

A Practitioner's Guide to SMART and Child Focussed Planning



What is SMART?

We all have goals in life and to achieve them we must have a plan to get us there. This is no different in the work we do with children and families.

When working with children and families we need our plans to be:



SPECIFIC

Objectives need to be as specific and child focused as possible. Avoid universal terms, e.g. *“Stuart needs to fulfil his educational potential”* as this is something all children should be doing. A more specific goal would be, *“Stuart needs his parents to take him to school every day, arriving at 8:55am, wearing a clean school uniform (with ‘clean’ meaning washed, dried and ironed at least twice a week). If Stuart is unable to attend school, then parents are to contact school by 8:55am on the day of the absence and inform staff of the reason for absence.”*

Likewise, avoid objectives such as *“Stuart’s house needs to be clean and tidy”*, as your expectation of clean and tidy may be different to that of Stuart’s parents’. If we are being more specific, you could say, *“The washing up needs to be completed after every meal”*, or, *“The living room and hallway carpet needs to be hoovered once a week”* – this makes the expectations clear for all involved with the plan.

Finally, avoid using service terms in your objectives, e.g. *“Stuart needs to be referred to Children and Young People’s Mental Health Service”* as this is an ACTION rather than a NEED. While professionals likely know why Stuart would benefit from a CYPMHS referral, his parents may know little about the service. A better goal would be, *“We need to understand why Stuart is hurting himself by cutting his arm when upset”*, and, *“Stuart to be supported to manage upsetting situations without hurting himself.”*



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If an outcome is not measurable then we will be unable to evidence progress. If a plan states *"Lindsey needs to have age-appropriate self-care skills"*, how can this be measured? Would Lindsey's family understand what this means? By saying *"Lindsey needs to brush her teeth for 2 minutes every morning before school and every evening before bed and have a bath three times a week..."* we are able to measure the progress. Likewise, in relation to the example above around school attendance, we can accurately measure how many times Stuart arrives at school on time, or late, how many days he was absent from school, and whether parents called to inform this.



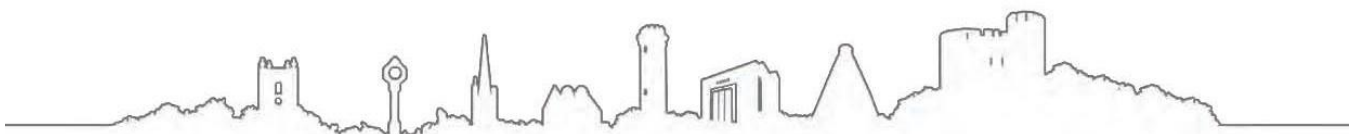
Objectives need to be ATTAINABLE – if the plan contains unreachable objectives, we are setting the children and families up to fail. For example, if a child is rarely attending school, with a current school attendance of around 25%, it would be unhelpful and ineffective to set the initial target at 100% attendance. There needs to be specific interim goals included throughout the Review Plans to assist reaching the goal of 100%. If however, the child's attendance is currently at 80%, then setting the goal of 100% attendance may be more achievable.



Objectives identified within a plan must be ones that parents/carers are able and willing to achieve. For example, if Tony's mother is alcohol dependant, how realistic would it be to put, *"Mother will stop drinking alcohol"* in the plan? Instead, we could propose, *"If mother has been drinking alcohol, then father will leave Tony in the care of paternal grandmother, for the hours he is at work"*, or, *"Mother will refrain from drinking alcohol during the times she has sole care of Tony"*.



Plans need to have definitive timescales for completing proposed actions and these must be incorporated into the child's timescale, not ours – for example, in cases of neglect, how do we know when enough is enough? Having clear time constraints for the completion of objectives allows children, parents and professionals to all know what they are required to do and by when. This helps to prevent a drift of the plan and possible confusion – should the proposed objective be completed within 10 days, 10 weeks, or 10 months?



How are we making our plans for children/young people SMART and child focussed?

The plan table headings within the **Child Looked After Care Plan, Child Protection Plan and the Child In Need Plans** have been amended to ensure that language used within the plans are in line with Dudley's Practice Framework and the model of Restorative Practice.

