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	Moving Towards a cl				
		est support local areas in the change process based on local			
eaks down the component parts of a child	ks down the component parts of a children's trust way of working, highlighting where there are statutory expectations on local areas. Executive Summary				
Local Authority Herefordshire Council					
Local Authority					
Regional Change Adviser	12th September, 2005				
Date:					
Document Status:					
Local contacts who have con	Local contacts who have contributed to the completion of this document:				
Name	Role	Organisation			
Lorna Selfe	Change Team Manager	Herefordshire Council			
If not, which partners have agreed the	· · · · · · · · · · · · · · · · · · ·				
		s Strategic Partnership? Yes			
If not, which partners have agreed the	e completed document?				
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If not, which partners have agreed the Name Areas of new emerging practice to	e completed document?	Organisation			
If not, which partners have agreed the Name Areas of new emerging practice to	be highlighted across the whole system ared more widely):	Organisation			
If not, which partners have agreed the Name Areas of new emerging practice to (including tools which could be sha	be highlighted across the whole system ared more widely):	Organisation			

Workforce development requires funding at the local level. Local Area Agreement is seen as an enabler.

Section 2	Managing Change				
Q1	How is the local area managing the change process?				
	Has a project plan with realistic timescales and targets been agreed, if not by when is this expected? How is the plan being reported against and reviewed? What are the accountability mechanisms for monitoring implementation of the project plan? What arrangements have been made to both manage and sustain the change process? What communication mechanisms support the change process? What has been done to ensure that all staff are effectively consulted and are engaged in the change process?				
	Area Maturity: Mature (select relevant maturity level)				
	Comments:				
	A Change Team has been established in the Council to oversee the change process for the area. There is a project plan which is being managed through Prince 2. The team reports to the Director of Children's Services. A new Children and Young People's Partnership Board has been formed and a stakeholder day in Spring 2005 agreed the main priorities. A strategic vision has also been developed tasked with the development of the Children and Young People's Plan. Wider communication is managed through a dedicated newsletter. At a strategic level officers meet on a regular basis and minutes are forwarded to the Partnership Board. All staff are invited to briefings on the change process. These briefings are also available to partner agencies and take up has been very positive.				
Q2	What measures has the authority put in place to maintain and improve its existing statutory service provision (e.g. safeguarding children, looked after children services, school attendance, special educational needs, services for children in need, adoption services) while it manages the integration of services?				
	To what extent is effective risk management operating which identifies risks to children, young people, partner organisations, staff, budgets, other resources and service effectiveness? What evidence is there of it being successfully applied?				
	Area Maturity: Mature (select relevant maturity level) Comments:				
	The new leadership team under the DCS will continue to build on current planning, risk management, and performance monit arrangements that are already in place. The APA dataset, alongside existing processes, will be used to shape, monitor and imp performance. The Children's Service Plan in the Council is the performance management document. An external evaluation of Child Concern Model is in progress and is due to report in Autumn 2005.				
Q3	How is the local area ensuring that it meets its diversity and equality requirements in the planning of integrated services for children and young people and in the development of the local workforce?				
	Comments: Each service in the Council is conducting diversity impact assessment with 60% of assessments already completed. The wide range of groups and agencies represented on various partnership boards have undertaken an analysis of need. These are being coordinated to inform the Children's and Young People Plan. The Council has an established diversity programme for key managers.				
Q4	What support will the local area require in delivering the change programme?				
	Has recent guidance helped? Which and how? What else can be done nationally or regionally to support local change?				
	Support and intelligence from other authorities including best practice signposting.				
	Top issues in relation to managing change				
	Creating a new culture across the area and the implementation of a robust workforce development programme.				

Section 3

Q5

Integrated Front-Line Delivery

The Children's Workforce Strategy was published for consultation on 1 April 2005, alongside the Common Core of Skills and Knowledge Prospectus. We expect the strategy will have been the subject of local discussion and debate, in addition to the nationally-organised regional consultation events that have been held in June and July. We expect the Common Core to be used as a basis for bringing practitioners together, thus enabling greater understanding of the benefits of multi-agency working. The lead professional role ensures that children, young people, parents, carers and families who have additional and interlinked needs will achieve better outcomes and have a better experience and engagement with services through the provision of integrated support through one practitioner acting in a 'lead role'. Good Practice Guidance on lead professional and resources for managers and practitioners engaged in multi-agency working will be published in Summer 2005.

