



CHILD PROTECTION COMMITTEE

IMPROVEMENT PLAN FOLLOWING HMIE
CHILD PROTECTION INSPECTION

Key Area 1: Improvement plan following HMIe Inspection

How was the need for improvement identified and initiated?

The inspection of services to protect children and young people in East Ayrshire took place between June and September 2007. It covered the range of services and staff working in the area, who had a role in protecting children. The Chief Officers were asked to prepare an action plan indicating how they would address the main recommendations in this report. The report was published in January 2008.

The action plan was developed and agreed by the CPC and Chief Officers group. The plan was monitored by the Performance and Audit sub group and its progress was reported on a regular basis to the CPC and Chief Officers Group.

The inspection action plan was part of the annual report 2008-2009 and business plan 2008-2011. The Performance and Audit group reviewed the process in relation to the specific actions detailed in the plan as part of the work concluding 2008/9 work of the committee. The progress in relation to the plan is attached in appendix One as at April 2009.

The main points for action were:

- Improve processes for identifying and assessing risks and needs of children where there are child protection concerns
- More fully involve health in child protection processes and improve children's access to medical assessments and examinations
- Improve joint planning to meet children's needs
- Ensure the work of social workers is monitored more consistently

How good are we now?

IMPROVE PROCESSES FOR IDENTIFYING AND ASSESSING RISKS AND NEEDS OF CHILDREN WHERE THERE ARE CHILD PROTECTION CONCERNS

Full details of this point contained under QI 5.3 of multi agency self evaluation report

- All Social Work children and families team managers completed a two day "Managing risk in child protection" development session with an experience external consultant.
- All children and families' social workers and addiction workers completed two day "Risk assessment, analysis and management course". This course is now run annually.
- Health Visitors and school nurses are trained in assessment and use the GIRFEC practice model on a single agency basis.
- Where the attendance of a child, young person or an adult, at an accident and emergency department raises concerns about the welfare of a child, the department will liaise with child protection health team, who will initiate a response by the child's school

nurse or health visitor.

- Comprehensive Risk Assessment will be completed where appropriate for the first Child Protection review case conference. This is completed on the Integrated Assessment Framework paperwork which incorporates the SHANRI principles, My world Triangle and the Vulnerability matrix. This will be completed after discussion and investigation by partner agencies and where completed, contains a risk and resilience assessment and uses the headings identified with the Department of Health's risk assessment triangle. This has made the information available to conference more robust and benefits children by providing accurate and full information along with recommendations for the care plan. The family and child, where age appropriate, are fully involved in the completion of this assessment and the final documents is shared with them.
- Systems have been put in place to tackle previous issues in the delay in Social Work assessment report. Regular meetings take place between the senior manager Children and Families, Authority Reporter and Children's Panel chair. The time intervals working group and interim prioritization procedures are in place and monitoring systems ensure the completion of assessments and reports.
- Mechanisms have also been put in place to ensure an improved quality of reports with training to social services staff and management overview which has resulted in a higher quality of report being provided to meeting. The outcome is that an increasing number of reports presented to child protection case conferences clearly demonstrate the vulnerability matrix and SHANRI principle with clear statements of risk and recommendations.
- GOCR guidance is in place and will be reviewed to ensure that it is continuing to meet practitioner's needs. Robust GOCR assessments inform decision making. The addiction staff, based across East Ayrshire within locality Children & Family teams work alongside social workers providing an expert addiction perspective which includes assessment of parental drug/alcohol use, motivation for change and ultimately the capacity of the drug/alcohol user to care for the child. The addiction staff have close working relationships with addiction staff working across East Ayrshire with NHS or voluntary sector providers ensuring the safety of the child whilst the care giver receives support towards recovery from their drug/alcohol problem.
- MAPPA, Multi agency public protection arrangements, risk assessment process in place for all registered sex offenders. Manifesting in individual cases is evidence of direct links between high-risk offenders under the management of MAPPA and child protection and vulnerable adult procedures. In such cases effective links between the three systems are vital, on an operational level, to ensure that all the relevant information is shared amongst the agencies involved and that an agreed, comprehensive and consistent approach to risk management is adopted. Beyond operational concerns, the Chief officers group have the primary responsibility for the strategic and operational development of MAPPA in this regard, in consultation with the MAPPA Strategic Oversight Group and the MAPPA Operational Group, which necessarily attend to the development of an effective strategic interface between Adult Protection, Child Protection and MAPPA, the three primary strands of public protection.
- Senior personnel from Children and Families Social Work Services attend MAPPA meetings and share information with other agencies where there are concerns about young people who may be considered to be actual or potential victims, either directly or indirectly. This information will be shared for the purpose of developing comprehensive

risk management plans of which a robust victim strategy is a central component.

