



**Nottingham City Council**  
**Corporate Parenting Board**

**Date:** Monday, 16 March 2020  
**Time:** 2.30 pm

**Place:** Ground Floor Committee Room, Loxley House, Station Street

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

*g. Bundenell*

**Corporate Director for Strategy and Resources**

**Governance Officer:** Mark Leavesley

**Direct Dial:** 0115 876 4302

- 1 Apologies for Absence**
- 2 Declarations of Interests**
- 3 Minutes** 3 - 20  
Last meeting held on 20 January 2020 (for confirmation)
- 4 Reducing Offending Behaviour** 21 - 24  
Report of Director of Children's Integrated Services
- 5 The Health of Children in Care of the Local Authority 2019/20** 25 - 40  
Report of Nichola Branhall, Nottingham City CCG
- 6 Independent Reviewing Service Annual Report 2018/19** 41 - 56  
Report of Director of Children's Integrated Services
- 7 The Children's Society: Independent Advocacy Annual Report 2020** 57 - 74  
Report of Director of Children's Integrated Services
- 8 Independent Visitor Service – CGL formerly Sova** 75 - 88  
Report of Director of Children's Integrated Services
- 9 Children in Care update**  
Engagement and Participation Lead Officer to report
- 10 Forward Plan 2020/21** 89 - 92  
For discussion
- 11 Date of next meeting**  
To note a provisional date of Monday 01 June 2020 for the first meeting of municipal year 2020/21

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](http://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 Loxley House, Station Street, NG2 3NG, on 20 January 2020 from 2.32 pm - 4.10 pm**

**Membership**

**Present**

Councillor Cheryl Barnard (Chair)  
Councillor Nicola Heaton  
Councillor Maria Joannou  
Councillor Rebecca Langton  
Councillor Maria Watson

**Absent**

Councillor Jay Hayes  
Councillor Phil Jackson  
Councillor Neghat Khan  
Councillor Georgia Power  
Councillor Cate Woodward

**Colleagues, partners and others in attendance:**

|                     |   |   |
|---------------------|---|---|
| Helen Blackman      | - | Director of Children's Integrated Services          |
| Clive Chambers      | - | Head of Safeguarding and Quality Assurance          |
| Jasmine Howell      | - | Service Manager, Virtual School                     |
| Mark Leavesley      | - | Governance Officer, Democratic Services             |
| Nick Lee            | - | Director of Education Services                      |
| Jon Rea             | - | Engagement and Participation Lead                   |
| Sophie Russell      | - | Head of Children's Strategy and Improvement         |
| Patrick Skeete      | - | Representations and Complaints Manager, Social Care |
| Audrey Taylor       | - | Fostering and Adoption Service Manager              |
| Catherine Underwood | - | Corporate Director of People                        |
| Jordan Whatman      | - | Project Officer, Children in Care                   |

**35 Apologies for Absence**

|                     |   |                        |
|---------------------|---|------------------------|
| Councillor Khan     | - | other Council business |
| Councillor Jackson  | ) | unwell                 |
| Councillor Woodward | ) |                        |

**36 Declarations of Interests**

None.

**37 Minutes**

The minutes of the meeting held on 17 December 2019 were agreed as a correct record and the Chair signed them.

**38 Action Plan in response to the Independent Inquiry into Child Sexual Abuse report**

Catherine Underwood, Corporate Director for People presented the report, which detailed recommended actions for Nottingham City Council, and the Council's response, following publication of the 'Independent Inquiry into Child Sexual Abuse (IICSA)' Report.

During discussion, the following action being taken by, or proposed by, NCC was stated:

- recommendation 1 – continued engagement with victim and survivor groups and working with partners, including signposting NHS support available i.e. therapy;
- recommendation 2 – a post has been created in Information Compliance to assist those wishing to access their social care records;
- recommendation 3 – offer to meet with survivors and representatives at higher level and apologise on an individual basis;
- recommendation 4 – working with Police and Crime Commissioner / safeguarding partners to inform future commissioned work on supporting victims;
- recommendation 5 – Survivor Manager post funded to March 2022;
- recommendation 6 – strengthened scrutiny of foster carers, especially if an issue is raised;
- recommendation 7(a-c) –
  - the action plan in response to the independent external evaluation was launched in November 2019 and will be reported to the Safeguarding Partnership in March 2020;
  - IICSA will review in 12 months and may make further recommendations.

In response to a question regarding:

- which organisation funds the therapeutic support for survivors, and whether the hub proposed is already in place, it was confirmed that this support is funded by the CCG and that the hub is a future development, but survivors can access support and the Corporate Director for People would provide contact details to Board members;
- whether the Council had received a response from the national panel regarding our Action Plan and how we will monitor progress and ensure an independent view, it was confirmed that we were not anticipating a response from the national team and, once they have completed their work in other local areas they may make wider recommendations. It was also stated that feedback from survivors and their involvement in the developments in the Action Plan will be the main loop back to consider impact.

The Board also stated that while there was a different culture at the time the abuse took place, NCC needed to ensure the same issues can never arise again.

**Resolved to note the action plan and associated costs, and the implications for the Council, as detailed in the report and appendices.**

### **39 Fostering Panel Chair's Report**

Audrey Taylor, Fostering and Adoption Service Manager, presented the report, detailing the activity of the Fostering Panel, an East Midlands wide scheme which replaced the City's Adoption Panel as of 1 April 2019.

Members asked about the links to the Children in Care (CiC) Council and requested the Fostering and Adoption Service Manager attend CiC Council to share the report and gain their views. Councillors also asked whether members of the Fostering Panel had been sighted on the findings of IICSA, to which it was confirmed that this learning had been shared.

**Resolved to note the report.**

### **40 Adoption and Permanency**

Audrey Taylor, Fostering and Adoption Service Manager, presented the report, detailing the permanency performance of the Council.

