# A Sharp Focus on Four Themes for Continual Improvement in Children's, Families and Education

## 1. Improving Quality

Ensuring the right staff are in the right place at the right time to deliver a consistent standard of good quality safeguarding services to children and families

- 1.1 Workforce
- 1.2 Practice Standards and Quality Assurance Framework
- 1.3 Ofsted specific concerns

## 3. Improving Tools

Ensuring we have the right tools to enable the workforce to deliver good quality services for children and families.

- 3.1 Technology and ICT systems
- 3.2 Management and Performance information
- 3.3 Effective, user friendly systems and processes that support the task
- 3.4 Corporate Services and Organisational alignment to deliver Luton 2040

# 2. Improving implementation of Learning

Using what we know and learn to continuously improve and enhance the services we deliver for children and families.

- 2.1 Feedback from families, children, young people, staff and partners
- 2.2 Internal and external audits
- 2.3 Research Regional and National presence

## 4. Improving Strategic Partnerships

Effective partnership working to enable the delivery of common goals and a high quality multi-agency response for children and families.

- 4.1 Corporate Parenting
- 4.2 Local Safeguarding Partnership
- 4.3 Corporate Services
- 4.4 Strategic Commissioning
- 4.5 Schools and settings
- 4.6 SEND

## **RAG Rating and Progress Status**

Not started

### **Action complete**

Action not yet completed, but on track

Activity progressing, some issues but realistic plans in place to recover

### Action off track, risk to plan

Long-term action not yet started. No risk to implementation currently anticipated

**Business As Usual Activity** 

1. Improving Quality
Ensuring the right staff are in the right place at the right time to deliver a consistent standard of good quality safeguarding services to children and families

- Norkforce
   Practice Standards and Quality Assurance Framework
- 1.3 Ofsted specific concerns

Objectives	Ref.	Actions	How will we know it has worked	Responsible Lead Officer Workforce	Start Date	End Date	Milestones (expected progress)	Rag rating	Detailed action plan
A Workforce Strategy that outlines our key strategic priorities for the next 3 years and includes:	1.1.1.1	To review and evaluate our current workforce strategy, benchmarking it against other Local Authority's recruitment data to inform the revised recruitment Plan.  To refresh the workforce strategy documentation	We will have reduced staff turnover and a higher ratio of Permanent staff over agency	Business Partner - HR	01/02/2023	21/10/2023	3 months: Review of existing strategy completed 6 months: initial draft for new WD strategy presented to DMT	Action not yet completed, but on track	Workforce Board Action Plan
Professional development pathways     A combined Social Work Academy     Training and support     Demand management     Recruitment     Remuneration	1.1.1.2	To review the training needs of all staff to inform our training and	An effective and robust training programme in place. We will see and increase in the quality of practice observed through QA	Workforce and OD Team Manager	21/03/2023	01/10/2023	3 months: Complete the analysis and present findings to DMT 4 months: Revised training plan in place 6 months: Review training uptake data and present to DMT	Not started	Workforce Board Action Plan Team Service Plans
	1.1.1.3	Review and update the current recruitment (attraction) and retention offer, including a refreshed recruitment website and updated employment value proposition (EVP) and proactive marketing within the market place.	Reduced staff turnover and reduced use of agency staff, we will see a greater number of applications per advert.	Business Partner - HR	01/02/2023	01/04/2024	3 months: Current offer reviewed and findings presented to DMT 12 months: Annual Permanent recruitment target met	Action not yet completed, but on track	Workforce Board Action Plan
	1.1.1.4	Senior Managers will ensure that caseload number remain within the agreed caseload management ratio	Assurance provided within PAM on a monthly basis that all staff caseloads are within the guidelines set by Luton Council.	Service Director - Operations	01/03/2023	01/03/2024	6 months - 60% within guidelines 12 months - 95% within guidelines	Business As Usual Activity	CSC Team Service plans Quality and Assurance Team Service Plan
Luton will have a Social Work Academy for all Social Work disciplines - delivering on our "grow your own" principle	1.1.2.1	Evaluate the impact and outcomes of the Social Work Academy.	A stable supported workforce, with the Social Worker Academy supporting ASYE's and development of staff.	Head of Social Work Academy	21/03/2023	01/04/2024	April - July 2023 6 ASYE recruited July - October 2023 20 ASYE recruited October - March 2024 10 ASYE recruited (36 in total) Performance Data on Reflective Supervisions for ASYE's 6 months - 70% completed 12 months consistently above 90%	Not started	Quality Assurance Service Plan (audit)
Our training offer will support staff to strengthen existing skills and to become future managers and leaders		We will work closely with Learning and Development, the virtual College and Beds University to strengthen our leadership programme for Children's and Adults Social Care services; to include leadership skills, managing change, coaching, and emotional intelligence.	A Leadership training programme is available for all prospective leaders within Children's and Adults services.	Workforce and OD Team Manager	01/04/2023	01/04/2024	April 2024 Training programme available to all staff.	Not started	Workforce Board Action Plan
	1.1.3.2	To deliver workshops and focus groups within every Practice Week with all staff to fully embed the corporate values (CARES) within our working culture	A clear view from the workforce around the values and culture, evidencing the impact of changes within training and skill base. Celebrating Good Practice nominations will be aligned with the	Workforce and OD Team Manager	21/03/2023	01/04/2024	6 months - DMT report of workshops and focus groups on attendance, themes and impact. 12 months - Full review of workshops and focus groups evidencing impact on service delivery to be presented at DMT.	Not started	QA & Improvement Service Plans
			Pract	ice Standards and Quality As	ssurance Framework				
An updated performance framework that captures the voices of children and families and is informed by the voices of employees/staff	1.2.1.1	To develop further training, guidance and performance measures to ensure views of children, young people and families are captured in all the work completed by Children, Families and Education.	Collaborative Audits will all have feedback from Children and Families. All Meetings will have sought the views of Children and young people before convening. All Management reports will have captured performance on the voice of the child, to assure Senior Management this has been embedded.	Head of Service Quality Assurance	01/01/2023	01/04/2025	I months: Review of scorecard, measures, KPis and data capture system present to DMT 6 months: 60% of all audits and meeting reports will have the voice of the children and families having been sought. 9 months: 75% of all audits and meeting reports will have the voice of the children and families having been sought. 12 months: consistent performance of over 12 months: consistent performance of over	Action not yet completed, but on track	Quality and Assurance Team Service Plan
	1.2.1.2	To review and refresh all recording and reporting mechanisms including the current scorecard capture to ensure we are capturing the voice of the child, young people and families.	Young people to fully participate in the organisation and delivery of their meetings		01/01/2023	01/05/2023	90% of all audits and meeting reports having sought children and families voice.	Action not yet completed, but on track	Team Service Plans
To address all assess for larger			Collaborative Audits will capture the	Ofsted Specific Con	icerns				
To address all areas for improvement as highlighted by Ofsted in the July 2022 ILACS to ensure effective services are delivered for Children and Young People in Luton		To complete a deep dive audit on the quality and impact of supervision and management oversight then deliver training and coaching to support practice improvements	Collaborative Audits will capture the quality of supervision and management oversight. Decision making will be evident on files and progressed in a timely manner reviewed in supervision. Feedback received would be of progression of plans and positive. Improved Scorecard data Workers will confirm the improvements made through the staff survey, check-ins and in exit interviews.	Head of Quality Assurance	15/03/2023	15/07/2023	4 months: First quarterly audits to be brought to PAM (July 2023)	Not started	Team Service Plans
	1.3.1.2	To review our existing offer to staff (remuneration, training, development and progression opportunities) to ensure we are competitive across all areas.	We will see a reduction in recruitment activity, an increase in staff taking up learning opportunities and improved levels of staff satisfaction in the annual staff survey results	Workforce and OD Team Manager	24/01/2023	01/07/2023	6 months: Improved offer in place	Action not yet completed, but on track	Workforce Board Action Plan

