

NEW CHILDRENS PARTNERSHIP ARRANGEMENTS

Report of the Chief Officer for Children's Services

Please note that the following recommendations are subject to consideration and determination by the Committee before taking effect.

Recommendation: that the Board notes the new children's partnership arrangements and considers any potential synergies between the work programme of Health and Wellbeing Board and the children's delivery plan.

~~~~~

### **Background/Introduction**

In May 2016 the government published the [Wood Review of Local Safeguarding Children Boards](#) (LSCB). The review recognised some of the challenges and limitations of LSCBs and made a series of recommendations to transform children's partnership working. The recommendations were all accepted by government and enacted through the Children and Social Work (CSW) Act which was granted Royal Assent on the 27<sup>th</sup> April 2017. Detailed revisions to existing national guidance and regulation in order to implement the CSW Act will follow.

In Devon we have decided to become early adopters of the Wood review.

Devon's existing children's partnership structures – the Devon Safeguarding Children Board (DSCB) and the Children, Young People and Families Alliance (the Alliance) - have been reviewed and a new streamlined partnership structure has been developed. The restructure seeks to strengthen partnership working in Devon, address the weaknesses identified locally and nationally and to do away with overlapping structures by merging the functions of the DSCB and the Alliance. The new structure incorporates the statutory requirements for Devon to have an LSCB.

Partners are taking the proposed changes through their respective governance systems. DCC has recommended to Cabinet that DCC's statutory safeguarding arrangements are discharged through the new arrangements.

The changes capture both the spirit and the detail of the Wood Review and its recommendations. The main changes include;

- Assign stronger leadership responsibility to three key partners, health, police and local authority. Responsibility previously has rested with the local authority.

- Separate more clearly the coordination and monitoring functions of LSCB and deploy the role of the independent chair purposefully in monitoring and quality assurance, locating the coordinating function with the statutory Director of Children's Services
- Locate responsibility for all children within the partnership, balancing well-being (universal), safeguarding (targeted) and protection (specialist).

The new partnership, which will be called ***The Devon Children and Families Partnership***, will be operational from 1<sup>st</sup> July 2017. The partnership executive will have its first meeting on 19<sup>th</sup> July 2017. A new Children Plan will be developed during the course of 2017 to set the priorities for the new partnership. In the interim a one year delivery plan has been adopted by the partnership (see Appendix 1).

### **Conclusions**

Stronger and more effective partnership improves outcomes for children and will provide evidence to support the judgement that leadership and governance of children's services in Devon is good.

JO OLSSON  
Chief Officer for Children's Services

## Appendix 1

### Delivery Plan for Devon's Children's Services

March 2017- 2018

#### 1. INTRODUCTION

1.1 The future of Devon rests with its children and young people. Devon's future prosperity, success and ultimate sustainability depends upon the education, health and wellbeing of our children and young people today. Children, young people and families are therefore at the heart of the ambitions of the Devon Children and Families Partnership<sup>1</sup>. It is only by working together effectively that we can realise the potential of our children and young people and build a sustainable future for Devon.

1.2 We have high ambitions for our children and young people and high expectations of schools, colleges, settings and services. We want all children in Devon to have the best start in life and, as they grow into young adults, we want them to have good routes into education, employment and apprenticeships that enable them to stay in Devon and lead fulfilling and happy lives. Our principal focus is always on the child.

1.3 The purpose of this document is to outline the delivery plan for Children's Services in Devon 2017-2020. The delivery plan details how the strategic vision set out in [My Life, My Journey](#) will be operationalised in Devon. The delivery plan also underpins the "Children and Young People" priority in the [Wider Devon Sustainability and Transformation Plan \(STP\) and](#) the "Preventing and Deterring Crime" priority along with

---

<sup>1</sup> "The Devon Children and Families Partnership" is the name for the new children's partnership structure in Devon that follows the merge of the functions of the Devon Safeguarding Children Board (DSCB) and the Children, Young People and Families Alliance.

the “Protecting People who are at risk of abuse or who are vulnerable” priority in the [Police and Crime Plan 2017-20 for Devon, Cornwall and the Isles of Scilly](#).