During discussion, and in response to a question about the:

- reduction in numbers of children discharged as a result of adoption, the context of moving into the Regional Adoption Agency (RAA) was outlined;
- impact of regionalisation for citizens, it was explained that the development of the RAA had bought four services together, integrating resources and giving families more options locally, although there was national intelligence that adoptions may slow down in Year 1 because it's a complex change. It was also stated that it was important to note that nationally, adoptions had reduced by 7%, and in respect of the pace of the journey, it was confirmed that feedback was positive for adults, once they were in process.

The Fostering and Adoption Service Manager also briefed the Board on adoption disruptions, stating that Nottingham City have low numbers of disruptions, with only two in the last year, and are always mindful to make decisions that take into account the needs/wishes of the child to identify the best permanence option, sometimes long term fostering best meets young people's permanence needs.

**Resolved to note the report.**

### **41 Children in Care Social Care Complaints**

Patrick Skeete, Representation and Complaints Manager, Social Care, presented the report, detailing the Social Care complaints process and highlighting the 12 complaints made April to December 2019 by children in care.

During discussion, the following was stated:

- all complainants have access to advocacy and this is publicised in the information sent to children in care;

- complaints are assessed to ensure there are no 'themes' occurring, if there are, these will be discussed with the appropriate team to find a solution;
- complaints can be made via either paper or electronically to ensure no-one is disadvantaged;
- in respect of the 'no findings' outcome, these were always explained to the complainant and that they could access Stage 2 of the process if they were unhappy;
- as to whether the low number of complaints was as a result of under-reporting, it was confirmed that the Council are proactive in finding resolutions for concerns, prior to the formal complaints process, and these issues are not included in the data provided to the Board.

**Resolved to note the report.**

#### **42 Educational Attainment of Children in Care**

Jasmin Howell, Acting Head of Virtual School, and Nick Lee, Director of Education Services, presented the report, detailing the work of the Virtual School Team and attainment during the 2018-19 academic year (Sept '18 to July '19).

During discussion, the following was stated:

- the City average attendance for non-looked after is 82%, compared to looked after attendance of 93.6%;
- a key concern is around multiple fixed term exclusions, and it was confirmed that where there is no clear reason for exclusion, the Council assists the carer of any excluded child to challenge the exclusion by i.e. attending meetings with them and creating plans.
- the data suggests that there has been a dip in the completion of PEPs and a drill-down into the reasons for this has been requested as there are exemptions that need to be applied manually. This will be ready for February 2020;
- the Virtual School Team are currently consulting on 3 options in regards to Pupil Premium and the preferred way to allocate funding throughout the academic year.

**Resolved to note the report and request that the Head of Children's Strategy and Improvement organise a 'round table' discussion at a future Board meeting, to include the Education Support Officer role, best practise examples and the Pupil Premium funding options.**

#### **43 Children in Care Council**

Jon Rea, Engagement and Participation Lead Officer, updated the Board in regards to the Children in Care Council.

The following was stated:

- a meeting will be held on 27 January 2020, including topics for discussion such as Independent Advocacy and PEPs;
- the Council has 5 new members and is operating at near capacity, however as older members are set to leave the group, interest from other potential new members is welcomed.

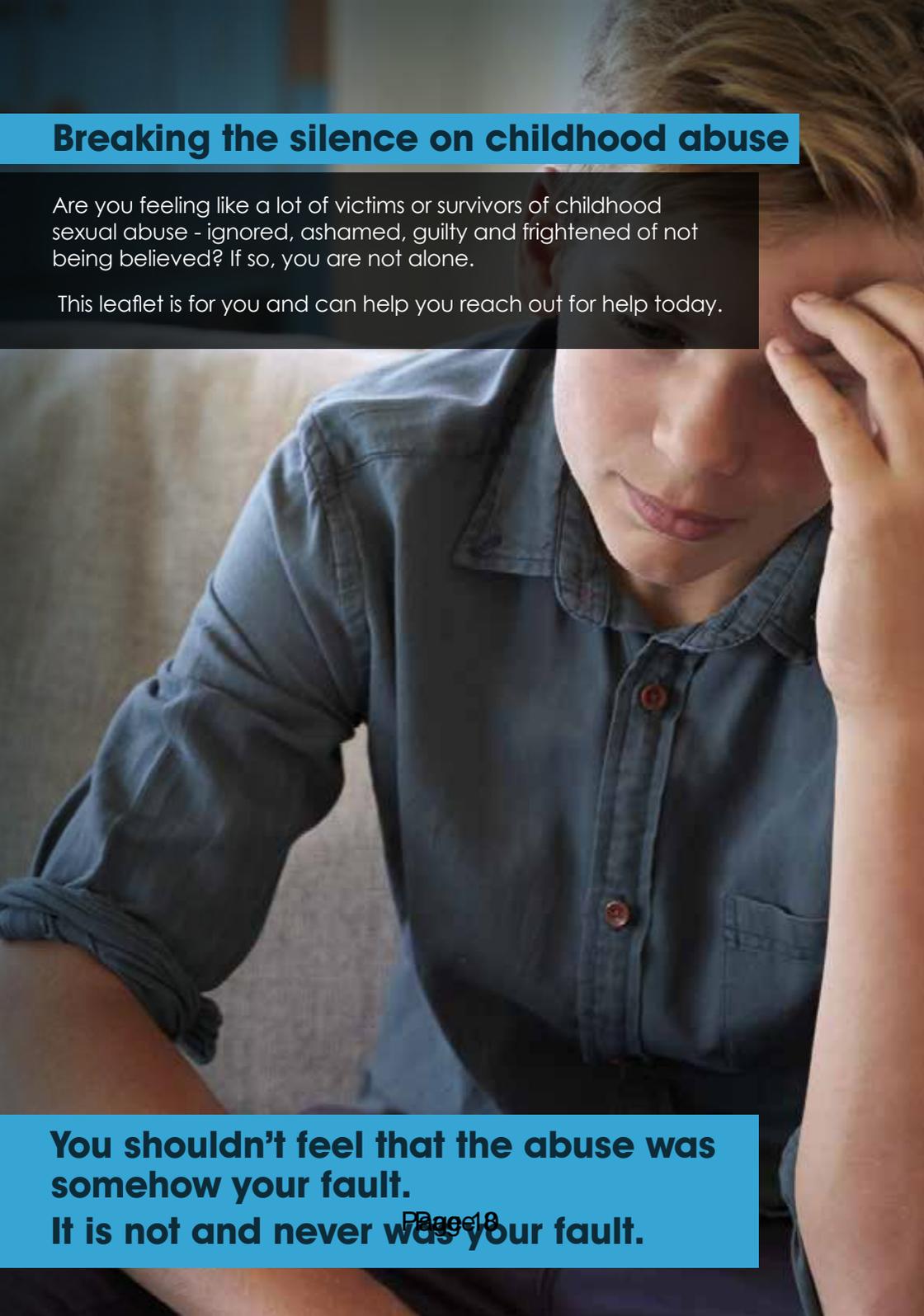
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Have you been impacted  
by sexual abuse in childhood?