1.3.1.3	To improve the quality and consistency of assessments, processes and analysis, though a deep dive audit and further training	Each child will have a detailed assessment recorded on file that shows good analysis and informed decision making. All staff will have received updated training on assessing and analysing need.	Head of Quality Assurance	01/09/2022	01/09/2023	Revised training delivered to all staff	Action not yet completed, but on track	Team Service Plans
1.3.1.4	To undertake a review of our existing evidenced based assessment processes and develop an training action plan to ensure effective placement matching and evidence based the decision making.	We will see a reduction in placement breakdowns. Evidence from Children and Young People sharing their experience of being in our care shows improvement. Evidence of decision making is recorded on files.	Head of Quality Assurance	14/02/2023	01/08/2023	Improved audit feedback at monthly PAMs	Action not yet completed, but on track	Team Service Plans
1.3.1.5	To use deep dive audit feedback on the consistency of support and pathway plans for Care Leavers to develop an action plan to address issues.	Our Care Experienced Young People feedback that they are supported and have a pathway plan that was co- produced by them. Collaborative audits reflect the pathway plans and feedback from	Head of Corporate Parenting	15/08/2022	31/03/2023	All operation services will have received Improved audit feedback at monthly PAMs	Action not yet completed, but on track	Team Service Plans
	To deliver further training on the quality of the Care Plans to ensure they are purposeful and focussed.	Plans are written in collaboration with Children and young people Plans are written in the voice of the child and young person. Plans are SMART and measured through supervision.	Head of Quality Assurance	08/03/2023	01/09/2023	3 months: Through audit we will see improvement to the quality of care plans 6 months: Thematic audit on care plans completed	Not started	Team Service Plans
	To delivery additional training to strengthen direct work with children and young people and how this is evidenced on case files	A clear voice of the child will be captured on case files through Direct Work.  Improved outcomes for Children shown through timely case progression.  Our direct work will show a greater use of the tools available to provide support and aid understanding Reviewed within audits and supervision.  Improved feedback from children and	Head of Quality Assurance	01/03/2023	01/09/2023	3 months: Training delivered to all staff 6 months: Improved audit feedback at monthly PAMs	Action not yet completed, but on track	Team Service Plans
	To develop and deliver a preventative, robust, and co-produced early intervention for children and families in Luton.	Increased number of families assisted through family network meetings within FPS. All support plans in FPS will evidence interventions co-produced with local community resources. Partner organizations like, faith groups, East European community centre, TOKKO, schools, DWP, CMAHS and health will have an active role in the delivery of the family helo offer. Weekly case reviews. School attendance Service relocated	Head of family Partnership, Service Director,	01/01/2023	on-going		Business As Usual Activity	FPS Service Plan
		School attendance Service relocated to FPS. Practice Leads are linked to schools as set out in the 5 neighbourhoods	Head of Family Partnership	01/01/2023	01/10/2023	1 Month: Attendance Team to move to FPS (05/04/23)	Action not yet completed, but on track	FPS Service Plan
	To promote the Lead Professional role utilising training, partnerships and monthly consultations for parents and staff	We will see less referrals into MASH Improved partner agency engagement for family network meetings (FNM) A larger pool of 'Lead Professionals' available (not just Education colleagues) from faith, third sector, you	Head of Family Partnership	01/01/2023	01/10/2023	6 months: Review and evaluation of training offer completed and presented to DMT 8 Months: Phase 1 of the programme complete, Phase 1 review presented to DMT	Action not yet completed, but on track	FPS Service Plan
	To improve early access to resources for families and their understanding of support options	More families will be engaged with relevant pathways (CAMHS, Early Years Alliance, School Attendance, reducing parental conflict)	Head of Family Partnership	01/01/2023	01/10/2023	6 Months: Website updated 8 Months: Phase 1 of the programme complete, Phase 1 review presented to DMT	Action not yet completed, but on track	FPS Service Plan

Improving implementation of Learning
 Using what we know and learn to continuously improve and enhance the services we deliver for children and families.
 1.1 Feedback from families, children, young people, staff and partners
 1.2 Internal and external audits
 1.3 Research - Regional and National presence