1.4 The My Life, My Journey strategy will be revisited in late 2017 with a view to update the strategy by mid-2018. The delivery plan and the revised strategy is the responsibility of the Devon Children and Families Partnership.

## **2. THE CASE FOR CHANGE**

2.1 Devon must find a new way to deliver children’s services. The need for children’s services has increased significantly as has the complexity of need. Simultaneously the resources available to meet need have reduced significantly.

2.2 We must change the way we do things in order that we can continue to meet the needs of children and families in our communities effectively and sustainably. We do not intend to lower our aspirations. We intend to deploy the very significant resources we have at our disposal purposefully to maximise the impact we are able to achieve.

2.3 We want children, young people and families in Devon to experience professionals who are working with them to find solutions that build on their strengths and that deliver the best outcome for the individual child, young person and family. We want children, young people and families to experience professionals that intervene when needed, before problems have escalated and crisis has set in. We want to move away from episodic care to a responsive, committed model that focuses on getting the right outcomes for individual children and young people. Through this delivery plan we are setting the direction of travel for all work with children, young people and families in Devon and thereby ensuring that the whole system, seamlessly, is pulling in the same direction.

2.4 There are five key shifts we need to make. The first of these is moving to **asset or strengths-based practice**. For too long we have been focused on what people can't do, not on what they can. We have had a paternalistic approach that assumes experts know best and which has been over-focused on risk, without sufficient attention to strengths and assets. As a partnership we are committed to implement the [RESILIENCE FRAMEWORK](#) into all our work with children, young people and families<sup>2</sup>.

2.5 A strategic approach to community engagement is being developed alongside this delivery plan. This aims to help communities build stronger relationships, and become more empowered and resilient.

2.6 The second key shift is **a strengthening of our Early Help system** in Devon. Our current system is out of balance. Too many children come into the children's statutory system and specialist services (such as CAMHS). We see this in Social Care, in Special Educational Needs and in CAMHS. There is good evidence to show that it is detrimental for families to be escalated into a statutory system when they don't need to be.

2.7 Strengthening Early Help will result in more children, young people and families being supported at an earlier stage and consequently a reduction in children that are escalated into statutory and specialist services. For this to happen higher levels of complexity, risk and need will be managed within the universal and targeted parts of the system than is currently the case. This demands that we better deploy specialist services to support and build capacity in targeted and universal services. Our commitment to strengthening Early Help extends the first objective of the Early Help Strategy 2013.

*'The overall aim of Early Help is to build resilient families who are able to find their own solutions to challenges and create a happy, healthy home'* is extended to include *'and to prevent unnecessary escalation into statutory service'*

---

<sup>2</sup> See hyperlink and <http://www.boingboing.org.uk/> for further information re. the Resilience model.

2.8 In order to achieve this, we have to THINK FAMILY and understand that the key to the child achieving good outcomes is very often held by the parents (the younger the child, the more that this is so) and it is only by working in partnership with parents that we can lever change for children.

2.9 Our Early Help system is described in the [Child Journey](#) and is [principle-based](#).

2.10 The third key shift that needs to happen in Devon is **a locality based model** with integrated systems and services rooted in the community. When needed, we want expert resources available where the family is, joining the team of professionals around the family and child. In this way we intend to build capacity, competence and confidence. As a partnership we have agreed<sup>3</sup> that local partnership working is at the core of a strong and effective children's services system. Devon County Council (DCC) is taking steps to restructure our services around 4 locality footprints. Partners are committed to aligning service planning and delivery to the Local Authority boundaries wherever possible.

2.11 The fourth shift that needs to happen is **an integration of systems and services**. We want our whole system to be joined-up and we want services and functions to be delivered by co-located, or virtually co-located, locality-based teams who take a whole systems approach. This is particularly important for children and young people (and their families), who have special educational needs and/or are disabled. We want children and their families to be able to access support that responds to their specific situation rather than them battling the boundaries of separate services that address their issues partially and in a piecemeal fashion. We don't want children and their families to experience that the different parts of the system they interact with are unable to communicate and cooperate. Concretely this will mean that functions currently

---

<sup>3</sup> Devon Children, Young People and Families Alliance Executive meeting on the 19<sup>th</sup> July 2016

delivered by Babcock, Virgin Care Limited and other providers as well as DCC and other statutory partners will in future be integrated and delivered through locality based teams and partnerships.

