

LAC ACTION PLAN PROGRESS REPORT				Jun-16	V1
Project Sponsor	Meredith Teasdale	Action RAG Overall Status: AMBER Complete: Blue On Track: Green Slippage or Issues: Amber Significant Risk of or Actual Delay: Red	Savings RAG Overall Status: GREEN Achieved/Exceeded: Blue On Track: Green At Risk of Underachieving: Amber Not on Track to Achieve Target: Red		
Project Leads	Judith Davies/ Tracy Collins				
Project Manager	Mary-Ann Stevenson				
Reporting Date	29 June 2016				

Actions to discuss at LAC Commissioning Board (actions rated RED and AMBER with a Savings attached will be included in this summary for Board discussion)				
No.	Action/ Risk	Status	Owner	Action to be taken and when
2.1	Develop a clear framework of Specialist and Edge of Care services	Amber	Tracy Collins	Draft of scope for review of IFSS has been completed and is with Service Directors to agree the scope of the work going forward. There has been some delay in progressing this work due to capacity and prioritisation on transformation bids.
2.2	Focus of family services on preventing children entering the care system to enable us to offer	Amber	Tracy Collins	As above.
2.4	Reduce the number of 16+ Looked after children	Amber	Rebecca Wilshire	There is still tension between housing providers and CSC on decision around LAC. Further work is taking place with housing providers and district councils.
4.7	Develop in house provision for disabled children	Amber	Richard Holland	Transformation proposal has gone in for Norwich Road. Links have been made with providers. There has been some slippage and timescales for completion have moved to September 2016.
5.1	Reunification	Amber	Tracy Collins	A Reunification task group has been identified and work is underway - see full text below.

Please complete the update below. Remember to amend the timescales for each update if this has changed as well as the RAG Status. If the project lead changes please inform the Project Manager.

Where there is a new Issue or Risk please include this in the 'Issues' and 'Risks' section below the relevant Outcome number. The Project Manager will then add these to the Project Actions above to be reviewed at the next Board meeting.

NO	WORKSTREAM/ ACTIVITY	WORKSTREAM DETAILS AND ACTIONS REQUIRED (DELIVERABLES)	UPDATE	LEAD	TARGET END DATE	REVISED END DATE	TARGET SAVING (£K)	Priority Rating	Action RAG	Savings RAG
OUTCOME 1: FAMILIES ARE SUPPORTED TO STAY TOGETHER										
1.1 (page 11)	A higher proportion of children who are referred to CSC to have a Family CAF in place so that no child comes through without one.	1. Proposal re data that can be accessed to help us to understand how to target our activity		L. Lofting/ C. Smith	Mar-16	Complete		Medium	Amber	
		2. Agree and implement a joint audit between social care group managers and locality managers looking at full chronology of LAC cases and identify themes of missed opportunities	TC has done initial work with Claire Betteridge, AJ and HK adding in early help work. SB, RD and HK to do some data analysis. To look at trends and patterns emerging.		TBC					
		3. Both data and audit will inform targeted action planning	As above.		Jun-16					
1.2 (page 11-12) work plan drafted	Support for parents/carers with mental health difficulties	1. A Service Specification will be developed with suggested options for delivery.	Paper developed looking at examples of what could be achieved in delivering a service that meets needs. TJ to re-visit.	T. Jefford/ B. Squire	Jun-16			Medium	Amber	
		2. A scoping exercise to determine the level of need to be undertaken; collecting of information re referrals to adult mental health and the outcome (take up or not).	This work has been done but needs moving forward.		Jul-16					