Workforce Development

What has the local area done to establish an understanding about the current workforce?

Is there an agreed process amongst partners for joining up recruitment activity, for example, has analysis been completed to identify particular recruitment difficulties, in terms of location, type of job, or pay pressure; has analysis been completed to identify recruitment strengths, which might be used to address difficulties elsewhere, such as through joint recruitment exercises?

Is there an agreed process for joining up workforce development activity, for example, cross-service training to embed the Common Core of Skills and Knowledge; opportunities for inter-professional learning; approaches to support multi-disciplinary working; agreement of a careers framework?

Is there an agreed process for developing leadership and supervision, for example, cross-service training to provide common understanding and ways of working; learning sets especially focused on development of leadership and supervision on multi-agency settings; programmes of succession planning, identifying future leaders?

Area Maturity: Early Stages/Developing (select relevant maturity level)

Comments:

A new Children's Services training and development officer is contributing to the workforce development strategy and has begun by identifying shared needs with partners in child protection. Workforce needs have not been collated across agencies at this stage. However, initial discussion have taken place regarding the key worker/lead professional agenda. There are opportunities for inter-professional learning. Opportunities for multi-disciplinary working are actively sought. PCT and Children's Services have a number of jointly funded or jointly located posts.

Q6 What plans are there for workforce development?

How is the local area addressing workforce development in the private and voluntary and community sectors? How is the local area addressing the workforce remodelling agenda in social care, youth services and the early years, learning from Schools Workforce remodelling and implementation of the NHS Agenda for Change?

How is the local area addressing workforce development and leadership issues arising from implementation of the Common Assessment Framework and Lead Professional?

What steps has the local area taken to engage with the local Learning and Skills Council, FE and HE partners to support their agenda?

Area Maturity: Developing/Mature (select relevant maturity level)

Comments:

This is being addressed in the Children and Young People's Plan along with other issues, such as information sharing, which require an integrated approach. The project group, formed regarding the NSF, will ensure there is an awareness raising programme across the multi-agency staff group and incorporates the ECM direction. Specific joint workforce plans are being developed to integrate services to children with disabilities and illness and a joint service manager has been appointed. Joint training is undertaken in child protection and in the development of the Herefordshire Child Concern Model. CAMHS has developed a multi-agency training programme. An area workforce programme is being developed in 2006/2007 based on the solid multi-agency training programmes.

Multi-agency working

What progress is being made to integrate services at the front-line?

How is the local area encouraging the integration of services at the front-line?

What services are being delivered through multi-agency working and what models are being used?

What progress has been made in linking universal services to more targeted and specialist provision?

What support / development is offered to leaders and managers of these services?

What challenges are the local area experiencing and what solutions are being considered to overcome them?

How has the impact of integration been measured e.g. is there evidence of more accessible services?

What successes has the local area had?

Area Maturity: Early Stages/Developing (select relevant maturity level)

Comments:

Q7

This has been incorporated into the vision and will be developed in line with Children's Centres and Extended Schools alongside a service hub model. Specific examples are the Greencroft Children's Centre, Leominster/Kington Sure Start, the CAMHS service, the Youth Offending Service and the Child Development Centre. Discussions have commenced between the PCT and the council regarding the development of a building that will allow the co-location of staff. The Change Team are involved in the identification of areas to be integrated. Services for children with disabilities and illness are to be integrated between health and social care. A joint service manager is now in post. Areas already identified for initial development include defining lead professional (key worker) roles, common assessment framework, single access point and information sharing.

What consideration has been given to the concept of a lead professional?

How is the local area using lead professional/ key worker models to ensure that the pathways for complex cases are integrated? How are they engaging front-line practitioners and their managers? What inter-agency systems of accountability are they developing and how will these be implemented? What challenges are they experiencing and what solutions are being considered to overcome them? What successes has the local area had and how have these been measured?

Area Maturity: Early Stages/Developing (select relevant maturity level)

Comments:

08

09

The lead professional role is well developed in the Child Concern Model. There are discussion between front line practitioners, their managers and schools about developing this role. There are also discussions with the PCT on the NSF key worker/lead professional interface.