**You're not alone.  
Help is  
available.**



**Please read on for support...**



## Breaking the silence on childhood abuse

Are you feeling like a lot of victims or survivors of childhood sexual abuse - ignored, ashamed, guilty and frightened of not being believed? If so, you are not alone.

This leaflet is for you and can help you reach out for help today.

**You shouldn't feel that the abuse was somehow your fault.**

**It is not and never was your fault.**

**Were you sexually abused as a child by someone in the past or do you think a child is being sexually abused now?**

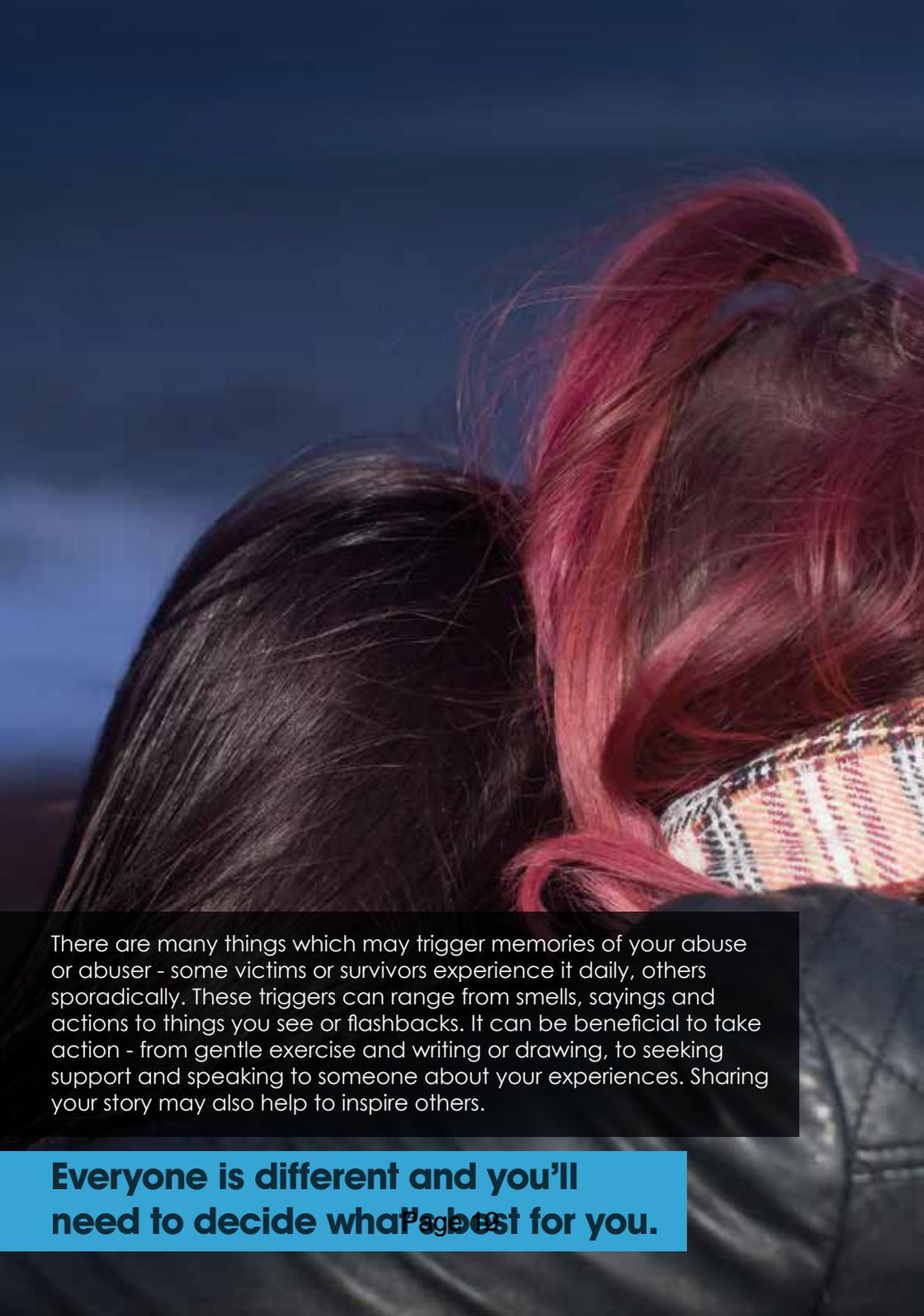
#### Child abuse could include:

- Forcing a child to have any form of sexual contact
- Buying sexual services of a child
- Causing, encouraging or arranging child prostitution or pornography
- Sexual abuse of vulnerable children with a mental disability
- Watching people engaged in a private act without the child's consent for sexual gratification
- Exposure, where a man or woman exposes themselves with intent to cause alarm or distress
- Being drugged to engage in sexual activity.

Children in these situations often feel unable to refuse because of a lack of understanding of what was happening, they were offered money or gifts, threatened or deceived, or there was a breakdown in the relationship between the child and those caring for them.