		3. An overview of the current adult mental health services with referral thresholds and working practices.	Establish what is available in Adult MH services and where are the gaps: anecdotally there is support for mild MH and severe but not a lot of services for mild to moderate. Need to allocate some time to look at this, gather up the information to understand what the gap is and develop a		Jul-16				
1.3 (page 12)	Domestic Abuse	1. Review 40 cases where children became LAC, to identify learning points with regards to domestic abuse for all relevant organisations.	SL has done some work on this.	T. Jefford / V. Crompton	May-16				
		2. Ensure the Domestic Abuse offer is implemented across Social Care and E&P using audit tools and techniques to judge how this has been embedded into practice.	All Social Work teams to have access to 'Complicated Matters' booklet produced by Against Violence and Abuse (AVA) which describes how to deal with DA, MH and D&A. LSCB have adopted this as practice guidance. SF agreed to funding for this.		Oct-16				
		3. Ensure access to support for those at high risk of harm is timely with cases presented at MARAC within 3 working days and support from IDVAS provided as appropriate.	All cases being heard within 3 working days. IDVAS engagement rate with clients currently at 79% (target of 68%)		Apr-16	Complete		Medium	Green
		4. Ensure the E&P and Social Care workforce development plans include expectations set out in the Domestic Abuse Document.	Completed by Workforce Development January 2016		Apr-16	Complete			
		5. Ensure 80% of E&P and Children's Social Care staff are fully compliant with the appropriate workforce development expectations.			Mar-17				
1.4 (page 12)	Improve pathway for Substance Misuse Support (by parents/carers)	1. Review 40 cases where children became LAC, to identify learning points with regards to substance misuse for all relevant organisations.	SF was due to meet with Simon Kerrs and VC - to be re-scheduled.	T. Jefford / V. Crompton	Jun-16				
		2. Pilot joint visits between Inclusion and Wisbech Locality Team, with a view to understanding the needs of children within this cohort, not already known to Children's Services. The pilot will run for 6 months and will be fully evaluated. Further action will be dependent on findings. The project will commence in March 2016. Following this provide an evaluation report.			Nov-16				
		3. Develop a working protocol between Children's Social Care and Inclusion Drug and Alcohol treatment services where parents are misusing substances.	Completed - March 16		Complete	Mar-16			
		4. Ensure the Children's Social Care and Inclusion protocol is implemented across Social Care and Inclusion using Auditing.			Oct-16				
		5. Ensure access to Inclusion Services for parents misusing substances is timely with the first treatment intervention received within 3 weeks of referral.			Ongoing			Medium	Green
		6. Update existing parental substance misuse screening tool	Completed - Feb 16		Complete	Feb-16			
		7. Embed the Substance Misuse Screening Tool for use within E&P and Children's Social Care and ensure it is used appropriately.			Apr-16				
		8. Publish the Parental Substance Misuse expectations for all practitioners working in Cambridgeshire with the LSCB			Jan-17				

		9. Ensure the E&P and Social Care workforce development plans include expectations set out in the LSCB Parental Substance Misuse Document.			Sep-16				
		10. Ensure 80% of E7P and Children's Social Care staff are fully compliant with the appropriate workforce development expectations.			Mar-17				
1.5 (page 12)	Review the impact of parenting support courses on LAC and ensure consistency of use and capacity. These courses form part of our preventative approach and we need to ensure that their use is promoted and their effectiveness and impact is monitored.	Children with Disabilities 1. Children's Proactscip Instructors will run 1 more Proactscip training course for parents before April 2016 and schedule and promote 3 more for 2016/17. This provides training on proactive strategies for use with children whose behaviour may be challenging. 2. Instructors will prepare an evaluation report of the 3 courses run to date for joint Children and Adults Proactscip Board In April 2016. General Parenting Courses 1. Evidence-based parenting programmes form part of our preventative approach and we will ensure that their use is promoted and their effectiveness and impact is monitored.		S. MacBean	Apr-16			Medium	Amber
1.6 (page 12)	Support parents with Learning Disabilities and parenting capacity issues	1. Training for workforce to understand adult learning difficulties and the implications for expectations of parenting capacity. 2. Where parents have been identified as having a learning disability consideration will be given to the best way to communicate with them to ensure children remain at home. 3. Ensure that plans address learning capacity of parents and are written and communicated to ensure parents understand the changes that need to be made to ensure the family stays together. 4. This will be monitored through case audits and through the child in need planning process.	T. Gurney: Protocol to complete this action has been signed off by Adults Services and CSCMT and we are now in the MAPSA tool implementation phase across the county	T. Gurney/ F.van den Hout	Complete	Apr-16		Medium	Blue
1.7 (page 12) work plan drafted	Parenting support website We will develop an accessible website that answers parent's questions and helps them pro-actively manage their children's needs. The site will include information regarding setting boundaries and managing difficult behaviour. This will be a useful tool in enabling practitioners to signpost parents to further comprehensive sources of support.	1. List of content areas to be produced based on research into the common problems and situations parents need help with. This will develop further from the work underway to understand common needs identified to support 'Early Help' and the ACT. Additional research will be conducted with 'Think Family' workers, and social care staff as well as gaining views directly from parents where possible, based on questions around 'what would have helped you', 'what would you use'. 2. Prioritised list of subject areas to be produced based on research into the information content, resources and applications that can provide support for the questions and situations identified. Research into the materials available, identification of any budget required to pay for subscription services (eg online parenting courses) or 3. Prioritised plan of work agreed and implementation begun to source/secure/develop content making best use of existing trusted sources. Plan will set out expected delivery time for specific content sections etc based on what is agreed overall. 4. Navigation plan of site/web content produced and any work required by others in Digital Strategy Team or LGSS IT team agreed through the Gateway process. 5. Development of any applications or similar, quizzes, online assessments, and things that people can do to encourage their involvement. 6. Develop marketing communications plan to support use of the content by key groups (practitioners, families)	Initial content areas listing produced. Focus on delivery of content for the 'parenting' section first. This will be put on line, and response tested (monitoing web analytics).	M. Whitehand	Jun-16			Medium	Green
					Aug-16				
					Aug-16				
					Aug-16				
					Sep-16				
					Nov-16				

