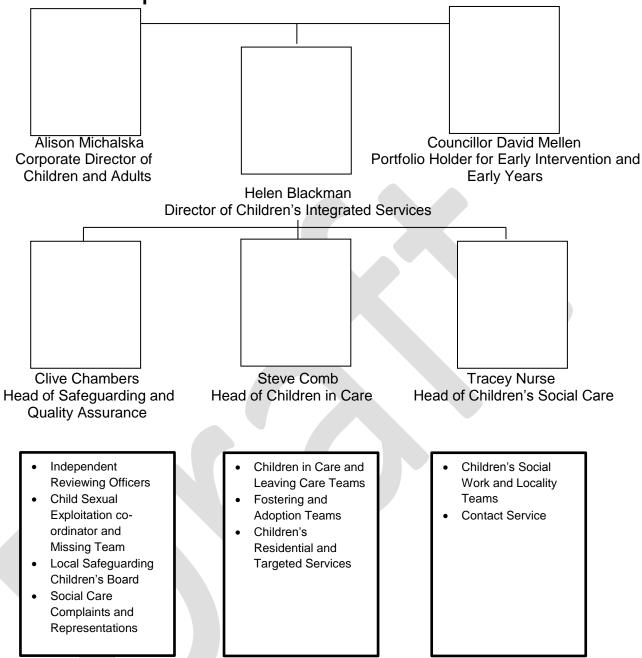
# Children in Care and Care Leavers Strategy 2016/17 – One Year Refresh: Valuing the Future of Our Children in Care and Care Leavers

# Our Leadership Team



# Introduction

We and our partners recognise the value of prevention and early intervention. We work to do all we can to support children in need of help and protection, and their families. We believe that in most cases children achieve their potential and thrive best within their birth families.

Sometimes children cannot be cared for in their birth families or wider network and come into the care of the local authority. For this group of children and young people we have a responsibility, as corporate parents, to provide care and to work with partner agencies to best meet their needs and prepare them for their future.

As corporate parents, we are responsible for ensuring children who come into our care experience safe and positive parenting, are helped to achieve their full potential and obtain the best possible outcomes.

It is acknowledged that in order for our children to achieve the best possible outcomes, all agencies involved in caring and supporting them must work together effectively. This in-turn requires a multi-agency strategy that clearly states areas that require improvement or attention (i.e. our strategic priorities) and what actions will be taken to address identified priorities.

This strategy is based on seven children in care (CiC) and care leaver (CL) strategic priorities that have been identified through the analysis of local data and the views of our young people. The strategic priorities identified within this strategy have been aligned with the Directorate's priorities, as detailed in the 2016/17 Children's Integrated Services (CIS) Delivery Plan – see table 1.

#### **CiC and CL Strategic Priority**

- To actively seek the wishes and feelings of our young people and use the information to influence the care and support they receive. We will ensure our young people are able to access the advocacy, independent visitor and complaints services. We will ensure our young people feel treated with respect and will be given enough time and help to understand and be happy with their circumstances.
- 2. To help our young people achieve educational success and to ensure those leaving care are engaged in either employment, education or training.
- To ensure care leavers have access to suitable accommodation and support in order to facilitate the best possible transition into independence.
- 4. To keep young people safe and avoid the criminalisation of young people through strong collaborative partnership work.
- To ensure young people are healthy through the delivery of appropriate intervention and health services. This will be facilitated through the timely undertaking of health assessments, dental checks, immunisations, and Strengths and Difficulties Questionnaires (SDQs).
- To reduce delays in securing stability and permanency for our young people. We will ensure unnecessary change in home, carer, social worker or school are avoided.
- 7. To increase use of internal foster and residential placements through the recruitment and retention of foster carers, and to explore if the types and numbers of residential placement can be increased, in order to offer more local homes.

#### **CIS Priority**

- We will play an active role in supporting families to address the issues that can become barriers to learning and aspiration young people and their children, parents/carers. We will work with education colleagues to support vulnerable learners, including looked after children. This will contribute to the successful delivery of Nottingham City's Education Improvement Strategy. We will promote a learning culture within our services that ensures our practice is informed by a strong evidence-base, emerging best practice and learning from Serious Case Reviews (SCRs) and other serious incidents. We will act on the findings of inspections, peer reviews, audit activity and our regular performance monitoring.
- We will provide early help, parenting and family support, targeted interventions and specialist services to build resilience, not dependence, in the children and families we serve. We will work with our communities to build their capacity to support one another. We will work to safeguard children and young people from harm, abuse and exploitation and we will support children who are in our care and their carers. We will use restorative approaches with young people to enable them to make a positive contribution to their communities.
- We will work with our partners to ensure children and young people have the self-esteem, confidence and knowledge to keep themselves safe in their relationships, seeking help when needed. We will, at the earliest opportunity, directly support children, young people and their families that are struggling with significant mental health issues that may result in harm to themselves or others.

### Vision and Mission Statements

Our **vision** is a city where every child and young person can enjoy their childhood in a warm and supporting environment, free from poverty and safe from harm; a city where every child grows up to achieve their full potential.<sup>1</sup>

Our **mission** ensure that all children and young people in and leaving our care have the right home and support to keep them safe and well and to help them grow into happy, healthy, successful and fulfilled young adults who are optimistic about their future.<sup>2</sup>

This vision will only be achieved if support services and support agencies around our children and young people work together effectively through well-coordinated collaboration. Working together in this way, should help us ensure our children and young people, and those who care for them get the **right help at the right time**. This document (and supplementary action plans) aims to provide the strategic direction needed to ensure this happens.

This document provides details on:

- Children in Care service areas
- Support Services and Partner Agencies
- · Governance and Monitoring Framework
- Strategic Action Plan

<sup>&</sup>lt;sup>1</sup> 'Children and Young People's Plan (CYPP) 1 Year Refresh for 2015/16: It Takes a City to Raise a Child' (2015)

<sup>&</sup>lt;sup>2</sup> Children in Care and Care Leavers' Charter

# Background to the Strategy

Multiple sources of information have been used to identify the priorities outlined in this strategy to ensure they reflect what is important to our children in care and care leavers. This section pulls together the relevant data for each priority, in addition to providing broader contextual information. Information presented represents our position up until the 31<sup>st</sup> March 2016 unless otherwise stated.

It should be acknowledge that at the time of writing this strategy, a number of national reviews have been recently published or programmed launched and therefore the national policy position is still emerging. Given this, actions in response to these reviews cannot be identified.

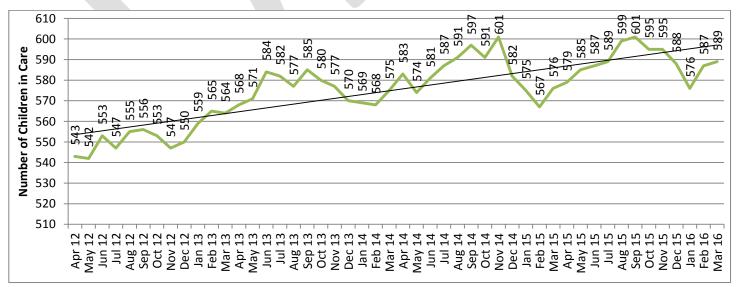
- Residential Care in England (Narey, 2016)
- Review of the Youth Justice System (Taylor, 2016)
- Unaccompanied Asylum Seeking Children Dispersal Programme

#### Context

During the last financial year, the local authority spent approximately £34.5m to support the children in care (an over spend of approximately £0.6m). Reductions to available funds for 2016/17 mean that we need to focus resources where they will have the most impact. Having clearly identified priority areas is essential to making this happen.

