

Plans and Planning- KEY PRINCIPLES

In Durham, our plans and planning is always guided by the following key principles:

Child's Voice and Involvement	Is what the child /young person wants to happen and their involvement clear throughout the planning and plan? Do we explore with children what life will look like for them when they feel safe, who they think would be good people to involve and what they would like the adults around them to do differently?
Parent Involvement	Is it clear that parents or carers have been involved in planning and the creation of the plan? Do we speak to them about what life will look like for their child when things are safer, what they worry could happen if things don't change, who they think are helpful people to include in the plan and what their ideas are to make life better and safer for their child?
Clarity	Is it clear whose plan this is, why it is needed and how worried we are? Do we use the child's name? Is there a Safety Goal and a Scaling Question linked to every Danger Statement?
Plain language	Is the plan understandable to the child, young person, parents, and network? Would a typical 8 year old be able to understand it?
Behavioural	Is there a focus throughout on specific behaviours that have been observed, and that need to change and why? Does it show the step by step 'who does what' to keep the child / young person safe when things are difficult?
Child focused	Is there priority given to actions that directly improve the life and safety of the child / young person? Where there are other plans (EHCP, PEP for example) are they aligned with this plan and referred to? Does the planning and plan also show that more?
Informed Support Network	Does the document show clear involvement of the important people to the child and parents / carers (Family Network) in active roles within the plan? Does it include the role of other agencies and the involvement of other support services i.e. what Supporting Solutions Service or Full Circle are doing?
Outcome focused	Are there clearly written outcomes that describe what life for the child will look like when the plan has progressed and things have changed? What are the child's needs and how will these be met including how opportunities to heal from trauma will be provided?
Time	Does the plan identify clear timescales for actions?

Risk Sensible
Practice

Does the planning and the plan apply what we know from practice wisdom and research as well as building upon the identified existing safety and existing strengths for the child?

Bottom lines

Are there any non-negotiables? Do we have a network?

Has the plan
been tried and
tested?

How confident are you that it will work? How do you know that the plan works?

Contingency
plan

Is it clear if this plan, or parts of the plan, don't work within the time it needs to, what will happen next? Do we have a plan B, e.g. if a member of the network falls ill. The plan is informed by the Danger Statement(s), Safety Goal(s) and Scaling Questions and this links back to the analysis in the assessment.

Safety planning must happen with a network as they are the eyes and ears on the children, especially when parents may be struggling.