

# **Local Authority Circular Health Service Circular**

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## **THE QUALITY PROTECTS PROGRAMME: TRANSFORMING CHILDREN'S SERVICES**

**2001-02**

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**For action by:** Councils - Common Council of the City of London, Chief Executive  
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# THE QUALITY PROTECTS PROGRAMME: TRANSFORMING CHILDREN'S SERVICES

2001-02

## Summary

1. Quality Protects is beginning to fulfil its aim – to transform services and outcomes for our most vulnerable children. Initially a three-year programme, Alan Milburn, the Secretary of State for Health, has now announced its extension to a five-year programme, running to 2004.
2. Quality Protects is the main means of achieving the Government's Objectives for Children's Social Services. Targets linked to those Objectives and set at the start of the programme remain valid. The NHS Plan, published in July 2000, included the Department of Health's public service agreement (PSA) which set new and more ambitious targets to be achieved by 2004.
3. The Children's Special Grant to support Quality Protects will be £404 million in 2001-02, £452 million in 2002-03 and £525 million in 2003-04. This is made up of increases from the current £120 million grant to £180 million in 2001-02, £220 million in 2002-03 and £290 million in 2003-04 supplemented by £225 million/£233 million/£236 million transferred from other Departments. (The figures may not sum because of rounding). Two parts of the total grant are to be earmarked for specific purposes. £256 million/£298 million/£347 million is to be ring-fenced for the implementation of the Children (Leaving Care) Bill, subject to Parliamentary approval to the legislation. £15 million/£15 million/£30 million is to be ring-fenced for services for disabled children over the next three years.
4. This Circular builds on LAC(98)28 and LAC(99)33. It gives details of the requirements for the submission of Quality Protects Management Action Plans (MAPs) for 2001/2002. MAPs serve both as part of the Department's monitoring and grant approval processes and as key governance and management tools for local councils. Clear, rigorous plans which focus on results for children and their families will be necessary if the ambitions of Quality Protects are to be achieved.
5. The requirements for 2001-02 have been significantly simplified, to give a much more streamlined approach, focusing on outcomes rather than working processes, with an expectation that MAPs reduce in size from an average of over 150 pages to about 30 pages. Subject to Parliamentary approval, payment of special grant, other than the transferred resources, will be dependent on satisfactory progress to date and on satisfactory plans as set out in the MAPs.
6. These introductory pages of the Circular only are being sent to those listed above. The whole Circular can be downloaded from the DH Quality Protects website <http://www.doh.gov.uk/qualityprotects/index.htm>. (NB. Note change of address from last year). Customised MAP forms are being sent separately and electronically to each local authority. Those forms will contain each authority's actual and projected figures for all Quality Protects targets and indicators.
7. This Circular is issued as statutory guidance under Section 7 of the Local Authority Social Services Act 1970.

## Action

8. Councils are required to:
  - a) Submit their third Quality Protects Management Action Plan to the Department of Health by 31 January 2001. MAPs should be emailed to your SSI Social Care Regional Office and to [MB-Quality@doh.gsi.gov.uk](mailto:MB-Quality@doh.gsi.gov.uk).
  - b) The MAP should be accompanied by a joint letter from the Chief Executives of the council and the Health Authority and the Director of Social Services and the Chief Education Officer (or equivalents). The letter should show that the MAP has been endorsed by the Leader of the Council and by the lead members with executive responsibility for social services and education and that all relevant services are aware of the MAP and are committed to its implementation. It should also specify what the Council has done to consult the voluntary sector in drawing up the MAP and explain how children, young people, their families and carers have been involved in the planning process.
  - c) Ensure that the MAP contains a clear statement of what the Council expects to have achieved by March 2001.
  - d) Explain how the performance projections set out in the autumn position statement for 2001-02 and subsequent years will be achieved, addressing all the key issues under each Objective.
  - e) Ensure that plans for securing each objective explain how Councils will involve children and young people; meet the needs of disabled children and their families; and provide services which fully meet the needs of black and minority ethnic children and families in their area.
  - f) Ensure that MAPs are public documents which are made available to anyone who wishes to see them. Councils should also consider how best to present their main elements in summary form, particularly to those groups they have consulted in drawing up the MAP and so that all front-line staff responsible for delivering services, including in the health, education and voluntary sectors, are fully informed of and involved in the process.
  - g) Submit an audit certificate for last year's (1999-2000) grant to the Department of Health by 31 December 2000 and their certificate for this year's (2000-01) grant by 31 December 2001. The information must be provided on the forms issued by the Secretary of State for Health and certified by an auditor appointed by the Audit Commission.

