

NOTTINGHAM CITY COUNCIL

CORPORATE PARENTING BOARD

**MINUTES of the meeting held at Loxley House, Nottingham on 21 March 2016
from 14.33 - 16.04**

Membership

Present

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

Absent

Councillor Jim Armstrong
Councillor Sally Longford

Colleagues, partners and others in attendance:

Jeren Artykova	- Children in Care Council Representative
Mark Ball	- Edge of Care Manager
BB	- Foster Carer Representative
Clive Chambers	- Head of Service – Safeguarding and Quality Assurance
Steve Comb	- Head of Children in Care
Dr Emma Fillmore	- Paediatrician, Children in Care Health Team
Gill Moy	- Nottingham City Homes
Jon Rea	- Engagement and Participation Officer
Kay Sutt	- Service Manager, Residential and Targeted Support
Kwesi Williams	- Project Officer, Children in Care
Malcolm Wilson	- Virtual School Headteacher
Phil Wye	- Governance Officer

46 APOLOGIES FOR ABSENCE

Councillor Sally Longford
Councillor Dave Liversidge
TM

47 DECLARATIONS OF INTERESTS

None

48 MINUTES

The minutes of the meeting held on 1 February 2016 were confirmed as a correct record and signed by the Chair.

49 ATTAINMENT OF CHILDREN IN CARE 2015

Malcolm Wilson, Virtual School Headteacher, introduced the report explaining the recent trends in educational attainment of Nottingham City Children in Care (CiC) by analysis of their performance at Key Stage 2 and Key Stage 4. Malcolm highlighted the following:

- (a) Key Stage 2 results are promising and have improved over the past 4 years. They are higher than the national average in reading, writing, grammar, punctuation and spelling, and maths;
- (b) Key Stage 4 results are not as encouraging as at Key Stage 2, with only 6% of CiC achieving 5 or more A*-C grades in their GCSEs, including English and Maths. This is lower than the national average. There has been a year on year decline in attainment, however this is mirrored nationally;
- (c) the Virtual School has offered £500 of additional Pupil Premium Plus funding to all schools with Key Stage 4 pupils who are at risk of not achieving their full potential in GCSE English and Maths. This offer has also been extended to all schools with Year 5 and Year 6 pupils. The funding will be monitored to record its impact but improvement is already predicted for this year's Key Stage 4 results;
- (d) Letterbox Club, which provides mathematics materials and literacy resources, is purchased for CiC in years 1,3,5 and 7.

The following responses were given following questions from the Board:

- (e) the reasons as to why Key Stage 2 pupils perform better than Key Stage 4 pupils are complex, however one reason may be that younger children have a stronger relationship with teachers and key workers than those who become CiC at a later stage;
- (f) the Promoting the Achievement of Looked After Children (PALAC) programme applies to all schools, even those without CiC as they may have CiC in the future. It can also be helpful for children from other difficult backgrounds.

RESOLVED to

- (1) note the recent trends and current levels of educational attainment for Nottingham City's Children in Care;**
- (2) note the proposed interventions to improve attainment and secure a narrowing of the gap between the performance of CiC and that of other pupils in the city schools, and between city CiC and our statistical neighbours;**
- (3) circulate additional information on the PALAC Programme to Board members.**

50 THE HEALTH OF CHILDREN IN CARE OF THE LOCAL AUTHORITY - NOTTINGHAM CITY

Dr Emma Fillmore, Consultant Community Paediatrician and previous Designated Doctor for Children in Care, presented the report and highlighted the following:

- (a) the Children in Care Health team includes doctors and nurses working with CiC across Nottingham City. There are service specifications and identified key performance indicators which are reported on quarterly to the commissioners for Nottingham City and annually through the annual report;
- (b) every child or young person has a health assessment carried out on entering the care of the Local Authority. This is carried out within 20 working days of entering care. Review assessments are then carried out twice a year for children under the age of 5 and annually for children over the age of 5 up to their 18th birthday;
- (c) the Medical Advisors for Adoption report on the health of prospective adopters following a health check from their GP, reporting on any health issues on the adopter's ability to parent a CiC;
- (d) the Designated Doctor and Nurse will offer expert advice and be involved in any dissemination of recommendations for a Serious Case Review;
- (e) from April 2015 care leavers due their last health assessment will be offered an Important Health Information Pack, providing information about their individual and family health history as appropriate. This was designed with CiC locally, with Children in Care Council being active participants in its design;
- (f) the Children in Care Health Team has successfully received accreditation and recognition of being young person friendly, meeting the Department of Health 'You're Welcome' quality criteria.

The following responses were given in answer to questions from the Board:

- (g) there has been an increase in the amount of adult health assessments carried out due to a number of factors. More adults are coming through as prospective adopters, and in the past not all adults had the assessment that they should have. It is statutory for prospective adopters to be assessed and good practice for special guardians and foster carers;
- (h) health information for care leavers is currently collected by the team, and will be reported to the Board in future reports.

