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NOTTINGHAM CITY COUNCIL CORPORATE PARENTING BOARD

Monday, 24 April 2017 Date:

Time: 2.30 pm

LB 41 - Loxley House, Station Street, Nottingham, NG2 3NG Place:

Councillors are requested to attend the above meeting to transact the following business

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Corporate Director for Strategy and Resources

Governance Officer: James Welbourn Direct Dial: 0115 8763288

1	APOLOGIES FOR ABSENCE	
2	DECLARATIONS OF INTERESTS	
3	MINUTES To confirm the minutes of the meeting held on 23 January.	3 - 10
4	THE RESPONSE TO MISSING CHILDREN Report of Director, Children's Integrated Services	11 - 16
5	EDUCATIONAL ATTAINMENT OF CHILDREN IN CARE Report of Director, Children's Integrated Services	17 - 24
6	CHILDREN IN CARE COUNCIL - HAVE YOUR SAY SURVEY RESULTS 2016 Report of Director, Children's Integrated Services	25 - 36
7	EDGE OF CARE PROVISION Report of Director, Children's Integrated Services	37 - 42
8	THE HEALTH OF CHILDREN IN CARE OF THE LOCAL AUTHORITY 2016 / 17 Report of Director, Children's Integrated Services/NHS Nottingham City Clinical Commissioning Group (CCG)	43 - 50

9 CHAIR'S UPDATE

Verbal Report

IF YOU NEED ANY ADVICE ON DECLARING AN INTEREST IN ANY ITEM ON THE AGENDA, PLEASE CONTACT THE GOVERNANCE OFFICER SHOWN ABOVE, IF POSSIBLE BEFORE THE DAY OF THE MEETING

CITIZENS ATTENDING MEETINGS ARE ASKED TO ARRIVE AT LEAST 15 MINUTES BEFORE THE START OF THE MEETING TO BE ISSUED WITH VISITOR BADGES

CITIZENS ARE ADVISED THAT THIS MEETING MAY BE RECORDED BY MEMBERS OF THE PUBLIC. ANY RECORDING OR REPORTING ON THIS MEETING SHOULD TAKE PLACE IN ACCORDANCE WITH THE COUNCIL'S POLICY ON RECORDING AND REPORTING ON PUBLIC MEETINGS, WHICH IS AVAILABLE AT WWW.NOTTINGHAMCITY.GOV.UK. INDIVIDUALS INTENDING TO RECORD THE MEETING ARE ASKED TO NOTIFY THE GOVERNANCE OFFICER SHOWN ABOVE IN ADVANCE.

NOTTINGHAM CITY COUNCIL

CORPORATE PARENTING BOARD

MINUTES of the meeting held at Ground Floor Committee Room - Loxley House, Station Street, Nottingham, NG2 3NG on 23 January 2017 from 14.30 -15.55

Membership

<u>Absent</u>

Present Councillor Liaqat Ali Councillor Jim Armstrong Councillor Glyn Jenkins Councillor Sue Johnson Councillor Ginny Klein (Vice Chair) Councillor Sally Longford Councillor David Mellen (Chair) Councillor Wendy Smith Councillor Marcia Watson Councillor Sam Webster

Colleagues, partners and others in attendance:

Sonia Cain Sarah Christine Cairns	Service Manager, Fostering and AdoptionYour Voice
Clive Chambers	- Head of Service – Safeguarding and Quality Assurance
Sharon Clarke	 Service Manager, Children in Care
Steve Comb	 Head of Children in Care
Sarah Fielding	- Director of Education
Sam Flint	 Children in Care Police Officer
Larelle Flowers	 Children in Care Council
ТМ	- Foster Carer
Gill Moy	 Director of Housing Services, NCH
Shelley Nicholls	 Youth Offending Team
Sam John Oliver	 Children in Care Council
Racheal Osborne	 Missing Children's Team
Natalie Pink	 YOT Lead Children in Care
Jon Rea	 Engagement and Participation Lead Officer
James Welbourn	- Governance Officer
Jordan Whatman	 Project Officer, Children in Care

43 APOLOGIES FOR ABSENCE

None.

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44 DECLARATIONS OF INTERESTS

None.

45 <u>MINUTES</u>

The minutes from 21 November were agreed and signed by the Chair.

46 FOSTERING AND ADOPTION PANEL CHAIR'S REPORT

Sonia Cain, Service Manager for Fostering and Adoption introduced a report on the Fostering and Adoption Panel.

The following points were highlighted:

- (a) there used to be one and a half panel managers this has been reduced to one;
- (b) the following are some example questions to Foster Carers from adoptees:
 - 1. How will I know that I will be safe in your home?
 - 2. Will you be loving, happy and friendly?
 - 3. How will you show you are loving?
 - 4. If I misbehave how will you discipline me?
 - 5. Will you take me to see your family?
 - 6. How would you introduce me to a stranger?
 - 7. Will I be allowed to have friends over to play?
 - 8. How much pocket money will I be getting?
 - 9. Can I continue playing for the same sports club?
 - 10. Would I be allowed to bring a boyfriend/girlfriend home?

The Panel themselves will select two or three questions to ask Foster Carers;

- (c) the 'Life Story Book' gives information to the child and prospective adopters about their whole life journey;
- (d) if there is a poor report to the Fostering and Adoption Panel, this will be fed back to a Service, or Team Manager and they can address report issues in Supervision;
- (e) Panel Chairs and advisers meet with the Service Manager for Fostering and Adoption quarterly at the Panel Steering Group. In that meeting, any issues with reports, or the running and functioning of the Fostering and Adoption Panel can be addressed;
- (f) one area for development would be to have Councillor representation on both Panels;
- (g) a 'connected person' is someone with a connection to an adoptee, such as an Auntie or Uncle. A 'connected persons extension' would be an eight week extension to the original deadline of 16 weeks.

RESOLVED to note the activity of the Fostering and Adoption Panels.

47 <u>SAFEGUARDING CHILDREN AND YOUNG PEOPLE FROM CHILD</u> <u>SEXUAL EXPLOITATION</u>

Racheal Osborne, Child Sex Exploitation (CSE) Coordinator & Missing Children's Team Manager introduced a report on Safeguarding Children and Young People from Child Sexual Exploitation.

The following points were highlighted:

(a) the Broken Dreams CSE awareness training was delivered with Health colleagues in mind but it is available for all agencies. So far, training has been delivered to Southglade and Victoria Leisure Centres, and Byron House. Most Foster Carers have attended Broken Dreams.

Broken Dreams takes place over a half day;

- (b) a training evening was developed aimed specifically at security staff. 58 attended, and then went away to their own firms to feed this training back to other staff members;
- (c) 'U Create' has been rolled out into schools to help young people create advertisements for TV and radio. There is a competition being run with Total Access radio; the school that comes first will get to go into the radio station to produce their advert;
- (d) Racheal is sending out letters to schools who didn't take part in 'Luv U 2';
- (e) the upcoming 'Alex' project will hopefully catch homeless families whose children have been unable to get access to courses such as 'Luv U 2' and 'U Create' in school.

Numbers of children in Highwood House were high over Christmas; over 90 children were there, whereas there would normally be 40-50 in their in any given month;

- (f) 'Protect and Respect' are part of the local arrangements with the Police and the CPS;
- (g) Police now mark Child Abduction Warning notices to say if they are specific to CSE;
- (h) work with schools does not always include colleges and further education establishments;
- (i) the support from children in care on the new safety strategy has been invaluable. There is now a resource to steer parents and carers towards.

RESOLVED to:

(1) note the performance in the current action plan;

(2) note proposed future developments.

48 <u>REDUCING OFFENDING BEHAVIOUR</u>

PC Sam Flint, Children in Care Police Officer (CiCPO) at Nottinghamshire Police, and Natalie Pink, Case Manager at Nottingham Youth Offending Team (YOT) introduced the item on Reducing Offending Behaviour.

The following points were highlighted:

- the rate of reduction in offending behaviour is good; because the rate is good it can be difficult to carry on driving this down, and this continues to be a challenge;
- (b) Sam and Natalie get together on a regular basis to share good practice, as well as coming up with ways of avoiding bad practice;
- (c) all staff are to have a refresher in CSE, as well as the 'Prevent' strategy;
- (d) the Leaving Care service has received positive feedback on keeping people out of trouble;
- (e) OFSTED are keen on the cross-authority protocol;
- (f) in terms of the children in care population, the number involved in the criminal justice system has dropped by two thirds. The relationship with the Police and these young people is important as it gets the Police to see them in a different way. If you prevent children in care getting involved with the criminal justice system at an early age, it helps to reduce future offending.

RESOLVED to:

- (1) recognise the further reduction of offending behaviour within the Children in Care (CiC) population in the financial year 2015-16;
- (2) recognise the importance of the role of CiCPO and YOT Lead in working together to reduce offending and safeguard CiC;
- (3) support the YOT Board, who propose to formally recognise and adopt the Multi Agency Protocol (currently in draft form), to reduce the criminalisation of CiC for Nottingham City, working towards its adoption as a cross-authority protocol;
- (4) note the continued drive for early identification and intervention in offending within the CiC population, to target resources and inform service development, and embed the use of restorative approaches to reduce the risk of offending across residential and foster care settings. This mirrors the YOT Plan 2016-17;

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(5) support a self-assessment process, by Nottingham City Council, working with the Children in Care and Care Leavers (CL) Council and partners, to review our performance against the recommendations of 'In Care, Out of Trouble' (2016), Lord Laming's Review by the Prison Reform Trust. To consider findings and recommendations in light of the pending Charlie Taylor Review, in order to improve outcomes for our CiC and CL.