### *Cancellation of Circulars*

9. This circular should be cancelled on 31 March 2004. Circulars LAC(98)28 and LAC(99)33 – which were previously due to be cancelled on 31 March 2002 – also now remain valid until 31 March 2004.

### *This Circular has been issued by:*

Denise Platt CBE  
Chief Inspector, SSI

David Walden  
Head of Social Care Policy

## **INTRODUCTION**

10. The aim of Quality Protects is to transform services for – and the outcomes achieved by – the most vulnerable children in our society and their families. Alan Milburn, Secretary of State for Health, recently announced that the programme would be extended from three to five years, ie until March 2004.

11. Quality Protects is accompanied by a Children's Special Grant. Payment of this grant is dependent upon satisfactory progress to date and the production of rigorous Management Action Plans (MAPs). They should show how councils, with health services, the voluntary sector and other partners, will work towards the achievement of the eleven Government Objectives for Children's Social Services (GOCSS). They should show how councils will secure the targets set in the 1998 Comprehensive Spending Review and the new targets set out in the NHS Plan, published in July 2000. The GOCSS – and therefore the MAPs – cover all services for children in need – particularly those on the children protection register, those in care and disabled children – not just to those services funded through the grant. Councils' progress is monitored through the Social Services Performance Assessment System, of which Quality Protects is an integral element.

### **Targets and indicators**

12. The targets and indicators set as a result of the 1998 Comprehensive Spending Review are set out in the Government's Objectives for Children's Social Services (Department of Health, 1999). New targets, set in the NHS Plan, are:

- Improved life chances of children in care by:
  - improving the level of education, training and employment outcomes for care leavers aged 19, so that the levels for this group are at least 75% of those achieved by all young people in the same area by March 2004 (this is also a Connexions Service target);
  - improving the educational attainment of children and young people in care by increasing to 15% in 2004 the proportion of children leaving care aged 16 and over with at least five GCSEs at grade A\* to C;
  - giving them the care and guidance needed to narrow the gap by 2004 between the proportions of children in care and their peers who have had a final warning or are convicted; and
  - maximising the contribution adoption can make to providing permanent families for children.

13. Specific targets for adoption and for reducing rates of offending will be published shortly.

### **Progress to date**

14. The recently published Performance Assessment Framework data, and other recent statistical publications, give information on progress to date in meeting the targets. The picture is mixed. On the plus side, 500 more children were adopted from care in 1999/2000 than the previous year. More young people are remaining in care until they are 18. The number of re-registrations on child protection registers is down, as is the number of children de-registered who had been on the register for over two years. Placement stability is increasing, with the proportion of looked after

children experiencing three or more placements in 1999/2000 dropping to 17.8% from 18.6% in 1998/99 and 19.6% in 1997/98. However, there were wide variations between councils so there is still a way to go to meet the placement stability target that no more than 16% of looked after children *in any council* should have three or more placements a year.

15. On the other hand, the PAF data showed that the proportion of child protection cases being reviewed had dropped from 87% to 83%, again with wide variations between authorities. The first national statistics on the educational achievement of looked after children show that only 30% of care leavers aged 16 or more had any GCSEs or equivalents, a long way short of meeting the national targets of 50% by 2001 and 75% by 2003. Similarly, only 4% of care leavers got five GCSEs at A\*-C grades, compared with the new target of 15% by 2004.

