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**TO EACH MEMBER OF THE
CENTRAL BEDFORDSHIRE (SHADOW) HEALTH AND WELLBEING BOARD**

06 November 2012

Dear Councillor

**CENTRAL BEDFORDSHIRE (SHADOW) HEALTH AND WELLBEING BOARD -
Thursday 8 November 2012**

Further to the Agenda and papers for the above meeting, previously circulated, please find attached the following addendum to agenda item 3.

3. Health of Looked After Children

To receive a report on plans and progress.

Should you have any queries regarding the above please contact Democratic Services on
Tel: 0300 300 4032

Yours sincerely

Martha Clampitt,
Committee Services Officer
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Addendum to Health of Looked After Children

Report to Central Bedfordshire Health and Wellbeing Board

Title:	PROGRESS REPORT ON THE IMPLEMENTATION OF THE POST INSPECTION ACTION PLAN AGREED BY THE COUNCIL'S EXECUTIVE ON 21 August 2012
Date:	08 November 2012
Author:	Edwina Grant Deputy Chief Executive / Director of Children's Services
On behalf of:	Central Bedfordshire Council
Action required by LSCB	To receive the report and note that the Director of Children's Services will be taking immediate action on the content.

Purpose of the report

1. The purpose of this report is to:
 - reflect on the first phase of improvement activity of the implementation of the post inspection Action Plan;
 - summarise the current position;
 - advise the meeting of the next steps in the improvement process.

Background

2. The inspection was carried out between 20 February and 2 March 2012. The report was published on 10 April 2012. The overall effectiveness of safeguarding services was judged to be good and capacity for improvement was also judged to be good. The overall effectiveness of services for looked after children was judged to be adequate.
3. The report contained a number of important areas for action to improve safeguarding and looked after children services. These areas for improvement were required to be addressed in the first phase of improvement activity following the publication of the report. These areas formed Phase 1 of the Action Plan and were captured in four workstreams.
4. A number of other areas for development were identified in the body of the report and planning to address these and longer term improvement were contained in Phase 2 of the Action Plan captured in five further workstreams. These actions were linked to a peer challenge programme to support the improvement journey.

5. The full Action Plan was completed in July and went to the Council's Executive on 21 August. However, Ofsted in their report identified areas for immediate activity and those for within three months and six months from the date of publication in April 2012. A Programme Board was established to oversee the implementation of the Action Plan.

Governance

6. The Council's Executive agreed the Action Plan and the arrangements for monitoring. Monitoring is managed through a Programme Board chaired by the Deputy Chief Executive/Director of Children's Services. The Board monitors the delivery of the whole Plan, including the Health related aspects of the Plan. In addition, the Director of Nursing and Quality oversees the delivery of the Health related workstreams in the Action Plan which are the responsibility of the Bedfordshire Clinical Commissioning Group.
7. The Action Plan sits within the reporting structures and delivery arrangements of both the Children's Trust Board and the Shadow Health and Wellbeing Board. The Local Safeguarding Children's Board will receive any reports from the Programme Board and will comment to the Director of safeguarding issues. The Plan will need to change over time. It is expected that if any amendments to the plan for Children's Services are needed, these can be implemented by the Deputy Chief Executive/Director of Children's Services in consultation with the Executive Member for Children's Services and through agreement with the Children's Trust Board. If a major re-write of the Plan is required this would need to be agreed by the Council's Executive.

Progress

8. Two formal Programme Boards have been held to monitor progress and one interim monitoring meeting was held to provide further reports on progress where slippage was identified. However, the Director of Children's Services formally took lead responsibility at the Programme Board on 30 October 2012.
9. For the Health workstreams for both Safeguarding and Looked After Children, the majority of the actions in Phase 1 of the plan have been completed, although there are reservations about the impact on outcomes. This is due to the fact that the activities outlined are largely process issues to address fundamental structural and management issues. The impact of these changes on practice and on outcomes has not been demonstrated nor evidenced. Further evidence is therefore required for the next Programme Board in November to ensure that areas for action in the first phase of improvement activity can be signed off by the Programme Board. **It is anticipated that this evidence will be available following a focus on activity during November. Much of this relates to data collecting to provide evidence of sustained improvement.**

10. Those Safeguarding workstreams which are the responsibility of Children's Services within the Council were judged at the recent Programme Board meeting to be largely off track. The majority of the actions required to address the Ofsted areas for improvement have not been completed, however those marked urgent has been prioritised. Deeper evidence of impact and improved outcomes has not been produced. Much of this work does relate to process issues and when the new information technology system, Frameworki is fully working, the evidence will be easier to retrieve.
11. Insufficient evidence was provided to judge the progress of the improvement plan for Looked After Children and again this is largely reporting issues. There is no evidence of looked after children not being safe although an accelerated action plan for improvement is being personally led by the Director, see section 16 below.
12. Successful implementation of Phase 2 of the Action Plan is dependent on progress in Phase 1 and on the effectiveness of the planned action.