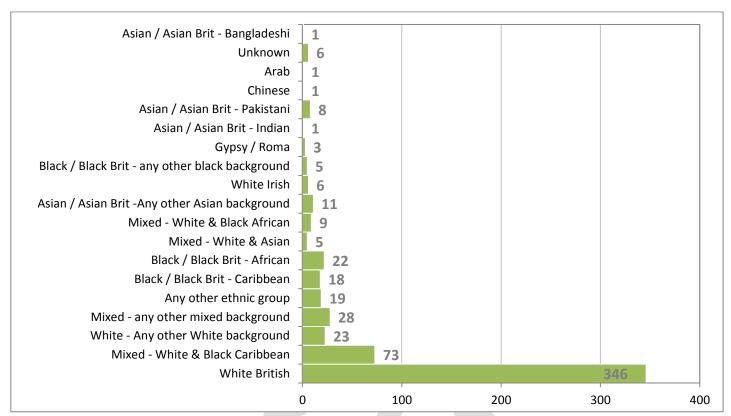
#### **Children in Care Profile**

We have 589 children in care and 203 care leavers (supported by the Leaving Care Service). Effective edge of care support services have resulted in Nottingham having a lower rate of per 10,000 of children in care when compared to statistical neighbours, with rates of 90.5 and 96.3, respectively). However, graph 1 shows that despite minor fluctuations, our children in care cohort has increased year on year since 2012. This increase creates increased demands on limited resources. We therefore need to ensure that only children, who need to enter care, enter care and that exit planning is effective.



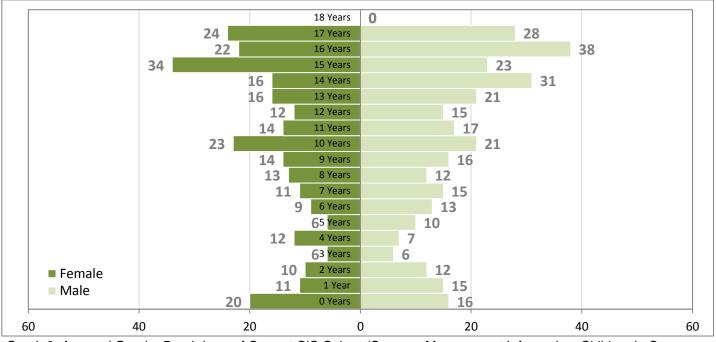
Graph 1: Number of CiC April 2012- March 2016 (Source - Management Information: Children in Care report)

58.7% (346) of our CiC are of White British ethnic origin. The next largest ethnic group is Mixed – White and Black Caribbean, accounting for 12.4% (or 73) of the CiC population. (See graph 2 for full ethnic breakdown.) More males than females are in our care, with 53.7% and 46.3% respectively.

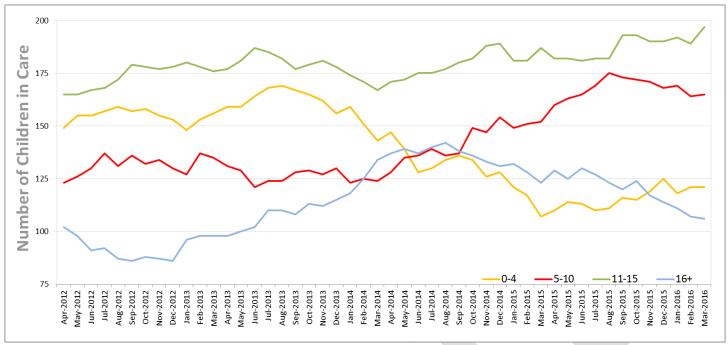


Graph 2: Ethnic Breakdown of Current CiC Cohort (Source - Management Information: Children in Care report)

The majority (61.5%) of our young people are aged between 5 to 15 years (graph 3). Between April 2012 – March 2016, there has been a noticeable decrease in the proportion of children aged 0 – 4 years. Over the same period, there has been a marked increase in the proportion of the CiC population who are aged 5 to 10 years – see graph 4.

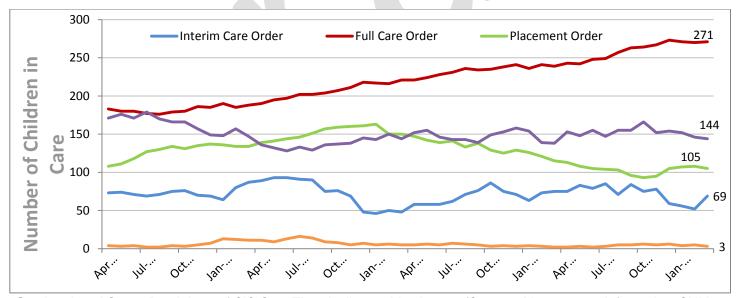


Graph 3: Age and Gender Breakdown of Current CiC Cohort (Source - Management Information: Children in Care report)



Graph 4: Age Breakdown Over Time April 2012-March 2016 (Source - Management Information: Children in Care report)

During the last financial year, 58% of our children were admitted into care under Section 20 of the Children Act (1989). During the same period, 4% entered under a Full Care Order. While the majority of our young people were first accommodated under this arrangement, after careful assessment and planning, the legal status of most of children in care will become a Full Care Order. See graph 5 which shows a breakdown of legal status over time.



Graph 5: Legal Status Breakdown of CiC Over Time April 2012-March 2016 (Source - Management Information: Children in Care report)

Strategic Priority 1: To actively seek the wishes and feelings of our young people and use the information to influence the care and support they receive. We will ensure our young people are able to access the advocacy, independent visitor and complaints services. We will ensure our young people feel treated with respect and will be given enough time and help to understand and be happy with their circumstances

#### **National Data**

The 2015 Children in Care and Care leavers (State of the Nation: Report 1) summaries the responses to the annual survey of children in care and care leavers across England. According to the report, at any one time there are approx. 69,000 CiC. In total 2,936 surveys were collected, this represents a 4.3% response rate. The response rate may be lower when it is considered only 1,667 (2.4%) surveys were fully completed.

#### Local Data

Children in care (aged 3 years and over) and care leavers are asked to take part in the annual Have Your Say (HYS) survey. Launched in 2011, responses to the survey help us gauge how well we are performing against the commitments made in our Children in Care and Care Leavers Charter (see appendix 1). We achieved a 19% response rate in 2015. This is a slight improvement on the 2014 response rate of 18% but lower than our 2012 high of 24%. In 2015/16 96.6% of children in care participated in their CiC review. 98.4% of CiC reviews took place within timescale (Analysis and Insight, 2016).