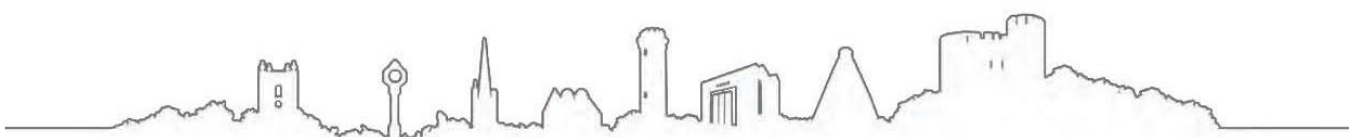
You will see the updated wording in the following areas of the plan:

- Child & Young Person's Development Needs
- Parental Capacity
- Family Environment Factors

The headings have been updated as below:

- Needs, Strengths and difficulties, has been reworded to read as **What are we worried about?**
- Actions, has been reworded to read as **What needs to change/happen?**
- Person/Agency Responsible, has been reworded to read as **Who is best placed to help with making the change?**
- Target date for completion, has been reworded to read as **Date to be achieved by:**
- Outcome, has been reworded to read as **What will we see happening to show there are positive outcomes for the child/young person?**

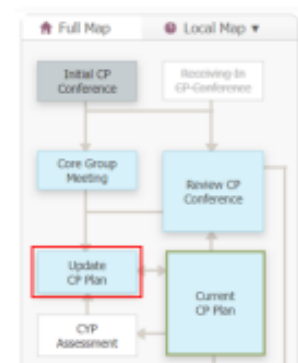
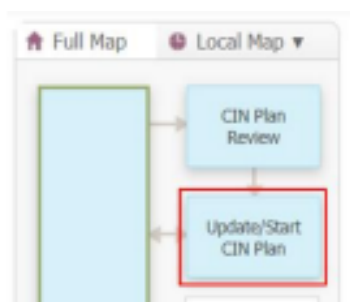
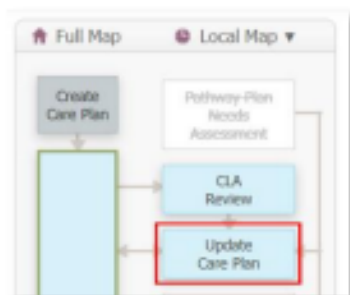
At the point where a CIN, CP or CLA Plan is to be updated, you will see that the plan headings are reflective of the updated wording.



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You will see these changes in the following areas of the pathways:



Note: you will only see the updated wording in the plan table at the point where a plan is updated, e.g. after a CLA Review has taken place. Any plans currently in the process of being written will still have the old headings.

Example of the table, with the new headings:

Child/Young Person's Development Needs

What are we worried about?	What needs to change/happen?	Who is best placed to help with making the change?	Date to be achieved by:	What will we see happening to show there are positive outcomes for the child/young person?	Action Complete?	If No, please explain why
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Parental Capacity

What are we worried about?	What needs to change/happen?	Who is best placed to help with making the change?	Date to be achieved by:	What will we see happening to show there are positive outcomes for the child/young person?	Action Complete?	If No, please explain why
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Family and Environment Factors

What are we worried about?	What needs to change/happen?	Who is best placed to help with making the change?	Date to be achieved by:	What will we see happening to show there are positive outcomes for the child/young person?	Action Complete?	If No, please explain why
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What Does SMART Look Like?



Child/Young Person's Development Needs

What are we worried about?	What needs to change/happen?	Who is best placed to help with making the change?	Date to be achieved by?	What will we see happening to show there are positive outcomes for the child/young person?
Paul becomes withdrawn when his mother and step-father have arguments.	Paul needs to be able to talk about the arguments he has seen/heard and how this has makes him feel. Direct work to be completed with Paul to explore his feelings. This will be 5 sessions which will take place once a week in school.	Shelia Smith, children's practitioner, will complete these sessions with Paul.	By 31 st August 2023	Paul will have learnt to talk about things that make him unhappy. If we know how he feels, we can make sure that the right support is in place for him to make things better.

Parental Capacity

What are we worried about?	What needs to change/happen?	Who is best placed to help with making the change?	Date to be achieved by?	What will we see happening to show there are positive outcomes for the child/young person?
Paul sometimes becomes angry when his parents put in place guidance and boundaries. Parents have shared that they feel they need support to manage this.	Parents to attend a parenting course to further develop their understanding of how to put in place routines and boundaries. This will be a 10 week course.	Robert, social worker, is to make the referral for this.	By 15 th August 2023	Paul will respond more positively when his parents put in place rules and boundaries as parents will be able to take a joint approach to doing this. They will be able to recognise how their own behaviours may be impacting on Paul.