		7. Workforce training plan to raise awareness and utilisation of online resources in practice			Jun-16					
1.8 (page 13)	Adult sexual health and contraception	1. Lead officers in Public Health and safeguarding services will work together to develop a pathway and guidance for practitioners for prioritising adults that require targeted support	A meeting took place on 7th June to discuss progress and use of the pathway. Staff training needs and options for training delivery. The SPACE workers have reported that they have 2 service user they will use the LARC pathway with; options for funding the initial staff training packages is now being considered.	T. Lacey/ V. Thomas/	Jun-16			Medium	Green	
		2. We will also continue to support adults and young people with a learning disability to access sex and relationship training, education and support.			Jun-16					
1.9 (page 13)	Support to children in their early years	1. We will work with commissioners of Health Visiting to consider how Health Visitors will support the strategy by taking opportunities to identify early, through standard interventions, families at risk of LAC.		J. Sollars	Apr-16			Medium	Green	
		2. We will ensure that eligible families take up the offer of free education for 2 year olds, and that wider support and intervention with families is planned in an integrated way across services in the early childhood sector so that pathways and decision making are clear.			Ongoing					
OUTCOME 1: Issues for escalation										
No.	Issue	Owner	Action to be taken and by when							
I01	We recommend that the target of “no families come through without a CAF” should be reconsidered as there are clearly circumstances where this is not likely to be either desirable or possible.	L.Lofting/ C.Smith	First review cases where there is no CAF/EH intervention to establish where to set target							
I02										
I03										
Risk to be added to the Risk Log										
No.	Risk	Owner	Mitigating Action							
R01	(1.1) Capacity for ONE report writing may not be available to support production of datasets because resource is diverted work to implement new IT systems	L.Lofting/ C.Smith	Simplify datasets - provide caveats to datasets							
R02	(1.1) Capacity for audit / case review and lack of agreement about what a “good” journey might look like.	L.Lofting/ C.Smith	Further joint HoS work to agree							
R03										
OUTCOME 2: RISK IS MANAGED CONFIDENTLY AND INTENSIVE SUPPORT IS PROVIDED FOR FAMILIES AT THE EDGE OF CARE										
-2,100										
2.1 (page 14)	Develop a clear framework of Specialist and Edge of Care services <i>Edge of care is defined where children have been exposed to a range of issues that could result in the need to become Looked After. Early Help Services are pivotal in preventing this escalation (Note 1)</i>	1. Each Specialist Service needs to be within framework that ensures that they contribute a range of options – clearly stating WHAT they deliver and HOW. Services must be focused on clear models or programmes with each action having a goal.	Draft of scope for review of IFSS has been completed and is with Service Directors to agree the scope of the work going forward. There has been some delay in progressing this work due to capacity and prioritisation on transformation bids. IFSS meetings take place fortnightly and look at current activity, referrals, waiting lists, capacity and staffing, these are considered alongside sharing of complex cases and practice issues; these discussions have highlighted gaps in the collective service delivery. A separate meeting has been scheduled to clarify outcomes and performance measurements against savings to monitor all edge of care services under one framework. Finance will be present at the IFSS meetings on a monthly basis going forward.	T. Collins	Apr-16	May-16				
		2. Align to Think Family principles and effective interface with Early Help and CSC. All cases need contingency planning to have an ‘at hand’ plan if risk escalates.	At IFSS meetings cases that are awaiting allocation are discussed and collective solutions are found to support families to prevent escalation to risk and the need to be accommodated in an emergency. This is a challenge due to the capacity and demands on services and the increase in referrals.		Apr-16	May-16				