49 CHILDREN IN CARE COUNCIL UPDATE

Jon Rea, Engagement and Participation Lead Officer introduced an update on the Children in Care Council.

The following points were highlighted:

- (a) there are between 12-16 active members, who take on some tough issues in a meaningful way;
- (b) Councillors and senior officers have met with the CiC Council the last meeting was around the consistency of placements, as well as other issues;
- (c) a newsletter is being developed to share outcomes more broadly. The first issues will be a retrospective on the previous term;
- (d) members of the CiC Council took part in a 'Commissioners takeover day'. There were placements with Loxley House restaurant, as well as the Marketing and Communications team.

In addition, there was individual shadowing with Councillors and MPs. These activities are due to be repeated;

(e) the Children in Care Council awards ceremony took place at the Council House alongside the Lord Mayor and the Sheriff of Nottingham. The winner was Sam Oliver.

There were also a number of Bronze certificates handed out;

- (f) a Kids' Club for 8-12 year olds has been launched as a fun way to have a say. The first was held at the Council House before Christmas, with the next one planned before the Easter holidays;
- (g) the spring term focus is 'safe lives and positive communities';
- (h) NCH extended an offer to give basic DIY lessons for care leavers;
- (i) there has been a request from the Commons Select Committee on the role of fostering. Lillian Greenwood MP attended a fostering meeting in the last week, and is interested in meeting the CiC Council on the same subject.

RESOLVED to note the update.

50 CHAIR'S UPDATE

Councillor David Mellen, Portfolio Holder for Early Intervention and Early Years gave attendees an update on activities over the past couple of months.

- A 12 carriage train from Nottingham Station took in Grantham, Peterborough and the Vale of Belvoir, and contained a mixture of children;
- Over the Christmas period huge generosity was shown by staff and businesses to sponsor a star for children in need, as part of the 'Stars Appeal;
- People contributed to 40 hampers for care leavers;
- 500+ pantomime tickets were given away;
- Parties were held for Foster Carers and their families, as well as adopters and their families;
- The 'Big it Up' celebration event was held before Christmas, and was an opportunity to celebrate the achievements of young people. Two events were held, with one for the young at Colwick, and the other for older people at Nottingham Trent University.

51 FORWARD PLAN

The Forward Plan was approved.

BROKEN DREAMS CSE Awareness Training. Quarter 2

Minuteoltieghand Thiversity Hospitals





NUH Sexual Health Outreach Services Team and the Health Improvement Coordinator for Nottingham City Care have provided bespoke CSE awareness training to a wide range of agencies in quarter 2.

The training aims to; increase awareness of child sexual exploitation amongst staff who work directly with young people and to enable them to respond appropriately and confidently to concerns or disclosures of such exploitation and manage them effectively.

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This quarter, staff delivered approximately 28 hours of training over 8 training sessions to 243 staff including;

- INSET training for 90 teachers at Bilborough Sixth form College
- INSET training for teaching staff at NUAST
- A full day for staff from private residential care for looked after children
- Half day training for teaching staff and mentors at Channeling Positivity (Free school for young people who do not do well within mainstream education).
- A short input in collaboration with the Police for 40 NUH paediatricians
- > A full day training for residential care staff for looked after children from the YMCA
- > A full day training for staff from POW
- A short input in collaboration with the police for City security staff

28 hours of training delivered via 8 training sessions delivered to 243 staff

For more information, please contact:

Judith Green – Outreach/Health Promotion Lead, NottIngham University Hospitals Sexual Health Service 115 9691169 Ext 76617 1 Judith.green@nuh.nhs.uk

Vanessa McFarlane - Health Improvement Coordinator, Nottingham City Care

1 Vanessa.McFarlane@nottinghamcitycare.nhs.uk

What participants said about the training;

Thanks for this morning's sessions – It was really informative and I think staff got a lot from it. It certainly gave food for thought. Maddy Varley, Welfare Officer/Designated Safeguarding Person

Highly competent, effective and professionally delivered.

Clear and sensitive delivery.

Excellent Pace & Delivery. Excellent choice of key points to address – structured and pitched well. Highly informative (and pleasantly humorous) FAB.

Excellent trainers who obviously had a wealth of information and were extremely engaging.

Teaching staff, Bilborough College

The training was informative and the trainers kept us engaged.

Good stuff - emotive.

Really good presentation and an approach that kept professional but informal- great for this kind of training

I think the trainers were excellent and explained everything clearly, any other training would be nice.

Very real, no fancy words so I understood. Residential Care Staff from Pathway Care Solutions.

Great mix of input/group activity.

Very informative and delivered in an engaging manner -Thank you ladies please come back.

Teachers and mentors, Chaneling Positivity

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CORPORATE PARENTING BOARD – April 2017

Title of paper:	The Response to Missing Children					
Director(s)/ Corporate Director(s):	Helen Blackman – Director, Children'sWards affected:Integrated ServicesAll					
Report author(s) and contact details:	Clive Chambers – Head of Service, Safeguarding and Quality Assurance <u>clive.chambers@nottinghamcity.gov.uk</u> Racheal Osborne – CSE Coordinator & Missing Children's Team Manager <u>racheal.osborne@nottinghamcity.gov.uk</u>					
Other colleagues who have provided input:						
Date of consultation wi (if relevant)	th Portfolio Holder(s)					
Relevant Council Plan I	Key Theme:					
Strategic Regeneration a						
Schools	•					
Planning and Housing						
Community Services						
Energy, Sustainability an						
Jobs, Growth and Transp						
Adults, Health and Comn						
Children, Early Interventi	on and Early Years					
Leisure and Culture						
Resources and Neighbourhood Regeneration						
Summary of issues (including benefits to citizens/service users):						
This report sets out the local arrangements in place to respond to children who go missing from home or care. These arrangements have been established because children who go missing have a range of vulnerabilities, including the risk of potential sexual exploitation.						

The current local protocol uses the following terms:

- Missing those children whose whereabouts are not known or who are deemed vulnerable for other reasons, e.g. concern regarding possible sexual exploitation.
- Absent i.e. those children who are not where they are supposed to be.

These definitions will be amended in the near future to reflect changes to national Police guidance.

Recommendation(s):

1

To note the content of this report.

1 REASONS FOR RECOMMENDATIONS

1.1 Corporate Parenting Board members are asked to note this report given the implications for the safety and well-being of children in care.

2 BACKGROUND (INCLUDING OUTCOMES OF CONSULTATION)

- 2.1 Children from all backgrounds will go missing, but there are some groups more likely to run away than others. Research suggests that nationally, 10,000 children run away from care, home or foster placements each year. These children may face an increased risk of significant harm, including the potential of being of being exposed to the risk of alcohol and drugs, criminal and sexual exploitation.
- 2.2 As indicated in the previous report to the Corporate Parenting Board regarding missing children (March 2016), there are well established arrangements to respond to missing children in Nottingham City. These are based on effective partnership working with key agencies, particularly the Police. This work is undertaken in accordance with both national and local practice guidance, particularly the Nottingham City Safeguarding Children Board (NCSCB) and the Missing Children Protocol, which is jointly agreed between Nottingham City Safeguarding Children Board and the corresponding Board in the County.
- 2.3 The protocol recognises the importance of identifying and targeting the response to missing children who are most vulnerable. A key mechanism for doing this has, until recently, been a differentiation between children who are missing (i.e. those children whose whereabouts are not known or who are deemed vulnerable for other reasons, e.g. concern regarding possible sexual exploitation) and absent (i.e. those children who are not where they are supposed to be). These were nationally agreed definitions that reflected Association of Chief Police Officer (ACPO) guidance.
- 2.4 The definition of absent has come under increasing scrutiny, due to concerns that a number of vulnerable children were not being fully safeguarded as they were deemed absent rather than missing. As a consequence, in November 2016 the National College of Policing issued further guidance which removed the term absent and introduced a graded risk scale in relation to reports of missing people. Although we plan to update the local practice guidance in response to this development, it is important to note that within Nottingham City Council we have consistently adopted the same approach to children reported missing to the Police, irrespective of whether they were categorised as missing or absent.
- 2.5 Local arrangements are comprised of a number of connected elements:
 - Strategic The NCSCB has a multi-agency Missing Children sub-group. This group ensures that there is effective communication and co-ordination of local activity. The Board also receives performance information in relation to Missing Children.
 - Operational Work with missing children takes place in the context of the wider safeguarding arrangements. Other safeguarding measures make a direct contribution to promoting the safety of vulnerable children who go missing, e.g. the Multi Agency Sexual Exploitation (MASE) panel receives information about children who are at risk of sexual exploitation and also go missing.

 In addition to the wider arrangements, there are specific measures in place for missing children. Every month there is a meeting between Police and Children's Social Care staff, to discuss those children who have been reported missing most frequently in the previous period. A manager from one of Nottingham City's residential units attends these meetings. Where a young person is identified as being particularly vulnerable, a meeting will take place to look at how best to support and protect them. This meeting will be chaired by a Team Manger or Independent Reviewing Officer and will involve staff from all agencies who work with the child and family.