#### Children in Care and Care Leaver Feedback

In 2015, 92% of our young people knew where to go if they had a problem or wanted to make a complaint. 84% knew where to go if they wanted to speak to an independent person apart from their social workers/personal advisors or carers (a 5% decrease from 2014). 7% said they would talk to the advocacy service; this is a decrease from 2014 (12.7%). There has been a reduction in the number of children who reported speaking to the complaints service from 2014 to 2015 with a figure of 18.6% to 12%, respectively. A reduction in the percentage of children reporting having spoken to the complaints or advocacy service should not automatically be considered a concern. Especially when it is considered that the majority of young people know where to go if they wanted to make a complaint or speak to someone independent.

93% felt that their carers had enough time for them 'All the time/ most of the time' in 2015. This is a small decrease on 2014 figures when 93.7% of young people felt their carers had enough time for them 'All the time/ most of the time'.

A small proportion (7%) of our young people felt that their opinions were 'Never' heard and 'Never' made a difference to decisions made in their lives in 2015 survey; this is an increase from 2014 (4.4%).

69.6% attended their 'Looked After/ Pathway Plan review' and 23.5% did not attend their 'Looked After/ Pathway Plan review' but told their social worker/ personal advisors their thoughts before the meeting. This is an increase on 2014 and indicates an increase in involvement in CiC reviews. 2% did not attend the meeting and did not want to tell anyone their thoughts; this is a decrease on the previous year from 10.9%. 85% felt their voices were heard in their Looked after/ Pathway Plan review 'All the time/most of the time'. This is a decrease from 90% in 2014. There was an increase in those who felt that their voices were 'Never' heard in their Looked After/ Pathway Plan reviews, 10% compared to 5.7% in 2014.

14% felt that they 'Never' (9% 'Only sometimes') got help in preparing for their Looked After/ Pathway Plan review' in 2015, this is an increase on 2014.

# Strategic Priority 2: To help our young people achieve educational success and to ensure those leaving care are engaged in either employment, education or training

#### **National Data**

In 2012/13, there was a 43% gap between children in care and their peers in attainment of 5 GCSEs grade A\*–C including English and maths, but this gap had narrowed from 45% in 2010/11 Absence from school for children in care had improved too since2010/11 (National Audit Office, 2016)

In 2013/14, 41% of care leavers were not in education, employment or training compared with 15% of all 19-year-olds, the highest proportion since 2001-02. 6% of care leavers were in higher education compared to one-third of all 19-year-olds (National Audit Office, 2016).

#### Local Data

93% of children in care have a completed Personal Education Plan (PEP); this is 2% below our 2015/16 target (Analysis and Insight, 2016). The current educational attainment trends over Key Stage 2 and 4 are mixed. Key Stage 2 results have improved over the four academic years ending in 2015 and outcomes in Nottingham are higher across every measure (see table 2).

Outcomes for Children in Care	2013	2014	2015	2014 National Average
L4 +	53%	61%	64%	48%
L5	Not recorded	Not recorded	0%	-

Table 2: Key Stage – Reading, Writing and Maths Combined (Source: Corporate Parenting Board Report – Attainment of Children in Care (March, 2016))

Key Stage 4 results are down on the results in 2014. The proportion of pupils obtaining the headline 5+ A\*-C passes including English and Maths in Nottingham was down 4% (1 pupil) on the 2014 results. However the number of pupils achieving a pass in at least one qualification improved from 62% to 84% in 2015.

65.9% of care leavers (aged 17 to 21 years) are in employment, education or training; this represents a 15.9% increase on the previous year and is 10.9% above the target set for 2015/16 (Analysis and Insight, 2016).

#### Children in Care and Care Leaver Feedback

61% felt that they are doing very well or well at school in 2015, the same as 2014 (53.5% in 2013, 69.3% in 2012 and 55.3% in 2011). There was a slight increase in those who felt they were not doing very well, at 4% compared to 3% in 2014. 21% did not know about their PEP, compared to 17.5% in 2014. 74% were happy with their PEP either 'All the time' or 'Most of the time'. However, 20% are not happy with their PEP – this is the largest proportion not happy since the survey began. 72% felt that they would do better with more help in 2015, a 10% increase from 2014, suggesting CiC may want more help with education than they are receiving.

# Strategic Priority 3: To ensure care leavers have access to suitable accommodation and support in order to facilitate the best possible transition into independence

#### **National Data**

Most care leavers (93%) live in suitable accommodation. However, in 2013-14, 17% of 19- to 21-year-old care leavers did not have their accommodation or activity reported by local authorities. Only 8 out of 151 local authorities reported that they knew where all their care leavers were living and what they were doing. In 2014 the Department of Education introduced Staying Put, which means care leavers can stay with foster carers until they are 21, if both wish. In 2013, eight government departments published the Care Leaver Strategy. Care leavers face challenging social problems.

25% of those who were homeless had been in care at some point in their lives (2010) (National Audit Office, 2016).

Most young people leave care at the age of 18 years. However, 50% of young people, nationally, are still living with parents at the age of 22. This highlights a need for effective leaving care services.

#### Local Data

89.6% of care leavers (age 17 to 21 years) are in suitable accommodation; this represents an increase in performance of 9.6% on both the previous year and the set target (Analysis and Insight, 2016). 94.7% of applicable<sup>3</sup> care leavers have a Pathway Plan that has been completed/authorised in the 6 months preceding the 2015/16 financial year end (Analysis and Insight, 2016).

#### Children in Care and Care Leaver Feedback

In 2015 87% of our young people were 'Happy/Very happy' with the support they were getting to plan for their future. This has improved consistently year on year, from 76.3% in 2011. 80% felt that they have the basic skills to become independent but would like help with budgeting, preparing for work, further education and employment to move on their lives, similar to previous years. 51% would like help with is becoming a responsible tenant.

38% knew what was in their Pathway Plan, a drop from 44% in 2014. 1 in 5 care leavers do not know they have a Pathway Plan.

# Strategic Priority 4: To keep young people safe and avoid the criminalisation of young people through strong collaborative partnership work

#### **National Data**

49% of men under the age of 21 who had come into contact with the criminal justice system had a care experience (2008) (National Audit Office, 2016). This suggests a need to identify steps that can be taken to deter criminal behaviour and the criminalisation of young people within the care system. Of those children in care aged between 10 and 17 years, 6.2% had been convicted or subject to a final warning or reprimand during the year compared with 7.2% in 2011.

#### Local Data

Data shows that, in Nottingham, the percentage of CiC aged 10 years old or older with convictions/cautions and reprimands are at their lowest when compared to previous years – see table 3.

13.00%   9.00%   9.00%   9.80%   9.80%   9.80%   8.70%   8.2%	06/07	07/08	08/09	09/10	10/11	11/12	12/13	13/14	14/15
18:8676 8:8676 8:8676 8:8676 8:3676 8:3676	13.00%	9.00%	9.00%	9.80%	9.00%	9.80%	8.70%	8.2%	6.0%

Table 3: (Source. OC2 Statutory Return)

Fewer young people are being criminalised. This can be attributed to the high level of support from the Authority's CiC Police Officer and targeted support provided by our Youth Offending Team (YOT). The YOT have been effective in embedding the Restorative Justice approach throughout the Authority and achieved the Restorative Justice Council's (RJC) Restorative Service Quality Mark (RSQM). Research shows that restorative practice works. It delivers better outcomes for young people across schools, care, community and the Criminal Justice System. Done well, it has the potential to positively change the lives of young people and others.