2.12 The final key shift is **bespoke and personalised services**. We want services to be responsive, flexible and agile. This means that services will be less shaped by specifications and traditional professional demarcations and more by family needs. We want Devon children and families to experience that services are co-produced with them and creative solutions are sought to fit their particular situation. Where appropriate this will mean using individual budgets to fit the particular situation and background of children, young people and their families.

2.13 These key shifts build upon the [Partnership Principles](#). They reflect deep cultural change and a transformational approach to service delivery and outcomes for children; marginal improvements will not be sufficient to achieve our ambitions.

2.14 The key shifts are designed to enable us to deliver services in a responsive and flexible way that ensures no child falls through the gaps that have historically existed between different organisations and defined service areas. We intend to empower our workforce to work with families to get the right outcomes by doing the right things.

### **3. CONTEXT**

3.1 There are approximately 160.000 children and young people in Devon and this is set to rise to 171.000 by 2037. On average Devon children and young people are doing well when measured against national benchmarks such as physical health, exam grades and crime levels. However, this average masks inequalities that some children and young people in Devon live with. Many do not enjoy the high quality of life for which the county is renowned; parts of the county experience much higher rates of poverty and ill health than others. Rates of anxiety and

depression and self-harm are high compared to the national average, and some children are at risk of harm or neglect<sup>4</sup>. Many young people do not see a prosperous future ahead of them in Devon and feel that their access to good jobs, public transport and affordable housing is limited<sup>5</sup>.

3.2 Childhood experiences lay the foundations for later life. Growing up in poverty can damage physical, cognitive, social and emotional development. The impact of child poverty is increasingly well researched with evidence pointing to increased child mortality, low birth weights, child accidental deaths, teenage pregnancy, poor housing conditions, lower educational attendance and attainment and youth suicide. Approximately 14% of the local authority's children are living in poverty, and the proportion of children entitled to free school meals is as follows:

- in primary schools, 13% (the national average is 15.2%)
- in secondary schools, 12% (the national average is 14.1%).

3.3 Children and young people from minority ethnic groups account for 7% of all children living in the area, compared with 30% in the country as a whole. The two largest minority ethnic groups in the area are Any Other White Background and mixed ethnicity (White and Asian). The proportion of children and young people with English as an additional language:

- in primary schools is 4% (the national average is 20%)
- in secondary schools is 3% (the national average is 16%)<sup>6</sup>.

---

<sup>4</sup> "My Life, My Plan" Children's Alliance Plan 2015-2020

<sup>5</sup> The Community Insight Survey 2015

<sup>6</sup> Data sources; Child Poverty: HMRC 2014 – snapshot as at 31 August 2014 – 152 Local Authorities in England; FSM – local data from Autumn 2016 School Census (Oct 16), national data DfE SFR20\_2016 Schools, Pupils and their Characteristics: January 2016 (national data - primary schools includes nursery schools) and Ethnicity and First Language – DfE SFR20\_2016 Schools, Pupils and their Characteristics: January 2016



3.4 In addition Devon's coastal areas and agricultural areas have transient populations due to seasonal work. There are a significant number of children from other authorities who are looked after in Devon<sup>7</sup>.

3.5 We are committed to **promoting equality and to closing the gaps in outcomes** for vulnerable children. In particular we want to ensure that our children in care, care leavers, disabled children, those experiencing domestic abuse or substance abuse, children and young people who are lesbian, gay, bisexual, transgender and questioning (LGBTQ), black or minority ethnic (BME) children, children of lone parents, teenage mothers and pregnant teenagers and children from low income backgrounds experience equality of opportunity. We intend to promote equality by making our services fit the particular situation and background of the children and young people we work with and by recognising diversity, barriers and inequality as a whole system.