Return Interviews

- 2.6 The Police share information about all young people who are reported missing with Nottingham City Council. The Police also notify Nottingham City when a young person has returned. This information sharing takes place with Nottingham City's Missing Children team, which is a small team that is line-managed by the Child Sexual Exploitation Co-ordinator (CSE Co-ordinator).
- 2.7 If a child goes missing on two or more occasions, or only once but is identified as being vulnerable, they will be offered a return interview. All return interviews are undertaken by someone independent, i.e. not responsible for the day to day care of the young person. Return interviews for children in care are always undertaken by someone independent of the placement where the young person lives.
- 2.8 The primary purpose of a return interview is to identify / address safeguarding needs and signpost the young person and their family to support. Key to this is identifying the factors which led to the young person going missing. Consideration is given to both push factors, things that are causing the young person to be unhappy or feel unsafe, or pull factors, things outside the home which are attracting the young person.
- 2.9 There is a secondary benefit from return interviews in that they provide potentially valuable insights into the experiences of the young person who went missing, which can be used to help protect other young people. Prior to the transition to the new IT system (Liquid Logic), the CSE Co-ordinator had been reviewing return interviews and cross-referencing the information in them. This has enabled us to identify some young people who were missing but not being reported to the Police, potential locations where young people may congregate and potential adults of concern. This facility was not available on the initial transfer to Liquid Logic.
- 2.10 The Ofsted inspection in January 2017 identified the need to increase the take up of return interviews, and ensure that they were all being reviewed. We have already taken a number of measures in response to this:
 - The CSE Coordinator is once again able to review return interviews, and authorise them.
 - We have worked with the Police to revise the information that they give to families and young people, when a young person goes missing. The revised information makes the expectation that a return interview will take place much clearer.
 - We have revised the letter sent to parents regarding return interviews to similarly strengthen this. Page 13

• We have drafted a Regional Protocol for missing children, which has been through one round of consultation with other local authorities and is therefore expected to be agreed shortly.

Further work is planned to build on these developments:

- We will be delivering training regarding return interviews for all staff who undertake them.
- We plan to introduce a specific target, for the take up of return interviews, into the Children's Integrated Services Directorate delivery plan.
- 2.11 As reflected in the information above, the response to children who go missing in Nottingham is multi-agency in nature with all key organisations fully engaged in supporting vulnerable children.

3 OTHER OPTIONS CONSIDERED IN MAKING RECOMMENDATIONS

3.1 None.

4 <u>FINANCE COMMENTS (INCLUDING IMPLICATIONS AND VALUE FOR</u> <u>MONEY/VAT)</u>

4.1 There are no direct financial implications or value for money issues arising from this report.

5 <u>LEGAL AND PROCUREMENT COMMENTS (INCLUDING RISK MANAGEMENT</u> <u>ISSUES, AND LEGAL, CRIME AND DISORDER ACT AND PROCUREMENT</u> <u>IMPLICATIONS)</u>

5.1 None.

6 STRATEGIC ASSETS & PROPERTY COMMENTS (FOR DECISION RELATING TO ALL PROPERTY ASSETS AND ASSOCIATED INFRASTRUCTURE) (AREA COMMITTEE REPORTS ONLY)

6.1 None.

7 EQUALITY IMPACT ASSESSMENT

7.1 Has the equality impact of the proposals in this report been assessed?

No An EIA is not required because: (Please explain why an EIA is not necessary) The report does not contain proposals or financial decisions.

8 <u>LIST OF BACKGROUND PAPERS OTHER THAN PUBLISHED WORKS OR</u> <u>THOSE DISCLOSING CONFIDENTIAL OR EXEMPT INFORMATION</u>

8.1 None.

9 PUBLISHED DOCUMENTS REFERRED TO IN COMPILING THIS REPORT

- 9.1 National College of Policing guidance <u>https://www.app.college.police.uk/app-content/major-investigation-and-public-protection/missing-persons/</u>
- 9.2 Nottingham City Safeguarding Children Board Missing Children Protocol

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Corporate Parenting Board – April 2017

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liti	e of paper:	Educational Attainment of Children in Care				
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	ector(s)/	Helen Blackman – Director, Children's Integrated Services	Wards affected:			
Cor	porate Director(s):	All All				
Rep	ort author(s) and	Jasmin Howell - Service Manager, Virtual	School			
con	tact details:	jasmin.howell@nottinghamcity.gov.uk				
		-				
	er colleagues who	Sarah Fielding – Director of Education				
hav	e provided input:	sarah.fielding@nottinghamcity.gov.uk				
Dat	e of consultation wit	th Portfolio Holder(s)				
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	dren, Early Intervention	•				
Leis	ure and Culture					
Res	ources and Neighbou	Irhood Regeneration				
		luding benefits to citizens/service users				
		pdate of the work of the Nottingham City Vi	rtual School and provides			
deta	alis of attainment in th	e 2015-16 academic year.				
Rec	ommendation(s):					
1		the recent trends and current levels	of educational attainment for			
		hildren in Care (CiC) in comparison to the	performance of all children and			
	CIC nationally.					
_						
2		rk and interventions of the Virtual School to				
	educational achieve	ment of Nottingham City looked after childre	en.			

1 REASONS FOR RECOMMENDATIONS

1.1 To ensure that we identify any emerging trends in the achievement of Nottingham City Children in Care, and to be aware of the interventions taking place to improve attainment and narrow the gap between the performance of CiC and that of other pupils and the performance of Nottingham City CiC and those of our statistical neighbours.

2 BACKGROUND (INCLUDING OUTCOMES OF CONSULTATION)

- 2.1. This report will consider the attainment of all looked after children in Key Stage 2 and 4 during the academic year 2015-16.
- 2.2. The Virtual School is currently working on developing a system and process to analyse attainment of looked after children termly, based on teacher's termly assessments, this work is still in progress. The ambition is to interpret, analyse and compare results of teacher termly assessments for looked after children; this will enable us to consider and report on trajectory performance thus targeting our interventions to improve attainment and progress.
- 2.3. The Virtual School has a responsibility to monitor, promote and support the education achievement and experience of all school age Children in Care; currently there are approximately 400 pupils on roll.

The Virtual School Roll

- 2.4. Currently the Virtual School has on its roll 402 children of statutory school age, 181 of these children are receiving education within Nottingham City, 215 are receiving education outside the Nottingham City boundaries and 6 of these are without a school place. It is important to note this number fluctuates as a result of the number of admissions and discharges of children in care.
- 2.5. Of the 402 looked after children currently on roll at the Nottingham City Virtual School, 78 are on roll at schools judged by Ofsted as 'outstanding', 230 in schools judged 'good', 60 in schools judged as 'requiring improvement' and 24 in schools judged 'inadequate', the remaining children (10) are either without a school place or are on roll at a school that has not yet been subject to an inspection (schools converted to academies for example).
- 2.6. The Virtual School prioritises schools judged by Ofsted to be 'good' or 'outstanding' for looked after children in need of a new school place, for the majority of the cases where our LAC are attending a school judged 'requires improvement' or 'inadequate', this judgment was made subsequently, after the child was placed.
- 2.7. There is no statutory requirement to include post-16 and early years Looked After Children (LAC) on our roll, although we do have a duty to promote the educational achievement of these cohorts. It was recently decided to include this cohort on roll, as doing so will enable us to effectively fulfil our duties to promote their educational achievement. Currently records for this cohort are being held on a spreadsheet and are being tracked and monitored by an assigned lead in the Virtual School, a strategy will be developed to consider the arrangements and processes to effectively monitor, track and support this cohort of LAC.

Attainment and progress of looked after children

2.8. Key stage 1 attainment 2015-16:

In the 2015-16 academic year the Key Stage 1 LAC cohort consisted of 27 pupils, of which 19 had been in care for at least 12 months at 31st March 2016. Attainment in 2015-16 for NCC LAC in Key Stage 1 is well below average for non-disadvantaged pupils and below average for all pupils.

*NCC LAC eligible cohort total	ARE Reading %	ARE writing %	ARE Maths %
19	47%	26%	32%
Non- Disadvantage			
	78%	70%	77%
All Pupils			
	74%	65%	73%
LAC Nationally			
	51%	38%	46%

2.9. Key stage 2 attainment 2015-16:

In the 2015-16 academic year the Key Stage 2 LAC cohort consisted of 33 pupils, of which 26 had been in care for at least 12 months at 31st March 2016. However 3 of this 26 were disapplied, leaving a total of 23 pupils. At Key Stage 2 attainment for Nottingham City LAC was above the national average for LAC pupils nationally in every measure, however below the national average for all pupils non-disadvantaged pupils nationally.

*NCC LAC eligible cohort total	ARE Reading, Writing and Maths combined %	ARE reading %	ARE writing %	ARE Maths %	ARE Spelling, punctuation and grammar
23	48%	52%	60%	65%	47%
Non-					
Disadvantage					
	60%	72%	78%	75%	79%
All Pupils					
	53%	66%	74%	70%	72%
LAC Nationally					
	26%	41%	47%	43%	44%

2.10. Key stage 4 attainment 2015-16

The percentage of LAC children achieving 5 or more GCSEs at grade A*-C in 2015-16 and the percentage achieving A*-C in English and Maths was lower than the national average for non-disadvantaged and all pupils. However, GCSE attainment in 2015-16 was slightly higher than in the previous year. Although there has been an increase in the percentage of

Nottingham City LAC achieving grades A*-C GCSE, attainment is still below national averages for all pupils and non-disadvantaged pupils. Page 19

	5plus GCSEs A*-C %		English and Maths GCSE A*-C %		Achieved a qualification	Did not achieve any qualification	
*NCC eligible	*NCC eligible 14-15 15-16		14-15	15-16	77%	18%	
cohort	6%	9%	12%	14%			
Non-	59%		65%		98%	2%	
Disadvantage							
All Pupils	45%		59%		97%	3%	

- 2.11. Pupils progress rates between KS1 and 2 are below the national average but above the national floor standard, and for maths, reading and writing are not significantly different from national.
- 2.12. NCER have developed a CLA project to enable better and quicker access to nationally available data for LAC pupils, which Nottingham City Council and the Virtual School now have access to. Approx. 142 local authorities have signed up to the project including ourselves, so this year we will be able to report the national attainment figures at Key Stage 4 for looked after children.