### **CHILDREN'S SPECIAL GRANT 2001-02**

16. Subject to Parliamentary approval, the Children's Special Grant has been made available for five years from April 1999. The grant for 2001-02, 2002-03 and 2003-04 has been augmented by transfers from local authority finance and the Department for Social Security. The transferred resources will form part of a ring-fenced element for implementing the Children (Leaving Care) Bill, subject to Parliamentary approval to that legislation. The total Children's Special Grant over the period 2001-02 to 2003-04, and the divide between the increased grant and transfers is as follows:

All figs in £m	2001-02	2002-03	2003-04
<b>Total</b>	<b>404</b>	<b>452</b>	<b>525</b>
Increased grant	180	220	290
Transfer from SSA and DSS	225	233	236

Figures do not sum because of rounding

17. This is divided between the main QP grant and the ring fenced elements for Children (Leaving Care) Bill and services for disabled children as follows:

All figs in £m	2001-02	2002-03	2003-04
Main grant	133	139	149
Children (Leaving Care) Bill	256	298	347
Services for disabled children	15	15	30

Figures may not sum because of rounding

18. £1 million of the 2001-02 grant will be set aside to meet the costs of the Regional Development Workers, their assistants and their regional development programmes and other specialist support including education advisers (joint funded with the DfEE).

### **Priority areas**

19. Services for disabled children have been made an additional priority area for grant. Otherwise priority areas remain the same but have been aligned more closely to the GOCSS, with Management Information and Quality Assurance merged into a single category under objective 11. The alignment of priority categories to GOCSS does not, of course, mean that expenditure under one priority category will not

contribute towards other objectives. For example, improved assessment (objective 7) will clearly help progress towards other objectives, such as objective 2.

20. The priority areas for grant for 2001-02 are as follows:

- Objective 1: Increasing the choice of adoption, foster and residential placements for looked after children, including appropriate choice for black and ethnic minority children. Particular attention should be given to the new PSA target to maximise the potential of adoption as placement option for looked after children; to the recruitment of adoptive parents and foster carers; and to the implementation of the foster care standards and the Code of Practice. Within this priority, you should separately identify planned expenditure on adoption.
- Objective 4: Improving the life chances of looked after children through expenditure on their
  - education, with particular attention to implementing the joint DH/DfEE *Guidance on the Education of Children and Young People in Public Care* and to working towards the PSA targets
  - health needs: working with health agencies to deliver a holistic service to meet the range of looked after children's physical and emotional health needs as outlined in the consultation document *Promoting the Health of Looked After Children*, including reducing teenage pregnancy and supporting teenage mothers and fathers in the light of *Teenage Pregnancy* (SEU 1999)
  - reducing offending and working towards the PSA target on offending
  - and more and better cultural, leisure and sports opportunities and the necessary support to take advantage of those opportunities

Expenditure should not substitute for services which properly should be provided or are being provided by local education authorities and the health service, though expenditure on voluntary sector provision to complement such services is acceptable.

- Objective 7: Improving assessment, planning and record keeping. Particular attention should be given to the inter-agency implementation of the *Framework for Assessment of Children in Need and their Families* and *Working Together to Safeguard Children*.
- Objective 8: Participation of children, young people and their families in the planning and delivery of services and in decisions about their day-to-day lives. Particular attention should be given to the involvement of young people collectively and to enhancing their individual voices, for example through the development of independent advocacy services.
- Objective 10: Managing change: expenditure in this priority area should be targeted on human resource issues, communications and on work to strengthen the governance of children's services. Key aspects of HR will include workforce analysis; training and development; effective and safe recruitment; and developing ownership, participation and awareness of multi-agency frontline staff in the Quality Protects programme.
- Objective 11: Enhancing the development and use of management information systems; improving quality assurance systems to ensure that services are

delivered according to requirements and are meeting local and national objectives; and developing financial management strategies. Attention should be paid to how information systems, as they develop, are designed and used to help control for procedural and practice compliance and hence underpin quality assurance.

