

SMART planning helps families and practitioners develop plans that are clear and address the identified risks and needs.

The development of the plan is everyone's responsibility; practitioners and the family. It should draw upon the resources available to both the family and the practitioners; their skills, expertise and knowledge and should demonstrate the wishes and feelings of the child. Practitioners should feel able and committed to challenging each other about aspects of plans that they feel are not SMART.

### **What does a SMART plan look like?**

When developing any plan to meet the needs of a child, young person or their family, the plan should be **SMART**.

SMART planning principles in Portsmouth are:

**Specific**

**Measureable**

**Agreed**

**Realistic**

**Timely**

### **Why is it important?**

Plans are written to enable families to recognise what needs to change and to have a clear understanding of what they as the family need to do differently and how they will be supported by the professional network to achieve and sustain the changes.

Additionally, Serious Care Reviews have consistently raised concerns about issues with planning including: lack of focus; plans not reflecting identified concerns; over optimism; and disguised compliance which prevents risks or issues being appropriately addressed.

### **What do we mean by 'Specific'?**

All aspects of the plan should be as specific as possible - for example, if a service is identified to meet the need, the plan should state: when the service will be provided, how frequently, what exactly will be provided, and what the outcome of providing the service will be. Being specific enables families and practitioners to clearly understand what the concerns are and what is expected of them. The plan should also be specific about who is responsible for what aspects of the plan (a named practitioner or family member); how often they should meet, date when they would be expected to have the work completed and date of next review.

### **What do we mean by 'Measureable'?**

All aspects of the plan should be measureable - this enables both families and practitioners to be clear about progress made and quickly identify when the plan is not working. A measurable plan will have a date by which progress will be expected to be seen, engagement with a service or completion of a programme depending on the 'next steps' identified within the plan. The views of the child and young person about progress should be obtained in addition to parents and other workers.

### **What do we mean by 'Agreed'?**

Plans are most likely to succeed and actions achieved when developed and agreed by children, parents / carers and practitioners; investing in and taking ownership for the plan.

We should take into account the child or young person's wishes and feelings and try to ensure their inclusion and agreement throughout the planning process.

It is important to engage parents and carers in CIN, CP and LAC planning, remember that parents maintain parental responsibility when a child is looked after and their engagement is key should reunification be considered now or in future planning.

Practitioner's agreement, commitment and ownership to the plan are essential to achieving successful outcomes for children. However, it is important for Practitioners to provide constructive challenge when planning for children.

If all aspects of the plan are not agreed then this should also be recorded and the implications for this non-agreement would need to be considered in the overall assessment of risk and likelihood of achieving change.

### **What do we mean by 'Realistic'?**

Plans should be realistic and based upon our knowledge and understanding of the family and the specific developmental needs of the child or young person. For example, it would not be realistic (or indeed safe) to expect a parent with long term alcohol misuse issues to suddenly stop drinking. This aspect of the plan would need to be carefully developed with the input of a specialist practitioner who could best inform what would be realistic.

Plans which are realistic are more likely to succeed in meeting the identified outcomes and long term goals. Small steps are often key to successful outcomes which are sustained over time and the success built on.

### **What do we mean by 'Timely'?**

All aspects of the plans should contain realistic timescales with some being broken down into stages to make them more achievable. This will enable everyone to be clear about what is expected of them and by when, as well as allowing progress to be monitored. This broken down timescale should be specific within the Next Steps section of the plan.

Timescales should be considered at each review of the plan and amended as necessary.

### **Checklist**

When creating a SMART 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 and how each part will be measured?
3. Is the plan written in family friendly language?
4. Does the plan clearly show who is responsible for each part?
5. Are the expectations in the plan appropriate and realistic in regards to the needs of the child or young person?
6. Are the expectations in the plan appropriate and realistic in regards to the needs of the family?
7. Does the plan take into consideration the specific risks identified?
8. Does the plan clearly show when each stage is expected to be completed?
9. Have the parents, child or young person had opportunity to contribute to the plan?
10. Is the plan signed by the parents, child or young person and those involved in developing the plan?

### **For more information:**

SMART planning with children, young people, parent / carers and practitioners and gaining everyone's views and feelings involved in the plan underpins Portsmouth commitment to

Restorative Practice and enables people to find creative solutions to issues that are affecting them that avoid blame, retribution and punishment.

SMART CIN, CP and LAC plans are available in the OMG library.

**Exemplar of a SMART Plan - Sally's Plan**

No	RISKS / CONCERNS What are we concerned about in relation to Sally's unmet needs?	NEXT STEPS What needs to be done to reduce the risks/concerns and meet needs?	By When	By Whom	OUTCOME How will we know the child's/children's needs are being met?
1	<b>Keeping me safe</b> Sally has been witnessing domestic abuse by her father Steve Budd on her mother Sarah Budd when they lived in London.	Discussions to be carried out with Karley Middleton (social worker) on the harm caused by unhealthy relationships. Sarah must report any future incidents of domestic abuse to the police.	10/11/ 19	Sarah Budd (mother) Karley Middleton (Social worker)	Sarah showing increased insight into the harm caused to children and no further evidence of any form of domestic abuse.
2	<b>Being Healthy</b> Sally's health needs have been neglected in the past and resulting in dental decay. Sally is not registered with a GP since moving from London. Parental mental health: Sally and Harry have been exposed to their mother's low mood.	Sarah Budd to register Sally with a Dentist for regular check-ups. Sarah Budd is to register Sally with a Doctor and take her to her GP if she is unwell. Sarah Budd to continue to take her medication (Sertraline) and have regular reviews with her GP.	1/10/19  1/10/19  1/10/19	Sarah Budd (mother)  Sarah Budd (mother)  Sarah Budd (mother)	Sally general health will improve.  Evidence over time of improved emotional regulation and effectively managing day to day tasks, planning and organisation.
3	<b>Learning and Achieving</b> Sally's school attendance is 65% since moving to Charter Academy.	Sarah Budd to ensure Sally is taken to school and picked up on time, uses homework club and assists Sally with her homework. Charter Academy to provide ELSA support for Sally.	15/10/19	Sarah Budd Sarah Moss (Teacher)	96% school attendance, completion of homework and Sally reaching expected achievements levels