3.6 The priorities identified in section 6 of this document are based on the full population analysis in the [JSNA Devon Overview Report 2016](#), workshops and partnership meetings that have taken place in Devon over the last 12 months, as well as numerous consultations and conversations with children, young people and parents/carers.

#### **4. THE POLITICAL CONTEXT**

4.1 The national political context for children's work is one of change and uncertainty. All statutory partners working with children are faced with significant change to the legislative framework they operate within, including:

- \* Major reform of the statutory framework for education with significant implications for schools and local authorities,

---

<sup>7</sup> [Ofsted Inspection report 2015](#)

- \* Major structural change of the local health and care landscape being implemented through Sustainability and Transformation Plans (STP),
- \* An anticipated restructure of the local duty to cooperate with clear leadership responsibilities assigned to the Police, Local Authority and Health (Wood's Review).
- \* Children's Social Care reforms that will have implication for how children's social services are delivered in the future.
- \* SEND reforms
- \* Significant resource constraints

4.2 Uncertainty also surrounds the future of major agendas such as devolution, benefit reform, the apprenticeship scheme and continued fiscal restraint. Added to this is the uncertainty brought on by the UK referendum on EU membership. These moving agendas will have implications for the context within which Children's Services are delivered at a local level.

4.3 A new Council administration will be elected in May 2017. All political parties have been consulted in the development of this delivery plan.

## **5. GOVERNANCE**

5.1 Devon is an early adopter of the reforms to partnership proposed in the Wood Review of Local Safeguarding Children Boards (LSCB). Devon has a Children and Families Partnership responsible for delivering the children's services outlined in this delivery plan which includes the coordinating functions of a Local Safeguarding Children Board (LSCB). The Partnership has an independent Quality Assurance function which incorporates the monitoring functions of LSCB.

5.2 The Devon Children and Families Partnership consists of a central Commissioning Executive that drives forward the delivery of this strategy, an Expert Reference System (including Experts by Experience) that will set the yearly priorities for the partnership and an independent Quality Assurance function that will scrutinise the delivery of services at the frontline to test the impact on outcomes and the experience of children and families. The independent chair of LSCB will lead the Quality Assurance function and co-chair the Executive.

The Commissioning Executive, the Expert Reference System and the Quality Assurance function are founded on a strong locality structure organised into the following 4 locality footprints:

- Northern Devon (North Devon & Torridge)
- East/Mid Devon
- Exeter
- Southern Devon (Teignbridge/West Devon & South Hams)

The partnership will continuously be sense-checked against the lived experiences of Devon children, young people, their families and carers who will give their views through an Expert by Experience structure.

5.3 Geographical boundaries within the partnership are not coterminous. The local authority is establishing 4 locality footprints that are coterminous with district councils in order to better align with housing and Community Safety Partnerships. This will work well for primary schools which tend to serve local communities but be more complicated for secondary schools and Multi Academy Trust arrangements can add further complexity. Health boundaries have historically been aligned around GP practices and acute hospital catchment populations, while the Police are organised across a much larger footprint spanning four Local Authorities in the South West. Partners are committed to aligning service planning and delivery to the Local Authority boundaries wherever possible.

5.4 We are early adopters of the [Wood's review](#) and through the Devon Children and Families Partnership we are implementing the greater flexibility given to local areas to streamline partnership working and to do away with overlapping structures.

5.5 The three key partners, the Local Authority, the Police and Health, are identified in the Wood's review to drive multi-agency arrangements across the three domains of **well-being, safeguarding and protection**. We have identified priorities for each of these domains and outlined the actions that need to be taken in order to achieve these priorities. Families don't sit neatly or separately under our administrative domain headings of well-being, safeguarding and protection. The system has to be dynamic and responsive if it is to avoid the pitfalls of silo'ed working.

## 6. PRIORITIES

6.1 This delivery plan does not set out everything that all partners will do during 2017/18. Its purpose is to sharpen the focus and drive the improvement in order to deliver good children's services in Devon<sup>8</sup>. Good children's services are characterised by systemic coherence where strong and effective partners deploy their resources and capacity together to best meet the complex needs of families, targeting as required to achieve the greatest impact for the kinds of vulnerabilities families have and the kinds of challenges they face.