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Family and Environmental Factors

What are we worried about?	What needs to change/happen?	Who is best placed to help with making the change?	Date to be achieved by?	What will we see happening to show there are positive outcomes for the child/young person?
Paul has previously been in danger when he was able to lean out through his bedroom window, which is on the third floor, as the window locks are faulty.	Safety catches are to be put on Paul's bedroom window.	Samantha, housing officer, is to arrange for this to be done.	By 31 st August 2023	Paul will not be at risk of injury as he will not be able to lean out of his bedroom window and potentially fall.



Top tips to make it SMART



When creating a plan, ask yourself the following questions:

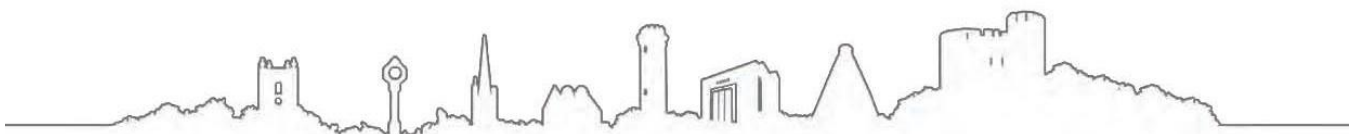
1. Is the plan in as much **detail** as possible including details on who, why, where, which, what?
2. Is the plan **clear** in what we are trying to achieve?
3. Does the plan say how we will **measure** each part?
4. Does the plan clearly show who is **responsible** for each part?
5. Are the expectations in the plan **appropriate and realistic** with regards to the needs of the family?
6. Does the plan take into consideration the **specific risks identified and needs of the child**, young person and family?
7. Does the plan clearly show when each stage **is to be completed**?
8. Have the parents and the child or young person **contributed** to the plan?
9. Is the plan **signed** by myself, the parents and the child or young person involved?
10. Do parents/carers and child/young person have a **copy of the plan**?



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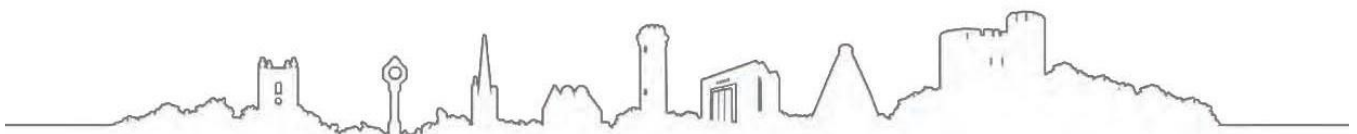
- The initial plan should be seen as the first step on a ladder to reach the overall goal. For example, if the initial plan had an action requiring mother to take Mohammed to the GP regarding his eczema, mother undertakes this and is told to apply prescribed cream 4 times a day – this new action can be added to the plan and the initial action removed.
- Outcomes should focus upon the positives, not on behaviours or actions we don't want to see. Parents will respond better if they are being asked to achieve something positive in the future, as opposed to asking them to stop a negative behaviour. For example, instead of stating a parent should, *"stop hitting Patricia as a punishment for bad behaviour"* we could say the parents should *"manage Patricia's behaviour without hitting her"*.
- If you are working with families where domestic abuse is a feature, it is likely that the parent with domestically abusive behaviour will be asked to attend a programme that tackles this behaviour. The individual may well attend the course but we should be mindful that this may only be a 'tick the box' exercise. In these circumstances, your outcome could be, *"Father will be able to explain to Jocelyn's Social Worker the impact domestic abuse may have on his daughter's physical and emotional wellbeing"*. This allows for father's engagement at the programme to be measured – not only by sessions attended but what he has actively learnt.
- Parent feedback from the Government's 'Troubled Families' agenda found they wanted actions which were easier to achieve at the top of plans; they felt that if these could be achieved it provided motivation for them to address more challenging objectives.