And – for the two ring-fenced elements of the grant

- *Objective 5:* implementation of the Children (Leaving Care) Bill – subject to Parliamentary approval. Expenditure will provide for improved support for qualifying children and young people in and leaving care. For each young person this support will be based on a needs assessment, agreed with him and set out in his Pathway Plan, including
  - accommodation and maintenance for those aged 16 and 17;
  - general assistance up to the age of 21;
  - help with employment up to the age of 21;
  - help with education and training to the end of the agreed programme, even if that takes someone past 21;
  - provision of vacation accommodation (if needed) for someone in Higher Education or in Further Education which means living away from home;
  - provision of young person's advisers to the age of at least 21, or for as long as someone is being helped with education or training.

Where young person's advisers and other staff are also working with care leavers not falling under the provisions of the Bill, their full salary and related costs may nonetheless be met from the ring-fenced element. However, where local councils are providing financial and other assistance (eg accommodation) for those not falling under the provisions of the Bill, these should be funded through SSAs as at present.

- *Objective 6:* Services for disabled children: this has been made a priority area for grant because of the body of evidence which shows heavy demand pressures and shortcomings in the provision of services. Expenditure should be targeted on increased provision of family support services including short term breaks; better integration of disabled children into mainstream leisure and out of school services; improved information for planning purposes; better information for parents and the increased availability of key workers and other measures to improve co-ordination. Steps must be taken to ensure that services are appropriate for ethnic minority communities.

21. These priority areas may be subject to alteration in 2002-03.

#### **PAYMENT OF THE SPECIAL GRANT**

22. Subject to Parliamentary approval, special grant will be paid to all councils in respect of their share of the resources transferred from SSAs and the DSS in 2001-02. Payment of the remaining special grant for 2001-02 will be made only to councils which demonstrate:

- Satisfactory progress in implementing the plans set out in the Quality Protects MAPs for 1999-2000 and 2000-01 and in meeting local and national targets. Progress will be judged both by the data submitted in the Autumn Position Statement and information contained within the MAP.

- Satisfactory plans for action in 2001-02 and plans to fulfil the Government's objectives for children's services and in the priority areas for 2001-02.

23. SSI Social Care Regions (SCR) will assess MAPs as an essential component of the performance assessment of councils with social services responsibilities. Issues on performance in achieving the Government's objectives for children may be discussed in the Annual Review Meetings which will take place in all authorities early in 2001 and will be addressed in the subsequent letter to your council.

24. As forewarned in previous circulars, greater emphasis will be given to evidence of progress. **Where outcomes for children are falling short of the expected levels, councils will need to make a convincing case as to how their plans will rectify this in order to receive the special grant.** If SSI Social Care Regions decide on the basis of their evaluation that satisfactory progress has not been made and that the MAP does not meet the Department's requirements, they will require the resubmission of all or part of the MAP for re-evaluation. If the MAP remains unacceptable, further discussions will take place between SCR and the council to agree a process and timescale to ensure the MAP will meet requirements.

25. For those councils with satisfactory MAPs, subject to Parliamentary approval, the grant will be made with payments being made quarterly in arrears. Councils providing RDWs or RDAs must submit invoices quarterly in arrears, to the relevant ACI, detailing the costs to be reimbursed (except for the final quarter, when the invoice should be submitted by the end of February 2001, with estimated costs for March 2001).

26. We are currently consulting on the formula for the Children (Leaving Care) Bill element of the grant. In 2001-02, the remainder of the grant will be allocated to councils on the same basis as 1999-2000 and 2000-01. That means that 50% of the grant will be allocated on the basis of the 1998-99 SSA formula and 50% on the basis of the 2001-02 formula for children's social services. We will issue information to each local council outlining indicative allocations by the end of November.

27. It will be a condition of the special grant for 2001-02 that the grant monies are used in the financial year 2001-02 for the purposes of implementing councils' year 3 MAPs, including that the ring-fenced elements are spent only on implementing the Children (Leaving Care) Bill and on services for disabled children respectively. Subject to Parliamentary approval, special grant for 2002-03 will again be dependent on evidence of satisfactory progress in relation to the Government's priorities for the special grant and on plans for further improvements.

28. Arrangements for the audit of the special grant will be set out in the special grant report, which will be subject to Parliamentary approval.