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<sup>&</sup>lt;sup>3</sup> Eligible, Relevant and Former Relevant care leavers

#### Children in Care and Care Leavers Feedback

No relevant feedback has been collected in regards to this priority.

Strategic Priority 5: To ensure young people are healthy through the delivery of appropriate intervention and health services. This will be facilitated through the timely undertaking of health assessments, dental checks, immunisations, and Strengths and Difficulties Questionnaires (SDQs).

#### National Data

Children often enter care with a worse level of physical health and mental health than their peers in part due to the impact of poverty, abuse and neglect (Comptroller and Audit Office, 2014).

For the year ending 31 March 2013, data shows some improvements in the health and wellbeing of children in care;

- The rate of substance misuse among children in care has fallen from 4.2% in 2011 to 3.5%
- However, there has been very little change in the emotional and behavioural health of children in care over the last 3 years when based on SDQ scores

#### Local Data

We did not meet our target of 90% in regards to young people with update to date health checks, dental checks and SDQs. Performance was 71.6%, 85.2% and 63.5%, respectively (Analysis and Insight, 2016). A concerted drive from staff has led to a significant improvement in performance over quarter 3 and 4 of 2015/16. Work is being undertaken to ensure robust consistent processes are put in place to improve performance.

Dedicated Business support has now been re-established which has led to a rise in performance in regards to SDQ completion. Meetings are now established to look at children's emotional well-being and data is available to ensure we capture those young people with high scores have appropriate intervention is in place.

Front line practitioners are embedding health checks as party of their practice.

#### Children in Care and Care Leaver Feedback

In 2015, 88% felt healthy (all the time or often) in 2015, the same as 2014. Before 2014 this had reduced year on year since the survey began, (92.9% in 2013, 95.4% in 2012 and 97% in 2011). Most children in care (55.4%) and care leavers worried about their family, followed by 43% about their futures, 39% about their education and 32% about finding a job/career. 'Living on my own/loneliness' was the worry which had a 10% increase when compared to the previous year.

Strategic Priority 6: To reduce delays in securing stability and permanency for our young people. We will ensure unnecessary change in home, carer, social worker or school are avoided

#### **National Data**

The NOA (Comptroller and Audit Office, 2014), states that there has been no improvement in getting children into the right placement first time and close to home. One of the Department's objectives is to improve the stability of placements. It measures the number of placements a child has in a year and whether they are placed within 20 miles of home. At 31 March 2013:

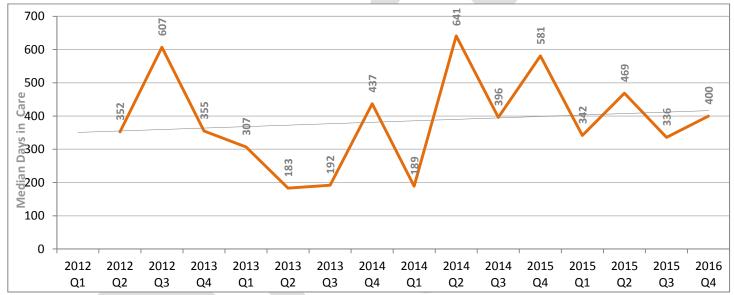
• 34% of children in care had more than 1 placement during the year and 11% had 3 or more placements. These proportions have been the same since 2009. Some 330 children had 10 or more placements during the year, and 90% of these children went 'missing' during the year.

Each time a child goes missing it is counted as an extra placement. There is evidence that, in the longer term, placement breakdowns can affect children's progress in school and their sense of well-being and self-worth

 14% of foster children and 34% of those in residential care were placed more than 20 miles from home. The Department accepts there is sometimes good reason to place a child at a distance from home, but the overall numbers have not improved in the last 4 years.

#### Local Data

Data shows fluctuations in the median number of days in care (graph 6) on a quarterly basis from April 2012 to March 2016. During this period the median number of days in care for those who have been discharged from care has risen from 352 to 400. This demonstrates the need for effective exit planning and obtaining permanency as early as possible.



Graph 6: Median Days in Care of Discharged CiC (Source - Management Information: Children in Care report)

We are committed to achieving adoption and permanency for our children. At the end of March 2016, the Authority had ninety-three children in the adoption process i.e. children who adoption was deemed in their best interest but had not been adopted. Forty-five children were adopted during the 2015/16 financial year, which represents a drop on the previous year, where 70 children were adopted. Reducing unnecessary delay in placing children for adoption remains a high priority. Recently published scorecard data shows children in Nottingham are waiting for too long to be placed for adoption. Timely adoption for our children remains as a priority.

Achieving stability is essential to achieving the best possible outcomes for our young people. Ensuring that unnecessary change in home, carer, social worker and school is avoided is therefore a priority. During 2015/16, 12.9% of our children in care had experienced three or more placement during the preceding 12 months – our aim was 11.1% or less. Data shows that 70% of children in care<sup>4</sup> had been the same placement for two or more years (our target was 66%). Performance is therefore good but needs to be maintained. Last year, 40% of children in care<sup>1</sup> had three or more allocated social workers. Improvements are required in this area.

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<sup>&</sup>lt;sup>4</sup> Children who had been in care for at least 12 months

#### Children in Care and Care Leaver Feedback

84% felt that 'where they are living is the right care place for them' in 2015, an increase from 2014. 85% felt safe where they lived 'All the time' compared to 76% in 2014, 81.2%. This is the largest proportion reporting they felt safe where they live since the survey began. 82% felt safe at school 'All the time', this is more than last year with 70.1% in 2014. This is the highest proportion stating they felt safe all the time at school since the survey began. 78% felt safe in their neighbourhood "All the time", this is an increase from 66.3 in 2014 and again the highest proportion since the survey began.

There has been an increase in the percentage of children stating they had experienced no changes in 2015 when compared to 2014, across all categories (home, carer, school and social worker), from 17% to 22%. However this still means that 4 in every 5 children or young people have had a change of home, carer, social worker or school in the past 12 months. Despite these overall reductions, still more than half of respondents had a change of social worker over the previous 12 months.

For those who had a change, 61% felt the help they received to cope with the change was very good or good, a 3% increase from 2014.

Strategic Priority 7: To increase use of internal foster and residential placements through the recruitment and retention of foster carers, and to explore if the types and numbers of residential placement can be increased, in order to offer more local homes.

#### **National Data**

During 2014-15, two thirds of fostered children were in placements with LA fostering agencies (57,195); the remainder were in placements with IFAs (28,695). The number placed through IFAs increased by three percent from 2013-14, from 27,980 to 28,695 in 2014-15. Over the same period the number in LA fostering agencies increased by one percent, from 56,470 to 57,195; this was a smaller increase than in previous years (Ofsted, 2015).