Risk Assessment

Health:

13. Most planned actions have been carried out. However, insufficient evidence has been provided to demonstrate the impact of action taken and that Health outcomes for both safeguarding and looked after children have improved as a result of the action taken to date. It is not possible, therefore, to sign off these areas. However, it is expected that the risk of non compliance with Ofsted's requirements can be mitigated through further work undertaken before the next Programme Board in November and a move to an improved position is anticipated. Health actions are the responsibility of the Bedfordshire Clinical Commissioning Group.
14. It is likely that as a result of the first phase of improvement activity Health will wish to re-plan its longer term improvement plan basing it around the work for peer challenge.

Children's Services

15. In the light of the above, the Council's Children's Services is not able to say formally that it has met Ofsted's requirements. Some progress has been made however. The programme and project management approach to rating outcomes achieved against the plan is robust and therefore sign off on the action will not be agreed unless secure and sustainable data can be retrieved. However, Safeguarding was judged to be good in the inspection, even with these required improvement actions, so the service is in no less good a position now than it was at the time of the inspection. The risk is non compliance with Ofsted's recommendations. The Director of Children's Services is making it her personal priority to take an active

lead on these safeguarding issues. None of the issues that are late in the action plan imply possible direct harm to children. However the outcome of the review implies a lack of focus on moving the Council activity forwards with the added risk of the fact that the current Ofsted framework is more testing.

16. Services for Looked After Children were judged to be adequate in the inspection. Action to address the education aspects have all been delivered, although further work on data will be required to produce a strong evidence base. For all other areas there was insufficient evidence to judge compliance with Ofsted's requirements. The service therefore remains adequate. The risk is non compliance with Ofsted's recommendations. The Director of Children's Services is making it a personal priority to take taking an active lead on these looked after children issues. **None of the issues that are late in the action plan imply possible direct harm to children.** However the outcome of the review implies a lack of continued focus on moving the Council activity forwards with the added risk of the fact that the current Ofsted framework is more testing. **This is an important factor as since the last Ofsted inspection the framework has changed to make inspections more focussed on outcomes. This is a good thing for children and care must be taken to ensure that a focus on process indicating in the first action plan is not implemented at the expense of the deeper child focussed and partnership work which is the focus of the new framework.**

MANAGEMENT ACTIVITY DETERMINED BY THE DIRECTOR OF CHILDREN'S SERVICES

17. Children's Services staff will temporarily suspend activity on the Phase 2 improvement plan and will focus on delivering the actions required in the first phase of improvement activity. These should be completed to the Programme Board's satisfaction by December 2012.
18. Additional and in some cases different resources will be provided for direct support and advice to the teams in Children's Services Operations to ensure a focus on outcomes and on evidence to support the implementation and monitoring of the Phase 1 Action Plan.
19. Following completion of the Phase 1 Action Plan, Children's Services will re-plan for longer term improvement in January when the criteria for the new inspection framework will be published. Preparatory work for this can be managed through the planned peer challenge programme. The new Action Plan should include any actions from Phase 1 that require further work to secure these areas and should be outcome driven. A clear outcomes framework will need to be developed.

20. The Director of Children's Services will keep the Chief Executive and the Lead Member for Children's Services closely informed of progress. Any key safeguarding issues that may arise out of the delays, although none have to date been recorded, will be notified to the Local Children's Safeguarding Board and the Children's Trust and the Health and Wellbeing Board will receive a further report after the December review.
21. The full RAG rating has not been included in this report as this was considered at the Programme Board which led to this direct and honest self evaluation.

CONCLUSION

22. The Board are asked to receive the report and note that the Director of Children's Services will be taking immediate action on the content. She will also be taking account of the need to review the detail of the plan in the light of the new Ofsted framework.
23. As this Board will not meet until 2013 and the Director expects some assurance from next month's Programme Board, she will write to each member of the Board advising them of progress before the end of the year via the usual secretarial arrangements.

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