- Transfer Of Case files; East Ayrshire Child Protection Committee ratified the West of Scotland Case file transfer procedure. As a matter of routine, transfer of a child's files go with the child if they move out of East Ayrshire to another Local Authority whilst on the register.
- Out with office hours the West of Scotland Standby Service provides social work services for East Ayrshire. The service level agreement is currently being revised as part of an ongoing review of the service provision and quality of the assessments and reports provided.

MORE FULLY INVOLVE HEALTH IN CHILD PROTECTION PROCESSES AND IMPROVE CHILDREN'S ACCESS TO MEDICAL ASSESSMENTS AND EXAMINATIONS

- The Tripartite discussion process was implemented October 2007, whereby all Child Protection Investigations involved a discussion with health staff and the initiation of a medical examination or a health assessment. In June 2008 health colleagues attended a meeting of Senior SW managers and Team Leaders to review and promote the process.
- Decision making in child protection investigations is informed by robust information sharing and includes the involvement of a health professional with specialist knowledge.
- Where necessary all children who require a medical examination or health assessment have this undertaken and plans are developed to meet their needs.

Further details to be added to this point following submission of the reports from health

IMPROVE JOINT PLANNING TO MEET CHILDREN'S NEEDS

Full details of this point contained in QI 5.4

- Child protection processes which can result in a Child Protection Case Conference. These meetings are chaired by an independent chair. Children and young people and their parents/carers are actively involved and encouraged to attend all child protection meetings including core groups. All key agencies are represented at child protection meetings and if there is a concern that a specific agency did not attend then the independent chair will follow this up in writing with the individual agency.
- The Chair will meet with the parents/carers and the children before the case conference to ensure that they are aware of the reason that it is taking place, that they have seen the relevant reports and that they understand the importance of providing their views to the meeting. The outcome of this initial meeting is that the child and family will know the chair and that their views are seen as an essential component of the meeting. Throughout the meeting the chair will ensure that the child and parent/carer understand what is being said and ask for their views.
- It has been agreed that at initial case conference a Comprehensive Risk Assessment will be discussed, to be completed, where appropriate, for the first Child Protection review case conference. This is completed on the Integrated Assessment Framework paperwork which incorporates the SHANRI principles, My world Triangle and the Vulnerability matrix. This new procedure has made the information available to conference more robust and benefits children by providing accurate and full information along with

recommendations for the care plan. The family and child, where age appropriate, are fully involved in the completion of this assessment and the final documents is shared with them.

- If a child is placed on the Child Protection Register robust, specific child protection plans are put in place for every child, naming the individuals responsible for implementing each aspect of the plans. Core groups are held regularly and have representation from the key professionals that are involved with the child. The core groups review the implementation of the plans and assess whether progress is being made and whether children's needs are being met.
- Systems have been put in place to ensure that the decisions of child protection case conferences are distributed within 24 hours of the meeting and a full minute of the meeting to be distributed within 7 working days of the meeting. Systems have been put in place to monitoring the distribution of these minutes and decisions.
- The Initial Response Teams assess, identify, and intervene to meet the immediate needs of children and young people, if it is determined that the needs of the child/young person's is on a longer term basis they are transferred into one of the longer term teams. The looked after, and permanency planning system ensures that the longer term needs of children are addressed, and Good Practice support sessions are offered to all staff to assist them in completing reports to secure longer term needs of children.
- All children on the child protection register or children who are looked after and accommodated away from home have an individual care plan. The plans are well formatted and contain actions, responsible persons, timescales, expected outcomes and a contingency plan. The key outcome of the plan in place is to improve the situation of the child and young person. Regular reviewing of the plan ensures that if this is not being achieved that the plan can be amended.
- When improvements have occurred and the child is removed from the child protection register the family will continue to be monitored and supported, a deregistration plan is agreed at the case conference and supports reduce in line with the progression of the case.
- The capacity for LAAC reviews have been enhanced with an additional reviewing officer now in post. This service is currently being reviewed to ensure that future capacity needs are met.
- MAPPA process ensure decision making and identifies those responsible for actions.
- We Can and Must Do Better strategies related to educational attainment and achievement are focusing on the mismatch between children looked after within the Corporate Parenting responsibility and those young people with supervision orders looked after at home.
- As universal services health visitors and school nurses understand the role of the lead professional and fulfil this role or support others to where agreed through multi-agency processes (GIRFEC, CP Process).
- There is good and improving involvement of all services in planning and formulation of action plans to meet children's and young people's needs.