		3. Service specifications for AtC and SFSS will be refined to ensure they are complimentary and not duplicating work.			Feb-16	Complete		High	Amber	Red
		4. Intervention points for each service will need to be revised.	There are ongoing conversations at each fortnightly meeting regarding capacity and flexibility of services; the learning of which is incorporated in the scoping document as to how the services can be better aligned going forward.		Apr-16	May-16				
		5. Develop clearer guidance around how to refer to each service and what to refer, based on S.Magilton's proposals.	Review of referral process by each service completed and being incorporated into 'Right Child getting the Right Service at the Right Time' document which is currently being updated.		Apr-16	May-16				
		6. Ensure staff receive training on making referrals to specialist services.			Jun-16					
		7. Develop a database to feed in outcomes of each specialist service to aid monitoring and evidence base.	Meeting arranged for SFSS to develop monitoring tool using AtC model as a guide. The aim is to have an overarching database that delivers to an agreed set of baseline outcomes.		Sep-16					
		8. Agree who will monitor specialist services (team or board).			Feb-16	Complete				
		9. Monitoring of the newly formed Alternatives to Care Service.			Jan-16	Complete				
2.2 (page 15)	Focus of family services on preventing children entering the care system to enable us to offer appropriate services at the appropriate time	1. We will target resources, such as young people's workers, towards families particularly where there are young people aged 8+ who may be on the trajectory towards care.	As above.	T. Collins/ J. Gregg	Mar-16	May-16		High	Amber	Red
		2. Implement the new role of combined Resource Panel to ensure strengthened thresholds of accommodation.	The new panel was launched on 14 April , supported by new referral paperwork.The panel will continue to be chaired by the Service Director CSC.		Mar-16	Complete				
		3. We will explore invest to save options to increase the impact of work on savings by reducing the number of 8+ coming into care.	This is ongoing and Invest to save bids will be made accordingly.		Mar-16	May-16				
2.3 (page 15)	Work to broker family solutions For all cases on the edge of care we will use family group approaches to explore wider family solutions to ensure a child can remain in their family or extended family. Family workforce will need to be upskilled to use FGC approach.	1. Undertake review of Family Group Conferencing Service and agree options/ funding for future of the service. Develop Transformation Bid proposals to be presented to Directors then CSC MT.	The first review of the Family Group Conference Service has been completed on deadline and has recommended the service offer an earlier intervention to maximise the productiveness of Family Group Conferences and consequent savings by diverting children from LA care. In order to deliver Family Group Conferences at the optimum point in a child's journey through Social Care (children subject to CIN and CP plans), the service requires an investment of 57.5K in 2016-2017 with an anticipated additional saving to the department of 682k in 2016-2018 . A further review has been requested looking at the possibility of delivering Family Group Conference Training in Early Help Services and the draft review will be available for CSCMT for consideration on 11 th May. In tandem with this a Transform to Save bid will be submitted that to incorporate both reviews as well as looking at how family Group Conference can improve the sustainability of the reunification process (linked to action 5.1) through the compiling of robust Family Plans and increasing family resilience.	F.Van Den Hout/ Sarah-Jane Smedmore	Mar-16	Complete		High	Green	Red
		2. Implement proposed option/s			Apr-16	Jul-16				