#### Local Data

We use a mix of internal Local Authority recruited foster carers and Local Authority managed residential homes, as well as commissioned independent fostering agencies (IFAs) and external residential homes. At the end of March 2015/16, we had 59% of children placed in external IFA placements. Over the next year, we will be working to get a 50% of our children placed with our carers. We will also be working hard to ensure that 85% of our children are placed within 20 miles of Nottingham. Data shows that 80.7% of our young people live within 20 miles of the City (Analysis and Insight, 2016).

#### Children in Care and Care Leavers Feedback

Children in foster care are asked their views about the support they receive from their carer at each review and following a placement coming to an end. This information is factored into the annual fostering review which will agree what support carers need in their role.

# Children in Care Services

We know that a strong and stable relationship with professionals is vital to ensure that children in care, care leavers and carers feel well supported and are able to thrive. Children, young people and carers are likely to be supported by a number of different teams as they move through the care process. Whilst we know that this can cause some disruption we think it's important that the support on offer changes as the needs of the child or young person develop.

This section seeks to outline the roles and responsibilities of Local Authority teams that work with our children in care and care leavers.

# Social Work Support for Children in Care

The Authority's social work support for children in care is provided by one of three types of social care teams. These are:

- Children in Care (CiC) Teams
- Children's Social Care (CSC) Teams
- The Disabled Children Team (DCT)

The Authority has three CiC Teams who work solely with children in care from 0 up to 18 years old. The teams strive to establish permanency through adoption, special guardianship, child arrangement or permanent fostering. Having dedicated children in care teams promotes specialism and expertise to develop within the social care workforce. This, we believe, in most cases leads to better outcomes for our young people.

While the majority of CiC are supported by our CiC teams, a small portion of our CiC cohort is supported by one of our twelve CSC teams. Cases are normally retained in order to prevent disruptions a move of social work team would cause. Like the CiC teams, CSC teams strive to secure permanency for young people through all available roots.

The DCT is an integrated service which includes social work with specialist knowledge in the area of childhood disability. The DCT undertake a number of duties, including those associated with meeting the Authority's statutory requirements in relation to severely disabled children in care. The number of CiC cases held by the DCT is relatively small.

## Children's Homes

Nottingham City Council has eleven small residential homes offering care and accommodation for children and young people between the ages of 12 - 25 years. A wide range of care and support including short term emergency care and long term care including a long term home for children with complex disabilities (17 beds).

Semi-independent accommodation for young people who are 16 years and over (18 beds) Short breaks unit for children and young people with learning disabilities, physical disabilities and a range of associated challenging behaviours (11 beds).

All our homes are safe and welcoming and we are proud to provide high quality care with all of our homes judged as 'Good' or 'Outstanding' by Ofsted.

Every effort is made to provide children and young people with the necessary support and nurture needed for them to achieve the best outcomes possible.

We quality assure all private and charitable run Residential Children's Homes and semi-independent provision in an effort to ensure all young people receive the same high quality care.

Some of our children are placed away from Nottingham city in residential children's homes and where this is the case we give our assurance to our young people and their families that we rigorously monitor the homes and extend all support and services to our children.

# Fostering and Adoption (Including the Adoption Post Order Service)

The Fostering and Adoption Service aims to provide high quality family based care that ensures that children in care receive a positive experience of home and family life.

To achieve this we recruit, assess, train and support foster carers and adopters to support children to achieve the best possible outcomes in regards to their physical, emotional and intellectual development. A variety of foster carers and adopters are recruited and trained to meet the diverse needs of children and reflect the ethnic and cultural background of the community we serve. We offer a full and comprehensive training programme to equip carers to be able to meet the complex needs of children in our care

All foster carer and adoption applicants are rigorously screened thoroughly assessed and carefully trained so that they can provide safe and supportive homes for children in care, children placed for adoption and children post adoption.

Support is available to adopters after the adoption order is granted to enable them to learn and adapt to the changing needs of children. We recognise the lifetime commitment that is adoption. We offer a range of support including a designated Adoption Support Services Adviser (ASSA) who is there to help adopters' access adoption support, make application to the adoption support fund and other specialist services.

The Post Order team also offer a service to special guardians who can request an assessment and further support post the making of the order.

(Our full range of post order support is included in our Adoption Passport which is available from our website, <a href="http://www.nottinghamcity.gov.uk/adopt">http://www.nottinghamcity.gov.uk/adopt</a>).

# Independent Reviewing Officer Service

The Independent Reviewing Officers (IROs) Service operates within the framework of the updated version of the IRO handbook, the national guidance of Working Together 2015 and the national guidance for Fostering. There is a statutory obligation to provide each child in care with an IRO to ensure their Human Rights are respected.

The Primary focus of the IRO is to critically examine and quality assure the Care Planning and interventions of the Local Authority in respect of each child or young person looked after. Central to this is ensuring that the child's wishes and feelings are given full consideration in planning and enabling by their role, improved outcomes. The primary focus therefore is to ensure;

• There is robust challenge regarding decisions, where there is underlying poor professional practice and when decisions are not being taken in the children's interests

- To challenge the quality of analysis being undertaken, to ensure it meets the children's needs
- That views of children, parents, carers and other professionals are given sufficient weight in care planning
- That informed reflection occurs on the child's progress and planning for the future

# **Leaving Care Service**

The Leaving Care Service work with young people aged between 18 and 25 years who are eligible to receive care leaver support. The service aims to ensure all young people get the best support as they transition into adulthood.

Every young person will be given the opportunity to explore their independence with an individual support package that allows them to develop, learn, or re-learn the skills that will be needed for successful independent living.

We have supported a number of young people through further and higher education, with some going on study at a post-graduate level. We are very proud of our young people who have gone on to achieve huge educational successes.

The Leaving Care Service also incorporates a service for unaccompanied asylum seeking young people. Many of these young people have had a difficult life and continue to need help to find suitable accommodation, education or training and may also need emotional or financial support.

#### The Placement Service

The Children's Placement Service is the single point of access for the procurement, brokerage, management and quality assurance of care placements. The Service is responsible for providing every child and young person with the best possible placement, which meets their needs, wishes and feelings and provides them with the opportunity to thrive and achieve. This could be an internal (Nottingham City Council) placement, or an external placement, commissioned through the Regional Provider Framework, or on a spot-purchased basis.

The Placement Service undertakes activities which ensure that all children and young people are accessing high quality care placements.

# Youth Offending Team (YOT)

The Youth Offending Team work closely with young people who get into, or are at risk of getting into trouble with the law. The YOT (and its partners) work hard to prevent offending and re-offending behaviour. It has been effective in its efforts to do this through its use of Restorative Justice (RJ).

RJ is used to help young people who commit crime to make amends in an effort to repair the damage done and find a positive way forward. Research shows that restorative practice delivers better outcomes for young people across schools, care, community and the Criminal Justice System.

The YOT has now been awarded the Restorative Justice Council's Restorative Service Quality Mark (RSQM), which recognises professionalism and high standards in RJ practice.