- Child health records contain care plans which identify needs, appropriate interventions and services which are in place for as long as required. These are developed in partnership with parents and children where appropriate. The interventions and services provided or facilitated by health staff are effective and have a positive impact on the needs of children.
- Health component in CP plan and care plans evident in Child Health Records demonstrate there is varied practice here and outcomes from ongoing self evaluation should address this.
- Non-disclosure of a child's address through children's hearing and legal proceeds work with partners, aimed at producing joint understanding of shared and individual responsibilities for keeping children safe from risk.
- Domestic Abuse Protocol- As per the Standard Operating Procedure (SOP) for Police response to Domestic Incidents. The SOP can be available to the Inspection Team. There is also the Ayrshire Wide Non-Offence Protocol which in effect means that all children who are exposed to a domestic incident are referred to the area Social Work Department. In addition where pre-school children are involved a referral is also made to Health. The 'flow chart' for this can be available to the Inspectors.
- Problem Solving Group- is a multi agency group which considers cases of concern.
- Case Progression- The Interim Prioritisation Scheme was introduced in October 2007 by the Principal Reporter in response to the ongoing rise in receipt of referrals, especially in relation to non offence referrals and the need to focus on the children most in need of compulsory measures. The scheme addresses both internal and external delay through introducing a process of decision making that will enable Reporters to deal swiftly and efficiently with priority cases. Reporters also closely monitor the time taken between registration of a referral and the time of a decision. This is a KPI, an objective in the Team Plan and a Performance Appraisal Objective of the Authority Reporter.
- Challenging Families CPC guidance was agreed in November 2008, distributed to all agencies and is available on the CPC webpage. A multi agency training course is available on the CPC training calendar and 73 multi agency staff have been trained. The protocol assists staff when dealing with challenging and/or unco-operative parents, working with parents and carers who use disguised compliance and assist staff to identify where the actions of parents/carers who are challenging, uncooperative or who use disguised compliance impact on child care/protection issues.

ENSURE THE WORK OF SOCIAL WORKERS IS MONITORED MORE CONSISTENTLY

- Supervision of staff is a key priority for all social work staff, a supervision policy for social work was developed and a monthly electronic reporting system is in place to monitor the frequency of supervision sessions. This system is also updated to reflect the occasion where supervision sessions require to be re-scheduled. The report will be sent to the Senior Manager who retains an overview of the frequency of supervision sessions.
- We have clear and consistent systems in place to ensure that our staff are supported, empowered, supervised and accountable for their practice in relation to undertaking child protection work. Strong line management structures are in place and these have been

reviewed and strengthened to take account of increasing pressures and demand for service. Social Work Services are currently subject to a Review of Sustainability which seeks to ensure that service needs, priorities and financial resources are aligned. (See good practice example below). Within this process the design and capacity of Children and Families Services has been identified as one of the key workstreams. At a corporate level the Council is working upon the development of an overall competency framework which will further support a structured approach to the deployment of staff.

- All staff receive regular professional supervision in accord with the recently reviewed Supervision Policy (see good practice example below). Management controls are in place to monitor supervision activity and ensure that it is taking place at the requisite intervals and in accord with the policy.
- The Supervision Policy articulates with and is complemented by the East Ayrshire General Employee Review (EAGER) scheme which is an annual appraisal and audit of each employee's professional development needs including specific training, learning and development requirements. EAGER returns are audited at a departmental and corporate level to assist in the aggregated identification of learning and development needs.
- A Social Work Training Strategy maps out the strategic direction in relation to meeting the learning and development needs of our employees - including Post Registration Training and Learning (PRTL) - and ensuring that our workforce meets regulatory and registration requirements. Training Action plans for each section are currently under development and these will underpin and be the key mechanism for implementation of the Training Strategy. A Training Officer has been identified as the dedicated link with Children and Families services and is working alongside the senior management team and the Training Manager to develop the Action Plan for Children and Families Area Services.
- A specialised induction programme which includes a focus on Child Protection responsibilities for new Social Workers in Children and Families Area Services has been implemented and this is complemented by the corporate induction process. All new members of staff are provided with Child Protection Awareness Training commensurate with their level of responsibility.
- An extensive programme of Child Protection training is delivered to the workforce both from a single agency perspective by the Social Work Training Team and on a multi agency basis under the auspices of the Child Protection Committee (CPC) and its Training Sub Group. This includes delivery by both dedicated in house trainers and specialist providers as appropriate. The CPC Training Sub Group ensures that full account is taken of both local and national strategic priorities and developments. In addition during 2006/2007 a programme of Child Protection Awareness Training was delivered corporately to all council employees and appropriate staff in partner agencies to ensure that all staff were aware of their corporate responsibilities in relation to Child Protection. In accord with the EAGER process specialist workers are supported to undertake study programmes in Child Protection at post graduate level. All training courses delivered are subject to evaluation and review

How do we know? What key outcomes have we achieved?

