



Children & Family Services

Business Plan 2017/18

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Version 3
Children, Families and Adults Directorate

Children & Family Services

Business Plan 2017-18

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1. Purpose of the Business Plan

The purpose of the Business Plan is to set out how the Service will contribute to the delivery of the statutory Children & Young People's Plan and Poverty Plan, and the Council Strategy and Business Plan. The primary contribution of the Service is in providing early help and protection to the most vulnerable children, young people and their families living in Cornwall, maximising opportunities for good outcomes for all children and closing the gap in outcomes for the most vulnerable children. The Service contributes to the Council's 8 strategic themes in the following ways:

1. Meeting all the Council's statutory social care duties to children, young people, their parents and carers under a wide range of legislation, statutory guidance and regulation relating to children, young people and their families.
2. Contributing to healthier and safer communities by identifying the needs of children, young people and their families early and providing high quality support, working together with partners, to prevent the poor outcomes linked to inter-generational social exclusion and poverty.
3. Improving the life chances, education, health and social care outcomes for children and young people who have experienced neglect and abuse, closing the gap between them and their peers in the general population.
4. Enhancing the reputation of Cornwall in the judgement of the Public, the Sector and Government by improving performance and the rating of HMI inspections of children's services, with the aim of realising our ambition to become one of the best children's services in the country.
5. Engaging with service users, partners and communities to design and develop alternative delivery models of care and support, based on integrating children's education, community health and social care services; strengthening preventative services; raising the expertise and status of practitioners; using evidence-based approaches and practice; identifying creative solutions; developing innovative services; controlling demand for high cost specialist services; reducing the unit cost of services; and taking appropriate management action to deal with under-performance and high unit costs.
6. Supporting voluntary and community groups by making resources available to them such as the use of Service buildings; direct access to professional advice and consultation; support with funding bids; and access to relevant training and skills development.
7. Helping families break the cycle of economic deprivation by adopting a whole family approach in the offer of support; supporting public health outcomes; encouraging parents and carers to return to education and

training; and working with the regional Department for Works and Pensions to prioritise access to employment advisors for 'Troubled Families'.

8. Delivering the Council's Children & Family Services within available resources and mitigating the impact of budget cuts on the welfare, development and safety of children and to the reputation of the Council.

2. How our Service Supports the Council Plan

Themes	Service contributions
<u>Ambitious Cornwall</u>	<ul style="list-style-type: none"> ✓ Our aim is to support parents and carers to improve the outcomes and life chances of children and young people most at risk of adverse childhood experiences ✓ Our ambition is to become one of the best children's services in the country
<u>Engaging with our Communities</u>	<ul style="list-style-type: none"> ✓ Develop a good understanding of the communities we serve and work with local partners to meet the particular needs of those communities ✓ Work together with community groups and volunteers to support families ✓ Facilitate support from wider family and friends to prevent family breakdown
<u>Partners working together</u>	<ul style="list-style-type: none"> ✓ Under the Deal for Cornwall and Sustainability & Transformation Plan, develop and implement the 'One Vision' Partnership Plan as the basis for a Children and Young People's Transformation Plan for Cornwall & the Isles of Scilly ✓ Integrate children's commissioning intentions, as the basis for integrated education, community health and social care services ✓ Put in place an integrated care pathway and single family assessments ✓ Enable co-location of professionals and develop multi-disciplinary teams so that families can get the support they need from one place, in one go
<u>Greater access to essentials for living</u>	<ul style="list-style-type: none"> ✓ Provide information, advice and guidance about services through different means to enable families to help themselves and each other, and to access the right help and support at the right time ✓ Develop digital access to children, young people and family information services

<u>Driving the economy</u>	<ul style="list-style-type: none"> ✓ Support the educational inclusion of the most vulnerable children and young people by working closely with schools and colleges to narrow the gap in outcomes between them and their peers
<u>Stewardship of Cornwall's assets</u>	<ul style="list-style-type: none"> ✓ Work in an environmentally friendly way by reducing our carbon footprint
<u>Healthier and safe Communities</u>	<ul style="list-style-type: none"> ✓ Promote healthy lifestyles and behaviours as the basis for improving long-term health outcomes ✓ Support parents and carers to understand and meet the needs of their children and to prevent risks to their safety ✓ Listen to children and young people and involve them in decisions about their lives ✓ Respond promptly to requests for early help from members of the public and other professionals when they have concerns about the welfare or safety of a child or young person ✓ Help and protect the most vulnerable children and young people from poor outcomes and long-term harm ✓ Improve the outcomes and life chances of children in care and care leavers
<u>Being efficient, effective, innovative</u>	<ul style="list-style-type: none"> ✓ Promote the wellbeing and resilience of the workforce, reducing sickness absence ✓ Develop the professional capabilities of the workforce to meet the needs of the children and families we work with ✓ Use evidence-based approaches and practice to help and protect children ✓ Respond to well-founded criticism with a willingness to learn and change ✓ Work with service users and practitioners to find the most creative and effective way of improving educational, health and social outcomes within the resources available

3. Our Statement of Mission and Values

Our Statement of Mission and Values was developed in collaboration with the whole service and service users. Our Statement of Mission and Values is at the centre of our priorities, decision-making and professional practice:

- ✓ Our mission is to help and protect the most vulnerable children and young people living in Cornwall from significant harm, to support the educational inclusion of those children and to close the gap in outcomes between them and their peers.

- ✓ Our first consideration is the lived experience of the child, taking into account their wishes and feelings, involving them fully in decisions about their lives, promoting their rights to family life and to education.
- ✓ We will work together with the child and others to understand the reasons for their behaviour, so that we can support positive change. We will stick with them and we will not give up.
- ✓ We will act with integrity, honesty, empathy and respect, showing fairness and courage in everything we do.
- ✓ We will work with birth families, the child's wider network of family and friends, communities and other services, listening to their views, building their trust and confidence, making every effort to understand and meet their needs.
- ✓ We will use discretion, professional judgement and common sense to guide us and we will be accountable for our decisions and actions. We will respond to well-founded criticism with a willingness to learn and to change.
- ✓ We will not be distracted from our mission through fear of being criticised. In identifying and managing risks to children we will seek to reduce the risk of significant harm and achieve better outcomes.
- ✓ We will be professional, calm and focused in undertaking our statutory and professional duties at all times and in all the circumstances we face.
- ✓ Our commitment is to deliver a service that we and those we serve can be proud of, which promotes positive outcomes for vulnerable children and which reduces the risk of harm.

4. Our Core Principles

Everyone working in Children & Family Services apply the following core principles when working with children, young people and their families:

- a) The welfare of the child or young person is paramount.
- b) Children and young people have a right to live their lives free from neglect and abuse.
- c) Children and young people have the right to be heard (regardless of their age/developmental stage) and the right to influence decisions about their lives and their futures.
- d) Parents and carers have the right to be heard. They retain parental responsibility and that includes the responsibility to make a contribution to the care of their child.