services for CFE will clearly show the "analyses and clearly show the "analyses and protects."    In this part in the calculation and protects are provided by the complete and protects are provided by the complete and protects.   In this part in the calculation and provided by the complete and protects are provided by the complete and protects.   In this part in the calculation and provided by the complete and provided	Objectives	Ref.	Actions we are taking	How will we know it has worked	Responsible Lead Officer	Start Date	End Date	Milestones / expected progress	Rag rating	Detailed action plan
services for CPE et all claudy since will in improve and planning or children, young proper, territors, sold and partitions.  2.1.1.2 To support and permote the electrons for the first time of the first property of the f				Feedback from families, childre	n, young people, staff and par	rtners				
relution Youth Council and the UK Youth Parliament  2.1.1.3. To take part in the material table over the findings become and supported to exhalteners, examing our younge people are calculated, examined and supported to 2.1.1.4. To conclude a archived year companies and cancers.  2.1.1.5. To support our children to fully participate in meetings and where appropriate, chair meetings.  2.1.1.5. To support our children to fully participate in meetings and where appropriate, chair meetings and where appropriate, chair meetings.  2.1.1.5. To support our children to fully participate in meetings and where appropriate, chair meetings.  2.1.1.5. To support our children to fully participate in meetings and where appropriate, chair meetings.  2.1.1.5. To support our children to fully participate in election to their life And Children and young people savice is sought and considered in decision making and meetings.  2.1.1.5. To support our children to fully participate in election to their life And Children and young people souche is sought and considered in decision making and meetings.  2.1.1.5. To support our children to fully participate in election to their life And Children and young people souche is sought and considered in decision making and meetings.  2.1.2.1. Service Directors to meet with providers to We will either have a revised specification or have decisioned by the centre of the control of their meeting and ONLY participation.  2.1.2.1. To evaluate the impact of all schools. Novice existing specific complete the impact of all schools. Novice existing specific complete and analysis and meetings and only to the control of the contr	services for CFE will clearly show the influence and shaping by our children, young		engagement strategy (for our care experienced children and young people) that ensures the voice of our children and	families will be evident in the following: Annual Looked After Reviews Child Protection and CIN reviews Pathway reviews Return home interviews Our independent visiting scheme	Head of Commissioning	01/04/2023	15/12/2023		Not started	Commissioning Service Plan
challengie, ensuring our young people at a calvely recording and supported to juntificipate.  2.11.4 To undertike a review of our methods of people. In militial and carers.  To use the findings to exposition including the possible use of digital platforms.  2.11.5 To support our disheren in fully participate in meetings and where appropriate, chair meetings.  2.11.5 To support our disheren in fully participate in meetings and where appropriate, chair meetings.  2.11.5 To support our disheren in fully participate in meetings and where appropriate, chair meetings.  2.11.5 To support our disheren in fully participate in meetings and where appropriate, chair meetings.  2.11.5 To support our disheren in fully participate in meetings and where appropriate, chair meetings.  2.11.5 To support our disheren in fully participate in meetings and where appropriate, chair meetings.  2.11.5 To support our disheren in fully participate in meetings.  2.11.5 To support our disheren in fully participate in meetings.  2.11.5 To support our disheren in fully participate in meetings.  2.11.5 To support our disheren in fully participate in meetings.  2.11.5 To support our disheren in fully participate in meetings.  2.11.5 To support our disheren in fully participate in meetings.  2.11.5 To support our disheren in fully participate in meetings.  2.11.5 To support our disheren in fully participate in meetings.  2.11.5 To support our disheren in fully participate in meetings.  2.11.5 To support our disheren in fully participate in meetings.  2.11.5 Service Directors to meet with providers to well as the support of the suppor		2.1.1.2	the Luton Youth Council and the UK Youth	meet termly and representatives attending the UK	Head of Youth Partnerships	01/03/2023	01/04/2024			YPS Service Plan
communication with children, young people, families and carers. To use the findings to co-produce a communication strategy to support staff of communication strategy shared with DMT  2.1.1.5 To support the communication strategy to support staff or communication strategy shared with DMT  2.1.1.5 To support the communication strategy to support staff or communication strategy shared with DMT  2.1.1.5 To support the communication strategy of the communication strategy shared with DMT  2.1.1.5 To support the communication strategy of the communication strategy shared with DMT  2.1.1.5 To support the communication strategy of the communication strategy shared with DMT  2.1.1.5 To support the communication strategy of the communication strategy shared with DMT  2.1.1.5 To support the communication strategy of the communication strategy shared with DMT  2.1.2.1 Service Directors to meet with providers to support staff in decision making and meetings.  A fully operational junior safeguarding board  2.1.2.2 To evaluate the impact of all schools having people are chairing key meetings and considered in decision making and meetings.  We will either have a revised specification or have decommissioned the service of the child will evidence participation of undifferent looked after children. Our ambition is to have 20% of our care experienced young people chair their interesting and soft on care capacity of our care experienced young people chair their interesting appears on the child will evidence participation and the communication of the child will evidence participation of undifferent looked after children. Our ambition is to have 20% of our care experienced young people chair their interesting and soft of our children looked after children. Our ambition is to have 20% of our care experienced young people chair their interesting and soft of our care experienced young people chair their interesting and meetings.  A fully operational junior safeguarding board  2.1.2.1 To evaluate the impact of all schools having program a		2.1.1.3	challenge, ensuring our young people are actively encouraged and supported to	Luton Council and encourages children and young	Head of Commissioning	01/03/2023	17/11/2023	produced action plan to be	but on track	Commissioning Service Plan
In meetings and where appropriate, chair meetings and where appropriate, chair meetings and where appropriate, chair meetings and labeling and meetings.  A fully operational junior safeguarding board 2.1.2.1 Service Directors to meet with providers to review existing spec  2.1.2.2 To evaluate the impact of all schools having children's safeguarding boards  2.1.2.2 To evaluate the impact of all schools having children's safeguarding boards  We will have an options paper on next steps, including whether a JSB is required  To have a working culture that is reflective, enabling and empowering  In celation to their life. A licin of the tribit dull evidence programme jointly devised by to discuss identified training requirements.  In relation to their life. A licin of their life. On the voice of the child will evidence programme propriets sought and considered in decision making and meetings.  We will either have a revised specification or have decommissioning 20/12/2022 31/03/2023 Meeting date to be confirmed but on track  Plan  To complete a 6 monthly audit of all training completed Audit and Training Teams to meet monthly to discuss identified training requirements in eligible as skills knowledge matrix to identify training needs.  There will be a skills knowledge matrix to identify training needs.  There will be a skills knowledge matrix to identify training needs.  There will be a skills knowledge matrix to identify training needs.  There will be a skills knowledge matrix to identify training needs.  There will be a skills knowledge matrix to identify training needs.  There will be a training programme jointly devised by to discuss identified training requirements.  There will be a training programme jointly devised by the improvement service and corporate training team following audit activity. We will promote learning the improvement service and corporate training team following audit activity. We will promote learning them followed and staff conferences.		2.1.1.4	communication with children, young people, families and carers. To use the findings to co-produce a communication strategy to support staff with effective communication including the	will inform and improve our communication methods between staff, children, young people, families and carers		01/03/2023	01/08/2023	review complete 6 months: first draft of communications strategy		All Team Service plans
review existing spec decommissioned the service decommissioned the service confirmed but on track Plan  2.1.2.2 To evaluate the impact of all schools having children's safeguarding boards including whether a JSB is required    Description of travel from the Safeguarding boards including whether a JSB is required from the Safeguarding but on track partnership and partnership partnership.		2.1.1.5	in meetings and where appropriate, chair	in relation to their life. All Children and young peoples voice is sought and	Head of Quality Assurance	01/04/2023	01/10/2023	on the voice of the child will evidence participation of our children.  Our ambition is to have 20% of our care experienced young people chair their meetings and 90% participation and 10% of our children looked after chairing their meetings and		QA Service Plan
having children's safeguarding boards including whether a JSB is required Effectiveness in Education travel from the Safeguarding but on track    Effectiveness in Education   Effectivenes in Education   Effectivenes in Education   Effectivenes in Education   Effectivenes   Effectivenes   Effectivenes   Effectivenes   Effectivenes   Effectivenes   Effectivenes	A fully operational junior safeguarding board	2.1.2.1			Head of Commissioning	20/12/2022	31/03/2023			Commissioning Service Plan
2.1.3.1 To complete a 6 monthly audit of all training completed training geams to meet monthly to discuss identified training requirements of lowing audit activity. We will promote learning through practice week and staff conferences.		2.1.2.2				07/03/2023	30/04/2023	travel from the Safeguarding		Education Service Plan
To have a working culture that is reflective, enabling and empowering training completed  Audit and Training Teams to meet monthly to discuss identified training requirements of following audit activity. We will promote learning through practice week and staff conferences.  Training completed  Audit and Training Teams to meet monthly the improvement service and corporate training team following audit activity. We will promote learning through practice week and staff conferences.		0401	To consider a Constitution of the			00/00/2222	04/00/2021	Amenda Halla III III III	A	OA Ossailes Et
		2.1.3.1	training completed Audit and Training Teams to meet monthly	training needs. There will be a training programme jointly devised by the improvement service and corporate training team following audit activity. We will promote learning	Head of Quality Assurance	22/02/2023	01/02/2024	matrix completed 1 month: Meetings scheduled (Audit and Training Teams) 2 months: Update bite sized	but on track	QA Service Plan