2.4 (page 15)	Reduce the number of 16+ Looked after children	1. Ensure consistent approach to Southwark judgement by reviewing the protocol to ensure consistency.		R.Wilshire	Mar-16			High	Amber	
		2. Regularly meet with District councils to promote keeping 16+ with their families. Voluntary housing agencies will be invited to these meetings to ensure they provide accommodation to young people where needed.	There is still tension between housing providers and CSC on decision around LAC. Further work is taking place with housing providers and district councils.		Ongoing					
2.5 (page 15)	Monitoring of Alternatives to Care (AtC) and Space Project (Avoid repeat removal of babies)	1. AtC service has now had an opportunity to embed - we will now need to review its effectiveness. See action 2.1 (9) above for duplicate action.		A. Jack (AtC); T. Jefford / V. Crompton/A. Warburton (Space)	Jan-16	Complete	-219	High	Blue	
		2. We will launch Space and monitor its effectiveness - targeted support for women who have have babies removed previously.	Space Project report March to May shows that the project has really taken off with referrals coming in on a regular basis. Space is currently working with 20 women aged between 19 and 42. Learning disabilities/difficulties – 6, Vulnerably Housed/Homeless – 6, Violent/controlling current partners – 5, Violent/controlling ex partners – at least 13, LARC being used – 8, In process of getting LARC (health issues) – 2. Funding has been secured for the project until March 2017.		Mar-16	Complete				
OUTCOME 2: Issues for escalation										
No.	Issue	Owner	Action to be taken and by when							
I01										
I02										
I03										
Risk to be added to the Risk Log										
No.	Risk	Owner	Mitigating Action							
R01										
R02										
R03										
OUTCOME 3: CHILDREN ACCESS AND REMAIN IN EDUCATION										
3.1	Post 16; transition, pathway and aspiration. (LAC Only)	1. Post 16 worker to further develop links with Universities and Colleges.		J. Pallett	Ongoing			High	Green	
		2. Implement redesigned pathway plan to improve transition of education data from year 11 PEP to pathway plan. Providing smoother transition to FE/HE.			Ongoing					
		3. Post 16 worker to become involved with KS 4 pupils at risk of NEET to support and identify options including 'results day' support and guidance.			Ongoing					
		4. University links to provide education support for young people in childrens homes to reengage/raise aspiration.			Sep-16					
		5. Ensure application to Bursary is clear and support application.			Sep-16					
3.2	Early Years intervention and support. (LAC Only)	1. EYs worker to further develop links with providers, sharing best practice for LAC pupils, training re attachment disorders etc.		J. Pallett	Ongoing			Medium	Blue	
		2. Early identification of SEND from age 2 to support provision and inform START team.			Ongoing					
		3. Allocation, monitoring and challenging the spending of EY PP+ for educational attainment.			Termly Review					
		4. Using the EYs PEP to identify areas for specific educational focus and providing challenge to settings			Ongoing					
3.3	Training to empower and challenge. (LAC Only)	1. Training programmes for Designated Teachers of LAC to empower schools to lead on LAC education progression.		J. Pallett	Ongoing					