Integrated services - children's centres

The government expects there to be up to 2,500 children's centres opened by March 2008. By March 2008 all children in the 30% most disadvantaged super output areas in the country should have access to a children's centre and there should be some outside the poorest areas as well. By 2010 there will be a children's centre for every community.

What progress is being made in developing children's centres and integrating early years services with wider children's services?

Is there a clear strategy in place, if not by when will this be produced?

Is there evidence of engagement with all partners in this strategy (including health, private, voluntary and community sectors and other providers, housing, transport, leisure)?

How are parents and carers being involved in the design of services?

How is work on children's centres integrated into the overall strategy for children and young people's services?

How is this being communicated with all settings, practitioners and governors?

How are LAs and local partners restructuring and reshaping to integrate service delivery in children's centres?

Are Business Support Officers involved in children's centre planning so that childcare places are sustainable?

Are there links being made with housing officers to ensure that children's centres are targeting the most disadvantaged children in temporary accommodation?

Area Maturity: Developing/Mature (select relevant maturity level)

Comments:

There are 3 Children's Centres in the county with a further 6 planned. All key partners are involved in their development and good progress is being made. The whole system/strategy is planned for consultation from September 2005. The work on Children's Centres will be integrated into the Children's and Young People's Plan. Consultation began at very early stages of the Sure Start initiative and has continued.

Integrated services – extended schools

The Extended Schools Prospectus issued on 13 June 2005 sets out a menu of extended services for primary and secondary schools together with funding of £680m over the next 2 years to help all schools become Extended Schools by 2010.

Q10 What progress is being made in developing extended schools?

How many are there in the local area (primary, secondary, special schools)?

What services are provided / what hours are they open?

Which multi-agency services are co-located in schools?

Is there a clear strategy in place based on need, if not, by when will this be in place?

Is there evidence of engagement with all partners in this strategy (including voluntary and community sectors and other providers, housing, transport, leisure, health)?

Are children's centres and extended schools being planned together and how is this work being embedded into the wider planning of children and young people's services? Is the local area using its network of School Improvement Partners to ensure that planning of extended services is informed by schools' self-evaluation?

Has the local area 'achieved' or 'understood' the benefits of locating their children's centres in or near primary schools so parents and carers can access services for all their children?

How are parents and carers being involved in the design of services?

Area Maturity: Developing/Mature (select relevant maturity level)

Comments:

There is an extended schools co-ordinator for Herefordshire. Extensive demographic studies have identified need and plans revolve round this analysis. There is a clear strategy with Children's Centres and Extended Schools together with co-located multi-professional teams (service hubs) being planned together as part of the vision in the Children and Young Peoples' Plan. All partners have been engaged through existing networks. Two schools have full service provision (one primary, one high) with 60% of all schools expected to be offering minimum core provision by March 2008. The three existing Children's Centres are located within or in very close proximity to the local primary school. This principle will be applied to the other centres wherever feasible. Parents and families have been involved through Sure Start.

Q11 What progress is being made in developing information, advice and support services for parents, carers and families?

What plans does the local area have for developing these services?

Are these services focused on age range, transitions or supporting parents, carers and families in the home?

What is being done to ensure effective engagement with all partners in the development of these services, including the voluntary and community sector and other providers?

How have children and young people, parents, carers and families been consulted (including those whose views are at risk of remaining unheard) in developing information, advice and support services?

What plans are there for using children's centres, extended schools and other outlets as local foci for information to parents, carers and families? Do these plans include utilising information available on the on-line directory for children and young people's services?

Area Maturity: Mature (select relevant maturity level)

Comments:

A Children and Families Resource Directory has been launched on the Herefordshire Council website as part of the Child Concern Model initiative. It is accessible to parents, families and professionals. There is a Child Information Service in early years, which involved partners in its development. The information available will be subject to ongoing changes as a result of restructuring in the future and the ECM agenda. Consultations with children and young people are numerous (including minority and hard to reach groups). These are currently being coordinated by the Council Communications Officer and Hear By Rights Standards are being considered.

Top issues in relation to integrated front-line delivery?

Consideration of service provision through service hubs and multi-agency teams

What further support does the local area require to deliver integrated front-line delivery?

National funding to deliver lead professional coordination and co-location of multi-professional support teams for localities in a very sparse rural area.