- e) The best environment for a child is within their birth family and their own community of wider family and friends.
- f) All children, especially those with special educational needs, disabilities or in care have a right to an education which is suitably differentiated and takes into account their strengths and needs.
- g) The emotional and psychological health and well-being of children, is supported, especially those who live apart from their families or in care.
- h) When a family struggles to meet the needs of a child they will be supported appropriately to do so.
- i) We will offer a wide range of early help and support to prevent those problems escalating to crises.
- j) Statutory social work intervention in the private life of a child and their family is always a last resort.
- k) When a child's birth family is unable to meet their needs or to keep them safe, their wider network of family and friends will be considered first and, if viable, supported appropriately to care for them.
- l) Where it is not possible to maintain a child within their wider network of family and friends, the Council will endeavour to provide a suitable care placement, in such a way that the child can remain at their school and maintain positive contact with family and friends.
- m) Parents/carers who hold parental responsibility for the child will be expected to make an ongoing contribution to the care of their child, including the cost of care.
- n) When it is not possible for a child to return safely to their family, they will be supported to achieve permanence, preferably within an alternative family.

5. Our Ambition for 2017/18

The following service improvement priorities are intended to improve a wide range of outcomes for children and young people at risk of or experiencing adverse childhood experiences by supporting parents and carers and drawing on the support of wider family and friends. These service priorities incorporate strategic key elements of the 'One Vision' Partnership Plan and the critical elements of the Ofsted Inspection Action Plan:

Service Transformation

1. Jointly with Kernow Clinical Commissioning Group, provide systems leadership to implement the 'One Vision' Partnership Plan as the basis for a Children & Young People Transformation Plan for Cornwall and the Isles of Scilly 2017-2020, working in partnership with providers and crucially with the participation of children and young people, parents and carers, practitioners and clinicians.
2. Realise the commitment to integrated commissioning and service delivery by establishing joint, outcomes-based commissioning intentions based on integrated pathways for assessment and care delivered through multi-disciplinary teams.

3. Further develop a place-based approach to understanding need and providing services through effective partnership working in areas and localities, particularly with schools, voluntary sector and community groups.
4. Explore the options and bring forward proposals for an alternative delivery model as the best means of delivering integrated education, community health and social care services at pace.
5. Explore Healthier and Wealthier Families as an addition to the early help offer to reduce the impact of poverty on the welfare of children.
6. Invest in an alternative approach to preventing admissions to care and a specialist adolescent placement scheme.
7. Contribute to the implementation of the Child and Adolescent Mental Health Strategy and Transformation Plan.
8. Implement the budget cuts and associated service changes for 2017/18, mitigating the impact on staff, children, young people and their families. Prepare for the budget cuts and service changes for 2018/19.

Workforce wellbeing and development

9. Improve the resilience, health and wellbeing of staff through positive supervisor/supervisee relationships, a supportive team culture, high quality supervision that includes coaching, access to high quality professional development and career progression.
10. Recognise and respond to the increased pressures on staff at all levels arising from reduced capacity and increased demand, organisational change and job insecurity. Identify the signs of stress early and take action, working collaboratively with the Occupational Health Service to support individuals to stay healthy at work.
11. Maintain investment in developing the professional capabilities of frontline practitioners and further invest in evidence-based practice.
12. Promote reflective supervision, encouraging challenge and professional scepticism as the best means of reducing the risks to children and adults that result from over-optimism by professionals when assessing the impact of maltreatment, especially chronic neglect or abuse arising from learning difficulties, mental ill-health, alcohol/drug misuse and/or domestic abuse.
13. Further invest in the capabilities of front line managers and staff to understand the impact of equality and diversity issues such as gender, ethnicity, culture, religion, language and disability, on the lived experience of the child and their family and to take positive action to counter the impact of prejudice and discrimination.

Outcomes for children and young people

- 14.Reduce the number of adolescent admissions to care and provide adolescents in care with carers who can meet their needs and manage their risks.
- 15.Further improve the quality of practice and the effectiveness of joint agency working aimed at reducing the risk of children going missing and becoming at risk of child sexual exploitation.
- 16.Improve the effectiveness of practice and joint services that prevent the homelessness of 16-17 year olds, provide a range of supported accommodation and eliminate the use of bed and breakfast as temporary accommodation in a crisis.
- 17.Maintain the agreed criteria and practice quality standards for receiving and supporting refugee families and unaccompanied asylum seeking children.
- 18.Increase the number and proportion of children and young people in stable care placements and achieving permanence on their terms, including leaving care to arrangements where their carers hold parental responsibility.
- 19.Increase the number and proportion of care leavers in suitable accommodation, education, employment or training, including apprenticeships.

Practice Quality and Performance

- 20.Reinforce the expectation and practice quality standard that the child's lived experience is at the heart of assessments, plans and reviews – that they are seen as soon as practicable in an assessment and their feelings and wishes are understood and are shown to influence decisions about their lives.
- 21.Further improve the quality and consistency of core practice quality standards in assessments and plans. Embed Signs of Safety as the core approach for working with families, in assessing and managing risk, setting measures of progress (milestones) and in monitoring the child's progress.

6. Our Top Service Achievements in 2016/17

1. The Service achieved an overall rating of 'Good' in the Single Inspection Framework Ofsted inspection in May 2016. This represents a major achievement for Cornwall Council, with only 26% of children services rated 'Good' and nearly 25% rated 'Inadequate', under the new tougher inspection framework for children's social care. Only 13% of local authorities improved to 'Good'. Of all the local authorities rated

'Inadequate' in 2010/11 only Cornwall has achieved this level of improvement under the Single Inspection Framework.

2. This achievement is in the context of increasing demand for Children & Family Services and budget cuts, including severe pressures and budget cuts in partner agencies. The service has managed this ongoing increase in the demand for early help, psychological and social care services, helping and protecting more children at an earlier stage and more effectively.
3. As part of the overarching Sustainability & Transformation Plan and together with NHS Kernow (the clinical commissioning group for Cornwall and the Isles of Scilly) jointly led the development of the 'One Vision' Partnership Plan for children and young people, which establishes the basis for a Children & Young People's Transformation Plan 2017-20.
4. Further strengthened management oversight and grip on the quality of practice, raising the quality and effectiveness of service provision, further reducing shortfalls in core safeguarding practice by identifying shortfalls early, investigating them and taking appropriate action.
5. Maintained areas of outstanding and good performance, and improved performance in areas identified for further development, notably child sexual exploitation and 16-17 year olds presenting as homeless. Maintained top decile performance in the revised Public Law Outline.
6. As part of the consortium of South West Councils, played a full role in the welcome and support of unaccompanied asylum seeking children and refugee families.
7. Continued to develop multi-disciplinary teams as the foundation for integration, strengthening the contribution of child and educational psychologists to understanding and meeting the needs of children and young people.
8. Provided systems leadership in integrating the Youth Offending Service and Gweres tus Yownyk (supporting adolescents on the edge of care) to create a specialist adolescent service, in line with the findings and recommendations of the Taylor Review and the government response.
9. Further increased the number of disabled children and their families benefiting from an innovative approach to identifying need, providing information, advice and guidance at an early stage, based on family strengths, greater self-determination and self-help through direct payments and personal budgets.
10. Led the further strengthening and embedding of 'Signs of Safety' as the core, multi-agency approach to working with children, young people and their families to identify and manage needs, risks and family strengths where children are in need of help and protection.