# Child and Adolescent Mental Health Service (CAMHS)

The CAMHS Children in Care team provides a specialist service and training to support and maintain the emotional and mental health needs of our young people. The team ensures the emotional health needs of young people are reflected in Health Plans and are part of the CiC review process.

The team multi-disciplinary offers support and intervention based on a Consultation Model. This model helps professional better meet the emotional and mental health needs of our young people and informs direct therapeutic work offered to young people and their carers.

#### Virtual School

The role of the Virtual School is to monitor, support and provide interventions to ensure that children in care achieve the best possible educational outcomes. The school reports on the completion of Personal Education Plans (PEPs) and audits the quality of these plans. It also supports schools, or other educational institutes, to fulfil their statutory duties to children in care.

The Virtual School works with a network of Designated Teachers who are dedicated to ensuring that our children achieve the best they can in line with all other children.

# Social Care Complaints Service

The Social Care Complaints Service facilitates the resolution of service user dissatisfaction and learns from complaints in order to improve service delivery. There is a concerted effort to ensure that our young people know how to make a complaint if they are dissatisfied with the support they receive. Regular monitoring of complaints mean trends can be identified and service improvements can be made.

## Analysis and Insight

Analysis and Insight work to create insight, analysis and performance reports to drive service improvements. The team are responsible for statutory returns, data quality, performance reporting, inspection support and work primarily to support front line services.

The team help services test hypotheses, identify trends and trajectories with a view to bringing data to life.

# Research, Engagement and Consultation (REC) Team

The Research, Engagement and Consultation team provides strategic and operational support for children's social care to ensure that children and young people's views, experiences and ideas for change are listened to and used to shape both their lives and improve services for CiC in general.

The Engagement and Participation Lead from the REC team is responsible for convening CiC Council meetings and associated youth voice activities linked to the Corporate Parenting Board (CPB) and Charter for Children in Care and Care Leavers. The Engagement Lead also co-ordinates the annual Have Your Say survey of all CiC and care leavers, the results of which are used by the CPB to drive up standards across all service areas.



# Support Services and Partner Agencies

The Children in Care Service works closely with a number of support services and partner agencies external to the Authority, all of which share the same vision. Support services and partner agencies include the following:

# Children in Care and Adoption Health Team

It is a statutory responsibility for the Children in Care and Adoption Health team to assist the local authority in addressing the needs of children in care through effective commissioning, delivery and co-ordination of health services and through individual practitioners providing co-ordinated care for each young person.

The team is led by a Designated Doctor and Nurse and includes Community Paediatricians and Clinical Nurse Specialists who collectively are responsible for:

- Ensuring that children and young people in care receive statutory health assessments and that key performance health indicators are met
- Working with children, young people, carers and Social Care colleagues to ensure all identified health needs of children in care that are identified are met
- The Designated Professionals ensure that the health needs of children in care are raised and recognised in all appropriate forums across the health and social care community

# Lifeline Journey

Lifeline Journey is commissioned by the Authority and partners to provide drug and alcohol provision for young people under the age of 18 who have a link to Nottingham City.

Their mission is to work with young people and their families to reduce the impact of substance misuse, support recovery and to challenge inequalities linked to drug and alcohol use. They are committed to providing a confidential and friendly drug and alcohol service that values young people and their families to achieve positive outcomes.

Lifeline Journey provides a comprehensive range of support packages for young people, their families and the professional around them.

# National Youth Advocacy Service (NYAS)

NYAS are commissioned to provide issue-based advocacy service for children and young people up to the age of 18 years, looked-after now or in the past, or up to 25 years for those with a disability or in higher education.

- Advice and information for children and young people about their rights. Services include
- Independent Persons service is for all eligible children and young people subject to current Secure Accommodation Orders
- Independent Visitor service provides suitable appointed volunteers to visit any child or young
  person who is in care where it is deemed to be in the child or young person's best interests.
  This includes children placed out of the local authority area

• Residential Visiting Advocacy service provides visits to all residential children's homes and residential schools wherever one of our young people is placed. This includes secure accommodation

## **Futures**

Futures are a not-for-profit provider of jobs and skills advice, training, apprenticeships and support to young people and adults who need help preparing for work or training.



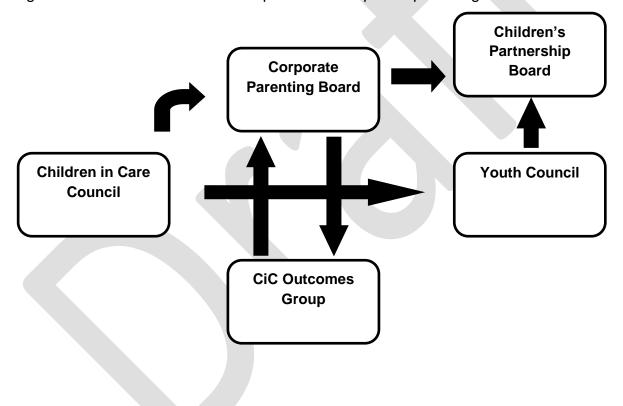
# Governance and Monitoring Framework

This strategy is endorsed by the Corporate Parenting Board. Strategic Priorities (SPs) and their corresponding actions will be reviewed in response to updates of the Children in Care Joint Strategic Needs Assessment, the annual children in care and care leavers 'Have Your Say' (HYS) survey, and priorities set by central government. The next schedule update of this strategy will take place in 2017.

Progress against actions outline in the action plan will be monitored by both Children in Care Outcome Group and Corporate Parenting Board members.

The Children in Care Council (CiCC) will assist in the evaluation of progress against identified priorities. The CiCC are involved in analysing performance data generated by the annual HYS survey and comparing it review result from the previous year. Priorities for future action are then recommended.

The diagram below shows the relationship between corporate parenting forums within the Authority.



# Strategic Action Plan

The action plan that supports this strategy is a working document. As the effectiveness of activity is monitored and reviewed, the content will be added to. The following action plan serves to provide an indication of activity that will be undertaken to address the seven strategic priorities identified but should not be viewed as a comprehensive and complete list of remedial action.

SP1 – To actively seek the wishes and feelings of our young people and use the information to influence the care and support they receive. We will ensure our young people are able to access the advocacy, independent visitor and complaints services. We will ensure our young people feel treated with respect and will be given enough time and help to understand and be happy with their circumstances

Action	Responsible Area	Performance Indicators	Baseline (2015/16 End of Year)	Target (2016/17)	Comments
1.1. Ensure children in care have their Children In Care Reviews within the appropriate timescale	IRO Service	The % of children in care reviewed within the appropriate timescale	98%	97%	
1.2. Ensure children in care participate in their Children in Care reviews	IRO Service	The % reviews where the child participated	97%	90%	
1.3. Convene monthly Children in Care Council (CiCC) meetings thus allowing children to be consulted on service developments their support		The number of CiCC meetings held over a 12 month period	12	12	
1.4. Increase the membership of CiCC	REC Team / CiC Team / F&A Service / Residential Children's Home / Placements Service	The number of CiCC members	18	20	