The Luton 2040 vision fully embedded within all aspects of CFE activity	2.1.4.1	To complete all activity as set out in the Luton 2040 Service Plan for the department	There will be a child friendly town strategy in place. The Family Partnership will continue to collaborate closely with Public health to develop the family hub model, in year one we expect to see one family hub up and running with up to six over the following 4 years.  There will be collaborative work between other departments, inclusive economy, population wellbeing, fairness and social justice, net zero town, modern and innovative council.	All Heads of Services	07/02/2023	01/04/2026	6 months: Review of Service Plan	Action not yet completed, but on track	All Department Services Plans
Luton achieves Child Friendly Town status	2.1.5.1	To develop a Child Friendly Luton strategy and programme plan	Luton will have a strategy and programme plan in place with identified lead officers for each section	Service Director - Quality Improvement	01/02/2023	01/05/2023	3 months: Draft CFL Strategy and Programme delivery plan ready for DMT	Action not yet completed, but on track	CFL Strategy CFL Programme Plan
	2.1.5.2	To create key focus groups who will work closely with our children, young people and colleagues from across the Luton system including Early Help, Family Hubs and Family Partnership Service to develop the strateqy and programmer.	There will be focus groups in place who will be working with our children, young people and the wider community to ascertain their views about the development of the Child Friendly Luton.	Service Director - Quality Improvement	01/03/2023	01/05/2023	2 Months: Focus groups delivered	Action not yet completed, but on track	CFL Strategy CFL Programme Plan CTB Programme Plan
	2.1.5.3	To develop communication material to enable engagement with Children, Young People and the community	Luton will have a communication strategy in place to ensure the development of Child Friendly Luton is effectively communicated.  Communication leaflets will be printed and readily available for our Children, Young People and Community.	Service Director - Quality Improvement	01/03/2023	01/05/2023	2 Months: draft Communication strategy shared with CFL board	Action not yet completed, but on track	CFL Strategy CFL Programme Plan
	2.1.5.4	Deliver an options appraisal to CLMT on direction of CFL and engagement with Unicef	Paper delivered and decision taken on which option to take	Service Director - Quality Improvement	01/02/2023	01/06/2023	3 weeks: paper to DMT	Action not yet completed, but on track	CFL Programme Plan
	2.1.5.5	To complete all defined actions set out in the Child Friendly Luton strategy and programme delivery plan	There will be a Child Friendly Strategy in place.	Head of Improvement	01/02/2023	01/04/2026	6 months: Regular highlight reporting to CFL Board and DMT	Action not yet completed, but on track	CFL Strategy CFL Programme Plan
To have a Multi-Agency Localities Model in conjunction with Public Health	2.1.6.1	Embed a Family Partnership presence within the new family hubs	Luton will have fully operational multi agency family hubs, with the Family Partnership Service delivering the whole family early help / prevention offer.	Head of Family Partnership	01/03/2023	01/03/2024		Action not yet completed, but on track	FPS Service Plan
To fully utilise all available Sector Led Improvement support	2.1.7.1	Luton to utilise the remaining days of SLI support available to address key improvement activity.	Diagnostic audit of services and training to have been completed.	All Service Directors and Heads of Services	s 01/01/2023	01/09/2023	9 Months: All SLI DFE funded days will have been utilised	Action not yet completed, but on track	All Service Plans
To have CFE representatives at Regional and National events	2.1.8.1	Collate a service wide register of all local, regional and national meetings and events.  Through personal supervision match managers to appropriate events	Luton CFE is represented at all meetings and have the key people with the right knowledge and skills to participate and engage in meetings.	Head of Improvement	20/01/2023	20/04/2023	3 Months: development of the meeting register	Action not yet completed, but on track	All Service Plans
Principal Social Worker will have greater influence on practice development and improvement	2.1.9.1	maximising their skills.  To set up a workforce forum in place to provide regular opportunity for all staff to raise issues and suggestions as to how changes in the work place can support more effective service delivery.	Principal social worker holds regular practice development sessions with all frontline staff focused on identified areas for improvement and provides support.  Principal Social Worker represents the department as a good role model.	Head of Quality Assurance	01/03/2023	01/04/2024	3 months: initial practice development sessions completed	Action not yet completed, but on track	QA Service Plan

3. Improving Tools
Ensuring we have the right tools to enable the workforce to deliver good quality services for children and families.
3.1 Technology and ICT systems
3.2 Management and Performance information
3.3 Effective, user friendly systems and processes that support the task
3.4 Corporate Services and Organisational alignment to deliver Luton 2040