11. Made further progress in developing and embedding the Family Partnership Model as the collaborative basis for working with families. Introduced family assessment and recording in line with our commitment to take a whole family approach to identifying and resolving the problems that are impacting upon the welfare and development of their children and young people.
12. Provided systems leadership in responding to the Wood Review of the role and function of Local Safeguarding Children Boards. Secured agreement for a more focused Safeguarding Children Partnership in line with the recommendations of the review and the government response.
13. Further embedded a more systematic approach to the Local Authority Designated Officer role and function in responding to allegations of professional neglect and abuse of children and young people.
14. Further invested in the core learning and development curriculum for frontline social care practitioners and extended the offer to early help practitioners and key partners. Further developed and supported the professional capabilities of frontline practitioners, enabling them to take on responsibility for appropriate cases.
15. Held the 7th Annual Social Work Conference and the 9th Aiming Higher for Disabled Children Conference for parents and carers, practitioners and managers, involving national speakers.
16. Managed the increased demand for care placements through effective prevention and supporting the contribution of wider family and friends as an alternative to care, in line with the wishes and feelings of children and young people. Achieved a stable children in care population.
17. Maintained high performance in supporting children to achieve permanence through adoption and special guardianship. Maintained top decile performance in adoption practice.
18. Maintained the number and range of case audits, including work with children who go missing, children at risk of CSE and children subject to three or more placement moves.
19. Provided systems leadership in developing and contributing to the LSCB quality assurance and scrutiny process. Led in commissioning the first LSCB independent multi-agency case audit.
20. Undertook further developments of the integrated children's system, involving practitioners in further efforts to reduce unnecessary bureaucracy and streamline recording, including live performance management information for frontline practitioners, supervisors and managers.

21. Further improved the confidence of partner agencies, other professionals and service users in the quality of the Council's Children & Family Services and the capacity of the service to improve further.
22. Provided systems leadership and secured widespread support for the plan to integrate children's education, community health and social care services.
23. Managed vacancy levels, reduced dependence on agency social workers and revised our systemic strategy for securing an effective children's social care workforce for the future.
24. Made further improvements in the quality of provision and maintained or improved performance indicators, in the context of increasing need and demand for specialist services arising from ongoing recession, welfare reforms and reduced funding for frontline services.
25. Despite further cuts in funding, increased demand for services and ongoing difficulties in recruiting experienced social workers, managed service changes and delivery, controlled expenditure, and offset budget pressures in other areas.

7. Our Approach

This Business Plan reflects the aspirations and priorities of the Council Strategy and Business Plan along with the approach set out in the 'One Vision' Partnership Plan. It is informed by needs assessment, findings from inspections, independent reviews, peer reviews, service user feedback, feedback from other agencies/professionals, consultation with front line practitioners and self-assessment. The approach is based on:

1. Taking a whole family approach to understanding the needs of individual children and young people. Seeing children and listening to them. Putting the child's lived experience at the heart of assessments and plans; that their views and feelings are clearly understood, taken into account and represented, irrespective of the child's age, developmental stage and method of communication.
2. Enabling the participation of children and young people in decisions about their lives, taking into account issues of their age and disadvantage, developmental stage and method of communication.
3. Taking into account issues of diversity and equality, such as gender, ethnicity, culture, religion, language and disability, and taking positive action to mitigate the negative effects of prejudice and discrimination on the welfare and safety of children, young people and their families.
4. Working with other agencies, voluntary and community groups to provide a wide range of early help to children, young people and their families to prevent needs becoming risks, problems turning into crises.

5. Responding promptly to requests for help from members of the public or other professionals when they have concerns about the welfare or safety of a child, in line with the multi-agency Threshold Criteria.
6. Undertaking multi-disciplinary assessments of children with additional and special educational needs and disabilities, in line with best practice and statutory guidance.
7. Working together with other agencies and professionals, developing a multi-disciplinary approach that draws on the experience, information and expertise of all relevant professionals to understand and respond effectively to a child's assessed needs, strengths and risks.
8. Obtaining consent and agreeing a plan with the family and with other professionals, which shows how the family will be supported to meet the child's needs and how any risks of harm will be managed and who will do what within an agreed timescale.
9. Undertaking social work assessments of children in need and their families whenever a case meets the multi-agency Safeguarding Children Partnership threshold for children's social care, in line with Working Together 2015.
10. Reviewing the child's progress and taking action when insufficient progress is being made to safeguard their welfare and safety. Taking into account the perspective and challenge of others.

8. Legislative Framework and Statutory Guidance

Children & Family Services operate within a complex legal framework, supplemented by a significant body of statutory guidance. The primary legislation and guidance include:

- Chronically Sick & Disabled persons Act 1970
- Police and Criminal Evidence Act (PACE) 1984: Code C 3.15
- Children Act 1989
- United Nations Convention on the Rights of the Child 1989
- The Carers (Recognition & Services) Act 1995
- Education Act 1996 (particularly Section 2)
- Housing Grants, Construction & Recognition Act 1996
- The Crime and Disorder Act 1998
- Human Rights Act 1998 Data Protection Act 1998
- Youth Justice and Criminal Evidence Act 1999
- Children Leaving Care Act 2000
- Care Standards Act 2000
- The Carers & Disabled Children Act 2000
- Adoption and Children Act 2002
- Criminal Justice Act 2003
- Children Act 2004

- Code of Practice for Victims 2006 (Victim's Charter)
- Achieving Best Evidence 2007
- Children and Young Persons Act 2008
- Criminal Justice and Immigration Act 2008
- Information Sharing: Guidance for practitioners and managers 2008
- Equalities Act 2010
- Care Planning, Placement and Case Review Regulations 2010
- Short breaks statutory guidance 2010
- Legal Aid, Sentencing and Punishment of Offenders 2012
- Working Together 2015
- Children & Families Act 2014
- Special Educational Needs Code of Practice 2014
- Care Act 2014

Working Together 2015, issued under section 7 of the Local Authority Social Services Act 1970, sets out how agencies and professionals working with children and families should work together to safeguard and promote the welfare of children and young people. This is supplemented by the South West Child Protection Procedures that also apply to all agencies and professionals. The revised Care Planning, Placement and Case Review Regulations 2010 and the accompanying statutory guidance, 'Putting Care into Practice', lays out how the Council and its partners should exercise these functions for children in care.

9. Operational imperatives

1. The Council's statutory duties to help and protect children in need and their families, children with special educational needs and disabilities, young people who offend, children subject to child protection plans, children in care and care leavers.
2. Children with additional needs are included in an appropriate educational setting and are supported to maximise their progress, individual potential and outcomes.
3. Children with special educational needs, children with disabilities and children who have experienced neglect and abuse benefit from high quality psychological advice as part of the assessment process.
4. Professionals work together to identify and assess the needs, strengths and risks to the child, share information, form a team around the child, devise a single plan, share responsibility for implementing the child's plan, designate a key worker and undertake regular reviews of the child's progress.
5. Partner agencies are committed to working together and to developing the capabilities of their workforce to deliver high quality services.
6. Children are safeguarded most by children's and adult's services working collaboratively and sharing information appropriately, particularly when

the one or more of the 'toxic trio' of parental mental health problems, alcohol/drug misuse and domestic abuse are present.