6.2 Health are the lead agency in relation to **wellbeing** which covers all aspects of physical, emotional and sexual health as well as education and captures public health as well as health service delivery. In Devon we have set the following priorities for wellbeing:

### 6.2.1 A good school for every Devon child, and every child ready for school

Devon already has a very high percentage of children attending a good or outstanding school or early years setting and Devon children achieve a good level of development pre-school and achieve well in primary and secondary school. Very successful strategies have

---

<sup>8</sup> Ofsted, CQC and HMIC are charged with assessing the quality of children's services.

been embedded to achieve this. However, there are groups of children, whose needs are less well met, pre-school and in school; these are often children with emotional, behavioural, social and/or communication difficulties. These groups of children will be our priority in this plan, this is captured in the actions related to special educational needs and disabilities (SEND) see below. We intend to build upon the excellent initiatives already in place to strengthen our response to those children who are not necessarily thriving in schools, **electively home educated children, those with anxiety-based school avoidance and those excluded or at risk of exclusion.** The actions will be set out in the Babcock annual delivery plan for 2017/18 and are not reproduced here.

Partnership Lead: Beverley Dubash, Babcock International

#### **6.2.2 Achieve good outcomes for children and young people with SEND**

A SEND peer review in November 2016 confirmed our self-assessment. There is some outstanding and innovative frontline practice in settings, schools and services but the whole system is not sufficiently joined up. We have the SEND Improvement Board in place and our SEND strategy is out for consultation. **We will implement the SEND Improvement Plan** where actions are set out and they are not reproduced here.

Partnership Lead: Julia Foster, DCC SEND Strategy Manager

#### **6.2.3 Promoting the health and wellbeing of children, young people and families and reducing inequalities in health.**

The health outcomes for children, young people and families within Devon have improved greatly over the past 20 years, with reductions in alcohol and smoking rates in young people and an increase in fruit and vegetable consumption. However levels of obesity and excess weight and physical activity have been more stubborn and remain relatively fixed over recent years. More needs to be done to address the health inequalities which are still apparent with lower levels of breastfeeding and higher levels of smoking, including

smoking in pregnancy, obesity and poor diets in more deprived areas. Giving every child the best start in life is crucial to reducing health inequalities across the life course. Ensuring preventative programmes and early intervention for pregnant women, babies, children, young people and families is a priority.

The better alignment of services that are core to the Early Help system, public health nursing, children's centres, early years settings and schools will be achieved through the **re-commissioning of children's centres and public health nursing services**. The actions are set out in the service plan for Early Years and Child Care and in the delivery plans for Public Health.

Partnership Leads: Claire Rockliffe, DCC Senior Manager Early Years and Childcare Service & Becky Applewood, DCC Public Health.

A key focus of activity for the partnership is the **re-commissioning of child health services for children with additional needs and for CAMHS**. The Procurement Board, under the direction of the Joint Commissioning Board, has developed and will implement the project plan.

Partnership Leads: Simon Tapley, Chief Operating Officer/ Dep. Chief Officer, South Devon and Torbay CCG, Caroline Dawe, Deputy Chief Operating Officer, North and East PDU & Fiona Fleming, DCC Commissioning Manager Children and Families

**Identifying and meeting the health needs of children in care remains a priority** and an area where accelerated improvement is still needed. Actions related to children in care are captured in the Children's Social Care Improvement Plan.

Partnership Lead: Vivien Lines, DCC Head of Children's Social Care

#### 6.2.4 Significant improvement in the emotional health and wellbeing of children and young people

Nationally, a third of children and young people are reporting symptoms of anxiety and/or depression. Around one in 10 children in Devon has a mental health disorder but only a small proportion are in contact with mental health services. The rate of self-harm admissions for 10 to 24 years olds is higher than for similar local authorities and is much higher in deprived areas of the County.