Objectives									
	Ref.	Actions we are taking	How will we know it has worked	Responsible Lead Officer	Start Date	End Date	Milestones	Rag rating	Detailed action plan
			Technology and ICT systems						
To fully utilise the Education and Early Years System (EYES) software	3.1.1.1	To complete an evaluation of the EYES system and identify actions to ensure it meets service needs	Performance reporting working and there is a clear collaboration of data between social care and education. SENAT will be able to produce good quality performance data Successful roll out of portal to parents/schools/partners.	Liquid Logic System Owner	01/04/2023	01/11/2023	3 months: Complete review and develop action plan (if required) 6 months: Provide detailed report to DMT	Not started	EYES Project Plan
	3.1.1.2	Special educational needs assessment team (SENAT) to complete their recording duties in line with their statutory duties.	Reviews and Implementation of EHCPs will be up to date. EHCP assessment to be completed within 20 week timescales. Collaborative work between SENAT and Social Care to formulate plans and actions.	Head of Inclusion	01/12/2022	01/12/2023	6 months: All KPis will be met	Business As Usual Activity	Education Service Plan
	3.1.1.3	To deliver EYES training through the Champion model.	All required staff will have received the training and be able to use system.  Scorecard will show correct usage of the system  We will see a reduced number of errors on the system	Liquid Logic System Owner	On-going	On-going	3 months: Champions trained and in place 4 months: All staff fully trained and able utilise system	Business As Usual Activity	EYES Project Plan
	3.1.1.4	To research additional EYES packages for Passenger Transport Unit (PTU) and Finance.	To have available a home to school travel system. Virtual school pathways Post 16 participation and learning. (NCCIS module)	Liquid Logic System Owner	01/02/2023	01/05/2023	3 months: options paper to be presented to DMT	Action not yet completed, but on track	EYES Project Plan
To have a workforce that is able to confidently utilise both data and systems	3.2.1.1	To refresh and relaunch Training for Systems and refresh and relaunch Data Collation and Interpretation	A developed training schedule is in place for all new starters for the use of Qlik, LCS and EYES. Staff are confident in the use of all systems. Reduction in errors within recording on the system. Reporting is accurate and consistent.	Liquid Logic System Owner	01/03/2023	01/04/2024	6 months: Complete an initial round of refreshed training and feedback findings to DMT	Action not yet completed, but on track	April 2024 Training programme available to all staff.
			Management and Performance information			•			
To have accurate data capture and display systems that meet the needs of the service.	3.3.1.1	To review existing QLIK dashboards and update as required.	Dashboard which is fit for purpose for providing team level data.  Feedback from audit to show effectiveness of the system. Positive feedback from families, better outcomes. Staff empowered to use performance data more confidently	Data and Reporting Manager	On-going	On-going	6 months: to have identified and scheduled all updates for change with Business Intelligence team for action	Business As Usual Activity	All Team Service Plans
	3.3.1.2	To develop an overarching dashboard that supports Senior Leader oversight and decision making.	DMT will have a scorecard that will highlight key strategic measure	Data and Reporting Manager	01/04/2023	01/10/2023	3 months: options paper to be presented to DMT and various boards	Not started	All Team Service Plans
To strengthen the use of our Performance Data Intelligence.	3.3.2.1	To strengthen governance for the Performance and Accountability process. To deliver bespoke data analysis training for CFE leaders.	Regular effective Performance and Accountability Meetings with effective data that supports the journey of the child.	Performance and Relationship Manager	01/05/2023	01/11/2023	6 months: Complete an initial round of training and feedback findings to DMT	Not started	All Team Service Plans
	3.4.3.1	To identify at a team level specific (data usage) training requirements and address through a team training programme.	An improved training programme incorporating key lines of enquiries from audits and other escalations.	Performance and Relationship Manager	01/06/2023	01/12/2023	6 months: training package developed	Not started	All Team Service Plans
			Effective, user friendly systems and processes that sup	port the task					
To have easily accessible accurate policies and procedures that underpin all practice and Safeguarding responsibilities.	3.5.1.1	To ensure the Children's workforce access all required policy and procedures through Tri-X.  To review all procedures and documentation used by Children's Services.  To develop a policy that outlines frequency and reviewing policy documents.	Staff will be working within the guidelines of policies and procedures and will have access to Tri-X. We will see a increased usage of Tri X through its analytics function and we will see an improvement in the quality of service delivery and reports.	Heads of Service	01/03/2023	01/08/2023	3 months: draft policy to be shared at DMT	Action not yet completed, but on track	All Team Service Plans

2040 programme evident in all work that supports outcomes for our Children, Young	To provide atrategic approvate applies place which links to I stop	All decorpts on its place will be signed off through our	Cardas Diseators and			2 months: plans	Action not yet	All Toom Consider
People and Families.  3.6.1.1	To provide strategic corporate service plans which links to Luton 2040 vision.	All department service plans will be signed off through our governance process.	Heads of Service	01/01/2023	01/04/2023	3 months: plans ratified	completed,	Plans
		, ,				at SMLG	but on track	

4. Improving Strategic Partnerships
Effective partnership working to enable the delivery of common goals and a high quality multi-agency response for children and families.