7. Frontline managers and practitioners are trained, supervised and supported appropriately to understand and achieve the practice quality standards consistently, including access to evidence-based research.
8. Consistent, good quality practice is based on using assessment and other safeguarding tools to understand the individual child's lived experience, taking into account individual characteristics such as ethnicity, culture, heritage, religion, language and disability.
9. There is good management oversight of practice and performance, along with management grip in key areas of risk and high risk cases.
10. Quality assurance and performance management, especially case monitoring and audit, focuses relentlessly on learning as the basis for improving the quality of practice, providing a learning feedback loop to practitioners and their supervisors about the quality of their work.
11. Effective practitioners are supported, recognised, rewarded and encouraged to remain in practice through appropriate levels of remuneration and an extended career and qualification pathway.
12. The Service contributes to the safeguarding of parents and carers and the protection of those adults who are vulnerable themselves to neglect and abuse.

10. Operational structure

The strategic lead for Children & Family Services is **Jack Cordery, Service Director**. The Service is organised and led by 9 Heads of Services and the Principal Child & Family Social Worker, who form the Senior Leadership Team for the Service:

1. **Commissioning for Wellbeing, Universal and Early Help – Angie Andrews, Head of Service**
 - Health visiting
 - School Nursing
 - 11-19 Support Services
 - Preventative Services for vulnerable adults
2. **Children's Psychology Services – Mandy Owen, Head of Service:**
 - 3 Area Educational & Child Psychology Teams
 - Early Years Inclusion Service
 - Autism Spectrum Team
 - Clinical Psychology & Therapy Service
 - Video Interaction Guidance Service

3. **Disabled Children and Therapy Services – Yvette Yates, Head of Service:**
 - 3 Area Disabled Children Teams
 - OT Service
 - Early Support Service
 - Residential Short Breaks
 - Direct Payments and Personal Budgets

4. **Children & Family Services (West Cornwall) – Ben Davies, Head of Service:**
 - 3 Family Assessment & Support Teams
 - 2 Child Protection & Court Teams
 - 1 Children in Care (Permanence) Team
 - 2 Children’s Centre Cluster Groups
 - 2 Early Help Locality Teams

5. **Children & Family Services (Mid Cornwall) – Bernie Doyle, Head of Service:**
 - Early Help Hub and Multi-Agency Referral Unit
 - 3 Family Assessment & Support Teams
 - 2 Child Protection & Court Teams
 - 1 Children in Care (Permanence) Team
 - Out of Hours Service
 - 2 Children’s Centre Cluster Groups
 - 2 Early Help Locality Teams

6. **Children & Family Services (East Cornwall) – Jane Hampton, Head of Service:**
 - 3 Family Assessment & Support Teams
 - 2 Child Protection & Court Teams
 - 1 Children in Care (Permanence) Team
 - 2 Children’s Centre Cluster Groups
 - 2 Early Help Locality Teams

7. **Children in Care and Care Leavers Services – David Roose, Head of Service:**
 - Children in Care Council, Participation and Advocacy
 - Gweretus Yownyk (incorporating the Youth Offending Service)
 - The Placement Hub
 - Fostering & Adoption Service
 - Family Plus Team
 - 16+ (Care Leavers) Service

8. **Practice Development – Marion Russell, Principal Child & Family Social Worker:**
 - Practice Educators Team
 - Trainee and Student Social Worker Programme
 - The Foundation for Social Work in Cornwall
 - ASYE Programme
 - Core Curriculum and post-qualifying programmes

9. **Safeguarding Children Standards Unit – Karen Dale, Head of Service:**

- Local Authority Designated Officer
- Child Protection Reviewing Team
- Children in Care and Care Leavers Reviewing Team
- Safeguarding Children Partnership Support Team

10. **Business Support & Administration Services – Emma Trethewey, Head of Service:**

- Business and admin support to frontline teams
- Integrated Children's System
- Quality Assurance and Performance Management
- Finance and Procurement

11. Role and Function of Operational Teams

The multi-agency **Early Help Hub** is the single point of contact for professionals and families to request a range of health and early help services, incorporating an assessment and care pathway to **Together for Families and Headstart**. **Early Help Locality Services** lead on the multi-agency early help strategy to offer children, young people and their families co-ordinated support when problems start to arise. **Early Help Locality Teams** co-ordinate the offer of early help through local arrangements for undertaking CAF and early help assessments and by facilitating a team around the child/family. The early help offer includes access to the **Family Group Conference Project**. **Targeted Youth Support Work** provides one-to-one support for the most vulnerable young people. Whilst **Children's Centres** focus on children 0-8 years, they provide services that are inclusive of children of all ages and their families. They support the foundation stage for learning in early years.

The **Children's Psychology Service** supports children and young people with a wide range of psychological needs, including children with needs relating to emotional wellbeing and mental health. The **Educational Psychology Service** supports children with special educational needs and disabilities. Child and educational psychologists provide wider, applied psychological services in collaboration with front line social care teams, working as associate members of those teams, as well as providing advice under a statutory duty to assess special educational needs. The service includes the **Autistic Spectrum Team**, which supports children and their families at home and at school, and the **Early Years Inclusion Service**, which provides advice and support by SEN co-ordinators and educational psychologists (and other specialist staff) to support parents and early years settings to meet the needs of children with SEN and disabilities. The **Children's Clinical Psychology and Therapy Service**, including the **Jigsaw Service** supports the emotional wellbeing and mental health of children and young people who have experienced neglect and abuse. The service provides advice and consultation to foster carers and social workers, training, assessment and therapy services. The Video Interaction Guidance Service provides a specialist service to support children and adults, along

with a hub and spoke model of training. The **Children's Psychology Service** works collaboratively with the specialist Child and Adolescent Mental Health Service.

Disabled Children and Therapy Services undertake the majority of assessments and care planning in acute and complex cases where children have severe and enduring disabilities and illnesses, including **OT assessments**. The service provides the full range of children's social care interventions, from **Early Support and Portage** to the management of child in need and child protection plans and, as a last resort, children in care plans for disabled children. The service also provides a wide range of **Short Breaks** to enhance the life experiences of children with disabilities and to offer parents and carers a short break from their caring responsibilities. The service makes a significant contribution to the implementation of the Code of Practice for children with SEN and disabilities. **Supporting Change in Partnership (SCiP)** is an innovative, practitioner-led development, which is a strengths-based and solution-focused service designed to support disabled children and young people and prevent the need for statutory social work.