Attendance and exclusion of looked after children

- 2.13. In the 2015-16 academic year the attendance rate for compulsory school age looked after children on roll at the Virtual School was 89.7%, below government expectations of 96%. In order to proactively support and encourage full attendance the Virtual School will agree a process for regularly tracking attendance rates to enable us to intervene as soon as non-attendance is identified.
- 2.14. In the 2015-16 academic year 52 of the 449 looked after children on roll at the Virtual School received at least 1 fixed-term exclusion and a total of 125 fixed-term exclusions were made, 1 child was permanently excluded.
- 2.15. Whenever the Virtual School is made aware of possible exclusions of a looked after child, a member of the Virtual School team will make contact and attend meetings with the placement school to offer advice and alternative solutions to exclusion. The Virtual School is reliant on placement schools informing us when they are intending to exclude or immediately after exclusion has taken place, otherwise we are dependent on receiving exclusion information from the Fair Access team and through Welfare Call.
- 2.16. In order to consider ways in which to prevent and reduce the number of fixed-term exclusions of looked after children we plan to:
- Understand the reasons for exclusions
- Encourage schools to report possible exclusions prior to them being issued, to obtain advice and support from the Virtual School.
- Agree a set of actions once exclusion data is received from the Fair Access team, for those exclusions on the list that we weren't previously aware of.

Personal Education Plan (PEP)

- 2.17. Currently the Nottingham City Virtual School monitors and records PEP completion for children of statutory school age (5-16). Currently we do not monitor and record PEPs for post-16 is currently in the same way as compulsory school aged children; we have recently developed a spreadsheet for recording and tracking post-16 LAC, the spreadsheet details the total number of 16 and 17 year olds on roll for whom a PEP is required and the number of these completed to date.
- 2.18 As of week ending February 3rd 2017 approximately 68% of our looked after children have a completed PEP that is in date, for the other 32% the PEP is either out of date (21%) or has never been completed/received (11%). PEP completion is not monitored nationally; individual local authorities report PEP compliance to their local Corporate Parenting Boards, but this is not captured centrally so we are unable to make a comparison of PEP completion nationally.
- 2.19. In 2016 a small number of PEPs were quality assured, however, the Virtual School will establish a systematic process for the quality assurance of completed PEPS and develop a toolkit that underpins and supports this process.
- 2.20. A review of the arrangements in place to support PEP completion is required, the Virtual School will then develop a strategy which maps the support and resources that will be made available each academic year commencing Sept 17.

Pupil Premium Plus (PPP)

- 2.21. Schools are required to apply to the Virtual School for Pupil Premium Plus funding each term (Spring, Summer and Autumn); indicating how they intend to use the funding and its intended impact on the educational outcomes and experiences of each looked after child.
- 2.22. A dedicated Business Support Administrator completes all the administrative tasks in respect to Pupil Premium Plus payments to schools, this consists of sending all schools the standard letter and application encouraging them to apply for the funding, maintaining records of all PPP payments made and collating applications to be reviewed and scrutinised by senior members of the Virtual School Team.
- 2.23. On receipt of applications for Pupil Premium Plus funding they are scrutinised by the Achievement Consultants, Service Manager and the Virtual School Head to ensure the planned interventions being funded are appropriate and relevant to the educational needs of that looked after child and as described in that child's PEP.
- 2.24. The Nottingham City Virtual School does not currently operate a process for the pooling of PPP funding and have no arrangements for planned retention of this funding; instead all schools are encouraged to apply for the full amount.
- 2.25. Historically, not all schools have applied for the PPP fund and there are occasions when a child is no longer looked after, resulting in funds being available towards the end of the financial year. To ensure PPP is utilised to promote the educational achievement and experiences of looked after children, available funding not allocated

is used to fund targeted and additional activities to enhance and improve the education of LAC. Decisions to fund targeted educational activities over and above the PPP allocation are currently made in partnership with schools, social workers, the Virtual School Service Manager and the Virtual School Head teacher. A written arrangement and process for the allocation of additional PPP funding is required to ensure a consistent and fair approach.

3 OTHER OPTIONS CONSIDERED IN MAKING RECOMMENDATIONS

3.1 None.

4 <u>FINANCE COMMENTS (INCLUDING IMPLICATIONS AND VALUE FOR</u> <u>MONEY/VAT)</u>

- 4.1 The staff team and services provided by the Virtual School is funded through Dedicated Schools Grant, funding approved by the Schools Forum. Each year the Virtual School is required to report its work and activities to the schools Forum in order for funding to be agreed; there are therefore implications to the Virtual School budget in that it is subject to agreed funding from Schools Forum each year.
- 4.2 As much of the work of the Virtual School is about enabling schools to fulfil their statutory responsibilities and supporting Social Workers with the identification of good quality educational provision for Children in Care, the opportunities to sell services are limited.

5 <u>LEGAL AND PROCUREMENT COMMENTS (INCLUDING RISK MANAGEMENT</u> <u>ISSUES, AND LEGAL, CRIME AND DISORDER ACT AND PROCUREMENT</u> <u>IMPLICATIONS)</u>

5.1 There may be implications in the future regarding educational activities provided by the Virtual School as the budget may not be able to sustain staffing and pupil activities with the increase in school academisation and consequent reductions in DSG funding. There may be a role for EPG funding in this respect.

6 STRATEGIC ASSETS & PROPERTY COMMENTS (FOR DECISION RELATING TO ALL PROPERTY ASSETS AND ASSOCIATED INFRASTRUCTURE) (AREA COMMITTEE REPORTS ONLY)

6.1 There are no proposed changes to this service other than increasing our capacity and reviewing our work to ensure we are effectively fulfilling our duty to promote and support the educational achievement of all our Children in Care.

7 EQUALITY IMPACT ASSESSMENT

7.1 Has the equality impact of the proposals in this report been assessed?

No An EIA is not required because: \boxtimes

(Please explain why an EIA is not necessary) Not required as the report does not contain financial proposals or decisions.

8 <u>LIST OF BACKGROUND PAPERS OTHER THAN PUBLISHED WORKS OR</u> THOSE DISCLOSING CONFIDENTIAL OR EXEMPT INFORMATION

8.1 None.

9 PUBLISHED DOCUMENTS REFERRED TO IN COMPILING THIS REPORT

9.1 None.

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CORPORATE PARENTING BOARD – APRIL 2017

-						
Title of paper:	Children in Care Council – Have Your Sa	y Survey Results 2016				
Director(s)/	Helen Blackman – Director, Children's	Wards affected:				
Corporate Director(s):	Integrated Services	All				
Report author(s) and	port author(s) and Jon Rea - Engagement and Participation Lead					
contact details:						
Other colleagues who	Noel McMenamin – Insight Analyst, Strat	egic Insight Team				
have provided input:	Jordan Whatman – Project Officer, Childr	ren in Care				
Date of consultation wi	th Portfolio Holder(s)					
(if relevant)						
Polovant Council Plan	Koy Thoma:					
Relevant Council Plan Strategic Regeneration a						
Schools						
Planning and Housing						
Community Services						
Energy, Sustainability an	d Customer					
Jobs, Growth and Transp						
Adults, Health and Com						
Children, Early Interventi	on and Early Years					
Leisure and Culture						
Resources and Neighbou	urhood Regeneration					
Summary of issues (inc	cluding benefits to citizens/service users	s):				
. The findings from	the 2010 Hours Vour Courses of Children					
a. The findings from	the 2016 Have Your Say survey of Children	n in Care and Care Leavers				
nave been analys	ed by the Children in Care (CiC) Council we s of previous years using a traffic light rating	no have assessed performance				
against the results	s of previous years using a traine light rating	g system.				
b. The findings provi	de insight into how Children in Care and Ca	are Leavers perceive the quality				
. .	ces they receive. It is recommended that the					
and guide relevan	•	5				
C C						
-	r's results, four priority areas have been ide					
	linked to following Children in Care and Ca	are Leavers Charter				
Commitments:						
- We will make sure they know about the advocacy and complaints services in case they						
•	ave their views heard or are unhappy with u ur children and young people safe and wel					
•	by have the right place to live as quickly as	•				
5	a change of home, carer, social worker or s	•				
	child or young person so we promise to do					
•	s they are absolutely necessary to keep the	•				
and well.						
	ur children and young people to plan for an	d achieve a successful journey				

- We will help our children and young people to plan for and achieve a successful journey into independent adulthood.

_							
Re	commendation(s):						
1	The findings from the survey results are used to inform relevant service and corporate action and business plans.						
2	The Board recognises the hard work done by the Children in Care Council in the planning, delivery and analysis of the Have Your Say survey, and acknowledges their vital role in the co-production of services across children's social care.						
3	To implement the findings of the 2016 Have Your Say survey as appropriate.						