6

Section 4

Q13

Integrated Processes

Common Assessment

The Common Assessment Framework materials were published in April 2005. It is anticipated that implementation will happen in two stages, starting with a testing and development phase within early adopter authorities (April 2005 – 2006) and then roll-out in all remaining authorities by 2008. However, all authorities should be planning for its implementation now.

Q12 What consideration has been given to the implementation of the Common Assessment Framework?

Has the local area begun implementing the Common Assessment Framework, or are they using a local version of common assessment, or are they working towards implementation from April 2006?

Is there a project plan for implementing the Common Assessment Framework?

How are training needs being analysed and met e.g. is there multi-agency training?

How are practitioners being made aware of the Common Assessment Framework and its relationship to other specialist assessments?

What approach (technology-based or other) is proposed in the local area to ensure that practitioners can easily and appropriately create, update, store and share common assessment information?

Area Maturity: Developing/Mature (select relevant maturity level)

Comments:

The Child Concern Model, launched in May 2004, has close connections with the Common Assessment Framework. Herefordshire's multiagency response will compliment the CAF and aid implementation. An evaluation of the Child Concern Model is in progress and due to report by Autumn 2005. A lead officer has been identified to further this work. There is a robust training programme.

What progress is the local area making on information sharing?

Are there procedures in place to keep the online service directory data accurate and up to date?

Who (organisations, the public etc) has access to the online service directory?

How well do health, education, and social services practitioners understand when consent is and is not required? How was this understanding established?

What kind and how much multi-agency training on information sharing has taken place? What (if any) changes in practice have been observed as a result of this training?

What procedures are in place to monitor and evaluate the implementation of the information sharing protocols? What other arrangements have been put in place to support information sharing?

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Area Maturity: Developing/Mature (select relevant maturity level)

Comments:

Work in all these areas is being developed through the implementation of the Child Concern Model. Consent and information sharing continues to be a challenge. There is active discussion between the PCT and the Council regarding information sharing protocols. The development of a new NHS electronic system will be a challenge for other agencies in gaining access to information and developing a tracking system for the most vulnerable children. Work is continuing on the development of the social care client services tracking system (CLIX). The services are awaiting further guidance from central government in September 2005. As a wider agenda for integration is rolled out, the information sharing protocols will need to reflect these changes.

Top issues in relation to integrated processes

Development of the NHS system and access to information for other agencies

What further support does the local area require to deliver integrated processes?

Guidance, due to be issued in September 2005, will help local areas to understand how to deliver.

Section 5

Integrated Strategy

Joint planning

The Local Authority is required to produce a Children and Young People's Plan (CYPP) by April 2006 that is consistent with the plans of non-LA partners e.g. health plans. A key feature of the plan will be to present a strategic analysis of progress made in improving outcomes for all children and in implementing the agenda for change. The development of local, integrated workforce strategies will be an integral part of the CYPP. The CYPP should summarise local needs for children, probably drawing on audit activity by a number of partners. Needs assessment and mapping of available resources will be key to both informing the strategic plan and to consequent commissioning decisions taken by the local authority and its partners. By 2007 authorities will be undertaking their first review of the CYPP. This review and the self assessment required for Joint Area Reviews and Annual Performance Assessment will form one document.

Q14 What progress is being made towards joint planning?

Is there a CYPP in place already, if not when does the local area expect to have a joint plan completed?

How has the local area developed a clear and realistic vision around outcomes for all children and young people, including disabled children and those with special educational needs and looked after children?

How is the local area ensuring that all staff understand the vision and how services will work towards it?

Are there robust delivery mechanisms in place for the shared vision?

What has the local area done to ensure that all partners, including those from the voluntary and community sectors and other providers, have been involved in the planning process?

To what extent have children, young people, parents, carers and families been effectively engaged (including those whose views are at risk of remaining unheard) at a formative stage of the preparation of the plan?

How does progress made on joint planning fit in with those partners' plans that do not form part of the CYPP?

Does the CYPP offer a clear account of how the local area will work together to deliver the NSF?

Area Maturity: Early Stages/Developing (select relevant maturity level)

Comments:

The Children and Young People's Plan is well developed and on target for April 2006. Herefordshire is working towards a first draft to be completed by November. The analysis of need is well developed and the Partnership Board have identified Herefordshire's priority areas. Consultations on the CYPP vision are being launched in the Autumn which will involve all partner agencies. Staff are kept informed through road shows and newsletters. Young people, parents and carers have already been consulted and further consultation around targets in the plan are scheduled.