The **Multi-Agency Referral Unit** (the **MARU**) is the single point of contact for anyone who is concerned about the welfare or safety of a child or adult, providing professional advice and guidance and determining whether the case meets the Safeguarding Children Partnership threshold criteria for social care. Where cases do not meet that threshold, referrers are provided with information, advice and guidance from the **Multi-Agency Advice Team** (the **MAAT**) including signposting to targeted and preventative services. Some of these cases are passed to an Early Help Locality Team for an early help assessment. Cases that meet the threshold for children's social care are assigned to the appropriate social care team in one of the 5 social care services for a final decision, including a statutory social work assessment or for a strategy discussion and a child or adult protection enquiry in those cases where there is evidence of actual or likely risk of harm. If a statutory social work intervention is required cases are assigned, proportionate to the level of need/risk, to **Family Assessment & Support Teams, Disabled Children and Therapy Teams, Family Plus Team** (a specialist team supporting special guardians and adoptive parents) **Gweres tus Yownyk** (a specialist adolescents' service incorporating the Youth Offending Service) **Child Protection & Court Teams or Children in Care Teams**.

The **Children in Care and 16+ (Care Leavers) Service** is responsible for commissioning a sufficient range of placements to meet the needs of children in care and care leavers. **Gweres tus Yownyk** (a specialist adolescents' service including youth offending) supports adolescents on the edge of care, including those who have returned home after an unplanned admission to care. The **Fostering & Adoption Service** provides the majority of placements for children in the care of the local authority and is responsible for recruiting, assessing and supporting sufficient adopters to meet the needs of children in care where the plan is for adoption. It is also responsible for supporting the assessment of potential special guardians

and for supporting placements resulting from Residence, Child Arrangement and Special Guardianship Orders through the **Family Plus Team**. The **16+ (Leaving Care) Service** is responsible for ensuring that young people leaving care are supported to make a safe and successful transition to adulthood and independence.

The **Principal Child & Family Social Worker (PCFSW)** leads on **Practice Development** and the **Core Curriculum** for social workers and other social care practitioners. The **Practice Educator Team** provides career advice, and supports trainee/student social workers and newly qualified social workers to meet their learning objectives. Practice educators provide advice and guidance to social workers at all levels of the **Professional Capabilities Framework** and support them in undertaking post-qualifying awards in pursuit of their career goals. The **PCFSW** is responsible for the **Trainee Social Work Scheme, Assessed and Supported Year in Employment** and **Advanced Practitioners**. She has oversight of the operation of the **Progression Panels**, ensuring the integrity of the **Career & Qualification Pathway for Social Workers**. She is responsible for **The Foundation for Social Work in Cornwall**, which leads on establishing the induction, learning plan and progression for all **Newly Qualified Social Workers**.

The **Safeguarding Children Standards Unit** provides independent quality assurance for social work practice and oversight of the implementation of child protection plans, children in care plans and care leavers pathway plans. SCSU officers provide practitioners and their supervisors with feedback on the quality of practice in line with agreed **Practice Quality Standards**. The SCSU provides the **Local Authority Designated Officer** function for overseeing agency responses to allegations of professional neglect and abuse. The unit also supports the effective functioning of the **Safeguarding Children Partnership Board**.

12. Overall Approach to Delivering our Objectives

Supporting staff

Health and Wellbeing

Direct work with vulnerable children and young people, many who have experienced neglect and abuse, and their families in distress is one of the most challenging and demanding roles in health and social care. To sustain their resilience in the face of these emotional and psychological challenges frontline practitioners need to be properly supported to do the job. Support is provided through a culture that aspires to be characterised by learning not blaming and through high quality supervision that addresses the impact of the demands of the work on the wellbeing of staff.

Although there are improved satisfaction levels in most aspects of the most recent staff survey and Health Check, successive staff surveys highlight communication as a key issue and how poor communication impacts

negatively upon staff energy, morale and resilience. Good communication, especially during organisational change is an expectation of all managers and supervisors.

A mandatory staff induction day is provided to all new staff. Three full staff conferences are held each year to provide staff with the opportunity to hear from senior managers and to express their views about how things are working and how they could be improved. A 'your ideas matter' drop box has been established so that staff ideas for improving the Service can be considered formally by the senior leadership team. Additional staff conferences are held following important developments and to discuss any proposed service developments or changes.

Staff have a right to know what is expected of them and to be treated fairly and reasonably when their practice falls short of the required standards. Conscientious mistakes are dealt with by supporting staff to learn from them and to avoid making the same mistake in future. Persistent and serious shortfalls are dealt with promptly at the appropriate level under the relevant Council policy. Any management actions resulting from that process must be reasonable and proportionate. Staff can expect to be treated with respect by managers at all times. Bullying and harassment is not tolerated.

Recruitment and Retention

Challenges persist in the recruitment and retention of sufficiently experienced, competent and confident front line managers and social workers. A systemic plan is in place to attract and retain the best social workers in these front line services, subject to tenure and performance, and to build a sustainable workforce for the future, including succession planning to senior posts. Staff who wish to progress are encouraged to broaden their experience, knowledge and skills by working in different parts of the service, including secondments.

The career and qualification pathway for social workers is in line with the findings of the Social Work Reform Board and the College of Social Work Professional Capabilities Framework and provides the basis for assessment, accreditation and career progression. The pathway includes a limited number of team-based Principal Social Worker posts, aimed at increasing the capacity for professional case supervision, enabling team based learning and to promote succession planning to first line management. The pathway also includes an unlimited number of Consultant Social Worker posts, where the only limitation to progression is a level of experience, attaining an appropriate post qualifying award, clear evidence that learning has been applied in practice, an area of specialist expertise and a solid record of performance in relation to the practice quality standards.

Career and qualification pathways, in line with these principles, have been implemented for other staff who do not hold a professional qualification or who do not require a professional qualification to undertake their role.

These pathways support and enable those who wish to train as social workers.

The Trainee Social Worker programme in children's services has been fully implemented and includes a Master's programme. Trainee Social Workers are part of the social work staffing establishment. Trainees are based in an operational team and work for up to a year (unless they have already worked in a relevant capacity) before being sponsored to undertake an appropriate programme of study in social work.

Work is being undertaken to review the training and supply of child and educational psychologists and to put in place a strategy for the recruitment and retention of child and educational psychologists in future years. A trainee scheme for practitioner psychologists is being established.

Reducing the bureaucratic burden on frontline practitioners

Further work is being undertaken to reduce duplication and overlap in bureaucratic processes, without compromising direct practitioner recording in the Integrated Children's System or the capacity to report performance reliably. The Integrated Children's System has been reviewed and developed to better support social care practice. MOSAIC has been re-designed, including group recording, to further reduce the bureaucratic burden on front line practitioners and managers, and to support information sharing. Further work is being undertaken to integrate other service areas within MOSAIC to improve information sharing. This will include the programme to integrate children's community health and social care under the Deal for Cornwall.

A framework for a balanced workload

A framework for a balanced workload is in place for children's social care practitioners, covering all but the most specialist posts undertaking the critical functions of the key worker role in case management. Caseloads are monitored closely and team performance in relation to these standards of efficiency and productivity are reviewed at the 6 weekly, service-based QAPM Meeting and quarterly, at the service-wide QAPM Conference to ensure a more balanced allocation of workload across the whole system. The professional capabilities of other social care staff and job grading have been developed to enable those staff to undertake assessments, hold case responsibility for early help cases and to support social workers with specific tasks. Decisions to recruit to vacant posts or to engage agency staff include consideration of workloads and throughput in a given service or team.