The abuse may have happened at, or been connected to institutions such as children's homes, places of worship, Brownies/Guides/Cubs/Scouts, sporting groups like football clubs, schools, youth clubs or young offenders' institutions.

**Abuse can happen to anyone.  
Abuse can happen anywhere.**



There are many things which may trigger memories of your abuse or abuser - some victims or survivors experience it daily, others sporadically. These triggers can range from smells, sayings and actions to things you see or flashbacks. It can be beneficial to take action - from gentle exercise and writing or drawing, to seeking support and speaking to someone about your experiences. Sharing your story may also help to inspire others.

**Everyone is different and you'll  
need to decide what's best for you.**

# Where to get help and support

Call Police **101** if you believe you or someone you know was sexually assaulted as a child in the past. If you know a child is subject to immediate and ongoing abuse then call police on the emergency number **999**

## SUPPORT FOR ADULTS

The services below are independent, accredited services commissioned by statutory agencies. They are quality assured and contract managed to ensure delivery of best practice and national standards. Victims and survivors do not need to report the crime to the police to get help.

### Topaz Centre for Nottinghamshire (Nottinghamshire Sexual Abuse Referral Centre)

Crisis support for all female and male victims and survivors of rape and sexual assault. The Topaz Centre supports both females and males who have been raped or sexually assaulted.

The Topaz Centre is a safe supportive environment which offers:

- Crisis support during the initial stages of reporting including the examination
- A supportive environment for a forensic examination and statement taking
- Medical examinations which can take place up to seven days after the attack to gather forensic evidence
- Emergency contraception and/or access to local GUM Clinic for emergency medical care and follow-up
- Access to advice and support and/or referrals to counselling services.

 0800 085 9993 **24 hrs helpline**

 [www.topazcentre.org](http://www.topazcentre.org)

### Independent Sexual Violence Adviser (ISVA) Service

Supports female and male survivors of rape and sexual violence including non-recent child sexual abuse, whether the violence occurred recently or in the past.

ISVAs provide practical and emotional support and advocacy including through the criminal justice service. The ISVA service includes the Survivor Support Service for survivors of non-recent child sexual abuse.

 0115 950 8713

 [referrals@nsvss.cjssm.net](mailto:referrals@nsvss.cjssm.net)  
(from a secure email address only)

 [www.nottssvss.org.uk/contact/](http://www.nottssvss.org.uk/contact/)  
(secure referral route via website)

### Nottinghamshire Sexual Violence Support Service

(Formerly known as Nottinghamshire Rape Crisis Centre)

Provides counselling support for female and male survivors of rape, sexual assault and childhood sexual abuse, whether the abuse occurred recently or in the past. They provide a telephone helpline, face-to-face counselling and group support.

 0115 941 0440

 [support@nottssvss.org.uk](mailto:support@nottssvss.org.uk)

 [www.nottssvss.org.uk/contact/](http://www.nottssvss.org.uk/contact/)



## GPs

Your own doctor is a good place to start.

They will be able to offer confidential advice and have access to specialist local health services such as counselling, drug and alcohol support, help with other addictions or mental health services.

## SUPPORT FOR CHILDREN AND YOUNG PEOPLE

### East Midlands Children and Young People's Sexual Assault Service (EMCYPSAS)

Provides crisis support, forensic examinations, short-term therapy and access to follow-on support including children's ISVA and healthcare.

☎ 0800 183 0023 24 hrs helpline

W [www.emcypsas.co.uk](http://www.emcypsas.co.uk)

## IF YOU NEED HELP WITH DRUGS, ALCOHOL OR OTHER ADDICTIONS

### Nottingham Recovery Network (NRN)

Providing a single point of free support, advice and treatment to people who use alcohol and drugs in a problematic way across Nottingham City (18+).

☎ 0800 066 5362 helpline

✉ Nottingham Wellbeing Hub,  
73 Hounds Gate,  
Nottingham  
NG1 6BB

W [nottinghamrecoverynetwork.com](http://nottinghamrecoverynetwork.com)

### CGL Journey

A commissioned service to work with young people and their families, under the age of 18 in Nottingham City to reduce the impact of substance misuse, support recovery and to challenge inequalities linked to drug and alcohol use.

☎ 0115 948 4314  
(Text) 07873 339 519

✉ [journey@lifeline.org.uk](mailto:journey@lifeline.org.uk)

W [changegrowlive.org/young-people/cgl-journey-nottingham](http://changegrowlive.org/young-people/cgl-journey-nottingham)

### Change, grow, live (CGL) New Directions Nottinghamshire

Providing adult drug and alcohol treatment and recovery support services to individuals in Nottinghamshire (18+).

☎ 0115 896 0798

W [changegrowlive.org.uk](http://changegrowlive.org.uk)

## OTHER SUPPORT SERVICES

You might prefer talking to a local service or support group first. These could be either charities offering counselling or other survivors offering peer support and advice. Many are registered with Self Help, where you can find their details

### Self Help Nottingham/ Self Help UK

Helps create, support and promote self-help groups covering a wide range of issues across the UK.

They will hold information about self help and support groups that have registered with them in your local area.

☎ 0115 911 1662

✉ [admin@selfhelp.org.uk](mailto:admin@selfhelp.org.uk)

🌐 [selfhelp.org.uk](http://selfhelp.org.uk)

### Local IAPT services

People can refer themselves directly to the following Improving Access to Psychological Therapies (IAPT) services and an assessment will be undertaken as to whether this service can meet your needs.

#### Trent PTS

☎ 0115 896 3160

🌐 [trentpts.co.uk/contact/nottingham/](http://trentpts.co.uk/contact/nottingham/)

#### Let's Talk Wellbeing

☎ 0115 956 0888

🌐 [nottinghamshirehealthcare.nhs.uk/nottingham-city-and-county-](http://nottinghamshirehealthcare.nhs.uk/nottingham-city-and-county-)

#### Insight Healthcare

☎ 0300 555 5582

🌐 [insighthealthcare.org/our-services/talking-therapies/find-a-service/nottinghamshire/](http://insighthealthcare.org/our-services/talking-therapies/find-a-service/nottinghamshire/)

#### Turning Point

☎ 0300 555 0456

🌐 [turning-point.co.uk/nottingham-city-talking-therapies.aspx](http://turning-point.co.uk/nottingham-city-talking-therapies.aspx)



## HELPLINES AND NATIONAL ORGANISATIONS

### The National Rape Crisis helpline

Can be contacted between 12 noon – 2.30pm and 7 – 9.30pm any day of the year and also between 3 - 5.30pm on weekdays.