- Effective joint working to meet the needs of the child.

- Improved information and assessments of the needs and risks for the child.
- Decision making based on clearly identified needs and risk factors.
- Deregistered children and their families needs met through continued support.
- Improvement in quality of report was evidenced in the CPC file audit exercise where it evidenced that the assessments clearly linked to the recommendations that were subsequently made.

Supporting Evidence: Please ensure that your written submission is supported by sound evidence and is readily available for inspectors if required. Examples included policies, procedures, protocols, minutes of meetings, publicity material, reports, management / performance information etc.

- Child protection case conference minutes
- File audit report
- GIRFEC
- Core group minutes
- Case progression minutes
- LAAC review decisions
- Communication with midwifery staff to ensure early intervention and intervention in at birth
- Commissioning of comprehensive assessments
- Self evaluation of initial response team Process map of referrals to initial response team
- CPC file audit results
- A&E audit
- Tripartite Audit
- GIRFEC evaluation
- Health Case file audit report
- Social Work Supervision policy and monitoring reports

Example(s) of Good Practice

- The establishment of the Initial Response Team in Social Services has improved the structure for dealing with referrals to remove delay in responding to the most serious referrals of children in need. This has ensured that children get the help they need when they need it. All referrals are screened on the day they are received and prioritised.

- The Early Information and Pre-Referral Group (or GIRFEC Group - as it is commonly known) established with representation from Social Work, Police, Education (Schools and Early Education/Childcare Services), Housing and NHS Ayrshire and Arran. The main purpose of the group is to 'monitor and take action on child referrals (non-offence) on a weekly basis', with the intention of bringing immediate benefits in terms of Child Protection. The desired end point of the process was determined to be the identification of the proper lead agency or agencies to take each referral forward. The Group, as part of its operating procedures undertakes to consider and take decisions on:
 - The specific agency that will take responsibility for the referral;
 - Requests for further information needed to make a full and proper decision;
 - Any evidence of risk to any other child;
 - Feedback to be given to the original referrer;
 - Timescales for action;
 - Where no further action is required by any partner agency;
- There has been significant improvement in the quality of assessments provided by front line social work staff. They are now clearly structured and provide analysis and recommendation.
- System in place for all new cases and all children on the child protection register to have an electronic chronological history.
- A & E Liaison process- has improved information sharing between hospital and community health services and the response to children who may need help.
- The Supervision Policy was reviewed in 2007 to reflect a work planning approach incorporating personal priorities, issues of workload management and accountability. The revised policy was implemented in December 2007. To coincide with the launch an external provider was commissioned to deliver a programme of training in effective supervision to first line managers within Social Work. The programme was evaluated and the overall response was very positive. A rolling programme of supervision training was established during 2008. This includes course in 'Providing Effective Supervision' and 'Getting the Most Out of Supervision'.

How Good Can We Be? Areas for Improvement Following self-evaluation the areas identified include the following action points:

CPC AREAS FOR IMPROVEMENT TO BE AGREED 23.09.09

- Roll out of Integrated Assessment Framework throughout East Ayrshire.
- Review of LAAC system regarding independence of reviewer and capacity and administrative supports.
- Whilst we have strong and effective systems in place for supervision, review of employee learning and development needs (EAGER) we recognise that the protecting vulnerable children can be a challenging, stressful and at times dangerous occupation. In some

circumstances, additional support may be required and to this end we are exploring approaches to increasing the level of support available to new staff through additional supervision and the use of mentoring.

- Protecting children is our first priority. Whilst we are committed to ring fencing time dedicated to supervision and team meetings, an urgent child protection investigation will always – and rightly - take precedence. Similarly operational priorities in conjunction with capacity and resource issues have hampered our commitment to research activity in support of developing our approach to evidenced based practice rooted in consideration of local issues. Systemic and capacity issues which exacerbate this situation are being tackled through the Sustainability Review (see good practice example).
- We have recognised the need to develop a systematic approach to leadership development for all managers within Social Work and a programme is being developed to tackle this issue.