### **KEY ISSUES FOR 2001-02**

29. The guidance on completing the MAP proforma gives details of what should be addressed under each objective. This section of the circular gives more details on some key issues for 2001-02. An updated list of Regional Development Workers is attached at Annex B. As in previous years, they are available to offer advice and assistance to councils in drawing up their MAPs. The Quality Protects website (<http://www.doh.gov.uk/qualityprotects/index.htm>) also provides a source of information that should be helpful in completing MAPs – in particular the good practice database.

30. Quality Protects depends on partnership within councils and with district councils; with the health service, the youth justice system, the voluntary sector and children,

young people and their families. It is essential that all concerned are fully involved in drawing up this MAP. Local councillors – including district councillors – continue to have the key role set out in previous circulars, in *Think Child* and in our series of councillors' briefing sheets.

### **Black and ethnic minority children and their families**

31. The SSI inspection report 'Excellence not Excuses' found poor and inconsistent service delivery to black and ethnic minority children and families and a lack of awareness and development opportunities for black and white staff in this area. Evaluation of year 2 MAPs showed that about one-fifth of them made no reference to black and ethnic minority children and their families. In other MAPs, references were often sparse.

32. Particularly in light of the findings of the inspection report, this is not acceptable. A good children's service should be able to demonstrate that the needs of black and ethnic minority children and their families, including unaccompanied asylum seeking children, have been carefully considered in relation to all the Government Objectives for Children's Services. All councils MAPs must, therefore, explain for each objective how you are considering and meeting the needs of these groups.

33. The Department is currently supporting four demonstration projects on services for black and ethnic minority children and their families. More details can be found on the QP website.

### **Children and Young People's Participation**

34. The evaluation of Year 2 MAPs shows that children and young people's participation remains a key area for development for many councils. There was good evidence in the MAPs of progress in involving children in the planning and delivery of services, although in many cases developments were patchy and needed to be part of an integrated strategy. However, many fewer councils were performing well in terms of involving individual children in decisions about their own care.

35. We held six *Make it Happen!* participation events around the country earlier this year. From these came some strong and clear messages from looked after children, and important lessons in how to develop children's participation. We have published a report of these events – also called *Make it Happen!* – which has been sent to all councils. You should pay particular attention to the messages in that report when preparing your MAP. In addition, Children's Rights Officers and Advocates (CROA) have produced training materials on children's participation, called *Total Respect*. These were sent to councils' training officers in the summer. We will be publishing advocacy standards later this year.

36. *Teenagers to Work* is an optional activity and the Department, ADSS and LGA are expanding it during 2001. The scheme is an important and practical way of achieving better outcomes for looked after children and young people. It's a practical way of improving the life chances of children and young people and enabling them to achieve the very best in their life and future.

### **Education**

37. The recently published data shows that councils still have a long way to go to meet the PSA targets on the educational achievement of care leavers. Only 30% of care leavers aged 16 or over left care with any qualifications, compared with the PSA target of 50% by next year and 75% by 2003. The new PSA sets an additional target

of 15% of care leavers to achieve 5 A\*-C grades at GCSE by 2004; the recent data sets a baseline for that target of just 4%.

38. This underlines the importance of successful implementation of the *Guidance on the Education of Children and Young People in Public Care* (LAC(2000)13). We will expect MAPs to show evidence of councils progress, covering issues such as:

- what you are doing to introduce personal education plans for all looked after children;
- how you are ensuring that children are receiving appropriate education provision within 20 days of a placement;
- what support and training you are providing for social workers, residential social workers and foster carers to enable them to promote children's educational outcomes;
- and how social services, the LEA and schools are working together to develop and support the role of designated teachers?

### **Workforce planning and human resource issues**

39. The Government recognises that there are serious problems affecting both recruitment and retention within the social care workforce at present. Human resource issues were cited by a number of councils in their Year 2 MAPs as significant barriers to progress. However, other MAPs showed that real progress was being made in workforce planning and human resource strategies. They showed that with thought and ingenuity the complex difficulties which many councils do face in terms of recruitment, retention and training of staff can be turned round to give positive results. The Joint Review report *People Need People* similarly found many examples of excellent joined up working and improved services. *People Need People* demonstrates that those councils with good HR strategies and those council who engage their front line staff are councils which are delivering improved outcomes for children and their families.