Devon has put in place Early Help for Mental Health with universal on-line access for children and young people and targeted face to face services. Good progress has been made to strengthen access to specialist CAMHS and to implement an assertive outreach approach to prevent acute admissions. The Police and Crime Commissioner is seeking the further development of services to help children and young people who are the victims of serious crime to overcome trauma through the provision of timely therapeutic care. A more innovative response to the needs of children coming into care has been developed and will be fully implemented in 2017/18.

The Partnership has committed itself to **implementing a Resilience Framework** across Children's Services. The South Devon and Torbay CCG will lead this piece of work. The CCG's delivery plans for 17/18 will include relevant actions.

Partnership Lead: Louise Arrows, South Devon and Torbay CCG.

We have identified three priority areas for system re-design in 17/18; **short breaks for disabled children, a better response to children with communication, speech and language needs and for those with neuro-developmental needs, autistic spectrum conditions.** The actions for these priorities are captured in the project plans of the Strategic Partnership Forum (SPF). SPF developments read across into the SEND Improvement Board.

Partnership Leads: Fiona Fleming, DCC Commissioning Manager Children and Families, Marian Martin, DCC Senior Manager & Sharon Matson, NEW Devon CCG.

6.3 Police are the lead agency for **safeguarding** which covers domestic and sexual violence, youth violence, gangs and extremism-radicalisation. Safeguarding also includes initiatives designed to prevent poor outcomes for vulnerable groups of children and young people. Early Help is at the heart of safeguarding, preventing escalation into statutory service and ensuring all children have the best possible opportunity to achieve optimal outcomes. In Devon we have set the following priorities for safeguarding:

#### **6.3.1 Strengthen Early Help practice in universal and targeted services**

Our position as reported in the 2015 Ofsted report was not strong and evidence suggests it has further deteriorated. We will not achieve good children's services without a good and effective multi-agency Early Help offer to children and families. Accelerated improvement is required. **The review of MASH, Early Help triage and the Virgin Single Point of Access (SPA)** that we will undertake in 2017/18 is designed to make the system work for families rather than for professionals and organisations. Plans for this area are set out in the Improvement Plan for Children's Social Care.

Partnership Leads: Vivien Lines, DCC Head of Children's Social Care, Andrea Morris, DCC Senior Manager, DCC Locality Director with lead responsibility for Early Help.

**Improved data sharing and information sharing governance and protocols** are required so that practice in Devon matches that of the best Local Authorities is a priority. **Actions for this area are still to be developed and will be picked up in the social care improvement plan.** **Developing Early Help practitioners' competence and confidence** is a key strand in our workforce development plan.



Partnership Leads: Dawn Stabb, DCC Head of Education and Learning, Vivien Lines, DCC Head of Children's Social Care, & DCC Locality Director with lead responsibility for Early Help.

Early identification of **vulnerable children and young people who are at risk of going missing** is a key area of focus. A piece of work is taking place to ensure a common and clear understanding of the issue and drivers for people, in particular children who go missing , and the support services, prevention and help needed for vulnerable people. A strategy is being developed and implemented to reduce the levels of vulnerable missing children and to ensure that the children's system becomes better at managing the risk of these children and young people without unnecessary escalation to statutory services.

Partnership Lead: Jim Gale, Partnership Superintendent, Devon and Cornwall Police

### **6.3.2 End domestic violence and sexual abuse**

Domestic violence and abuse affects many families in Devon. Children and young people were present in 36% of incidents reported to police in 2013-14. The consequences can be profoundly harmful for children and this issue alone drives a huge amount of activity in all public services. Risks of harm to children are compounded when domestic violence is accompanied by mental ill-health and or alcohol/substance misuse and/or parental learning difficulties. This is often referred to as inter-sectionality. Survivors of childhood sexual abuse intra or extra-familial, are over-represented in homelessness, incarceration, mental health services, drug and alcohol services, domestic violence and so improving the quality of our response to **Child sexual abuse and child sexual exploitation remain priorities for 17/18**. Actions are captured in the CSA and CSE sub-groups and in the social care improvement plan.