Understanding the needs of the local area

A needs assessment is the basis for deciding the priorities and actions which will help to improve the five outcomes and supporting targets. The self assessment guidance for the APA and the JAR refers to current priorities and actions and their basis in an assessment of need. A local needs assessment should involve children, young people, parents, carers and families, communities, the private and voluntary sectors and practitioners.

Q15

How far has the local area progressed with a needs assessment?

Is a suitable level of data from many sources (including School Improvement Partners and schools) being gathered and analysed on a regular and systematic basis to provide a coherent picture of local needs?

Does the data support a needs assessment of particular groups of children and young people in the local area?

Is data gathered from the periodic assessment of contracts, SLAs and monitoring of in-house service provision?

How is the local area ensuring effective engagement with partners, communities, children, young people, parents, carers & families? Have existing services for children, young people, parents, carers & families been mapped?

Does the local area have an adequate qualitative and quantitative understanding of their baseline position and local need against the 5 outcome areas if not, what action is the local area taking to address this?

To what extent are issues of service provision in isolated areas and barriers to access being adequately considered?

Is the needs assessment of early years and childcare provision being monitored within local area planning so that it is undertaken regularly and consistently?

Area Maturity: Developing/Mature (select relevant maturity level)

Comments:

In January 2005 the IMPACT team (health/social care planning) worked with Connexions to map local need and translate the findings into the terms of the ECM and its 25 aims. This work will be progressed through the Children and Young People's Plan and will be used to produce a county wide commissioning strategy. Data from many sources has been gathered and analysed to determine local needs. This need analysis is ongoing and includes assessment of the needs of particular groups of children as well as demographic study of the geographical location of need. Services have been mapped through the joint area review template. A gap analysis is underway. The baseline position is understood and this will inform targets and the local area agreement. Co-located multi-professional teams will mitigate the effects of isolation and difficulties of access.

Q16 What progress is being made on market development and management?

Is there an effective dialogue with local providers (statutory, voluntary and private) and a strategy in place for developing and sustaining the local market so as to meet identified needs, including those for workforce development?

What arrangements are in place to ensure that all providers (including the voluntary and community sectors) have fair access of opportunity? Are there satisfactory arrangements to ensure that potential conflict of interest is avoided within the commissioning and procurement processes – including those where in-house officers may be providers as well as commissioners of services?

Is thought being given to the right levels for commissioning and purchasing decisions – whether they should be at regional or sub-regional (e.g. for high cost residential care) level; or at school cluster, children's centre, GP level etc? And to the processes involved in each case?

Area Maturity: Early Stages (select relevant maturity level)

Comments:

There is a very effective dialogue with local providers in the statutory sector (GP and school representation on the Partnership Board). There is full involvement of the voluntary sector on all major partnerships in addition to a local COMPACT with the voluntary sector. Sure Start has positive private and independent sector involvement.

8

Commissioning and pooled budgets

Q17

Q18

Q19

What percentage (in financial terms) of all services being delivered to children and young people in the local area are currently being jointly commissioned (as defined in the statutory guidance for the duty to co-operate)?

Are there specific people or teams dedicated to joint commissioning?

To what extent does the local area feel that it needs additional skills or experience to undertake work on joint commissioning? Are children, young people, parents, carers, families and the community involved in decisions on joint commissioning? What flexibility does the local area have to commission for preventive services? To what extent are contracts and SLAs increasingly based on outcomes?

Area Maturity: Early Stages/Developing (select relevant maturity level)

Percentage of jointly commissioned services being delivered: Under 1% %

Comments:

Health, Education and Social services have a process of joint provision through a 'virtual pooled budget'. This is now the second year of implementation and the aim is to develop a joint commissioning approach. Herefordshire is also part of a multi-agency West Mercia group (Herefordshire, Worcestershire and Shropshire) to jointly commission residential provision for a specific group with particularly complex needs which have been identified by the three authorities as an area for concern. The 'consortium' have gained agreement from the 'choice protects' task force to get support in developing this initiative. An example of pooled budgets in Children's Services is Community Equipment (Section 31) . Further developments will be addressed in the Children and Young People's Plan.