4.1 Corporate Parenting

4.2 Local Safeguarding Partnership

4.3 Corporate Services

4.4 Strategic Commissioning

4.5 Schools and settings

4.6 SEND

Ohioativas	Dof	Actions	How will we know it has worked	Decreasible	Stort Data	End Date	Milastanas	Dog roting	Detailed action plan
Objectives	Ref.	Actions	How will we know it has worked	Responsible Lead Officer	Start Date		Milestones	Rag rating	Detailed action plan
			ing "The Council and partners are ambitiou						
A Local Offer supported by partners that is clear, accurate and easy to navigate	4.1.1.1	To review and update the Financial Commitment for Care Leavers in Luton and Out of Borough.	Our care experienced young people will have access to a more comprehensive package of financial support	Corporate Parenting	01/03/2023	01/04/2024	4 months: Review complete 6 months: New draft financial commitment presented to relevant boards (DMT, CLMT, CIB, CTB, CSRG and Exec)	Action not yet completed, but on track	Care Leavers Ambition Plan Corporate Parenting Service Pla
	4.1.1.2	Review the existing joint housing protocol and negotiate an increased commitment to meet demand	Care Leavers have access to suitable housing when they are assessed as ready to live independently	Head of Service Corporate Parenting	01/04/2023	01/12/2023	3 months: Complete review 5 months: Present new commitment to relevant boards 7 months: Implement revised protocol	Not started	Care Leavers Ambition Plan Corporate Parenting Service Pla
	4.1.1.3	To provide all care experienced adults have access to employment, education and training in accordance with their aspirations through the Local Offer	Care Leavers have wider range of opportunities available to be in employment or training	Head of Service Corporate Parenting	01/01/2023	01/01/2024	6 months: Local Offer reviewed and updated	Business As Usual Activity	Care Leavers Ambition Plan Corporate Parenting Service Pla
	4.1.1.4	Expand the in-house mentoring Scheme to include external providers and care experienced adults	All care experienced adults have the opportunity to work with a mentor	Head of Service Corporate Parenting	01/06/2023	01/04/2024	6 months: Recruitment strategy implemented	Not started	Care Leavers Ambition Plan Corporate Parenting Service Pla
Care Leavers will have a high quality co- roduced Pathway plan.	4.1.2.1	To deliver additional training for all Social Workers, PA's and IRO's so that all Pathway Plans and Looked After Child reviews, record options for staying put and appropriate accommodation	All pathway plans and CLA Review records are deemed good or outstanding in audits.	Head of Service Corporate Parenting	01/06/2023	15/12/2023	6 months: Practice week session delivered	Not started	Care Leavers Ambition Plan Corporate Parenting Service Pla
	4.1.2.2	To strengthen knowledge and skills of staff in Pathway Plan writing.	All pathway plans will be deemed to be good or outstanding in audits.	Head of Service Corporate Parenting	01/06/2023	15/12/2023	6 months: Practice week session delivered	Not started	Care Leavers Ambition Plan Corporate Parenting Service Pla
To provide the best possible care, educational standards and safeguarding for all of our	4.1.3.1	All care experienced adults to be offered direct work with their PA.	There will be records on case files of direct work covering specific areas to support care leavers.	Head of Service Corporate Parenting	On-going	On-going	Monthly: Report into SD PAM	Business As Usual Activity	Care Leavers Ambition Plan Corporate Parenting Service Pla
looked after children and care experienced adults	4.1.3.2	All Care Experienced Children and Care Leavers are offered opportunities to contribute to the review and development of strategies and services.	Strategies and Services provided have been collaboratively reviewed and created with Children and care leavers.	Head of Service Corporate Parenting	On-going	On-going	Monthly: Report into SD PAM	Business As Usual Activity	Care Leavers Ambition Plan Corporate Parenting Service Pla
	4.1.3.3	All workers through the care planning process capture the voice of children and young people.	Care Plans will be deemed good or outstanding in audits, with a clear voice of the child present.	Head of Service Corporate Parenting	On-going	On-going	Monthly: Report into SD PAM	Business As Usual Activity	Care Leavers Ambition Plan Corporate Parenting Service Pla
	4.1.3.4	IRO's and PA's offer all looked after children and care experienced adults the opportunity and support to chair their own meetings	Performance Data will show that meetings are being chaired by children and young people.	Head of Service Corporate Parenting	01/04/2023	01/01/2024	6 months: Practice week session delivered	Not started	Care Leavers Ambition Plan Corporate Parenting Service Pla
	4.1.3.5	Managers and Social Workers record how matching decisions for children in care where made on LCS.	All placements for children will have a clear record of decision making for placements.	Head of Service Corporate Parenting	01/04/2023	01/10/2023	4 months: Practice development session with Managers 6 months: Practice week session delivered	Not started	Care Leavers Ambition Plan Corporate Parenting Service Pla
	4.1.3.6	To undertake an appraisal of the local authority response to separated migrant children seeking asylum and develop an action plan.	The response provided will be identified as good and outstanding in feedback through QA audits.	Head of Service Corporate Parenting	0/1/09/23	01/04/2024	3 months: complete appraisal 6 months: Action plan progressed through governance requirements		Care Leavers Ambition Plan Corporate Parenting Service Pla
			Local Safeguarding Par						
Luton Safeguarding children's partnership is effective in holding all partners to account for the shared delivery of key outcomes for children and young people	4.2.1.1	To coordinate effective multi agency interventions	There will be good communication between Partner agencies to address safeguarding issues/concerns. The Wider Safeguarding Partnership will address	Head of Quality Assurance	01/01/2023	01/01/2024	Annual: Section 11 audit	Business As Usual Activity	QA Service Plan
	4.2.1.2	To include the private fostering requirements in the Luton Place based partnership and share with Pan Beds Strategic Partnership	All partners demonstrate an awareness of fostering responsibilities by providing a detailed action plan of private fostering within their agencies	Head of Quality Assurance	01/09/2022	01/08/2023	4 months: Briefing paper to DMT 5 months: Briefing paper to place based exec (July 2023)	Action not yet completed, but on track	QA Service Plan
	4.2.1.3	The Joint Executive and relevant subgroups to include the improvement strands in their delivery plans	Subgroup delivery/work plans will demonstrate impact. Twice annually Thematic Audits are carried out by the joint learning and improvement sub group.  Through the Section 11 Audit monitoring.	Head of Quality Assurance	01/04/2023	01/04/2024	9 months: Audit completed (if agreed by partnership)	Not started	QA Service Plan
	L		Corporate Service		1				

C	4044	Figure and Dusiness Intelligence to some autable of the Color	All assessment the southeast is according	Finance Duci :	04/05/2022	04/44/0000	2	Not started	
Corporate services, systems and processes will contribute directly to good practice and the delivery of effective Safeguarding services		Finance and Business Intelligence to scope out the potential for a finance based dashboard	All managers will be confident in managing the resources under their responsibility, through the use of Performance/ Dashboards. All cost centre managers will be confident in managing budgets effectively and working	Finance Business Partner		01/11/2023	3 months: Options paper to be presented to DMT	Not started	