☎ 0808 802 9999

### NAPAC

National advice line for the National Association for People Abused in Childhood.

☎ 0808 801 0331

✉ support@napac.org.uk

W napac.org.uk

### NSPCC Helpline

Providing adult drug and alcohol treatment and recovery support services to individuals in Nottinghamshire (18+).

☎ 0808 800 5000

✉ help@nspcc.org.uk

W nspcc.org.uk

### Childline

☎ 0800 11 11

W childline.org.uk

### Samaritans

☎ 116123

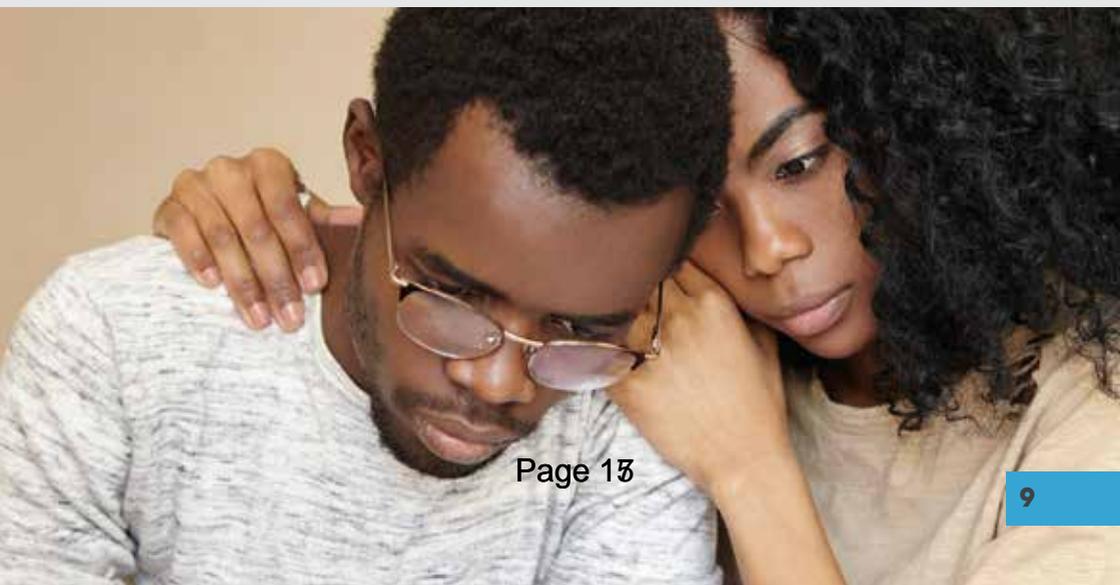
✉ jo@samaritans.org

W samaritans.org

### Survivors UK

Survivors UK helps men who have been sexually abused (both childhood sexual abuse and adult sexual assault/rape) through web chat and text chat. See website for details of what services they offer nationally.

W www.survivorsuk.org



## STATUTORY AGENCIES THAT YOU MAY WANT TO CONTACT

Nottingham City Children's  
Social Care  
(City residents only)

☎ 0115 915 0800

✉ [childrens.services@nottinghamcity.gov.uk](mailto:childrens.services@nottinghamcity.gov.uk)

Nottinghamshire Multi Agency  
Safeguarding Hub (MASH)  
(County residents only)

☎ 0300 500 80 90

✉ [mash.safeguarding@nottscgcsx.gov.uk](mailto:mash.safeguarding@nottscgcsx.gov.uk)

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If you contact adult social care services the following will be considered:

- Any immediate risk to the citizen or from the alleged perpetrator and whether immediate intervention is needed from the Police, Health and / or Social Care
- Whether the victim/survivor needs an Adult Social Care Assessment
- The need to provide advice and guidance in relation to support services through consulting the Self Help UK database and advising of services
- Sharing of information with General Practitioners with consideration to Consent and Data Protection
- Referral to Nottingham City Council Children and Families Duty Point or Nottinghamshire County Council's MASH.

### City Enquiries

☎ 0300 131 0300

A secure online referral can be made via:

✉ [adult.contactteam@nottinghamcity.gcsx.gov.uk](mailto:adult.contactteam@nottinghamcity.gcsx.gov.uk)

### County Enquiries

☎ 0300 500 8080

## THE TRUTH PROJECT

The Truth Project was set up for victims and survivors of child sexual abuse to share their experiences in a supportive and confidential setting.

It's part of the [Independent Inquiry into Child Sexual Abuse \(IICSA\)](#) which was set up in 2015 to investigate organisations and institutions that have failed to protect children from sexual abuse. We need to understand the past to help protect children now and in the future.

By sharing their experiences, victims and survivors make an important contribution to the work of the Inquiry and their experiences will feed into and influence our findings and recommendations.

For more information about sharing your experience:

 0800 917 1000

 [truthproject.org.uk/i-will-be-heard](http://truthproject.org.uk/i-will-be-heard)



## LOCAL INVESTIGATION

If you want to report to the police you can contact Nottinghamshire Police's Operation Equinox team which is investigating allegations of historical child abuse at a number of different former care facilities in Nottinghamshire.

If you believe you have any information which is relevant to this operation or you are the survivor of child sexual abuse and have not yet spoken to the police, please call on 101.