		2. Training for Head Teachers and Governors regarding the duties of schools for LAC pupils.			Ongoing		Medium	Green	
		3. Training for Social Workers, Foster carers, adoption agencies and other LA staff in the education expectations and actions needed to promote quality education for LAC pupils.			Ongoing				
		4. Holding a data base of schools who have attended DT training, regular review of same to advise on need for updated training etc to keep schools fully aware of the most recent expectations..			Ongoing				
3.4	Quality Assurance (LAC Only)	1. QA of all PEPs undertaken to ensure robustness in target setting, aspiration and use of PP+		J. Pallett	Ongoing		High	Green	
		2. QA of schools regarding LAC provision (audit) to support best practice and challenge poor practice. To enable DTs to raise the profile of LAC pupils and their requirements.			Sep-16				
		3. Monitoring HMI/Ofsted reports to share best practice and support local hubs of excellence.			Ongoing				
3.5	Attendance, Alternative Provision, Inclusion; Provision and monitoring. (LAC only)	1. Attendance, Alternative Provision, Inclusion, not in Full Time data reviewed and challenged regularly. Meeting with VSH and managers of each of the above sections on a fortnightly basis to review strategic work and individual pupils at risk of NEET/exclusion etc.		J. Pallett / AP Manager Inclusion Manager Attendance Manager	Ongoing		Medium	Green	Red
		2. Data provided by the attendance tendered supplier to be used as a basis for the monitoring and challenge to schools on behalf of LAC pupils as well as sharing best practice.			Ongoing				
		3. Employing LAC tutors directly to provide quicker provision for those out of school, UASC, part time education. This is in addition to employing support from the tendered organisations for all vulnerable groups work.			Sep-16				
		4. Supporting the development of an Alternative Provision directory of best practice to support appropriate and safe transition from mainstream placement.			Ongoing				
3.6	Eastern Region Virtual School Heads, collaborative approach.	1. Further developing the role of the ERVSH group to provide information on schools in county who are/not performing well for LAC pupils.		J. Pallett	Ongoing		Medium	Green	
		2. Using the ERVSHs group to link with HMI strategy development to maintain LAC as a key focus. Liaising with HMI/Ofsted to clarify what to look for in schools to better challenge education provision for LAC.			Ongoing				
		3. Working together to identify new areas of good practice, training opportunities etc for all LAC pupils across the region.			Ongoing				
3.7	Accelerating the Achievements of Vulnerable Groups. (LAC and other vulnerable groups.)	1. Working cross directorate to implement an action plan focussed on enhancing the education outcomes for all vulnerable groups. This will include LAC and those on FSM, EAL, BME etc. (A proportion of pupils who are at risk of becoming LAC will be included within these groups.)		J. Pallett	Ongoing		High	Amber	
		2. Monitoring and challenging schools based on progress of all vulnerable groups, training and support for school leaders and others.			Ongoing				
		3. Undertaking QA audits of schools re the progress of vulnerable groups, identifying need and supporting improvement.			Sep-16				
3.8	CiN Project (CiN/pre LAC)	2 year project to monitor the progress of a group of CiN pupils who are being monitored as LAC. School interventions, parental involvement and championing education aimed at improving engagement of young people in the process and providing stability.		J. Pallett	Sep-17		Medium	Green	

3.9	UASC opportunities (LAC only)	1. Better coordinating the arrival, placement and education opportunities for UASC pupils to engage more fully in society and provide the necessary skills for lifelong learning.		J. Pallett	Ongoing			High	Amber	
	2. Developing links with a range of providers of language work, ESLO etc to improve transition and stability.	Ongoing								
3.10	Support within Localities for the early identification of risk	Establish local point of access for schools, securing links between Locality Teams and newly established SEND Specialist Teams to ensure early signs of SEMH are identified and effectively responded to by the schools and targeted/ specialist support services when needed. Establish process within Transfer meetings between Locality Teams and Childrens Social Care by which adolescents who are at risk of needs escalating are identified and prioritised, with appropriate additional support provided for the family as required		H. Phelan				High	Green	
OUTCOME 3: Issues for escalation										
No.	Issue	Owner	Action to be taken and by when							
I01	138 UASC	.	additioanl time allocation to be found within the VS to coordinate this role from September 2016							
I02										
I03										
I04										
Risk to be added to the Risk Log										
No.	Risk	Owner	Mitigating Action							
R01										
R02										
R03										
OUTCOME 4. PLACEMENTS FOR CHILDREN IN CARE ARE IN COUNTY AND WITH A FAMILY										
4.1 (page 18)	Family based care (Creative Care) Review placements and look at creative options to reunify child with family and reduce cost. This is being undertaken through creative care work and S20 panel.	1. Draft a process for Creative Care		R. Holland/R. Leslie	Complete	Mar-16	-507	High	Blue	Amber
		2. ART to implement the process	Process has been implemented - ART are also developing a reference library around available resources for SW to access. RL to meet with RH to discuss further.		Complete	Mar-16				
		3. Fortnightly discussion regarding Creative Care to take place through S.20 panel.	In Place		Complete	Mar-16				
4.2 (page 18)	Reduce the number of external placements/ increase in-house fostering placements External residential and IFA use will be reduced. In-house fostering placements will be increased. [Additional action plan attached]. Wherever an external placement disrupts, the young person will be brought back in-county. Developing partnerships with external providers in-county to provide cost effecline long term residential placements.	1. Develop emergency foster carer provision (in-house)	Approval granted to recruit 3 additional SWs to increase capacity to continue to increase assessments being undertaken to increase the number of filled beds.	T.Collins/ R. Leslie	Ongoing		-922			
		2. Develop the fostering action plan	The action plan has been refreshed and reflects the work done by Nathan Whitely and Jill Blose. A project group is being established in July to drive the actions within the plan through. TC to chair this group.T		Apr-16	Jun-16				
		3. Implement findings from fostering consultant to improve the fostering service.	As above.		Apr-16	Jun-16				
		4. Develop in-county supported lodgings provision for 16+	PE and JB taking this forward. The current service specification needs updating - RL to do this. The work to recruit supported lodgings carers is actively being promoted and the £70k will be transferring from ART to fostering to support the work going forward.		Jun-16					