	4.3.2.2	To review recruitment and on-boarding processes quarterly	Children Services managers will work alongside the Recruitment team to continue to develop a robust process for ensuring the recruitment process for new staff runs smoothly without delay.	HR Business Partner	01/04/2023	01/10/2023	3 months: Review feedback at workforce board 6 months: Present findings to DMT	Not started	Workforce Board Action Plan
	4.3.2.3	To review current Legal Services processes that support Children Services in delivering effective safeguarding services quarterly	Adequate resources will be allocated to support care proceedings and associated legal advice.	Principal Solicitor		15/09/2023	3 months: 1st review complete with action plan written as required	Action not yet completed, but on track	Family Safeguarding Service Plan
	4.3.2.4	Deliver partner reflective workshop sessions to contribute to future business plan for the LSCP	Evidence through QA that Service Plans will have been collaboratively worked	Head of Service Quality Assurance		01/04/2024	6 months: development day to support Business Plan held	Action not yet	QA Service Plan
		business prairies the ESOI	Strategic Commission				Support Business Flan Held	completed, but on track	
Commissioned CLA Services support LBC to meet sufficiency duty to provide high quality care and support to CYP.	4.4.1.1	To develop strategic commissioning strategy for Corporate Parenting Link with other corporate strategies (JSNA, Participation, SEND, Sufficiency, Corporate Parenting)	Commissioning strategy developed encompassing gaps in service identified. Services commissioned to meet needs. CYP receive appropriate high quality support	Head of Service Commissioning	01/04/2023	01/10/2023	3 months: Draft presented to DMT 6 months: Strategy Implemented	Not started	Commissioning Service Plan
	4.4.1.2	Undertake gaps and needs analysis - Placements sufficiency	and services to meet their individual needs. Commissioned services provide clear		01/02/2023	01/07/2023	Annual: Sufficiency report (Aug)	Action not yet completed, but on track	Commissioning Service Plan
	4.4.1.3	To develop Contract Management processes that support the voice of the child to be heard, understood and captured.	information on eligibility access criteria information is published on the Local Offer.		01/05/2023	01/08/2023	3 months: Processes implemented	Not started	Commissioning Service Plan
	4.4.1.4	Create a sub group of the JSCB and BLMK ICB to promote stronger partnership working between children's and adults services, health, public health and housing			20/02/2023	01/05/2023	3 months: Subgroup created and meetings scheduled	Action not yet completed, but on track	Commissioning Service Plan
To strengthen the Placements Team and Service provided	4.4.2.1	Review the placement matching template	Ability to provide decision making, audit trail for external auditors, Ofsted and young	Head of Service Commissioning	01/03/2023	01/06/2023	3 months: Template implemented	Action not yet completed, but on track	Commissioning Service Plan
	4.4.2.2	To develop a commissioned brokerage service.	people.		01/05/2023	01/11/2023	3 months: Brokerage specification developed	Not started	Commissioning Service Plan
To strengthen joint commissioning with Health and SEND.		Develop the role of a Joint Strategic Commissioner between Health and SEND	Contracts and Contract Management with reporting in place within SEND.	Head of Service Commissioning	01/11/2022	01/06/2023	3 months: Recruitment underway 6 months: JSC in place	Action not yet completed, but on track	Commissioning Service Plan
	4.4.3.2	To develop a joint commissioning intentions strategy action plan.  Review and update contract management processes within SEND	Better Partnership working between LBC and Health.  Commissioning intentions delivered for		01/12/2022	01/05/2023	3 months: Present to required boards 6 months: Implementation of	Action not yet completed, but on track	Commissioning Service Plan
			SEND and Health.  Schools and Setti	200			action plan		
Support in place for schools and settings to improve outcomes at all key stages to be at least in line with national average	4.5.1.1	To promote teaching of oracy in schools and settings, to recruit between 8 and 15 schools for a local area partnership linking with Voice 21 and the Early Years Professional Development Programme together	We will see: Increased outcomes of ELG for communication & language at the end of the early years. Improved outcomes at phonics, KS1 and KS2. Improved outcomes at GCSE (closer to national), including for CYP with SEND	Head of Standards & Effectiveness in Education	26/01/2023	01/02/2024	8 months: Review of statutory assessment outcomes completed (Dec 2023)		Education Service Plan
	4.5.1.2	To share outcomes data of different ethnic groups (every Dec) with school leaders and governors	We will see a higher proportion of early adopter schools engage in Fig Tree International RACE charter mark.	Head of Standards & Effectiveness in Education	01/06/2023	01/06/2026	6 months: A review of impact will have been completed and presented DMT 9 months (Jan 2024): Schools and settings have action plans in		Education Service Plan
To increase uptake of childcare for 2, 3 and 4 year olds	4.5.2.1	To develop a communication strategy to raise awareness of our early years offer to Luton's families with the most vulnerable children, Health and Social Care colleagues.	Increased awareness of our offer Our Scorecard data will show an increase in uptake of places	Senior School Advisor	01/03/2023	01/10/2023	6 months: Draft strategy developed and presented to DMT	Action not yet completed, but on track	Education Service Plan
Our children and young people are able to realise their potential through education and training	4.5.3.1	To review our NEET offer and refresh our NEET action plan to reduce the NEET figures	Capture the voice of children in Years 10 and 11.	Head Teacher Virtual School	01/01/2023	01/09/2024	3 months: Updated plan shared with CEO 12 months: To raise the number	Action not yet completed, but on track	The draft NEET Eradication Plan has been produced.
-							of young people identified as EET from the current yearly average of 95.4% to 97%		
Improve the educational outcomes of all children looked after and care experienced adults.		Undertake termly audits of PEPs to learn from good practice and identify areas for improvement.  To ensure looked after children and young people attend good or outstanding schools and avoid unnecessary school moves.  To ensure all young people who are NEET have an effective NEET plan that supports their return to education, employment or training.  Provide ongoing high quality training and support to schools and	We will closely monitor all schools in and out of borough where our Looked After Children are placed  School Governors are aware of their	Head Teacher Virtual School	01/01/2023	01/01/2024	from the current yearly average of	Business As Usual Activity	Quality Assessment process is already in place  The Virtual School continues to monitor OFSTED reports and looked after Children new into care apply only to good/outstanding schools  Regular reports are run on LCS to show %of NEETs with a NEET plan  Training is available annually