*Information correct at time of publication (November 2018).*

**This leaflet has been produced in cooperation with a number of survivors of childhood sexual abuse and a number of different groups across the City and County.**



**Corporate Parenting Board – 16 March 2020**

|   |  |                            |
|---|--|----------------------------|
| <b>Title of paper:</b>  | Reducing Offending Behaviour (Children in Care)  |                            |
| <b>Director:</b>  | Helen Blackman<br>Director, Children’s Integrated Services   | <b>Wards affected:</b> All |
| <b>Report authors and contact details:</b>  | Natalie Pink – Leaving Care Service, 0115 8761206<br>PC Sam Flint - Children in Care Police Officer, Nottinghamshire Police<br>0115 8763735  |                            |
| <b>Other colleagues who have provided input:</b>  | PC Rebecca Dalby – Children in Care Police Officer<br>Boyd Livingstone-Navin – Youth Justice Service Principal Analyst<br>Thomas Cullen – Operational Manager, Nottingham City Youth Justice Service   |                            |
| <b>Relevant Council Plan Key Theme:</b>   |  |                            |
| Nottingham People   |  | X                          |
| Living in Nottingham  |  |                            |
| Growing Nottingham  |  |                            |
| Respect for Nottingham  |  |                            |
| Serving Nottingham Better   |  |                            |
| <b>Summary of issues (including benefits to citizens/service users):</b>  |  |                            |
| <ul style="list-style-type: none"> <li>To update the Board of the published data for 2018/19 regarding reducing offending behaviour within the Children in Care population.</li> <li>To update the Board about the activity of the Children in Care Police Officers and Leaving Care Service Case Manager 2018/19 in working together to reduce offending, safeguard Children in Care, and meet the needs of the Directorate.</li> <li>To highlight the review of the Multi-agency Protocol for Nottingham City and Nottinghamshire, to reduce the criminalisation of Children in Care, further to the publication of the National Protocol for reducing the criminalisation of Children in Care and Care Leavers, 2018.</li> </ul> |  |                            |
| <b>Recommendation:</b>  |  |                            |
| <b>1</b>  | That the Board notes the 2018/19 data regarding reducing offending behaviour within the Children in Care population, and recognises the importance of sustaining the work of the Children in Care Police Officers, supported by the Leaving Care Service Case Manager, to continue to improve outcomes for Children in Care. |                            |

**1 Reasons for recommendations**

1.1 The role of Children in Care Police Officers and Leaving Care Service Case Manager (previously known as Youth Justice Service Lead for CiC), working in partnership, has

previously been suggested as a model of best practice. This has been recognised in repeat Ofsted inspections: “The dedicated children in care police officer successfully supports restorative justice interventions, and there have been impressive reductions in offending rates.” “Joint work with the police, youth justice service and community-based services results in shared strategic approaches to providing swift and flexibly deployed resources, reducing the risk of young people re-offending.” (Ofsted 2018).

- 1.2 Nottingham City is the only known authority where Children in Care Police Officers and Leaving Care Service Case Manager work in collaboration and to this model. We believe that this has contributed to the marked reduction in offending within the children in care population over time.

## 2 Background (including outcomes of consultation)

- 2.1 National reporting data is submitted annually, based on the Children in Care population whose home Authority is Nottingham City, who have been in care for a year or more, are aged 10-17, and have received a Youth Caution, Youth Conditional Caution or conviction within the year.
- 2.2 Up until (and including) the year 2016/17 we were able to report a 5 year trend in reducing offending behaviour within the Children in Care population. In 2017/18 we maintained our performance in terms of the numbers of children in care who offended.
- 2.3 We are pleased to report that the figure for 2018/19 has reduced to 3%, which sees us returning to the best performing quartile, ranking 21 out of approximately 155 Authorities (table 1).

### 2.4 Table 1

| 2009  | 2010 | 2011  | 2012  | 2013  | 2014 | 2015 | 2016 | 2017 | 2018 |
|-------|------|-------|-------|-------|------|------|------|------|------|
| 9.80% | 9%   | 9.80% | 8.70% | 8.20% | 6%   | 6%   | 5%   | 6%   | 3%   |

(Source <https://www.gov.uk/government/publications/local-authority-interactive-tool-lait>)

- 2.5 We are encouraged that other Authorities continue to seek out advice and guidance around reducing criminalisation from Nottingham City, with a view to improving outcomes for Children in Care.
- 2.6 **Specialist roles:** Both Children in Care Police Officer posts continue to be jointly funded by Nottinghamshire Police and Nottingham City Council. PC Rebecca Dalby joined PC Sam Flint in the role of Children in Care Police Officer in January 2018. The Leaving Care Service Case Manager holds a caseload of young adults, supports management and performance. Elements of the previous Youth Justice Service Lead role are now embedded within the Youth Justice Service.
- 2.7 **Multi Agency Protocol:** The Leaving Care Service Case Manager, Children in Care Police Officers and Nottinghamshire Police worked alongside the Crown Prosecution Service, Service Managers for Children in Care and Placements to develop and implement a protocol for Nottingham and Nottinghamshire, with a view to further reducing the criminalisation of Children in Care. This Protocol embedded restorative justice and early intervention, including tools for carers. A renewed focus was placed upon the completion of a Crown Prosecution 10-point checklist, to provide information to the Prosecutor/Out of Court Disposal Panel, to ensure the most appropriate action is taken (if

any), following offending behaviour by a Child in Care. The then Youth Offending Team Board ratified this document in 2017.