1 REASONS FOR RECOMMENDATIONS

- 1.1 Ensuring that the views of service users are used to inform service improvement is a cross-cutting theme of both the Children and Young People's Plan and the Corporate Parenting Action Plan. It is one of the primary means by which the Corporate Parenting Board demonstrates the active participation of corporately parented children and young people in decision-making at strategic and operational level.
- 1.2 Other significant drivers include the various safeguarding related inspection criteria that require the Board to evidence service user participation; Munro Report recommendations on developing a child centred approach to service design and delivery; Nottingham City Participation Strategy commitment to Article 12 on the UN Convention on the Rights of the Child.
- 1.3 Previous iterations of the survey have provided significant insight into the views and experiences of Children in Care and Care Leavers which in turn has been used to shape improvement plans for a number of service areas.

2 BACKGROUND (INCLUDING OUTCOMES OF CONSULTATION)

- 2.1 The pledges contained in the Nottingham City Children in Care and Care Leavers' Charter commit the Board and its constituent partners to work towards the highest standard of service delivery to Children in Care and Care Leavers corporately parented by the Board.
- 2.2 The pledges contained in the Nottingham City Children in Care and Care Leavers' Charter commit the Board and its constituent partners to work towards the highest standard of service delivery to Children in Care and Care Leavers corporately parented by the Board.
- 2.3 The principal means of performance assessment against the pledges is through the annual Have Your Say (HYS) Survey, which is sent out to all Children in Care and those Care Leavers in contact with services.

- 2.4 730 surveys were sent out to children aged 3 and over this year. There were 135 usable returns, thus we achieved an 18.5% response rate. This is a very slight decrease when compared to our response rate in 2015 of 19%. Our response rate compares to an approximately 4.3% response rate nationally for the most recent Care Monitor survey in 2015.
- 2.5 In addition to the standard HYS survey, an optional easy read version for children under 10 years and those with learning difficulties was sent out as an alternative form of feedback. The questions were not linked to the overall survey and as result the findings have not been incorporated into the RAG assessments, however findings will form part of our evidence base. The primary purpose of the survey is to encourage participation our younger cohort of children and to cultivate a culture of participation.
- 2.6 As in previous years, the survey was accompanied by the 'You Said, We Did' feedback statement. The statement identifies actions that were undertaken to address the priorities highlighted as a result of the 2016 Have Your Say survey.
- 2.7 In analysing the survey results, the Children in Care Council used a RAG rating system to indicate how well they thought services are performing compared to the pledges made in the Children in Care and Care Leavers Charter. RAG rating colours red, amber and green identify the degree to which services are perceived to be doing well or improving, or require some form of attention and/or improvement.

In comparison with results from last year, performance in all but two charter commitments has either remained static with the same RAG rating, or has improved. 95% of respondents felt that their Social Worker had time for them, which is the highest figure since the inception of the survey in 2011, likewise 99% of respondents felt their opinions were heard and made a difference to decisions made in their lives, which is also the highest figure since the launch of the survey in 2011. Another example of improvement can be found in the results for our commitment on change. Of those young people who have experienced a change in placement, Social Worker or school, 70% were satisfied that they had received help to cope which was 'good' or 'very good'. This represents a 9 percentage point increase on the 2015 survey, and a 12 percentage point increase on the 2014 survey showing consistent and strong improvement. The areas that the Children in Care Council found worthy of further analysis and scrutiny are explored below (2.8). It is worth noting that, in an instance where a charter commitment has been rated red, amber or green with elements of amber, it is not necessarily implied that the CiC Council believe the Service is inadequately performing in these areas, only that they are regarded as areas of priority focus and on-going scrutiny.

2.8 The areas identified for further focus and enquiry corresponds with the following Children in Care and Care Leaver commitments:

Charter Commitment: we will make sure they know about advocacy and complaints services in case they want help to have their views heard or are unhappy with us.

This year's survey revealed that Children in Care and Care Leavers have greater awareness of the complaints service, and are more willing to speak to the advocacy service, than in 2015. However, there was a 5 percentage point drop (from 92% to 87%) in those who knew where to are the total a problem or wanted to make a complaint. The CiC Council propose that this is addressed and monitored through the imminent roll-out of the MOMO (Mind of My Own) engagement and feedback app, through which Children in Care and Care Leavers will be able to raise issues of concern and be signposted to further help.

Charter Commitment: We will keep our children and young people safe by seeing that they have the right place to live as quickly as possible.

Just under 4 in 5 respondents (79%) considered that 'where they are living is the right care place for them', which is down 6 percentage points on the 2015 return. The CiC Council felt that more work should be carried out to identify the reasons for this reduction and maintain a focus on providing Children in Care with the optimum level of choice over their care placements.

Charter Commitment: We know that a change of home, carer, social worker or school can easily cause problems for a child or young person so we promise to do all we can to prevent such changes unless they are absolutely necessary to keep the child or young person safe and well.

The CiC Council recognises that good progress has been made in providing Children in Care and Care Leavers a more settled experience across a range of settings (home, carer, school and social worker), and also recognises that satisfaction with how change was managed has also increased. However, on the basis that almost three quarters of respondents (73%) have experienced one or more changes in the above settings in the past 12 months, the CiC Council wants focus to remain on having more stable environments in which children and young people can learn and grow.

Charter Commitment: we will help our children and young people to plan for and achieve a successful journey into independent adulthood.

The survey revealed that most young people felt they have the basic skills to become independent (cleaning, cooking, ironing and washing clothes), broadly in keeping with 2015 levels. However, there is an increase in those who would like help with preparing for interviews, budgeting money, finding information on jobs and training and being a responsible tenant. The CiC Council recognises that more children and young people asking for help can be seen as a positive development as they are taking charge of their lives, but also felt that further investigation was warranted. In addition they would like to explore different ways in which younger Children in Care can develop key life skills before they reach the age of 15 and start their Leaving Care Pathway Plan.

The following areas have been proposed as subjects for the three 2017-18 Corporate Children in Care Council meetings:

- Having the right place to live at the right time
- Reducing change in the care journey
- Building skills for independent living

2.9 In line with good practice the survey will undergo annual review by the CiC Council. Potential changes to the way questions are asked will be identified and made in order to ensure questions are easily understood by respondents and that the answers yield high quality information that can used to influence decision making. In particular the question about the regularity with which people see family members and friends while in care requires redrafting in order to give us answers we can interpret and develop insight from.

3 OTHER OPTIONS CONSIDERED IN MAKING RECOMMENDATIONS

3.1 Not to use or implement the findings from the survey – discounted - since the Have Your Say survey was introduced in 2011, it has served as a highly effective tool to gain primary insight into the lives of children in care and care leavers, in relation to how they perceive the services we offer to them. It is therefore an invaluable and unique tool, and should continue to be consulted as a primary data set for the purpose of service development.

4 <u>FINANCE COMMENTS (INCLUDING IMPLICATIONS AND VALUE FOR</u> <u>MONEY/VAT)</u>

- 4.1 The cost of the Have Your Say survey is approximately £1000 per year, consisting primarily of printing and postage. This cost is currently met by the Children in Care team, who also provide officer support. Survey structuring and results analysis is provided by the Strategic Insight team, citizen engagement and overall management by the Engagement Lead officer.
- 4.2 Improvements in services based on the insight from service user views can lead to a wide spectrum of benefits, including resource efficiencies.

5 <u>LEGAL AND PROCUREMENT COMMENTS (INCLUDING RISK MANAGEMENT</u> <u>ISSUES, AND LEGAL, CRIME AND DISORDER ACT AND PROCUREMENT</u> <u>IMPLICATIONS)</u>

5.1 Each survey has a unique reference number enabling all responses to be screened for individual safeguarding and specific service-use complaints.

6 STRATEGIC ASSETS & PROPERTY COMMENTS (FOR DECISION RELATING TO ALL PROPERTY ASSETS AND ASSOCIATED INFRASTRUCTURE) (AREA COMMITTEE REPORTS ONLY)

6.1 None.

7 EQUALITY IMPACT ASSESSMENT

7.1 Has the equality impact of the proposals in this report been assessed?

No An EIA is not required because: (Please explain why an EIA is not necessary) \square

Not needed as the report does not contain proposals or financial decisions.

8 <u>LIST OF BACKGROUND PAPERS OTHER THAN PUBLISHED WORKS OR</u> THOSE DISCLOSING CONFIDENTIAL OR EXEMPT INFORMATION

8.1 Have Your Say survey.

9 PUBLISHED DOCUMENTS REFERRED TO IN COMPILING THIS REPORT

- 9.1 Nottingham City Children and Young People's Plan.
- 9.2 Children in Care and Care Leavers' Charter: http://nottinghamcitychildcare.proceduresonline.com/pdfs/care_leav_chart.pdf

Children in Care & Care Leavers' 20017 Sa

To complete this survey online visit www.nottinghamcity.gov.uk/CiCSurvey2016

5



Q1 Are you responding as

A child in care (aged 11 or under)	Go to Q2
A child in care (aged 12-18)	Go to Q2
A care leaver (aged 18 and over)	Go to Q2
On behalf of a child in care or a care leaver	Please answer the following question

If you are completing this form on behalf of a child in care or a care leaver what is your name and care role?