4.5.4.3	Provide ongoing training and support to Social Work teams to ensure that Personal Education Plans (PEP) are an integral part of the care planning process.		Head Teacher Virtual School	01/01/2023	01/01/2024	All SW teams have attended training by 01.09.23 All LAC teams attended training in Feb. 22 re: the 16 + PEP	Business As Usual Activity	Training session to be planned and shared with SW managers before delivery Deliver as part of Practice Week
4.6.1.1	Co-produce and develop an attendance strategy Implement the attendance strategy Reorganise resources to strengthen a bespoke service.	Attendance Strategy in place An established resource offering a high quality service to families, measurable through audits and feedback. Improved attendance of targeted groups	Senior School Advisor	01/11/2022	01/12/2023	10 months: OCA completed 12 Months: Attendance strategy in place with a 5% target improvement for year one	Action not yet completed, but on track	Education Service Plan
4.7.1.1	Expansion of Lady Zia Wernher (LZW) Special School onto a second site at The Leagrave Centre.	That there are sufficient places available for all children who require a specialist school place and that the number of pupils accessing out of borough special schools	Head of Provision and Services in Education	01/09/2021	01/09/2024	This will create an additional 40 places in September 2023 and a further 70 places in September 2024.	Action not yet completed, but on track	Education Service Plan
4.7.1.2	Develop a new secondary special school for September 2026 at Kestral Way.	does not increase	and Services in Education		01/09/2026	This will create an additional 110 secondary special school places in September 2025.	Action not yet completed, but on track	Education Service Plan
			and Services in Education		01/09/2024	Reduction in the pressure on the special school sector and provide a greater diversity of provision.	Action not yet completed, but on track	Education Service Plan
	·		and Services in Education			provision for pupils with SEMH	Action not yet completed, but on track	Education Service Plan
4.7.1.5	Develop a SEN sufficiency strategy	the LA to continue to meet its sufficiency duty with regarding to specialist school places		01/09/2022	01/07/2023	6 Months: Draft prepared	Action not yet completed, but on track	Education Service Plan
4.8.1.1	To review and develop the SENAT service to meet statutory guidelines	We will see an increase EHCP's completed with 20 week timescale currently (Feb 2023) 58% We will see an increase in successful parent requests for an EHCP assessment (2022-23) 46% successful	Head of Inclusion	01/08/2022	01/12/2023	12 months: Review complete (Aug 2023) 18 Months: We will see a increase of 20% in EHCPs completed with 20 week timescale 18 Months: Successful parent assessment requests increase by 10%	Action not yet completed, but on track	Education Service Plan
		All stakeholders will be able to feedback on the strategy			01/09/2025	1 month: Strategy signed off	Action not yet completed, but on track	Education Service Plan
	areas of focus	Plans are developed and support provided in a timely way that meets children's needs				E months: Droft grouted and	Action not yet completed, but on track	Education Service Plan  Education Service Plan
	·	based upon the new framework				shared with system		
4.0.1.4	for SEND with Luton schools which provides support at a universal, targeted and specialist levels in line with assess, plan, do, review	all levels for children with SEND improving inclusion across all schools	nead of inclusion	01/09/2023	01/03/2024	document created and presented to DMT	Not started	Education Service Plan
4.8.1.5		Children and young people will receive the right services at the right time Services will be planned based on priorities with key information and data from stake holders, local indicators	Head of Inclusion	01/09/2023	01/08/2024	5 months: Review completed on training uptake	Not started	Education Service Plan
1011	Identify shillded a secretary for instruction within the later and Con-	Public Health	Discotor of Dublic	04/00/0000	04/06/2025	Conception Asserted Dublic Health	Not started	ICC Diss
4.9.1.1	recentry children's priorities for inclusion within the integrated care System Plan, through the Core 20 + 5 children's Health Priorities (BLMK ICB)	children and young people with regards to their health needs and priorities.  We will see an improvement in our children's health outcomes with a focus on Health	Health	U 1/U0/2U22	01/00/2025	6 months: Annual Public Heatin outcomes frame work update 12 months: Regular review of local strategies and action plan	INUL SIZITEU	ICS Plan
	4.7.1.1 4.7.1.2 4.7.1.3 4.7.1.4 4.7.1.5 4.8.1.1 4.8.1.2 4.8.1.3 4.8.1.4	the care planning process.  4.6.1.1 Co-produce and develop an attendance strategy Implement the attendance strategy Reorganise resources to strengthen a bespoke service.  4.7.1.1 Expansion of Lady Zia Wernher (LZW) Special School onto a second site at The Leagrave Centre.  4.7.1.2 Develop a new secondary special school for September 2026 at Kestral Way.  4.7.1.3 Develop specialist SEN bases attached to mainstream schools.  4.7.1.4 Create new SEMH special school  4.7.1.5 Develop a SEN sufficiency strategy  4.8.1.1 To review and develop the SENAT service to meet statutory guidelines  4.8.1.2 To implement the refreshed SEND strategy  4.8.1.3 To deliver SEND services within the new framework using the 8 areas of focus  4.8.1.4 To develop a SEF based upon the new SEND framework  4.8.1.5 To deliver systemic training and support to schools on inclusion The Inclusion and Wellbeing strategy to be shared and embedded within all Luton schools  4.8.1.1 Identify children's priorities for inclusion within the Integrated Care System Plan, through the Core 20 + 5 children's Health Priorities	the care planning process.  4.6.1.1 Co-produce and develop an attendance strategy Reorganise resources to strengthen a bespoke service.  4.7.1.1 Expansion of Lady Zia Wernher (LZW) Special School onto a second site at The Leagrave Centre.  4.7.1.2 Develop a new secondary special school for September 2026 at Kestral Way.  4.7.1.3 Develop a new secondary special school for September 2026 at Kestral Way.  4.7.1.4 Create new SEMH special school  4.7.1.5 Develop a SEN sufficiency strategy  4.8.1.1 To review and develop the SENAT service to meet statutory guidelines  4.8.1.2 To implement the refreshed SEND strategy  4.8.1.3 areas of focus  4.8.1.4 To deliver SEND services within the new framework using the 8 areas of focus  4.8.1.5 To flowlop a SEP based upon the new SEND framework  4.8.1.6 The Inclusion Services willi co-produce a graduated offer of support for SEND with Luton schools which provides support at a universal, targeted and specialist to review the following the services of the strategy in place for a set and flow and the number of pupils accessing out of borough special schools does not increase  4.8.1.2 To implement the refreshed SEND strategy  4.8.1.3 To deliver SEND services within the new framework using the 8 areas of focus  4.8.1.4 To deliver sexual services will co-produce a graduated offer of support for SEND with Luton schools which provides support at a universal, targeted and specialist tovels in line with assess, plan, do, review with all Luton schools which provides support at a universal, targeted and specialist tovels in line with assess, plan, do, review inclusion and state from stake holders, local indicators  4.9.1.1 Identify children's priorities for inclusion within the Integrated Care System Plan, through the Core 20 + 5 children's Health Priorities (BLMK ICB)  4.9.1.1 Identify children's priorities for inclusion within the Integrated Care System Plan, through the Core 20 + 5 children's Health Priorities (BLMK ICB)	the care planning process.  4.6.1.1 Co-produce and develop an attendance strategy Reorganise resources to strengthen a bespoke service.  4.7.1.1 Expansion of Lady Zia Wernher (LZW) Special School onto a second site at The Leagrave Centre.  4.7.1.2 Develop a new secondary special school for September 2026 at Kestral Way.  4.7.1.3 Develop a new secondary special school for September 2026 at Kestral Way.  4.7.1.4 Create new SEMH special school of September 2026 at Kestral Way.  4.7.1.5 Develop a SEN sufficiency strategy  4.7.1.6 Develop a SEN sufficiency strategy  4.7.1.7 To review and develop the SENAT service to meet statutory guidelines  4.8.1.1 To review and develop the SENAT service to meet statutory guidelines  4.8.1.2 To implement the refreshed SEND strategy  4.8.1.3 To deliver SEND services within the new framework using the 8 areas of focus  4.8.1.4 To develop a SEN sufficiency strategy  4.8.1.5 To deliver SEND services within the new framework using the 8 areas of focus  4.8.1.6 To length special strategy to be shared and embedded with 20 ways the support provided in Plead of Inclusion The Inclusion and Services in Servic	the care planning process.  4.6.1.1 Co-produce and develop an attendance strategy Implement the attendance strategy Reorganise resources to strengthen a bespoke service.  4.7.1.2 Expansion of Lady Zia Wernher (LZW) Special School onto a second site at The Leagrave Centre.  4.7.1.3 Develop a new secondary special school for September 2026 at Kestral Way.  4.7.1.4 Create new SEMH special school for September 2026 at Kestral Way.  4.7.1.5 Develop a new secondary special school of mainstream schools.  4.7.1.6 Develop a SEN sufficiency strategy  4.7.1.7 Develop a new secondary special school for September 2026 at Kestral Way.  4.7.1.7 To review and develop the SENAT service to meet statutory guidelines  4.8.1.1 To review and develop the SENAT service to meet statutory guidelines  4.8.1.2 To implement the refreshed SEND strategy  4.8.1.3 To deliver SEND services within the new framework using the 8 strategy of the Sex occasion of the support available for the support avai	the care planning process.  4.6.1.1 Co-produce and develor an attendance strategy (Injurioring the attendance strategy) (An established retours of fering a high quality service to familiae, measurable through sudias and feedback. Improved attendance of tramples, measurable through sudias and feedback. Improved attendance of tramples process. In the confirmation of	4.7.1.1 Expansion of Lady Zas Wernher (LZV) Special School onto a state from the area of surface and developing an attendance strategy in place.  4.7.1.1 Expansion of Lady Zas Wernher (LZV) Special School onto a state from the attendance strategy in place through a second site at The Lagragive Certific. Improved attendance of targeted groups in place for control of the second site at The Lagragive Certific.  4.7.1.1 Expansion of Lady Zas Wernher (LZV) Special School onto a state free are sufficient places are associated subject and that the number of pupils place and that the number of pupils schools (see an increase of pupils place) and schools for September 2028 at at a strate of pupils place and the three purposes schools (see an increase of pupils place) and schools are pupils schools (see an increase of pupils place) and schools are pupils placed for pupils p	be care planning process.  4.6.1.1 Coprosition and develop the attendance strategy in planning process. Alternative control of the planning process. Alterna