Partnership Leads: Vivien Lines, DCC Head of Children's Social Care

The Safer Devon Partnership has the overarching responsibility for the implementation of the Domestic and Sexual Violence and Abuse (DSVA) strategy, and it is here that the detail of all actions will be co-ordinated. Children's services will make appropriate contributions to the strategy and associated implementation plan. The **children's workforce will strengthen its responses to children and families experiencing DSVA and develop tools to support practice development.** Actions are captured partly under the broad workforce development heading and in relation to the development of tools, in the Social Care improvement plan.

Partnership Leads: Vivien Lines, DCC Head of Children's Social Care

### **6.3.3 Ambitious routes into employment, education and training, strengthening transitions so vulnerable young people don't drop out, building a strong and effective apprenticeship offer**

A job and a sense of positive prospects offer huge security and resilience for young people. Most young people, with support from their family, friends, school and college will transition successfully into adulthood without any additional help. Vulnerable young people need some scaffolding in place to support that transition and it needs to be in place early enough and with enough consistency to tolerate some missed opportunities and false starts. A strengths-based practice culture that supports independence, choice and control rather than dependence needs to be further developed in Devon. **The development of a strategy for this area will be led by the Head of Education and Learning.**

Partnership Leads: Dawn Stabb, Head of Education and Learning

**Transitions** for some vulnerable children are captured under SEND and for care leavers are captured in the social care improvement plan reporting to the Corporate Parenting Board.

Partnership Leads: Julia Foster, DCC SEND Strategy Manager & Marian Martin, DCC Senior Manager

**Strengths based practice that supports independence choice and control** is captured under workforce development.

6.4 The local authority is the lead agency for **protection** which covers all forms of abuse, physical, emotional, sexual and neglect. In Devon we have set the following priorities for protection:

**6.4.1 Teenagers at the threshold of care are supported through a multi-agency assertive outreach response**

Our response to teenagers in difficulties needs to be further strengthened and this depends upon managing risk and complexity in the community, deploying the expertise of a multi-agency assertive outreach function into the team around the child to achieve the required outcomes ensuring a sustainable support system around the young person and family is in place.

Partnership Leads: Vivien Lines, DCC Head of Children's Social Care, Marian Martin, DCC Senior Manager & DCC Locality Director with lead responsibility for Safeguarding.

This priority also addresses **placement stability for children in care**, where Devon's performance needs to be strengthened. We are too quick to move a child when the going gets tough, and it will often get tough for children in care who often carry the burdens of unresolved trauma derived from childhood abuse and neglect.

Partnership Leads: Vivien Lines, DCC Head of Children's Social Care & DCC Locality Director with lead responsibility for Children in Care.

**6.4.2 A strengths based model for child protection conferences** has been introduced; this will be fully implemented in 17/18 and embedded thereafter. To be successful the practice model has to be embedded throughout the child protection journey and in all aspects of social work and multi-agency child protection practice.

Partnership Lead: Jean Kelly, DCC Senior Manager

**6.4.3 Achieve good outcomes and consistently good practice across Devon for children, young people and families in contact with the Council's children's services (early help, children in need, child protection, children in care and care leavers)**

In 2015 Children's Services were judged to require improvement to be good and services for care leavers were judged inadequate. The 2016/17 improvement plan is in place and will be refreshed for 2017/18. A self-assessment has been completed and a mock unannounced inspection has been commissioned. These will provide the platform for the next phase of the improvement journey.

Partnership Lead: Vivien Lines, DCC Head of Children's Social Care

## **6.5 Workforce Development**

The following priorities for multi-agency workforce development have been identified and will inform the planning around workforce development for 2017/18

- Leadership of multi-agency and multi-disciplinary practice, systems and services
- Resilience and strengths based practice (including child protection conferences)
- The principles of personalisation, independence, preparation for adulthood, and excellence in EHCPlanning
- Working with men and a new approach to DVSA
- Risk management; a new approach to working with teenagers

- Managing risk, need and complexity in Early Help
- LGBTQ and Race/Culture awareness

**Final version 07.04.2017 as signed off by joint meeting of Alliance and DSCB executive boards on the 21<sup>st</sup> March 2017.**