Section One: About you and the people around you							
Please tell us what best describes you	r experiences.						
	All the time	Most of the time	Only sometimes	Never			
My social worker/personal advisor treats me with respect							
My social worker/personal advisor has enough time for me							
My carer(s)* treats me with respect							
My carer(s)* has enough time for me							
* Please do not answer if you are a care leaver.							

Please use this box to tell us more about how you feel things could be better: 🗆 NO **YES Q3** Do you know where to go if you have a problem or want to make a complaint? **YES** □ N0* Q4 Do you know where to go if you want to speak to someone who is not your carer, social worker or personal advisor? *If no, information regarding who you can talk to is on the back page of this survey form.

		ould you talk to if there was a problem with your social worker, personal advisor er(s)? PLEASE TICK ALL THAT APPLY.				
	Пм	y social worker		My friends		
	Пм	y personal advisor		My parents		
	Пм	ly carer				
		lvocacy service		l find it hard to	talk to anyone	
	🗆 Ca	omplaints service		Other, please	tell us :	
	Пм	y school				
	Please	tell us what best describes you	r experiences.			
			All the time	Most of the time	Only sometimes	Never
		cial worker/personal advisor s to what I say				
		rer(s)* listens to what I say				
	My de I say	signated teacher listens to what				
		my opinions are heard and do a difference to decisions made life.				
	* Please	e do not answer if you are a care leaver.				
Please use this box to tell us what worked well for you and what could have worked better: Please tell us how you contribute your wishes and feelings to your Looked After review/ Pathway Plan review (Please tick ONE only). I attend my Looked After review/ Pathway Plan review and tell my social worker/ personal advisor what I think during the meeting.						
		I don't attend my Looked After review/ Pathway Plan review but I tell my social worker/ personal advisor what I think before the meeting.				
		l don't attend my Looked After r anyone what I think.		-	and I don't want t	o tell
		None of the above, but I was ab review by other ways	le to have a say	in my Looked	After Review/ Pa	thway Plan
		(Please tell us what it is).				

time	Most of the time	Only sometimes	Never
]			
]			
]			
]			

08 Please tell us what best describes your experiences.

Q8	Please tell us what best describes you	ir experiences.				Q1	1 Do you feel worried?
		All the time	Most of the time	Only sometimes	Never		All the time
	I feel my voice is heard in my Looked After review/ Pathway Plan review						L Only sometimes Please tell us what you worry about.
	I get help in preparing for my Looked After review/ Pathway Plan review						
	I can use different ways to communicate what I think e.g. drawing pictures, using photos, writing etc. in my Looked After Review/ Pathway Plan review						Please tell us what helps you cope with worry.
ר מטָר אַט							
Se	ction Two: Your placement	and your l	ife			01	2 Generally, do you feel healthy?
Q9	Thinking about where you are living at		-	the right care pl	ace/		Yes, all the time
	semi- independent living/ independen	_	-				Yes, often
	YES NO	NOT SUR	E				How do you find out about staying healthy?
	If you are unsure or do not feel that wh please tell us why.	ere you are livin	g is the right o	care place for you	1,		
						Q1	3 Please tell us about your free time and what yo
Q10	Please tell us what best describes you	r experiences.					
		All the time	Most of the time	Only sometimes	Never		
	I feel safe where I live						
	l feel safe at school/ further education/ work					Q1	4 How well do you feel you are doing at school/ fu I am doing very well
	l feel safe in my neighbourhood						
	Please use this box to tell us more ab feel safer.	out what makes	you feel safe	or what could ma	ike you		I am doing well I am doing OK
							If you feel you are not doing well or not very well and what support you think you need to do bette

☐ Most of the time
Never
Rarely
No, none of the time
ou like to do. What else would you like to do?
,
urther education/ work?
I am not doing well
I am not doing very well at all
I do not go to school/further education/work
l at all, please tell us why you think this, er.

Q15	If you are still in education, please tell us about	your expe	rience.			Q20 Overall, how happy are you with the way Nottingham City Council takes care of you?
		All the	Most of	Only sometimes	Never	Very happy Happy Unhappy Very unhappy Not sure
	I know all about my Personal Education Plan I am happy with my Personal Education Plan I am involved in drawing up my Personal Education Plan I would do better with more help. Please use this box to tell us more about your P	time	the time	sometimes		Q21 If you would like to receive information about how Nottingham City Council is looking after children and young people in care, please tick this box and we will get in touch with you. How do you want to receive the information? Facebook Printed newsletter Email Text message Website Telephone
	Within the past 12 months (or if you are new in card Home Go to Q17 Social Worker (Carer Go to Q17 Personal Advis If you have had a change in the last 12 months, Very good Good OI Please tell us what helped you cope with chang	Go to Q17 or Go to Q1 how would <	7 you rate the Poor	School Go to No changes G help you recei	Q17 Go to Q18 Wed?	 Q22 If you are interested in getting involved in Children in Care Council and having your say about care or care leaver issues, please tick this box and we will get in touch. Q23 How happy are you with the help and support you are getting to plan for your future? Q Very happy Q Happy Q Unhappy Q Very unhappy Q Very unhappy or very unhappy, please tell us why.
	Do you see your own family? Yes, as much as I like Yes, quite often Please use this space to tell us anything you war	I never	much as I lil see my own ting in touch	family	n family:	Q24 Which of the following skills have you got and which would you like help with? I can I would like help to clean my room or house iron clothes wash my clothes
Page 3						cook for myself
Q19	Please tell us what best describes your experie I see or speak to my old friends I go round to my old friend's houses to visit My old friends come to visit me Since leaving care, I have made new friends Is there anything that you want to tell us about coming into care?	All the time	Most of the time	Only sometimes		budget my moneywrite a curriculum vitae (CV)prepare for an interviewfind information about jobs and trainingapply for further or higher educationchoose subjects for further or higher educationbe a responsible tenant

Section Three: Please only answer the following questions if you are over 15 years old or a care leaver.

Q25	Do you know what is in your Pathway Plan?						
	Yes Go to Q26	No End	🔲 I did not know I had a Pathway Plan End				
Q26	Please tell us how your pat	thway plan is helping y	you prepare for leaving care.				

Thank you for completing the questionnaire!

The Children in Care Advocacy Service is an independent advocacy service to help you get your voice heard. Please ask your social worker or independent reviewing officer about this.

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CORPORATE PARENTING BOARD – APRIL 2017

Title of paper:	Edge of Care Provision					
Director(s)/ Corporate Director(s):	Helen Blackman - Director, Children's Integrated Services helen.blackman@nottinghamcity.gov.ukWards affected: All					
Report author(s) and contact details:	Mark Ball - Edge of Care Hub Manager 0115 8762050 Mark.ball@nottinghamcity.gov.uk					
Other colleagues who have provided input:	Kay Sutt - Service Manager, Residential Services and Targeted Support 0115 8765667 <u>kay.sutt@nottinghamcity.gov.uk</u>					
	Tracey Nurse - Head of Service, Children 0115 8764524 tracey.nurse@nottinghame					
Date of consultation wit (if relevant)	h Portfolio Holder(s)					
	/ -					
Relevant Council Plan						
Strategic Regeneration a	nd Development					
Schools						
Planning and Housing						
Community Services						
Energy, Sustainability and						
Jobs, Growth and Transp						
Adults, Health and Comm						
Children, Early Intervention	on and Early Years					
Leisure and Culture						
Resources and Neighbou	rhood Regeneration					
 Summary of issues (including benefits to citizens/service users): The Edge of Care Hub diverts children and families away from care proceedings through intensive intervention and a whole family approach, to improve family functioning. The Edge of Care Hub benefits citizens and service users by building resilience within families through assertive, community based outreach support; as a consequence it plays a significant part in strengthening the communities of Nottingham City. All families present with multiple complex issues and all subject to Child Protection Plans. The table below outlines performance data for this financial year: 						
Number of families referred to Hub 40 (18 open, 21						
ster whe rem						
% Families on child pro	otection plans	90%				
	Page 37					
	-					

100%	
90%	
45	
21	
18	
2 (from 1 family)	
1	

Recommendation(s):

1

To note the service being provided by the Edge of Care Hub, and monitor progress made year on year.

1 REASONS FOR RECOMMENDATIONS

- 1.1. The Edge of Care Hub (EoCH) supports families with multiple complex issues such as domestic violence (DV), substance misuse, poor parental mental health, poor school attendance and worklessness.
- 1.2. The reason for recommendation 1 is for the Edge of Care Hub to continue to provide intensive intervention to vulnerable families within Nottingham City. At present, Priority Families grant funding is guaranteed until March 2020.
- 1.3. In addition, implementation of the recommendation will allow the Edge of Care Hub to continue to provide significant and cost effective budget relief, diverting children from care proceedings and building resilience in families and communities.

2 BACKGROUND (INCLUDING OUTCOMES OF CONSULTATION)

- 2.1. The Edge of Care Panel was established in 2013 as a result of internal consultation between the Portfolio Holder for Children's Services and the Corporate Director, regarding rising numbers of children in care, with the objective of diverting children and young people from care proceedings and managing a menu support services.
- 2.2. 57% of the children and young people cases that were heard at panel were accommodated in 2012. As a result of internal consultation, a menu of services was created to reduce increase the number of children supported to remain with their family where safe to do so, through intensive intervention by a service from the menu. The number of children and young people that were heard at panel and were accommodated has fallen year on year since. The Edge of Care Hub Team was established under Priority Families to add specialist, intensive, and whole family support to the menu of services available³ to the Edge of Care Panel. The Edge of

Care Hub was funded from the Priority Families Grant until March 2016; further funding has been provisionally agreed until 2020 pending government confirmation of future grant monies. The Edge of Care Hub was given the Big Ticket objective of providing £400,000 budget relief which it has exceeded each financial year since.