What progress has been made on pooled budgets and the pooling of other resources to support cooperation between partners?

For which services are budgets or other resources being pooled already?

What proportion of current spend, on children's and young people's services are actually being pooled?

Are there plans to pool other budgets and/or other resources?

If so, what stage are these at?

To what extent are there clear objectives set for pooling budgets?

What are the major barriers and what action is the local area taking to address them?

What use has the local area made of the support materials on pooled budgets on the Every Child Matters website?

Area Maturity: Early Stages/Developing (select relevant maturity level)

Comments:

There are a number of examples where equipment resourcing is undertaken jointly. There are also several areas where staffing is jointly funded e.g. Education Liaison Service, the Youth Offender Service, the Kite Centre (for children with disabilities), Learning & Skills Council, Child Development Centre, Police Family Protection Unit, Connexions, and the Hunderton Room (space in a primary school). Every opportunity is now being taken to pool budgets. The LAA will further these opportunities and enable additional freedoms and flexibilities.

Efficiency Targets

Sir Peter Gershon's review of public sector efficiency set out targets for efficiency gains across the public sector. These targets are for 2.5% efficiency gains year on year for the next three years starting FY 2005-06. Efficiency gains refer to either: providing the same outcomes whilst reducing resource input; or improving outcomes for a similar resource input. Gershon efficiency gains are mutually supportive with the Every Child Matters agenda.

What ongoing work is the local area doing to improve value for money across children's services?

Is the value for money work fully tied in with the Gershon efficiency gains? Are these gains being treated as part of the Every Child Matters agenda?

How is the local area ensuring that the quality of existing services is maintained?

Area Maturity: Early Stages/Developing (select relevant maturity level)

Comments:

The Herefordshire Council have identified a number of Gershon savings. Money saved through this process will be allocated according to priorities and in support of the ECM agenda. A second Local Public Service Agreement is in place and a Local Area Agreement is currently under negotiation.

Meeting the educational and stability needs of looked after children, wherever they are placed

Section 52 of the Children Act 2004 places a duty on local authorities to promote the educational achievement of looked after children. The duty will mean in practice that local authorities as "corporate parents" for looked after children will have to give particular attention to the educational implications of any decision they take about the welfare of any child they are responsible for looking after, including those placed out-of-authority. Consultation on draft guidance ended on 9 June 2005 and final guidance will be issued in Summer 2005. The duty came into force on 1 July 2005.

What is the local authority's strategy for working with partners to improve stability and educational outcomes for looked after children, including those placed out-of-authority?

Is there a strategy in place to implement the duty under section 52 of the Children Act 2004 to promote the educational achievement of looked after children, if not, when will one be in place?

What mechanisms are there for implementing it?

How is the strategy linked to the statutory guidance on section 52?

Are existing statutory responsibilities in relation to out-of-authority placements (e.g. notification) being met?

What steps are being taken to reduce dependence on distant out-of-authority placements (e.g. by developing an adequate supply of good quality local foster and residential care places)?

How are good outcomes (with the level of support needed) being secured for children who are placed out-of-authority?

Area Maturity: Developing/Mature (select relevant maturity level)

Comments:

Q20

The outcomes for looked after children, including the stability of placements, is a Children and Young People's Partnership Board priority and there has already been cross-agency work to identify ways of improving the educational achievement of this group. This area will also be described as a priority in the Children and Young People's Plan. There is a robust strategy contained within the Child Concern Model. There is an Educational Liaison Service (ELS) which has contact with every child in the looked after system. The ELS monitors the progress of looked after children and supports schools and social service staff. The Corporate Parent Group is provided with monitoring reports on the educational progress of looked after children. There is a Cabinet Member for Children's Services who scrutinises monitoring reports.

Top issues in relation to integrated strategy

Integration of front line delivery will strengthen monitoring and support mechanisms.

What further support does the local area require to deliver an integrated strategy?

Recognition that fluctuations in performance around this group are due very a small, statistically unreliable cohort rather than failure of provision.

