements</i>					
	89.6	82.9	83.0	83.0	83.0	83.0
PAF E45	<i>Ethnicity of children in need</i>					
		0.78	0.85	0.90	0.95	1.00