Investing in professional development

A Practice Quality Standards self-assessment tool is available as a reference by quality assurance officers when providing feedback on the practice quality standards to practitioners and their supervisors. The core curriculum of learning in evidence-based approaches to assessment,

analysis, planning interventions and measuring outcomes in child protection has been embedded in the core curriculum.

The team-based Principal Social Workers support Team Managers in practice development and education and for developing a learning culture. Priority will continue to be given to providing front line managers and Principal Social Workers with a high quality training programme in supervision skills for supervisors of social workers and other front line social care practitioners who hold case responsibility. This is provided in addition to mentoring and coaching training. Practitioners have access to evidence-based research websites to support their learning and as a tool to challenge their understanding of a child's needs, strengths and risks.

Workforce development resources that support the competence and confidence of front line social workers and psychologists and other professionals within the service, such as occupational therapists, is being maintained at current levels to support sustainable improvement in the quality and consistency of practice. Increased emphasis will be placed on developing expert practitioners, in line with the revised career and qualification pathway. A children's social work conference is held annually, with contributions from nationally recognised speakers.

All members of the Children's Psychology Service will continue to receive continuing professional development opportunities appropriate to their needs, arising from their annual appraisal and/or service development priorities.

Practitioners who struggle to achieve the level of consistency in the practice and quality standards required to help and protect children effectively are provided with appropriate training and additional support through mentoring and coaching to achieve the required standards consistently. Serious or persistent shortfalls in achieving those standards are dealt with fairly and reasonably at the appropriate level.

Newly Qualified Social Workers (NQSWs) have a protected caseload for 6 months so that they can undertake the NQSW development programme and on completion of that programme they are supported to undertake an Early Professional Development programme to consolidate their learning. Once this has been completed successfully, practitioners are entitled to be considered for Level 3, 'experienced' social worker status via a Progression Panel. In order to become senior social workers, practitioners are encouraged and supported to complete the main elements of the core curriculum and to undertake a suitable specialist post-qualifying programme of study in social work theory and practice, in preparation for undertaking a higher specialist award. This is required to become eligible for further progression to the role of an Advanced Practitioner, as either a Principal or Consultant Social Worker.

Management oversight of practice

The 6 weekly service-based quality and performance meeting (QAPM) is held to monitor progress in relation to practice quality standards, and promote learning through the identification of strengths and shortfalls:

1. Assessments will be allocated and recorded as started within 48 hours of the decision and information gathered during the assessment process will be recorded in the assessment episode. Child protection strategy discussions/meetings will take place within 24 hours of the decision. Children are seen in a timely way, proportionate to known need and risk, and regularly when subject to plans.
2. The decisions of managers/supervisors along with a clear rationale for the decision will be recorded at each stage in the process of determining threshold, the status of the case, assessment, allocation and case transfer.
3. Priority will be given to seeing and listening to children, including statutory visits to children. As a result, assessments will provide a clear picture of the child's lived experience and their journey, including their wishes and feelings expressed in their own words.
4. Child case records will incorporate a chronology of significant events in the child's life, with evidence of how the child's history has influenced the analysis of needs, strengths and risks in determining the assessment and plan.
5. Child records will incorporate a genogram/ecomap of the child's network of family and friends, with evidence of how it has influenced the assessment of need and analysis of risk, as well as how the wider family has been consulted in establishing a plan to help and protect the child.
6. Child records will incorporate a clear and good quality risk assessment, including a contingency plan. Child sexual exploitation will be considered wherever the indicators are detected. Signs of Safety will be used by practitioners to clarify risks to the child and family strengths, and to monitor progress against the plan.
7. Cases will incorporate a clear and good quality plan describing strengths, needs and risks and how the desired outcomes will be achieved, how progress will be measured, who will lead on the actions and when by.
8. Assessments, plans, intervention, reviews and case recording will show how a person's diversity and equality needs have been taken into account and met.
9. Case records will contain evidence of professional supervision that includes critical reflection as a means of ensuring appropriate levels of challenge and professional scepticism in understanding the child's needs,

the capacity of parents/carers to change and progress against intended outcomes.

10. Case records will contain evidence of management oversight, and appropriate management support to help staff achieve the standards and effective action where there are serious or persistent shortfalls.

In addition to the 6 weekly QAPM service meeting, a quarterly QAPM Conference of the full management team (open to practitioners and key members of the LSCB) focuses on understanding shortfalls, any potential systemic issues and action planning by each service to correct identified shortfalls in the quality of practice and performance. The latest performance data for 2015/16 is shown as an Appendix to this plan.

13. Resources

The staffing and financial resources available to Children & Family Services are shown at Appendices 3 and 4.

The monitoring and control of budgets is undertaken by managers at every level of the service, with support and oversight by the Head of Service for Business Support and Administration Services (BSAS) along with a close working relationship with a senior Accountant. Expenditure monitoring and forecasting are undertaken at a monthly meeting of Heads of Service following scrutiny by the finance business partner and senior manager for BSAS with the Service Director. This includes challenge to significant variances from the budget plan and adjustments. The Service is subject to internal audits to check compliance with standing orders for financial controls and achievement of value for money. The budget monitor is reported for scrutiny and challenge to the Directorate Leadership Team and Corporate Leadership Team monthly.

Decisions about recruiting to vacant posts are subject to scrutiny by the senior manager for Business Support & Administration Service and the finance business partner to ensure requests are in line with the establishment and funds are available before sign off by the Service Director and, for some posts, subject to agreement by the Directorate Leadership Team.

Consideration of requests for procuring high cost care placements from the voluntary and independent sector are scrutinised by the Head of Service for BSAS and the finance business partner before discussion with the Service Director and only brought to the Directorate Leadership Team for final consideration and decision once all the requirements for exploring and trying in house alternatives have been met.

Service reviews are held to test best value (quality and cost). Service reviews take into consideration the views of staff and the experience of customers/service users and other stakeholders. Research and evaluation is undertaken to draw on examples of best practice.

Heads of Services are expected to explore opportunities to support and build the capacity of voluntary and community groups that provide effective support services to children in need and their families, particularly in relation to advocacy and voluntary support to parents and carers.

Integrated commissioning and partnership opportunities that optimise the use of resources are being developed. These opportunities are explored with all partner agencies and providers working to improve the life chances of children and young people, particularly with schools to support the educational aspiration and achievement of vulnerable children and to close the gap between them and their peers.