Section 6	Inter-Agency Governance				
	Robust inter-agency governance arrangements are essential to drive the change processes and create the framework for new ways of working in local areas. The key elements of inter-agency governance arrangements will include effective leadership by the local authority; full engagement of all key partners (including private providers, the VCS, children, young people, parents, carers and families); clear accountability; and a shared vision to improve outcomes for children and young people.				
	Partnership Arrangements				
			nose under the duty to co-operate) at a strategic level to CT; Connexions; Learning and Skills Council and Youth		
Q21	To what extent are the partners listed above engaged in decision making arrangements contributing to the local				
	change programme (including Local Area Agreements where relevant)?				
	Have there been particular issues in engaging any of the partners? Is there evidence of effective relationships with each of the above? Are the partners being involved in the design of the children's trust governance arrangements? What steps have been taken to ensure effective links to Local Strategic Partnerships and the Children & Young People's Strategic Is the local area finding any issues around for example, accountability, or clarity of operating arrangements? What are these issue In two-tier authorities, how does the joint decision-making process work? How are any difficulties being overcome?				
	Area Maturity: Mature	(select relevant maturity level)			
	Comments:				
	Partnership arrangements are already identified as one of Herefordshire's strengths. A local Partnership Board for children and young peop been established and has already identified a vision and a set of priorities. There are clear links with the Change Team which is implementi local change agenda. A Local Area Agreement is in the draft stage and is closely involving the PCT. A variety of other partnership groups e within Herefordshire.				
Q22		e in northough in with the following	n mantu ave 2		
422	How is the local authority working in partnership with the following partners? What steps are being taken to ensure they are involved in the following areas: governance, workforce planning, needs assessment, joint planning and commissioning, work on processes? To what extent are arrangements in place to ensure that these bodies are engaged in a way that gets the most from the local diversity of experience and expertise? e.g. is effective use being made of representative bodies, including disability or religious bodies? How is the LA developing the capacity of voluntary and community organisations?				
(a)	Schools:	Area Maturity: Mature	(select relevant maturity level)		
	The local authority has ensured that all major partners are represented on the major partnerships within the county. Various groups exist including the Children and Young People's Partnership Board, the ACPC, SACRE and there are strong links with the West Midlands Consortium for Travelling Children. Schools have direct representation on the Children and Young People's Partnership Board. These ensure that joint planning and commissioning occur and also ensures that the diversity agenda and the ECM agenda is met. Extended Schools and Children's Centres have a considerable impact on this work.				
(b)	Health Services, including primary care practitioners:	Area Maturity: Mature	(select relevant maturity level)		
	The Children's and Young People 's Partnership Board and the Area Child Protection Committee, along with work conducted to implement the Child Concern Model, ensure joined up needs analysis and joint commissioning within Herefordshire. The Lead GP is a member of the Children and Young People's Partnership Board.				
(c)	Voluntary and Community Sector Organisations and other providers	Area Maturity: Mature	(select relevant maturity level)		
	Through The Alliance, the capacity of which has been enhanced to achieve the joint agenda, voluntary and community sector organisations are involved in all major partnerships and have been engaged.				

Q23 To what extent are children and young people involved/participating in the partnership?

How does the local area involve children and young people in decision-making about policies, strategies and / or services and monitoring and evaluation (e.g. through a youth forum or involvement of children and young people in partnership bodies)?

Is there a written policy or strategy for children and young people's participation in decision making etc and how is this being implemented, if not, by when will one be in place?

How does the local area seek to engage with hard-to-reach groups such as black and minority ethnic, disabled children and those with special educational needs, those for whom English is an additional language or looked after children and young people?

Which service areas (health, education, social services, youth services, recreation & leisure, criminal justice etc) does the local area find it most difficult to engage children and young people in the design, delivery and evaluation of?

What are the barriers that prevent or hinder the fuller engagement of children and young people in general, or in the context of particular services as described above?

Area Maturity: Early Stages/Developing (select relevant maturity level)

Comments:

There are numerous initiatives which have sought to involve children and young people in decision making and in service evaluation. There is now a well formulated project to coordinate these initiatives using Hear By Rights Standards. This work is scheduled to be completed by November to coincide with early drafts of the Children and Young People's Plan. There are a wide range of existing consultations that already inform the CYPP. School Councils are well advanced, alongside work on values education.

Q24 To what extent are parents, carers and families involved/participating in the partnership?