1.5. Seek the views of children and young people as part of the annual 'Have your Say' (HYS) survey		The % return of usable Have Your Say surveys	19%	20%	
1.6. Introduction of the MOMO (mind of my own) service to staff and young people	REC Team	Identification and training of MOMO champions from appropriate service areas  Production of staff guidance document  Production of young people guidance	Data not available (new measures)	N/A	
1.7. Ensure the wishes and feelings of children in care are recorded in all health assessments		document  The % of health assessments where the wishes and feelings of young people have been recorded	Data not available (new measure)	90%	

SP2 - To help our young people achieve educational success and to ensure those leaving care are engaged in either employment, education or training

Action	Responsible Area	Performance Indicators	Baseline (2015/16 Year End)	Target (2016/17)	Comments
2.1. Ensure the completion and implementation of Personal Education Plans (PEPs)	Virtual School / CiC Team / CSC Team /	The % of children in care with completed with a completed PEP	95%	95%	
2.2. Ensure children in care achieve A* - C in their GCSEs	Virtual School / CiC Team / CSC Team	The % children who have been in care for more than 12 months as at 31/03/14 achieving 5+ A* - C	6.5%	16%	
		The % children who have been in care for more than 12 months as at 31/03/14 achieving 5+ A* - C including English and Maths	6.5%	13%	
2.3. Ensure that school admission of children in care takes no longer than 20 days	Virtual School / CiC Team / CSC Team /	% of admissions not processed within 20 school days in City schools	Data not available	80%	
2.4. Monitor school attendance of children on a weekly	Virtual School / CiC Team /	The % of sessions missed due to:  *Overall absence	4.7%	5.2%	
basis	CSC Team	*Authorised absence	3.3%	3.8%	
		*Unauthorised absence	1.4%	1.9%	
		The % of children in care classed as persistent absentees	4.3%	4.8%	
2.5. Ensure care leavers are engaged in education, employment or training	Leaving Care Service / Futures	The % of care leavers in employment, education and training aged 17 – 21 years	65.9%	55%	

## SP3 – To ensure care leavers have access to suitable accommodation and support in order to facilitate the best possible transition into independence

Action	Responsible Area	Performance Indicators	Baseline (2015/16 End of Year)	Target (2016/17)	Comments
3.1. Ensure Pathway Plans are completed and implemented at age 15	Leaving Care Service / IRO Service / CSC Team	The % of applicable (Eligible, Relevant and Former relevant) young people with a Pathway Plan completed/authorised in the preceding 6 months	80.8%	97%	
3.2. Ensure the Independent Living Skills Programme is being used for children in care	CiC Team / IRO Service	The % of children in care with a Living Skills Programme booklet started	Data not available (new measure)	To monitor	
3.3. Work with NCH, Housing Aid and other housing providers to ensure our care leavers have access to suitable accommodation	Leaving Care Service / IRO Service	The % of care leavers, aged 17 to 21 years in suitable accommodation	89.6%	85%	
3.4. Promote use of the Staying Put scheme where appropriate	CiC Team / F&A Service	The number of young people in Staying Put placements	24	20	

# SP4 – To keep young people safe and avoid the criminalisation of young people through strong collaborative partnership work

	· - · · ·				
Action	Responsible Area	Performance Indicators	Baseline (2015/16 End of Year)	Target (2016/17)	Comments
<ul> <li>4.1. Convene quarterly Multiagency Network meetings between our Youth Offending Team, Nottinghamshire Police, and private and statutory providers. Meetings are used to share good practice, information, and open up lines of communication</li> <li>4.2. Deliver training on Restorative Justice (RJ) to staff, foster carers, residential team and external providers</li> <li>4.3. Embed the Multi-Agency Protocol to avoid the criminalisation of young</li> </ul>	Police Service / YOT  YOT  Police Service	The % of children in care aged 10 years and over with convictions/cautions and reprimands	6% (2014/15 End of Year)	5.5%	
people  4.4. Deliver training regarding reducing the risk of Sexual Exploitation to staff and external	Police Service / CSE Coordinator	The number of training sessions delivered	27 delivered training sessions	To increase the number of training sessions	
providers  4.5. Convene bi-monthly Concerns Network meetings where low level	Police Service	The number of convened Concerns Network Meetings	6	6	
sexual exploitation concerns are shared and addressed		The number of Child Sexual Exploitation referrals	28 (October 2015 – End of financial care)	To monitor	

4.6. Undertake return	Missing Team	The % of return interviews undertaken	64.3	80%	
interviews to children who					
go missing or absent					



SP5 – To ensure young people are healthy through the delivery of appropriate intervention and health services. This will be facilitated through the timely undertaking of health assessments, dental checks, immunisations, and Strengths and Difficulties Questionnaires (SDQs).

timely undertaking	of health assessi	ments, dental checks, immunisations, and Stren	igths and Difficul	timely undertaking of health assessments, dental checks, immunisations, and Strengths and Difficulties Questionnaires (SDQs).					
Action	Responsible Area	Performance Indicators	Baseline (2015/16 End of Year)	Target (2016/17)	Comments				
5.1. Ensure children have appropriate and timely health checks	CiC Team / F&A Service/ CSC Team / CiC Health Team/ Placement Service / IRO Service	The % of children in care with an up-to-date health assessment	76.9%	90%					
5.2. Ensure children in care are registered with a General Practitioner (GP)	CiC Team / F&A Service / CSC Team / CiC Health Team/ Placement Service / IRO Service	The % of children in care registered with a GP	98.8%	100%					
5.3. Ensure children have appropriate and timely dental checks	CiC Team / F&A Service / CSC Team / CiC Health Team / Placement Service / IRO Service	The % of children in care with up-to-date dental checks	80.1%	90%					
5.4. Ensure children in care over the age of two years are registered with a dentist	CiC Team / F&A Service / CSC Team / CiC Health Team / Placement Service / IRO Service	The % of children in care aged two years and over who are registered with a dentist	87.7%	100%					
5.5. Ensure children have appropriate and timely immunisation	CiC Team / F&A Service / CSC Team /	The % of children with up to date vaccinations on initial assessments reaching two years of age and reaching five years of age	Data not available (new measure)	N/A					

	CiC Health Team / Placement Service / IRO	The % of children with up to date vaccinations after a year of being in care reaching two years of age and reaching five years of age	Data not available (new measure)	95%	
	Service	The % of children in care who have had their Human Papilloma Virus (HPV) vaccination reaching 18 years of age	15%	To monitor	
		The % of children in care who have had their Preschool Booster (PSB) vaccinations reaching 18 years of age	41.9%	To monitor	
have an up-to-date Strengths and Difficulties Questionnaire	F&A Service / CSC Team / Placement / IRO Service	The % of children with up-to-date Strength and Difficulty Questionnaire	65.3%	90%	
5.7. Ensure children in care with abnormal Strengths and Difficulties Questionnaire score (of 17+), who are not receiving therapeutic support, are referred to the CAMHS Children Looked After team	CiC Team / CSC Team	The % of children in care with an abnormal SDQ score referred to the CAMHS Children Looked After team	Data not available (new measure)	100%*	
5.8. Ensure children in care, referred to the CAMHS Children Looked After team are offered the opportunity to complete an outcome measure	CAMHS	The % of children in care referred to the CAMHS Children Looked After team offered the opportunity to complete an outcome measure	Data not available (new measure)	100%	
5.9. Ensure the completion of outcome measures	CAMHS	The % of completed Routine Outcome Monitoring for children in care referred to the CAMHS Children Looked After team	Data not available (new measure)	65%	