2.3 The report proposes the consideration of expanding the EoCH to include an adult mental health worker. 90% of families supported by the EoCH present with adult mental health difficulties. Adults are often the key to improved outcomes for families supported by EoCH. Waiting lists for adult mental health support are increasing. An adult mental health worker in EoCH would provide valuable support to families referred to EoCH, and would reduce the duration of such support. This point has been expanded on in a report sent to Head of Service for consideration.

3 OTHER OPTIONS CONSIDERED IN MAKING RECOMMENDATIONS

3.1 The option to discontinue funding the Edge of Care Hub has been considered. This would have negative cost implications for the local authority, and a negative effect on the Children in Care numbers.

4 <u>FINANCE COMMENTS (INCLUDING IMPLICATIONS AND VALUE FOR</u> <u>MONEY/VAT)</u>

Financial Data EOC HUB Budget Relief Analysis	£
Actual Budget Relief from 1/4/16 to 31/01/2017	
Budget Relief to 31/10/16	979,686
less:	
20% failure rate	195,937
10% variation in placement costs	78,375
Net Budget Relief to 31/01/2017	705,374
less:	
Team Costs to 31/10/16 (Approx)	115,000
Net Budget Relief to 31/01/2017	590,374
Projected Budget Relief from 1/4/16 to 31/03/17	
Projected Budget Relief to 31/03/17 (based on current cohort) <i>less:</i>	1,165,092
20% failure rate	233,018
10% variation in placement costs	93,207
Net Projected Budget Relief to 31/03/17	838,866
less:	
Budgeted Team Costs to 31/03/17 Page 39	180,000

- 4.1 Philip Harrison, Project Manager for the Early Intervention Directorate, consulted with finance colleagues in establishing net budget relief of £590,374, from 01/04/2016 up to 31/01/2017.
- 4.2 The figure above offers clear value for money, when considering that the full term cost of the team is £180,000. The team cost in the figure above has already been deducted.
- 4.3 The actual budget relief is inclusive of the deduction of:
 - 1. Team cost (£200,000) per annum.
 - 2. 10% of actual budget relief up to 31/12/15 for cost of placement variation.
 - 3. 20% of actual budget relief up to 31/12/15 for failure rate.
- 4.4 So far this financial year only 2 out of 78 children and young people directly at risk of accommodation, that have been supported by the Edge of Care Hub, have been accommodated.
- 4.5 The financial implication of the above is reduced pressure on the local authority in care costs, and additional social work hours.

5 <u>LEGAL AND PROCUREMENT COMMENTS (INCLUDING RISK MANAGEMENT</u> <u>ISSUES, AND LEGAL, CRIME AND DISORDER ACT AND PROCUREMENT</u> <u>IMPLICATIONS)</u>

- 5.1 The risks attached to a decision to continue funding to the Edge of Care Hub are minimal, with a small cost implication that can be offset against the budget relief.
- 5.2 The risk of not funding the Edge of Care Hub is that vulnerable families will not get the intervention they need to be diverted from care proceedings.
- 5.3 The Hub supports families subject to Child Protection plans, with the aim of reducing risk through whole family intervention.
- 5.4 Without the Edge of Care Hub, more families will be at risk of breakdown.
- 5.5 Edge of Care Hub support operates under the Priority Families (Troubled Families) national criteria and helps to reduce police call outs, anti-social behaviour, missed health appointments, poor school attendance and worklessness.

6 STRATEGIC ASSETS & PROPERTY COMMENTS (FOR DECISION RELATING TO ALL PROPERTY ASSETS AND ASSOCIATED INFRASTRUCTURE) (AREA COMMITTEE REPORTS ONLY)

6.1 None.

7 EQUALITY IMPACT ASSESSMENT

7.1 Has the equality impact of the proposed of

No An EIA is not required because: (Please explain why an EIA is not necessary) The report does not contain proposals or financial decisions.

8 <u>LIST OF BACKGROUND PAPERS OTHER THAN PUBLISHED WORKS OR</u> <u>THOSE DISCLOSING CONFIDENTIAL OR EXEMPT INFORMATION</u>

8.1 None.

9 PUBLISHED DOCUMENTS REFERRED TO IN COMPILING THIS REPORT

9.1 None.

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CORPORATE PARENTING BOARD – APRIL 2017

Title of popor	The Health of Children in Care (CIC) of th	a Lacal Authority 2016 / 17					
Title of paper:	The Health of Children in Care (CIC) of the Local Authority 2016 / 17 – Nottingham City						
Director(s)/	Sally Seeley - NHS Nottingham City Wards affected:						
Corporate Director(s):	Clinical Commissioning Group (CCG) All						
	Helen Blackman – Director, Children's						
	Integrated Services						
Report author(s) and	Kathryn Higgins - Designated Nurse for Children in Care						
contact details:	Kathryn.higgins2@nhs.net						
	Malania Dracowall Designated Destar for Children in Core/Marker						
	Melanie Bracewell - Designated Doctor for Children in Care/Medical Advisor for Adoption / Consultant Community Paediatrician						
	melanie.bracewell@nuh.nhs.uk						
Other colleagues who							
have provided input: Date of consultation wit	h Bortfolio Holdor(s)						
(if relevant)							
Relevant Council Plan							
Strategic Regeneration a	nd Development						
Schools							
Planning and Housing							
Community Services							
Energy, Sustainability and							
Jobs, Growth and Transp							
Adults, Health and Comm							
Children, Early Intervention	on and Early Years						
Leisure and Culture							
Lucauraaa and Najabbau	rhood Regeneration						

Summary of issues (including benefits to citizens/service users):

The physical and emotional health and well-being of children and young people in care has been shown to be significantly worse than that of their peers living with birth families. Contributory factors include the impacts of poverty, poor parenting, physical/sexual abuse and neglect the child may have suffered at the time of entry to the care system. Almost half of children in care have a diagnosable mental health disorder and two thirds have special educational needs (NICE 2013). They often enter the care system having missed scheduled vaccinations and health appointments. Delays in identifying and meeting their emotional well-being and mental health needs can have far reaching effects on all aspects of their lives including their potential to lead happy and healthy lives as adults.

This report has been provided to the Service Director of children's social care by the Designated professionals for Nottingham City CCG. To provide an update to the Corporate Parenting Board on the health organisations contributions to improving health outcomes for children and young people in the care of the local authority during 2016/17.

- 1 To note health providers supported by the Designated Professionals will continue to work with the Service Improvement Forum and associated working groups with the aim to improve the health outcomes for Children in Care. The Designated Professionals will continue to encourage the City Local Authority to engage alongside the County Local Authority in this Forum.
- 2 To note health providers supported by the Designated Professionals will continue to work with the Local Authority and other partner agencies in planning for and providing health provision for Unaccompanied Asylum Seeking Children and young people placed in Nottingham City.

1 REASONS FOR RECOMMENDATIONS

- 1.1 Following the County Pathway review and recommendations made, the Nottinghamshire Service Improvement Forum is a newly established group which includes representation from CCGs, health providers and the Local Authority with the aim to improve health outcomes for children and young people in care across Nottingham City and Nottinghamshire.
- 1.2 NHS Nottingham City CCG are responsible for all Looked After Children placed in Nottingham City, including placements by Other Local Authorities and we must ensure that health providers have the knowledge, skills and capacity to provide for this cohort of children and young people. See 2.3.

2 BACKGROUND (INCLUDING OUTCOMES OF CONSULTATION)

2.1 **Designated Doctor and Designated Nurse**

Under the Children Act 1989, Clinical Commissioning Groups (CCGs) and NHS England have a duty to comply with requests from a local authority to help them provide support and services to looked after children. This is done through effective commissioning and co-ordination of health services and through individual practitioners providing co-ordinated care for each child, young person or their carer.

The Designated professionals working for the CCG ensure that the health needs of Children in Care are raised and recognised in all appropriate forums across the health and social care community. They influence the development of Service Specifications and monitor Key Performance Indicators that are reported to the CCG.

2.2 **Providers of Children in Care health services**

In recognition of the identified health inequalities and in response to the guidance, Nottinghamshire Healthcare NHS Foundation Trust and Nottingham University Hospital NHS Trust are the providers of the Children in Care and Adoption Health Service. This specialist team consists of Doctors, Medical Advisers (adoption), Clinical Nurse Specialists and dedicated administration support working with children in the care of the local authority across Nottinghamshire City. These services are underpinned by the Statutory Guidance on Promoting the Health and Well-Being of Looked After Children (DH/DCSF, 2015) which ensures that all children and young people who are looked after are physically, mentally, emotionally and sexually healthy.

2.3 Health is responsible for ensuring that looked after children have:-

- A holistic health assessment when they enter the care system and throughout their journey in care within statutory timescales.
- Their physical and emotional health needs are identified through initial and review health assessments; with the formulation of health recommendations and an action plan, working closely with children/young people, their carer, other health care professionals and Children's Social Care colleagues to promote positive outcomes for looked after children.