- 2.8 This existing Protocol was agreed prior to the publication of the National Protocol on Reducing Unnecessary Criminalisation of Looked-After Children and Care Leavers, November 2018. Though this protocol is already reflective of the spirit and many of the practices put forward in this national document, it was felt its publication should prompt a multi-agency review. The national protocol asks “would this [response] be good enough for my child?” and extends a consideration beyond children and young people to care leavers. This review was initiated by the Children in Care Police Officer and Leaving Care Service Case Manager in 2019. Stakeholders have been consulted and a draft revised document prepared for view by signatories.
- 2.9 **Children in Care Arrest Screening:** The difficulty of early and effective identification of Children in Care on arrest was identified as a concern in 2015, and an Arrest Screening Programme devised to pro-actively divert Children in Care from prosecution where appropriate. The Arrest Screening Programme is now embedded within the Youth Justice Service, with the Leaving Care Service Case Manager providing consultation only.
- 2.10 **Practitioner Forums:** These Fora are chaired by the Children in Care Police Officer’s and Youth Justice Service Lead, for the benefit of Local Authority, Private providers, foster carers and invited representatives of Childrens Services and the voluntary sector. Resources are promoted, guest speakers present and best practice is shared. We aim to offer participants 2 Fora per year. Though we remain committed to this offer and see its benefit, the limited availability of large meeting rooms available at no cost to the Authority continues to present a challenge.
- 2.11 Evaluation has been wholly positive, with key themes being the opportunity to network and share learning from each other and guest speakers. The most recent meeting 28.02.2020 focussed on Child Criminal Exploitation, Leaving Care Service and the review of our Protocol.
- “County lines is an area I have worried about and I feel I understand more. Informative as always. Thank you” (Residential)
- “A lot of information was put across very well in a short space of time – very useful” (Foster carer)
- “The team provides me with up to date information to work on my practice – highlights concerns we are currently aware of and enables me to be signposted to the correct person/team” (Private Residential)
- 2.12 **Child Sexual Exploitation and Child Criminal Exploitation:** The Children in Care Police Officers continue to liaise daily with children’s homes, supporting workers to implement our protocol, identify indicators and promote the use of tools to safeguard young people. Children in Care Police Officers continue to chair the Concerns Network Meeting, where over 20 agencies meet to discuss and share intelligence, and implement disruption tactics. Children in Care Police Officers continue to work alongside with hotels, nightclubs and venues in order to protect our young people and raise awareness.
- 2.13 **Diversions work with young women:** The Children in Care Police Officers lead a girls-only boxing provision in collaboration with Jawaid Khaliq, World Champion boxer, to empower young women. Nottinghamshire Police have now funded this project for 12 months.

- 2.14 “Coming to the boxing club has stopped me from assaulting other young people in my home. It has taught me how to control my anger.” (Young person, 2018)
- 2.15 We are delighted to report that this class has resulted in 3 young women becoming police cadets and one completing work experience with the Crown Prosecution Service in 2019.
- 2.16 **Restorative Approaches:** The Restorative Service Quality Mark was renewed for Nottingham Youth Justice Service in Spring 2019. The Youth Justice Service has established an Out Of Court Disposal Triage system and this Panel meet every week in an effort to reduce the numbers of young people entering the Youth Justice System. There are established protocols and working practice guidelines with Victim Care to ensure all ‘person’s harmed’ have a voice.

### **3 Other options considered in making recommendations**

- 3.1 None.

### **4 Finance colleague comments**

- 4.1 The post of CiC Police Officer is jointly funded by Nottinghamshire Police and Nottingham City Council. Reduction of offending and missing reports have both a short and long term financial benefit across the authority and partners, as well as safeguarding Children in Care and improving outcomes.
- 4.2 “The rate at which a minority of children move from care into the criminal justice system is not inevitable.....“Good practice can dramatically reduce the long term costs that arise when young people get sucked into the criminal justice system unnecessarily – one study calculated a return of £3.41 for every £1 invested.” (In Care, Out of Trouble 2016)

### **5 Legal, Strategic Assets & Property and Procurement colleague comments**

- 5.1 None.

### **6 Equality Impact Assessment (EIA)**

- 6.1 Not required because the report does not contain proposals or financial decisions.

### **7 List of background papers other than published works or those disclosing confidential or exempt information**

- 7.1 Joint Protocol Nottingham City and Nottinghamshire (Revised Draft)

### **8 Published documents referred to in compiling this report**

- 8.1 <https://www.gov.uk/government/publications/national-protocol-on-reducing-criminalisation-of-looked-after-children>

## Corporate Parenting Board – 16 March 2020

|  |   |                                     |
|--|---|-------------------------------------|
| <b>Title of paper:</b>   | The Health of Children in Care of the Local Authority 2019/20 – Nottingham City   |                                     |
| <b>Directors:</b>  | Nichola Bramhall - NHS Nottingham City CCG (Greater Notts Partnership)<br><br>Helen Blackman – Director, Children’s Integrated Services   | <b>Wards affected:</b> All          |
| <b>Report authors and contact details:</b>   | Kathryn Higgins - Designated Nurse for Children in Care<br><a href="mailto:Kathryn.higgins2@nhs.net">Kathryn.higgins2@nhs.net</a><br><br>Melanie Bracewell - Designated Doctor for Children in Care/Medical Advisor for Adoption / Consultant Community Paediatrician<br><a href="mailto:melanie.bracewell@nuh.nhs.uk">melanie.bracewell@nuh.nhs.uk</a> |                                     |
| <b>Relevant Council Plan Key Theme:</b>  |   |                                     |
| Nottingham People  |   | <input checked="" type="checkbox"/> |
| Living in Nottingham   |   | <input type="checkbox"/>            |
| Growing Nottingham   |   | <input type="checkbox"/>            |
| Respect for Nottingham   |   | <input type="checkbox"/>            |
| Serving Nottingham Better  |   | <input type="checkbox"/>            |
| <b>Summary of issues (including benefits to citizens/service users):</b>   |   |                                     |
| <p>Most children become looked after as a result of abuse and neglect. Although they have many of the same health issues as their peers, the extent of these is often greater because of their past experiences.</p> <p>The NHS has a major role in ensuring the timely and effective delivery of health services to looked after children (and, by extension, to care leavers) by commissioning effective services, delivering through provider organisations, and through individual practitioners providing coordinated care for each child.</p> <p>The attached document is the third CCG looked after children annual report and provides assurances that Nottingham City CCG is fulfilling its statutory responsibilities to children as outlined in the Children Act 1989 and Promoting the health and well-being of looked after children (2015).</p> <p>The additional document outlines some of the health data collected and issues relating to it.</p> |   |                                     |
| <b>Recommendation(s):</b>  |   |                                     |
| <b>1</b>   | 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.   |                                     |
| <b>2</b>   | To note – Revised CCG pathways for out of area placements and other local authority placements in the City to be implemented in 2019.   |                                     |