Risk Log

Risk No.	Risk Name	Risk Definition	Score	Planned Actions to Mitigate Identified Risk
CFS1	Reconciling Capacity and Demand	Cuts in budgets will increase stress on already stretched services at a time of increased demand for services arising from pressures on vulnerable families due to ongoing recession and welfare reforms.	L: 5 I: 4 T: 20	<ol style="list-style-type: none"> 1. Prioritise targeted support to the most vulnerable children and families 2. Implement partnership arrangements with other agencies and providers to secure improved value for money. 3. Increase income from traded services. 4. Seek joint funding with others to increase capacity and efficiency 5. Work with partners to seek additional funding to support voluntary and community groups providing services to children and families 6. Invest in evidence-based practice and interventions 7. Monitor activity at the front door closely for early warning signs 8. Monitor the demographic pressures closely and take corrective action as required.
CFS2	Improving Recruitment and Retention	The ongoing challenge to recruiting experienced, permanent social workers in frontline teams is likely to persist until the long-term measures have time to impact.	L: 4 I: 4 T: 16	<ol style="list-style-type: none"> 1. Sustain the investment in Trainee Social Worker programme 2. Maintain investment in the Core Curriculum 3. Continue to improve the quality of supervision for frontline practitioners 4. Support the progression of social workers along the Career and Qualification Pathway.
CFS3	Raising the Quality of Practice	Differences in levels of professional capabilities, compounded by a continued reliance on newly qualified and temporary or agency social workers and managers, will cause inconsistency in the quality of practice.	L: 3 I: 4 T: 12	<ol style="list-style-type: none"> 1. Continue to improve strengthen management oversight and the quality of supervision for frontline practitioners 2. Continue to clarify standards and expectations for key practice 3. Continue to implement the Core Curriculum 4. Continue to provide QA feedback on quality and performance 5. Continue to closely monitor shortfalls through the Core Audit System 6. Take appropriate management action in response to serious and persistent shortfalls in the quality of practice

Performance Data

Performance Template – to December 2015

CHILDREN IN NEED									
Source: Social Work Performance Data Set	14/15 Year End Figure	Target 14/15	Cornwall, England & Statistical Neighbours 14/15 figures	July	August	September	October	November	December
Total number of Contacts recorded during the month				747	565	610	551	523	456
Total number of Contacts recorded during the month resulting in a Referral				330	213	273	296	267	219
Percentage of Contacts recorded during the month resulting in a Referral				44.18%	37.70%	44.75%	53.72%	51.05%	48.03%
Total number of Referrals completed during the month resulting in a Social Work Assessment				273	194	226	267	230	173
Of all Referrals completed during the month, the percentage resulting in a Social Work Assessment				82.72%	91.08%	82.78%	90.20%	86.14%	83.98%
% Repeat referrals to social care within 12 months - Rolling Year to Month End (LI18) National data for 2008/09 = 23% (no longer published).	19.36%	<22%	Cornwall = 18.9% England = 16.6% SN = 18.4%	18.7%	19.1%	18.9%	18.7%	18.4%	18.9%
				660/3538	677/3552	679/3586	679/3640	661/3590	664/3521
Number of Children Subject of Section 47 Enquires Started in the month				89	69	64	84	84	76
Percentage of referrals to children's social care going on to a Social Work Assessment - Rolling Year to Month End (NI68b)	85.66%	>85%	n/a	88.2%	80.2%	79.7%	79.3%	79.9%	79.0%
				3111/3528	2849/3552	2857/3586	2907/3666	2869/3590	2782/3521
Number and % of Assessments completed within 45 working days of referral, rolling year to month end (CSFSD10b)	n/a	>80%	Cornwall = 76.0% England = 81.5% SN = 80.6%	76.1%	77.8%	81.3%	84.3%	86.3%	86.9%
				2813/3699	3239/4166	3062/3766	3145/3732	3263/3782	3308/3808
CHILD PROTECTION									
Source: Monthly Management Information	14/15 Year End Figure	Target 14/15	Cornwall, England & Statistical Neighbours 14/15 figures	July	August	September	October	November	December
No. of Children Subject to a Child Protection (CP) Plan as at Month End (Per 10,000 population (LI14))	404 (37.77)	-	Cornwall = 38.5% England = 42.9% SN = 39.0%	405 (34.74)	411 (36.89)	401 (36.00)	415 (37.25)	425 (38.15)	430 (38.60)
No. of Child Protection (CP) Plans starting in the month				57	29	18	62	42	43
No. of Child Protection (CP) Plans ending in the month				39	23	28	48	32	38
No. of Children subject to an Initial Child Protection Conference During the Month				77	28	35	64	42	49
No. of Children subject to a Review Child Protection Conference During the Month				108	53	119	112	87	89
No. of Children Ceasing to be Subject to a CP Plan During the Month Who Had Been Subject to a Plan Lasting 2 Years or More				3	0	0	4	0	2
No. of Children Made Subject to a CP Plan During the Month Who Were Subject to a Plan for the Second or Subsequent Time				14	6	8	4	11	1
No. and % of Children Ceasing to be Subject to a CP Plan During the Year Who Had Been Subject to a Plan Lasting 2 Years or More - Rolling Year to Month End (NI64)	5.38%	<8%	Cornwall = 5.4% England = 3.7% SN = 3.7%	5.4%	4.9%	3.7%	4.3%	4.2%	3.9%
				21/387	19/390	14/382	18/415	18/427	16/408
No. and % of Children Made Subject to a CP Plan During the Year Who Were Subject to a Plan for the Second or Subsequent Time - Rolling Year to Month End (NI65)	18.90%	<20%	Cornwall = - % England = 24.0% SN = 25.3%	19.1%	19.9%	19.6%	18.9%	20.8%	20.3%
				93/488	92/462	91/465	89/471	98/472	95/469
No. and % of Review Child Protection Conferences in Timescale - Rolling Year to Month End (NI67)	95.40%	>95%	Cornwall = 95.4% England = 94.0% SN = 97.8%	93.6%	94.8%	93.3%	93.7%	93.9%	93.5%
				278/297	275/290	291/312	296/316	291/310	302/323
Percentage of initial child protection conferences in the month which were held within 15 working days of Strategy Discussion (LSCBL13)				87.1% (27/31)	89.3% (25/28)	94.1% (32/34)	82.5% (52/63)	90.2% (37/41)	95.8% (23/24)