RESOLVED to

- (1) note the performance of the Children in Care and Adoption Health Team;**
- (2) acknowledge the need for the development of a Leaving Care/Transition nurse post within the health team;**

- (3) recommend that the additional city funding, provided by the City Commissioners is maintained to address performance issues around initial Health Assessment timescales.**

51 NCSCB MISSING REPORT

Clive Chambers, Head of Service, Safeguarding and Quality Assurance, presented the report setting out the local arrangements in place to respond to children who go missing from home or care. Clive highlighted the following:

- (a) there is a difference between missing children and absent children. Absent children's whereabouts are known as opposed to missing children whose whereabouts are unknown;
- (b) the police will inform the council of all missing children they become aware of, as well as all those who have returned. When they return, a return interview is carried out which identifies the reasons for going missing and attempts to address these;
- (c) where a young person is identified as particularly vulnerable, a meeting will take place, chaired by an Independent Reviewing Officer, to look at how best to support and protect them;
- (d) further work is planned to develop a system to analyse the information in return interviews to provide a more qualitative insight into the local profile of children who go missing.

The following answers were given in response to questions from the Board:

- (e) return interviews should be carried out within 72 hours of the child's return. Key names and locations are noted to make connections with other missing children. Further work is planned to develop this to be more systematic and to share information with the police;
- (f) at children's homes, conversations will still be had with staff and managers, as children will not always open up to strangers;
- (g) missing children are a potential indicator of Child Sexual Exploitation (CSE), however this may not always be the underlying issue.

RESOLVED to consider the work being carried out by Nottingham City Council in supporting children who go missing from care and from home.

52 EDGE OF CARE PROVISION

Mark Ball, Edge of Care Hub Manager, introduced the report providing an update on the work of the Edge of Care Hub, highlighting the following:

- (a) the Edge of Care Hub was established in 2013 to address concerns following rising numbers of CiC, with the objective of diverting children and young people

from care proceedings;

- (b) over 50 families have been referred to the Hub, with no families disengaging and 90% having been kept together avoiding children becoming CiC. 23 families now also have no further social care involvement;
- (c) the Hub works on a family's capacity to change, utilising innovative ideas to ensure long-lasting change;
- (d) although supporting families is the primary objective of the Hub, it also provided net budget relief of £427,520 from 1st April to 31st December 2015.

The Board congratulated the Edge of Care team on its success, and noted that it has contributed to a stable level of CiC in Nottingham compared to national levels.

RESOLVED to note the service being provided by the Edge of Care Hub and to acknowledge the benefits offered by its existence.

53 CHILDREN IN CARE COUNCIL - 2015 HAVE YOUR SAY SURVEY RESULTS

Jon Rea, Engagement and Participation Lead, introduced the report summarising the findings of the 2015 Have Your Say survey of Children in Care and Foster Carers, highlighting the following:

- (a) the survey findings provide an insight into the views of CiC n Care and Foster Carers, and provide an opportunity to make their voices heard;
- (b) the survey forms part of the council's strategy for engagement as some CiC don't participate in other ways such as the Children in Care Council;
- (c) 128 usable returns were received from a total of 690 surveys sent out. This is a 19% success rate which is higher than the national average of just 4.3%. However, there is still ambition to increase this number. There is also an easier version of the survey available for children under 10;
- (d) the findings of the survey help to shape Children in Care Council meetings, which goes on to help council officers to shape services. The Children in Care Council rated progress against the commitments made by the Corporate Parenting Board in the Children in Care and Care Leavers' Charter, using RAG (Red, Green, Amber) ratings.

Jeren Artykova from the Children in Care Council then presented the findings of the Children in Care Council, highlighting the following:

- (e) progress against two Charter Commitments was marked red. The Children in Care Council found that more needs to be done to ensure that CiC are aware of and have access to the advocacy and complaints service, and that consistency needs to be improved to reduce the amount of unnecessary change in CiC's lives;

- (f) progress against one Charter Commitment was marked red/amber. The Children in Care Council found that more needs to be done to ensure CiC and Care Leavers have the time and help to understand and be happy with their circumstances;
- (g) progress against three Charter Commitments was indicated amber. The Children in Care Council found that more needs to be done to ensure CiC are listened to, to involve them in planning for their care, to achieve in school and elsewhere, and to help to stay in touch with their birth family;
- (h) progress against all other priorities was indicated green or green/amber. The Children in Care Council found that CiC and Care Leavers are generally happy that they have the right place to live, home life is stable and safe, and they are generally treated with respect and receive support to facilitate transition into adulthood.

The following answers were provided in response to concerns of the Children in Care Council:

- (i) there is a current challenge with consistency of social workers due to a high turnover of staff and problems with retention of skilled staff. This has been a problem nationally as agency staff is paid more than Local Authority staff. Nottingham is trying to limit movement and commit staff to 3 years of work, setting an expectation of a minimum commitment. By June the CiC Service should be without agency staff;
- (j) regarding access to the advocacy service, some work needs to be done around the channels of communication used to promote this to CiC and Foster Carers. Advocacy is an important service as it provides CiC with somebody external to talk to. Communications may need modernising, with use of social media and investment into publicising this service, with carers as well as CiC.

Board members made the following comments in the conversation which followed:

- (k) the Children in Care Health team could help to signpost young people to advocacy services as they see most of them once a year;
- (l) although a change of social worker is not ideal for any CiC, some are more vulnerable than others and so consistency should be assured for these.

RESOLVED to

- (1) use the findings from the survey results to inform relevant service and corporate action and business plans;**
- (2) recognise the hard work done by the CiCC in the planning, delivery and analysis of the Have Your Say survey, and acknowledge their vital role in the co-production of services across children's social care;**
- (3) implement the findings of the 2015 Have Your Say survey as appropriate.**

54 FORWARD PLAN

RESOLVED to note the forward plan