40. Workforce analysis and planning has several related dimensions, including:

- Compiling and maintaining a database to record employees' details
- Recording and analysing data on staff recruitment and retention
- Analysing jobs and maintaining accurate job specifications
- Matching skills to posts
- Appraisal and review of employee performance
- Assessment of terms and conditions of work
- Analysing relevant information on local and national labour markets
- Consultation with managers, front line staff and service users about future plans, training and education
- Development of a human resource strategy
- Monitoring and review

41. Examples of good practice can be found on the QP website, or from your Regional Development Worker.

### **NHS Plan**

42. The NHS Plan sets out afresh the Government's commitment to ending inequalities in health, particularly in early life. The NHS has a stronger role to play in

prevention, as well as working in partnership with other agencies to tackle the causes of ill health so as to reduce health inequalities. At national level we will set a target to narrow the longstanding gap in infant and early childhood mortality and morbidity between socio-economic groups. Locally, health economies will, through their Health Improvement Programmes (HimPs), need to show more clearly than ever how they intend to tackle inequalities in their area. Children looked after and children in need are both key disadvantaged groups, for whom such inequalities are starkly apparent.

43. The health service should therefore continue to play a key role in meeting the needs of children in need, including children looked after. This should be reflected in HimPs and the Health Authority's input into MAPs and Children's Services Plans (CSPs). That input should reflect the full range of services for vulnerable children, including disabled children; children with special educational needs; those with drug and alcohol problems; and those at risk of social exclusion. Clear links should be made with the work of teenage pregnancy local co-ordinators. Special attention should be paid to ensuring continuity of health care during children's transition to adulthood.

44. We know that health outcomes for many looked after children are currently poor due to lack of health history, health care planning and monitoring and poor access to the range of health care services. We will expect MAPs to show evidence of the Councils progress in improving health care planning, local arrangements for service delivery and what training and support you are providing to social workers and carers to enable them to promote good health outcomes.

### **Child and adolescent mental health services (CAMHS)**

45. Children's mental health is an issue for all services. Local councils have a key role to play in both the provision and commissioning of a spectrum of CAMHS. They have a particular duty to ensure, in partnership with health authorities, that their staff have access to training and consultation in children's mental health and that children looked after and their carers have adequate access to CAMHS. The promotion of children's positive mental health should be a corporate priority for all local councils.

46. There are now many examples of partnership working in CAMHS, including the 24 projects funded through the CAMHS Innovation Grant. These are focused particularly on the mental health needs of children and young people who have otherwise had difficulty accessing traditional services. The Young Minds web-site (<http://www.youngminds.org.uk>) gives information and contact details of all these projects. All of these projects are subject to evaluation and many include measures of change in Quality Protects indicators.

47. Other local authorities have entered into creative and effective partnerships through the HAZ programme or use of the NHS Modernisation Fund / Mental Health Grant for CAMHS, often combined with Quality Protects funding.

### **Connexions**

48. The Connexions Service is an inclusive service for every young person aged 13 - 19 who needs information, guidance, support or help with their personal development. A particular priority for the Connexions Service will be to make a difference to the life chances of vulnerable young people needing extra help to deal with barriers to learning and enable them to make progress. The Service will begin to be rolled out across England from April 2001. Where the Service exists, Connexions Service Partnerships will need to be informed by existing plans including Children's Services Plans, Schools Health Plans and local teenage pregnancy

strategies. The MAPs need to demonstrate that they are linked into the Connexions Service planning structure.

## **PLANNING CHILDREN'S SERVICES**

49. Quality Protects is a key element of the Government's strategy to end child poverty and transform the life chances of vulnerable children. Quality Protects management action planning should therefore be an integral part of local planning for vulnerable children. LAC(99)33 recognised the need to make local planning for vulnerable children more effective and coherent and said that, until the necessary changes were introduced, councils need not update their children's services plans.