		5. Develop shared understanding between Social Care and Strategy and Commissioning on the types of placement children and young people can expect to increase the understanding of each service of the particular pressures relating to the current financial pressures with the placement budget. A set of joint 'rules' will be drafted and signed up to then shared widely by all managers.	A draft communication of the " joint rules" has been completed which will be sent out by the respective Service Directors. A meeting is scheduled between the HoS CP and ART to review ART and Fostering duty. The fostering service specifaion including supported loggings is to be updated by RL, GB and TC.		Apr-16	Complete				
		6. Develop a clear understanding of the likely placement needs over the coming 12 months and beyond. We will undertake a full review of the needs of our current LAC population to ensure we have the right resources to meet needs.	There is a weekly meeting to review all purchased care placements, the LAC needsand considerationas to future placements . A review of LAC needs utilising in house , in county provision and plan further future resources required.A full review of all LAC and care leavers placement needs will be undertaken by May.		Apr-16	Complete				
		7. Develop a defined process for decision making and challenge around threshold agreements and resource needs for a young person.	This will be part of the threshold and resource panel (TARP)		Apr-16	Complete				
4.3 (page 19)	Lowering the cost of the most expensive placements	1. Continue to review the top 50 placements weekly	work is ongoing through the weekly placement meetings reviewing external placements on a 5 week rota. This work is being led by ART in collaboration with the units and there are a number of positive changes being made. Savings have been identified for permanent placements in IFA's and de-escalation of resource. Top 50 placements reviewed on a monthly basis. Disabled children's placement meetings are also taking place as these are the highest cost placements.	R. Leslie/ J Davies/ T.Collins/S.J. Smedmor	complete	Apr-16				
		2. Budget information available to units and Sec 20 panels; reduce costs through procurement of places			complete					
		3. Develop written process for escalation/ challenge by ART when matched place in county/ in house is refused			complete	Jan-16				
		4. Develop notional budgets for Units			complete	Apr-16				
		5. Explore independent options in County for children and young people with mental health issues	Rachel Leslie has met with 3 providers for services to children with mental health difficulties (Cambian, Break, Unique). It has been established that we do not need to set anything new up, just work on upskilling existing providers.		Jun-16					
		5. Undertake monthly monitoring of identified permanence places to support swift return home for those not in permanent placement.	This now takes place weekly . ART also attend the PMG meetings.		Mar-16	Complete				
		6. Creation of emergency solo placements at Hawthorns Children's Home.			Mar-16	Complete				
4.4 (page 19)	Reducing the cost of external placements	1. Continue to commission IFAs through the Eastern Region Fostering Contact .	Work takes place on a monthly basis to review the cost of external palcments.	J. Davies/ R. Leslie	Mar-16	Complete	-132			
		2. Monitor and report savings made as a result of negotiating discounts	Cambridgeshire continues to see a reduction in cost.		Apr-16	Complete		High	Green	Green
		3. Review the external residential framework contract.	This has now been reviewed. A provider event is taking place on 17th June 2016.		Jun-16	Complete				
4.5 (page 19)	Develop Assisted Boarding Placements	1. Establish process to procure places where appropriate to avoid children coming in to care. This is being taken forward through the RNCF and Assisted Boarding Schools Network.		J. Davies/ R. Wilshire	Jan-16	Complete				
		2. Launch programme across all SW Units to raise awareness and encourage take-up. Launch to be led by Units information to be drafted centrally.	This has been launched to all Units, however, a new action needs to be created to reflect that a menu of options is available to SW's (of which Assisted Boarding is one option). More work needs to be done in respect of other options.		Apr-16	Complete		High	Green	
4.6 (page 20)	Camb's policy on UASC Placements Development of dedicated pathway for UASC to ensure assessments are made quickly and children placed in the most appropriate and cost effective accommodation	1) Review potential for crash pad to reduce call on in-house fostering while long term solutions found.	The emergency solo placement developed at Hawthorns residential home in Cambridge is now fully operational and can offer significant savings where an intensive lone placement is required. Additional 8 properties have been secured to support the development of additional placement provision.	C.Smith/ T. Collins/ J. Davies/	Apr-16	Complete				