KEY PERFORMANCE INDICATORS

2.4 The performance of health providers is monitored against national guidance:

Guidance:

- Initial health assessments
- Review health assessments
- Registration with a GP
- Registration with a dentist
- Immunisation uptake and data

2.5 Initial and Review Health Assessments

Initial health assessments are completed by Paediatricians. Review health assessments are undertaken by the Clinical Nurse Specialists twice a year for children under the age of 5 years and annually for all children over the age of 5 years up to their 18th birthday. From these assessments a health plan is formulated. The plan includes information from the child's GP, Strengths and Difficulties Questionnaire via the social worker, any information from Child and Adolescent mental health team (CAMHS) colleagues and relevant information from parental health records/ completed parental health form if consent is given. The aim is to provide a comprehensive assessment of current health needs including any previous history which may have implications on the child or young person's future health outcomes. This plan is shared with the social worker, GP and other health partners, carers and child or young person if appropriate.

	Q4 2015/6	Q1 2016/17	Q2 2016/17	Q3 2016/17
IHA (total seen)	71	33	57	44 [*]
RHA (total seen)	66	67	140	102

* Includes children placed in City from other local authorities where an IHA is requested of the local Children in Care doctors

2.6 **GP and Dental registration**

The number of children registered with a GP has been consistently high (above 95%) during 2016/17. The number of children registered with a dentist was consistently high in 2015/16 (over 80%) however following a change of data collection process the recent figures for 2016/17 have been unobtainable. We are now attempting to capture not only if a child is registered with a dentist but also whether they have been seen for a check-up and appropriate treatment.

2.7 Immunisations

The immunisation status of a child/young person demonstrates the protection of individual children and the community against a range of diseases. There is a national childhood immunisation programme which all children are expected to complete. Immunisation status is recorded at all health assessments identifying any outstanding immunisations in the care plan with the recommendation they are completed.

- Primary Vaccination (up to the age of 5) rates have been reported on differently from April 2016 and current data is not reliable and therefore not included in this report. This data is now including the child or young person's vaccination status upon on entering care and then 1 year following. This enables us to report on outcomes of health interventions.
- Changes to how the Human Papillomavirus vaccination (annual vaccination) data is collected have been made and this data will be collected annually over the academic year in 2017. This data will be due in September 2017 this year.
- The School Leaver booster uptake continues to be a challenge as it is frequently refused by young people. The School Aged Immunisation Service targets and supports children in care to ensure vaccinations are up to date. This data will be due in September 2017 this year.

EMOTIONAL HEALTH OF CHILDREN IN CARE

2.8 The national picture of the rates of emotional, behavioural and mental health difficulties are 4 to 5 times higher amongst looked after children than the wider population (Children's Care Monitor, 2013/15). A pathway is in place for returns of the Strengths and Difficulties Questionnaire (SDQs) which help inform holistic health assessments and identifies to the CAMHS Looked After Children team, children who have emotional health issue of concern and require additional interventions. The Children in Care team work closely with the CAMHS LAC team on individual cases and through regular joint meetings/consultations and information sharing. For those children who do not meet thresholds for CAMHS LAC their management is via the Clinical Nurse Specialists with links to universal services and the third sector.

NOTTINGHAMSHIRE SERVICE IMPROVEMENT FORUM (SIF)

- 2.9 During 2015/16 a full review of the health pathway for Children in Care across Nottingham City and Nottinghamshire was undertaken. This resulted in numerous recommendations and an action plan for CCGs, health providers and local authorities that should ultimately improve services and health outcomes for Children in Care.
- 2.10 This action plan will be monitored as part of a multi-agency Service Improvement Forum. From this forum the following working groups have been established:
 - Data group with the aim to improve data reporting and collection, ensure Key Performance Indicators are reported on and additional health information to inform health needs assessments and future service planning.
 - Out of area placement group to review existing practice and revise to ensure that robust processes and pathways are in place.
 - Care leavers working group to look at hard to reach care leavers and ways of improving health outcomes.

CHILDREN LIVING OUT OF AREA

- 2.11 There can be differences in the quality of provision of services offered for children and young people who are placed out of our area. There is a quality assurance process undertaken on all health assessments that are not completed by the Nottingham Children in Care team. Those health assessments that do not meet the quality assurance standards are challenged with the health organisation providing this for example by sending a letter clearly setting out the issues and holding back payment of the invoice.
 - It has been recognised within the SIF that the current process needs reviewing and updating therefore a working group has been established to examine all aspects of health provision for Nottingham City children placed in other local authorities with the aim to ensure a robust process is in place.

CHILDREN LEAVING CARE

- 2.12 It is recognised that care leavers, particularly if they have experienced unstable placements or have been placed out of area, are vulnerable to not having sufficient information about their own health as well as having limited information about their family and significant history. Care leavers are offered an important health information pack on their last health review prior to leaving care. This is currently in paper format but plans to transfer to an electronic system in the future.
 - It has been recognised within the SIF that there are several cohorts of young people that do not consistently receive this information and support with their health when leaving care. A working group is planned for 2017 to look at ways of addressing these issues.

ADOPTION

2.13 The Medical Advisors and Clinical Nurse Specialists for adoption are responsible for ensuring that where the Local Authority indicates that they are seeking a plan for adoption, the relevant medical information is provided in a report. This report is initially to aid agency decision making and will be updated and shared with prospective adopters and matching panel as well as the child or young person in the future.

Additional Adoption work includes:

- Adult Health Reports
- Medical Advice to Adoption Panel
- Information sharing with prospective adopters

UNACCOMPANIED ASYLUM SEEKING CHILDREN (UASC)

2.14 UASC who are in the care of the Local Authority represent an increasing proportion of the CIC caseload. There are additional physical and emotional health issues that affect this group and the CIC health teams provide a service to ensure identification of these as well as contributing to holistic multiagency working to meet their needs.

2.15 Since the agreement in 2016 to accept children and young people via the National Transfer scheme the numbers have been steadily increasing (see tables below) but continue to be managed with the existing Children in Care service provision. In July 2016 an impact assessment was undertaken to assess the potential effect that additional numbers would have on health services. The result of this was that most health provision could be absorbed within services however the greatest impact would be on the Children in Care team especially the medical team undertaking the IHAs.

Consideration is currently being taken into a bid for Home Office funding to provide additional support to this team.

	2015/16			2016/17 to date			
No. IHAs completed 2015/16	Q1	Q2	Q3	Q4	Q1 (April – June 16)	Q2 (July – Sept 16)	Q3 (Oct-Dec 16)
City	1	3	1	2	4	8	1
% of total city IHA referrals	3			10			

2.16 Medical team – Initial Health Assessments for UASC

There are also UASC who have been accepted by other local authorities but have been placed within Nottingham City (other local authorities' children - OLAC. These children are being referred to local health teams for assessment and are in addition to the numbers quoted above. (50% of OLAC referrals to date are UASC).

(Information provided by Nottingham University Hospitals NHS Trust)

2.17 Nursing team – Review Health Assessments

For UASC placed in Nottingham City the first Review Health Assessment will be done 1 year following the Initial Health Assessment. This data evidences the numbers on the nursing caseload are steadily increasing which means that the RHAs required will increase going forward as more UASC are placed within Nottingham City.

		201			
UASC on nursing caseload	Q1	Q2	Q1 (April – June 16)		
City	6	7	9	12	20
Grand Total	24	23	28	37	53

(Information provided by Nottinghamshire Healthcare Foundation Trust)

3 OTHER OPTIONS CONSIDERED IN MAKING RECOMMENDATIONS

3.1 None.

4 <u>FINANCE COMMENTS (INCLUDING IMPLICATIONS AND VALUE FOR</u> <u>MONEY/VAT)</u>

4.1 There are no direct financial implications or value for money issues arising from this report.

5 <u>LEGAL AND PROCUREMENT COMMENTS (INCLUDING RISK MANAGEMENT</u> <u>ISSUES, AND LEGAL, CRIME AND DISORDER ACT AND PROCUREMENT</u> <u>IMPLICATIONS)</u>

5.1 None.

6 STRATEGIC ASSETS & PROPERTY COMMENTS (FOR DECISION RELATING TO ALL PROPERTY ASSETS AND ASSOCIATED INFRASTRUCTURE) (AREA COMMITTEE REPORTS ONLY)

6.1 None.

7 EQUALITY IMPACT ASSESSMENT

7.1 Has the equality impact of the proposals in this report been assessed?

No An EIA is not required because: (Please explain why an EIA is not necessary) The report does not contain proposals or financial decisions.

8 <u>LIST OF BACKGROUND PAPERS OTHER THAN PUBLISHED WORKS OR</u> <u>THOSE DISCLOSING CONFIDENTIAL OR EXEMPT INFORMATION</u>

8.1 None.

9 PUBLISHED DOCUMENTS REFERRED TO IN COMPILING THIS REPORT

- 9.1 Children Act 1989 HMSO.
- 9.2 Children's Care Monitor: children on the state of Social Care in England: reported by the Children's Rights Director for England (2013/14). http://deva.ioe.ac.uk/id/eprint/19818
- 9.3 Interim National Transfer Protocol for Unaccompanied Asylum Seeking Children 2016-2017 DfE.
- 9.4 The National Institute for Health and Care Excellence and Social Care Institute for Excellence (2013) "Promoting the Quality of Life of Looked After Children and Young People" NICE Quality Standard 31.
- 9.5 The Statutory Guidance on "Promoting the Health and Wellbeing of Looked After Children "(2015) DH/DCSF.

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