50. Earlier this year, we consulted on possible future improvements to children's services planning processes. The consultation produced a warm response with numerous constructive responses. By locating some of the material previously sought in MAPs within the wider strategic plan for vulnerable children, it has been possible to radically simplify this year's requirement. At the same time, the spending review has resulted in the establishment of the Children's Fund and the creation of the Children and Young People's Unit (CYPU). Consultation is now also taking place about guidance on Local Strategic Partnerships (LSP) which will oversee the production of community plans, initially in those 88 areas that are to benefit from the Neighbourhood Renewal Fund. It is, therefore, now our intention to develop new guidance on planning children's services as part of the developing LSP process, which it is intended will be extended to all areas after 2001-02.

51. In view of these important developments, local councils will wish to continue to revise their Children's Services Plans only as necessary. It is hoped that good practice guidance, based on the planning children's services consultation, will be placed on the Quality Protects website (<http://www.doh.gov.uk/qualityprotects/index.htm>) early in the new year to assist those councils who are undertaking reviews of their CSPs at present. Nothing in this circular or the forthcoming guidance need hold up councils currently working on the review of their children's services plans.

## **INSPECTION PROGRAMME**

52. The Social Services Inspectorate's Inspection Division will continue their programme of inspections of Children's Services generally to monitor the implementation of Quality Protects. Additionally they will look at specific aspects of children's services such as Youth Offending Teams and Fostering Services which link to particular Quality Protects and the Government objectives. This programme, together with the programme of Performance Assessment conducted by the SSI's Regional Inspectors will show the extent of national progress on Children's Objectives during 2000/2001 and beyond.

## Annex A

### GUIDANCE ON COMPLETING THE MAP PROFORMA

#### General

1. An outline of the proforma is available on the Quality Protects website (<http://www.doh.gov.uk/qualityprotects/index.htm>) to show you the format<sup>1</sup>. **This is for demonstration only, and cannot be used for completing your MAP. Individualised MAP proformas will be emailed to each council during November. There may be some minor changes between the demonstration version and the final, individualised proformas.** These will be in Excel 7.0 format, and will contain within them a spreadsheet setting out the performance indicator information you submitted in the autumn.
2. The MAP proforma is based around the eleven Government Objectives for Children's Social Services. Under each objective it asks for progress to date and key challenges for 2001-02 and beyond. In each case, you should evidence your response with reference to the performance indicators. There are then a series of specific questions under each objective. A blank proforma is attached here to show you the format. Do not complete this, but wait for the individualised proforma to be emailed.
3. Space for answering the questions is limited to the size of the boxes provided. Your answers will therefore need to be in the form of concise summaries, focussed on key points and issues. Responses in bullet point form are entirely acceptable.
4. In responding on each objective, you **must** explain explicitly what you are doing to meet the objective specifically in relation to black and ethnic minority children and their families, including unaccompanied asylum seeking children. This must include details of how you measure and monitor the quality of services as they are delivered for these groups and the outcomes achieved.
5. Responses should also refer explicitly to specific services for disabled children and their families, and to work in partnership with other agencies
6. Your responses to Sections A and B should make clear and full reference to the values of the relevant **Performance Indicators** as entered in your Autumn 2000 Position Statement. These will be included in your council's personalised proforma. You should also indicate as far as possible what **Priority Areas** are being addressed in your responses.
7. Note that, as well as PIs, some questions in relation to progress in 2000/2001 are also addressed in the Autumn Position Statement (Sections 8 to 20 inclusive). Please ensure that your MAP answers are consistent with these, cross-referring where appropriate.

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<sup>1</sup> When you open the proforma, you may get a dialog box. If so, click on the 'enable macros' button to open the proforma.

## **Annex B**

### **Regional Development Workers**

#### London

Paul Fallon (until November 30th)  
Telephone: 020 7972 1099  
Email: [paul.m.fallon@doh.gsi.gov.uk](mailto:paul.m.fallon@doh.gsi.gov.uk)

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