		2) Develop emergency pool of foster workers to support UASC			Apr-16	Complete		High	Green	
		3) Draft UASC Pathway	A pathway is already in place re transfer of cases between FREDt and 18 to 20 Service but this is being refreshed.		May-16					
4.7 (page 20)	Develop in county provision for disabled young people	1) Work with providers already operating in Cambridgeshire to discuss the Council's needs and work with them to establish in-county provision.	Transformation proposal has gone in for Norwich Road. Links have been made with providers. There has been some slippage and timescales for completion have moved to September 2016.	R. Holland/ J. Davies	Sep-16	Jun-16	-500	High	Amber	Red
		2) Develop a working group to review First Steps to ensure Cambs Special Schools do not exclude disabled children.			Apr-16	Jun-16				
4.8	Parental financial contributions We will consult on parental contributions	1) Re-submit proposal through Democratic Process (Spokes/ Committee)	Jaqui Barry and Tracy Collins are looking at what other LA's are doing prior to progressing. Meeting scheduled for July.	T. Collins	Jun-16			Medium	Green	
OUTCOME 4: Issues for escalation										
No.	Issue	Owner	Action to be taken and by when							
I01										
I02										
I03										
Risk to be added to the Risk Log										
No.	Risk	Owner	Mitigating Action							
R01										
R02										
R03										
OUTCOME 5: CHILDREN ARE MOVED THROUGH THE CARE SYSTEM IN A TIMELY WAY										
5.1 (page 20)	Reunification Well-resourced and coherent reunification services can lead to better and speedier permanence outcomes through a stable return home to parents. This work will ensure that reunification is considered as soon as the child becomes Looked After.	1) Map a process for tracking children where reunification has been agreed to ensure it remains on track.NSPCC Framework.	A Reunification task group has been identified. This includes: GM's from Access, CIN and Lac, Data analyst, Workforce dev. Rep, IRO Service manager, Service Dev. Manager, Clinician, SFSS Team manager, and alternatives to care team manager (also to include fostering, leaving care and residential). The framework for reunification can be considered for all LAC, not only those where the plan is for reunification. The plan going forward to ensure that this process is properly embedded within the organisation is to undertake an audit (for the last 12 months) of the outcomes for children who did return home where the plan had been for reunification and audit the outcomes for these children. This work has begun and so far is telling is that of y/p aged 16-17 years, we were looking at reunification for 7 out of 37 in the year 2015-2016. All returned home and 2 more returned home unplanned. 1 of the 2 unplanned returned to care. All of these YP were offered services as part of the care plan, which was either support under a CIN plan or locality support such as a YPW. 3 out of the group of 9 refused such support. Of this group 5 are now closed to CSC. What this is telling is so far is that where there is a plan for reunification for young people this age, we are getting it right!!!! 1/3 of young people decline support and we may need to think differently about how we offer support to make sure they do not return to care.	S.J. Smedmor/ T. Collins	Sep-16	May-16		High	Amber	

R02				
R03				