Performance Data

Performance Template – to December 2015

CHILDREN IN CARE									
Source: Social Work Performance Data Set	14/15 Year End Figure	Target 14/15	Cornwall, England & Statistical Neighbours 14/15 figures	July	August	September	October	November	December
No. of Children in Care as at Month End (Per 10,000 population (LI15))	441 (42.30)	-	Cornwall = 42.0% England = 60.0% SN = 53.5%	434 (38.95)	444 (39.86)	440 (39.50)	446 (40.04)	438 (39.32)	435 (39.05)
No. of CIC whose episode of care started in the month				19	17	12	38	18	22
No. of CIC whose episode of care ended in the month				31	7	16	32	26	25
No. of Children in Care as at Month End - Ages 0 to 4 Ages 5 to 10 Ages 11+				65 83 291	73 82 302	68 76 296	69 78 299	60 79 299	59 79 297
No. of Children in Care as at Month End - Interim Care Order Full Care Order Freeing or Placement Order Voluntary Accommodation (incl. Section 20) Other				45 248 40 106 0	47 247 41 109 0	43 249 42 106 0	55 247 39 105 0	60 243 35 100 0	58 241 39 93 1
% CIC aged at least 10 and under 16 in foster placements or placed for adoption (LI10)				86.5% 167/193	85.5% 165/193	85.4% 169/198	85.4% 169/198	86.9% 179/206	88.0% 184/209
% CIC in residential accommodation (LI13)				10.6% 44/417	10.4% 46/444	10.5% 46/440	10.1% 45/446	10.3% 45/438	10.3% 45/435
No. and % of Children in Care Who Directly Communicated Their Views to a Statutory Review - Rolling Year to Month End (LI12)				96.5% 363/376				93.0% 319/343	93.4% 324/347
% of Children in Care For Whom Review in Timescale - Rolling Year to Month End (NI66)	94.20%	>95%	n/a	99.3% 419/422	99.3% 425/428	98.1% 408/416	98.8% 424/429	98.8% 426/431	98.6% 410/416
Short Term Stability of Children in Care: Number of Placements - Rolling Year to Month End (NI62)	13.84%	<14%	Cornwall = tbc England = tbc SN = tbc	18.2% 80/439	18.9% 84/444	17.0% 75/440	16.4% 73/446	16.7% 73/438	16.1% 70/435
Long Term Stability of Children in Care: Length of Placement - Rolling Year to Month End (NI63)	64.00%	>70%	Cornwall = tbc England = tbc SN = tbc	72.6% 90/124	72.6% 90/124	69.7% 92/132	66.9% 87/130	68.9% 91/132	72.6% 98/135
% Children adopted who were placed within 12 months of the agency decision that the child should be placed for adoption. (NI61)	82.05%	>80%	Cornwall = tbc England = tbc SN = tbc	82.5% 33/40	84.9% 28/33	85.7% 30/35	86.1% 31/36	82.1% 32/39	80.6% 29/36
% children adopted or who ended care after the granting of a Special Guardianship Order or a Residence Order/Child Arrangement Order (LI11)	22.38%	>22%	Cornwall = tbc England = tbc SN = tbc	22.8% 82/359	21.5% 77/359	22.1% 79/358	23.2% 81/349	24.8% 83/335	24.8% 84/339
No. of Reviews of Foster Carers Completed in the month (Mosaic episodes completed in the month)				20	2	3	10	23	7
Legal Activity - New Care Proceedings (not individual child)				tbc	tbc	tbc	tbc	tbc	tbc
Legal Activity - Ongoing Interim Care Orders				45	50	43	55	60	58

Resources: Staffing Establishment

Childrens Early Help, Psychology & Social Care			
Staffing Establishment			
	2015/16 FTE'S	Savings Plan FTE's	2016/17 FTE's
SLT (Including Trainee Social Workers)	28.00	0.00	28.00
Children in Care and Care Leavers Service	101.77	13.71	88.06
Help & Protection Services (East)	72.44	0.00	72.44
Children's Psychology Service	44.74	0.00	44.74
Safeguarding Standards Unit	22.00	1.00	21.00
Help & Protection Services (Mid)	89.52	0.00	89.52
CEHPSC Training Unit	6.45	0.00	6.45
Help & Protection Services (West)	85.71	1.00	84.71
Disabled Children and Therapy Service	163.82	2.00	161.82
Youth Offending Service	23.44	0.00	23.44
Children's Early Help Locality Services	188.29	0.00	188.29
	826.18	17.71	808.47

Resources: Budgets

	Original Budget 2016/17 £m
Employee Costs	29.567
Premises Costs	1.131
Transport Costs	2.153
Supplies & Services	2.766
Third Party Payments	17.703
Transfer Payments	3.344
Internal Recharges	1.640
Gross Expenditure	58.304
Government Grants	(2.485)
Other Grants, Reimbursements and Contributions	(0.800)
Customer and Client Receipts	(0.290)
Internal Recharges	(0.574)
Total Income	(4.149)
Interest Payable and Similar Charges	0.000
Movement In Reserves Statement	(0.630)
Net Expenditure	53.525

Sub Service Analysis

The Children's Early Help, Psychology & Social Care service can be broken down over the following sub services:

	£m
Help and Protection East	2.800
Locality Teams	7.241
Safeguarding Children Standards Unit	1.279
Youth Offending Service	0.306
Children's Early Help, Psychology & Social Care Agency Contracts	1.016
Training Unit	0.328
Children in Care Services	20.493
Help and Protection West	3.284
Children's Early Help, Psychology & Social Care Senior Leadership Team	3.239
Children's Psychology Services	1.147
Help and Protection Mid	3.568
Disabled Children & Therapy Services	8.824
Total Children's Early Help, Psychology & Social Care Service	53.525

Childrens Early Help, Psychology & Social Care						
Budget Table						
	Savings Achieved in 2015/16 £m	Revised Budget 2015/16 £m	Growth 2016/17 £m	Savings Plan 2016/17 £m	2016/17 Virements £m	Budget 2016/17 £m
SLT	(0.075)	1.199	0.005		0.011	1.215
CEHPSC Agency Contracts	(0.107)	0.971		(0.045)	0.090	1.016
Children in Care and Care Leavers Service	(1.195)	21.394	0.798	(1.016)	0.085	21.261
CEHPSC Legal Costs & Preventative Services (S17)	(0.066)	1.206			0.050	1.256
Help & Protection Services (East)	(0.183)	2.800	0.011		(0.011)	2.800
Children's Psychology Service	(0.134)	1.159	0.010	(0.022)	0.000	1.147
Safeguarding Strandards Unit	(0.172)	1.346	0.004	(0.058)	(0.013)	1.279
Help & Protection Services (Mid)	(0.260)	3.594	0.014	(0.032)	(0.008)	3.568
CEHPSC Training Unit	(0.005)	0.381	0.001		(0.054)	0.328
Help & Protection Services (West)	(0.175)	3.423	0.011		(0.150)	3.284
Disabled Children and Therapy Service	(0.757)	8.874	0.016	(0.066)	0.000	8.824
Youth Offending Service	(0.135)	0.219	0.003	0.084	0.000	0.306
Children's Early Help Locality Services	(1.051)	7.222	0.019		0.000	7.241
	(4.315)	53.788	0.892	(1.155)	(0.000)	53.525

2016/17 Savings Plan for Children's Early Help, Psychology and Social Care.

Savings Ref	Saving Description	2016/17 Target £m
Childrens Early Help, Psychology & Social Care		
CSF16	Children's Social Work Agency.	0.045
CSF17	Children's Social Work Agency placements.	0.300
CSF17a	Adoption Service Income Generation	0.050
CSF17b	Adoption Service	0.041
CSF17c	Fostering Service	0.041
CSF27	Children's Social Work Help and Protection (Central) - Family assessment unit	0.032
CSF31	Children's Social Work Education Psychology Services.	0.022
CSF32	Children's Social Work Safeguarding Children Unit/Local Safeguarding Children's Board Support Team	0.058
CSF33	Children's Social Work Children's Social Work Aiming High for Disabled Children short breaks.	0.021
CSF34	Children's Social Work disabled children's support workers.	0.045
CSF38	Children's Social Work Youth Offending Service .	0.016
CSF39	Children's Social Work Youth Offending repayment / claw back.	(0.100)
CSF52	Inflation Management - cash limiting a range of budget within the Directorate.	0.166
CSF53	Vacancy Management to offset pay award and living wage.	0.418
		1.155

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