SPS 6 – To reduce delays in securing stability and permanency for our young people. We will ensure unnecessary change in home, carer, social worker or school are avoided

Action	Responsible Area	Performance Indicators	Baseline (2015/16 End of Year)	Target (2016/17)	Comments						
6.1. Ensure permanency is secure for children in care	CiC Team / IRO Service /	The number of children discharged as a result of an Adoption Order	45	42							
	CSC Team	The number of children discharged as a result of a Special Guardianship Order	21	30							
		The number of children discharged as a result of a Child Arrangement Order	20	To monitor							
6.2. Ensure children in care with an Adoption Plan do not experience	CiC Team / F&A Service / IRO Service/	The % of adopted children who were placed for adoption within 426 days of entering care (adoption scorecard)	42.2%	75%							
unnecessary delay	CSC Team	The % (who were placed for adoption or adopted in the year) who were placed for adoption within 426 days of entering care	35.4%	75%							
		The % of adopted children who were matched within 121 days of the placement order (adoption scorecard)	15.4%	85%							
		The % of children currently matched, placed for adoption or adopted in the year that were matched within 121 days of the placement order.	9.7%	85%							
								The number of children whose adoption plan has been formally revoked	8	To monitor	
								The average number of days between a Best Interest decision and an Agency Decision Makers approval of a plan	74	To monitor	
			The average number of days between an Agency Decision Makers approval of plan and an approval of a match	365	To monitor						
		The average number of days between an Agency Decision Makers approval of match and a child being placed for adoption	4	To monitor							

not experience	CiC Team / F&A Service / IRO Service /	The % of children in care that have had three or more placements in the previous 12 months	11.1%	12.9%	
placements	Placement Service / CSC Team	The % of children in care who have lived in the same placement for at least 2 years	66%	70%	
are a priority in the event of a placement move, in an attempt to ensure the	CiC Team / CSC Team / Placements	The % of children in care reporting a change of school in the previous 12 months	31%	27%	

# SP7 – To increase use of internal foster and residential placements through the recruitment and retention of foster carers, and to explore if the types and numbers of residential placements can be increased in order to offer more local homes

Action	Responsible Area	Performance Indicators	Baseline (2015/16 End of Year)	Target (2016/17)	Comments
<ul> <li>7.1. Recruit and retain a broad range of foster carers who are able to accommodate older children and those with complex needs</li> <li>7.2. Ensure Nottingham City Council foster carers are used wherever possible</li> </ul>	F&A Service / CiC Team / Placement Service / CSC Team	The % of Independent Fostering Agency (IFA) placements compared to the % of City Fostering placements	59%/41% (IFA/City)	50%/50% (IFA/City)	
7.3. To explore if the number and types of Nottingham City Council residential placements available can be increased	Residential Children's Home	The number of and types of Nottingham City Council residential placements available	Placement Types  • 4 short-term • 9 long-term • 4 complex disability long-term • 11 short breaks • 18 semi- independent	N/A	
7.4. Ensure children in care are placed as close to Nottingham city as possible	F&A Service / CiC Team / Placement Service / Residential Children's Home	The % of placements that are within 20 miles from Nottingham	82.6%	85%	

Responsible Area	Lead Officer		
Child and Adolescent Mental Health	Anna Masding (Aileen		
Service (CAMHS)	Wilson)		
Children in Care Health Team	Kathryn Higgins		
Children in Care (CiC) Team	Sharon Clarke		
Children Sexual Exploitation (CSE)	Racheal Osborne		
Coordinator			
Children's Social Care (CSC) Team	Caroline Riley		
Disabled Children's Team	Marie Halford		
Fostering and Adoption (F&A) Service	Sonia Cain		
Futures	Angela Whitehead		
Independent Reviewing Officer (IRO)	Alison Platkiw		
Service			
Leaving Care Service	Sharon Clarke		
Lifelong Journey	Habib Akhtar		
Missing Team	Racheal Osborne		
National Youth Advocacy Service (NYAS)	Valerie Marshall		
Placements Service	Anne Partington		
Police Service	PC Sam Flint		
Representative and Complaints	Patrick Skeete		
Research, Engagement and Consultation	Jon Rea		
(REC) Team			
Residential Children's Home	Kay Sutt		
Targeted Support Team	Kay Sutt		
Virtual School	Sarah Fielding		
Youth Offending Team (YOT)	Angeline Harrison		

# **Appendices**

Appendix 1 Children in Care and Care Leavers' Charter

# Children in Care & \* Care Leavers' Charter

Nottingham City Council has a responsibility to children and young people in its care and to its care leavers. This responsibility is represented by the term "Corporate Parenting": Nottingham City Council is the "Corporate Parent" for all children and young people in its care and its care leavers. Because of this responsibility, Nottingham City Council makes the commitments below.

We will ensure that all children and young people in and leaving our care have the right home and support to keep them safe and well and to help them grow into happy, healthy, successful and fulfilled young adults who are optimistic about their future.

#### Commitments to children and young people in care and care leavers

- . We will treat all our children and young people with respect and with regard to their age and understanding
- We will give our children and young people enough time and help to understand (and be happy) with their circumstances
- We will make sure they know about the advocacy and complaints services in case they want help to have their views heard or are unhappy with us
- We will listen to our children and young people and involve them in planning for their care
- We will keep our children and young people safe and well by:
- o Seeing that they have the right place to live as quickly as possible
- o Making sure that this home is stable and keeps them safe o Giving them the right support to be
- as healthy as possible
- We will help our children and young people to enjoy themselves

- We will help them to achieve at school and elsewhere to the very best of their
- 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
- We will make sure that a child or young person stays in touch with their birth family and friends as much as possible, considering their safety and wellbeing
- We will help our children and young people to plan for and achieve a successful journey into independent
- We will ensure that all our children and young people – and the adults working for them - know about these promises

#### Commitments concerning children and young people in care and care leavers

- · We will make sure that Nottingham City Council is the best Corporate Parent it can be and achieve improved and sustainable outcomes for children and young people in and leaving our care
- We will ensure that everyone who shares our responsibility to children and young people in care and care leavers helps us to keep these promises
- When there are changes to the law or other things that affect the lives of children and young people in and leaving our care, everyone involved - Nottingham City Council and its partners - will respond together, for the benefit of our children and young
- We will let children, young people and everyone else concerned with these commitments know how well we are keeping them by reporting about them regularly

For more information or to see the Children & Young People's Plan please visit www.nottinghamchildrenspartnership.org.uk

Nottingham City Council, NHS Nottingham City, City of Nottingham Governors' As Probation Service, Job Centre Plus, Nottinghamshire Police Authority, Djanogly City Academy, Nottingham Community and Voluntary Services, Nottingham City Safeguarding Children Board Hadden Park High, Nottingham Nursery and Training Centre, Springfield Primary School