How does the local area involve parents, carers and families (including hard-to-reach groups) in the process of planning, delivery and evaluation of work around the change agenda for children and young people's services? e.g. consulting on the quality of service provision and the need for re-deploying family support services to meet needs more appropriately; auditing locally available family support services and promoting these to parents, carers and families as a preventative, universal offer)

What are the barriers that prevent wider engagement and how are these being overcome?

Area Maturity: Early Stages/Developing (select relevant maturity level)

Comments:

There are numerous individual service consultations with parents, carers and families which are currently being coordinated through a dedicated council officer. Consultations are an integral part of the work of Sure Start/Children's Centres, Children's Fund, PCT and Herefordshire's Family Centre. A major provider, NCH, involves families in looking at the outcome and efficacy of services.

Director of Children's Services & Lead Member

Ministers have said that they expect most local authorities to have appointed a DCS and designated a LM by 2006, and all LAs by 2008.

The statutory guidance on DCS makes it clear that there should be a single chief officer who has responsibility for children's education and social service functions and any health functions relating to children delegated to the authority by the NHS and who reports directly to the Chief Executive. Staff in children's education and social services should report to the DCS.

Has the local authority appointed a Director of Children's Services?

Is there a DCS in place?

Does he / she fulfil the requirements above? What structures have been put in place to support the DCS? What background is the DCS from? If there is not a DCS that fulfils the requirements, what other arrangements are in place? When does the authority plan to appoint?

Area Maturity: Mature (select relevant maturity level)

Comments:

A DCS has been in post since January 2005. Various structures have been implemented to support this including a Cabinet Member for Children's Services and a Change Team. The authority is Children Act compliant.

The LM should be a single elected member of the executive who, on behalf of the executive or council, has overall political accountability for children's education and social services, and any health functions relating to children delegated by the NHS. In authorities without executive arrangements, it is expected that the lead member will be the chair of a committee responsible for children's services.

Q26

Q25

Has the local authority designated a Lead Member?

Mature

Is there a Lead Member in place? Does he / she fulfil the requirements above? If not, are there other arrangements in place? When does the authority plan to designate a Lead Member?

Area Maturity:

(select relevant maturity level)

Comments:

The lead member was approved by Council in November 2004 and took up responsibilities in January 2005. The Cabinet Member for Children's Services is also the chair of the Corporate Parent Working Group. The Council is Children Act compliant.

Local Safeguarding Children Boards (LSCBs)

The purpose of LSCBs is to strengthen local arrangements for safeguarding and promoting the welfare of children. We expect all Area Child Protection Committees to grow and develop into LSCBs by April 2006. The following bodies will be included in LSCBs as Board partners: NHS bodies including Strategic Health Authorities, Primary Care Trusts, NHS Trusts and NHS Foundation Trusts; Police; Local probation boards; Connexions Service; Prisons in the area which normally detain children (this includes Young Offenders Institutions); Secure training centres; The Children and Family Court Advisory and Support Service (CAFCASS); District councils where they exist; Youth Offending Teams are also expected to participate as full members of the Board. We also expect that LSCBs will secure representation from the voluntary and community sectors and others such as schools.

Q27 Is an LSCB in place?

If not is a plan in place to ensure the ACPC develops into a LSCB by April 2006?

Has funding either been finalised or are discussions currently on-going?

If funding agreed, at what level and what are the contributions from the partners?

Has the ACPC/LSCB decided which other Board partners need to be included, in addition to those listed in the Children Act 2004?

Has the ACPC/LSCB either chosen a Chair for the LSCB or started the recruitment process? If chosen, is the chair the DCS, someone else from the LA, from another Board partner or independent?

Is there a clear view of how the LSCB will fit with the rest of the children's trust arrangements?

Area Maturity: Developing/Mature (select relevant maturity level)

Comments:

Following consultation, the Herefordshire ACPC set up a working group as an extension of the Standing Committee. The ACPC, in consultation with the DCS, will have a clear vision by Autumn 2005 of the future requirements and are intending full implementation by April 2006. The development of the Child Concern Model by the ACPC is an example of mature multi-agency working. A positive transition is expected to the new body. A paper has been presented to the Children and Young People's Partnership Board translating the ACPC into the Local Safeguarding Children Board and the proposed arrangements are supported.

Top issues in relation to inter-agency governance

What further support does the local area require to develop inter-agency governance arrangements?