Reviewing Progress



- Plans are always evolving and need to constantly be updated. Progress in achieving the actions set out in a child in need/child protection plan should be reviewed frequently.
- Plans should be reviewed during review meetings, involving the family and relevant partner agencies. Progress against the plan should be at the heart of the review and captured in the meeting document. Progress against a plan should be the focal point of meetings and reviewed by the social worker, partner agencies and the family. For CP plans, for example, this means developing the outline plan agreed at the conference and reviewing and revising it within core group meetings and providing updates to the child protection review conferences.
- Supervision will also play a role in reviewing plans as practitioners will be looking at what is working well for the family and what needs to happen moving forward.
- NOTE – Deep dive audits have identified that often, records of meetings are not sufficiently focused on the Plan and considering progress against it. Instead, they capture a general discussion but without the focal point being on the actions. All core group members must play an active role in reviewing the plan and also provide challenge to one another, particularly if there is drift or delay or a lack of participation/contribution.
- Many of the families we work with have multiple complex issues which need addressing, it is important to look at what the child's most pressing needs are at the time a plan is started. This must be re-assessed regularly, taking into account any completed actions.



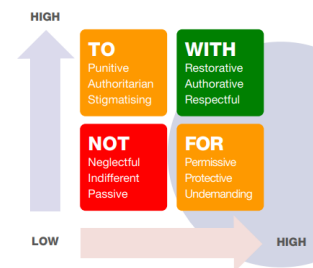
Child- friendly plans

Dudley's Children in Care council shared their views on plans and, as well as what is noted above, they also said that a plan should 'look good and use different colours' and to 'make it smaller.'

Keep plans simple! Make sure you ask the children and parents if they understand the plan and the actions within it – if they don't, how can we expect them to make any progress? Some words should also be avoided within plans, e.g. "ongoing" (this is not a definitive timescale), "appropriate" (appropriate in whose view?), and, "clean and tidy" (these are subjective words, without the detail and context required to define them specifically).

The use of Dudley's new mobile devices supports Dudley's restorative way of working WITH families, through working in partnership and encouraging involvement. For example,

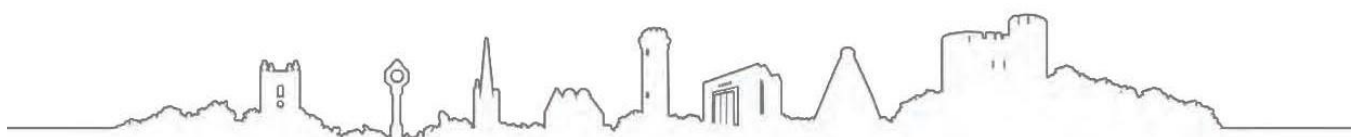
- Assessments and plans can be accessed and updated during a visit.
- Signatures can be obtained during visits using the included stylus, therefore ensuring that individuals are part of agreeing assessments and plans.



Plans should be made accessible to children and young people in a way that can be shared with them in a child-friendly manner. **This is where practitioners can be creative!** As part of wishes and feelings work, practitioners should develop an understanding of the interests that children/young people have, and this can be used to develop plans that are more child-friendly.

The plan itself should be clear, free of jargon, and written to the child. E.g an action might be 'Your social worker, James, will meet with you every 4 weeks to talk to you about how you are feeling.' The outcome for this would be 'It is hoped that you will be able to share how things are for you at home and school, and James will be able to work towards making sure you have the right support in place.' A copy of this plan can then be shared with the child, and also uploaded into 'documents' on LCS.

An example of the child-friendly plan can be seen on the next page.





NAME's care plan.



WHAT YOU WILL ACHIEVE BY MAY 2023:

- UNDERSTAND WHY YOU CAN'T LIVE WITH YOUR PARENTS, BROTHER AND SISTER BY DOING SOME LIFE STORY WORK E.G PHOTOBOKS/MEMORY BOXES.
- GO TO A SCHOOL YOU LIKE & DO WELL.
- HAVE SOMEBODY TO TALK TO, TO HELP YOU UNDERSTAND HOW YOU FEEL & WHEN THINGS BECOME A BIT WOBBLY.

My team: Simone (social worker) 01384 815387/07966447319.

School: Keyworker:

IRO-

- YOU HAVE A BANK ACCOUNT WITH A LOT OF MONEY IN THAT YOU WANT TO SPEND ON A HOLIDAY ABROAD, YOUR SOCIAL WORKER & KEYWORKERS WILL WORK TO GET ACCESS TO THIS ACCOUNT.
- SEE/TALK TO/WRITE TO ANY FAMILY MEMBERS THAT YOU WOULD LIKE TO. THIS CAN BE YOUR MUM, DAD, UNCLE, BROTHERS & SISTERS.
- SEE YOUR SOCIAL WORKER SIMONE EVERY 6 WEEKS BUT YOU CAN CALL HER OR ASK TO SEE HER MORE OFTEN.