- |          |  |
|----------|--|
| <b>3</b> | To note – health providers supported by the Designated Professionals will continue to work with the Local Authority, other partner agencies and Commissioners in planning for and ensuring adequate health provision for Care Leavers. |
|----------|--|

## **1 Reasons for recommendations**

- 1.1 The Nottinghamshire Children in Care Service Improvement Forum is now an established group which includes representation from CCGs, health providers and the Local Authority with the aim to improve all health outcomes for children and young people in care across Nottingham City and Nottinghamshire.
- 1.2 NHS Nottingham City CCG is responsible for all Looked after children originating Nottingham City placed out of area and for ensuring the health provision is in place for those placements by other local authorities in the city.
- 1.3 Nottingham City CCG is supporting the Local Authority with the “Care Leaver Offer”.

## **2 Background (including outcomes of consultation)**

- 2.1 See attached Looked After Children/Children in Care Annual Report.
- 2.2 See attached additional data to support the Annual Report.

## **3 Other options considered in making recommendations**

- 3.1 None.

## **4 Finance colleague comments (including implications and value for money/VAT)**

- 4.1 None.

## **5 Legal and Procurement colleague comments (including risk management issues, and legal, Crime and Disorder Act and procurement implications)**

- 5.1 None.

## **6 Strategic Assets & Property colleague comments (for decision relating to all property assets and associated infrastructure) (Area Committee reports only)**

- 6.1 None.

## **7 Equality Impact Assessment (EIA)**

- 7.1 Not required as the report does not contain financial proposals or decisions.

## **8 List of background papers other than published works or those disclosing confidential or exempt information**

- 8.1 Appendix 1: Looked after children (LAC) in Nottingham City – Corporate Parenting Board health update – 16 March 2020.

## **9 Published documents referred to in compiling this report**

9.1 Children Act 1989 HMSO.

9.2 Looked after Children: Knowledge, skills and competencies of healthcare staff. Intercollegiate Role Framework (RCGP, RCN & RCPCH) March 2015.

9.3 The Statutory Guidance on “Promoting the Health and Wellbeing of Looked After Children “(2015) DH/DCSF.

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## Looked after children (LAC) in Nottingham City – Corporate Parenting Board health update – 16 March 2020

### Purpose of the Report

To update the City Corporate Parenting Board on efforts to promote and improve the health and wellbeing of Looked after Children, summarising key achievements and highlighting priorities for the year ahead. To note that this report doesn't reflect fully the commissioning arrangements around meeting the emotional health and well-being of looked after children including the LAC CAMHS service who report to the Board separately.

This report will summarise achievements and activity undertaken in 2018 - 19 and highlights recommendations for 2019 - 20.

### Background

Most children become looked after as a result of abuse and neglect. Although they have many of the same health issues as their peers, the extent of these is often greater because of their past experiences.

The number of CIC has continued to rise and as of 31 March 2018 there were 75420 nationally a 3% increase since 2018 (previous 3% increase in 2017). In Nottingham City this number was 618 remaining stable as 615 in 2017 (Local authority interactive tool).

The NHS has a major role in ensuring the timely and effective delivery of health services to looked after children (and, by extension, to care leavers) by commissioning effective services, delivering through provider organisations, and through individual practitioners providing coordinated care for each child (Promoting the health and well-being of looked after children 2015).

(Although the terms are interchangeable throughout this report Looked after Children [LAC] will be referred to as children in care - CIC).

### Commissioning

The 6 Clinical Commissioning Groups (CCGs) within Nottinghamshire (excluding Bassetlaw) and Nottingham City commission health services for the population of Nottinghamshire. The purpose of this report is to provide assurance that the CCGs are fulfilling their responsibilities as commissioners to work in partnership with the Local Authority and other agencies to promote the safety and welfare of children and adults in need of care and protection living in Nottingham City.

The NHS plays a key role in ensuring effective delivery of health services to CIC. Nottinghamshire CCGs commission services for CIC from the following NHS provider organisations:

- Nottingham University Hospital NHS Trust (NUHT) provides a CIC medical service, completing a comprehensive initial health assessment to identify health

needs and make referrals to specialist services, as well as a Medical Advisor to Adoption role.

- Nottinghamshire Healthcare NHS Foundation Trust (NHFT) provides a CIC and adoption nursing service, co-ordinating the pathway once a child or young person enters care and completing the majority of review health assessments following on from the initial health assessment; a Child and Adolescent Mental Health Service for Looked After Children (CAMHS LAC); and the Healthy Family Teams who deliver public health nursing in line with the Healthy Child Programme.

CIC also access the full range of NHS and public health commissioned services, which include primary healthcare services (GP's), secondary care, specialist and acute health services, emotional health and wellbeing services, and services to support weight management, smoking cessation, substance use, amongst others.

A Designated Nurse for CIC is situated in the CCGs on behalf of both Mid, South Nottinghamshire and Nottingham City CCG. A Designated Doctor for CIC is also based in NUH.

A multi-agency whole system review of pathways and service provision for CIC statutory health services was completed in 2016-17, and a multi-agency Service Improvement Forum for the health of CIC in Nottinghamshire and Nottingham drives implementation of these recommendations, working in close partnership to promote and improve the health and wellbeing of CIC.

## Health Assessments - Frequency

Statutory guidance (Promoting the Health and Well-being of Looked After Children, 2015) sets out timescales for the completion of health assessment, with accompanying health report and recommendations as follows: initial health assessment: 20 working days from when the child started to be looked after, and review health assessment: every 6 months before the child's fifth birthday and every 12 months after the child's fifth birthday.

## Data Collection

As part of funding received from NHS England in 2016 a working group has been in place and a revised data set has been agreed for our two health providers. This data set includes statutory key performance indicators and additional data that will hopefully lead to improved health outcomes for our looked after population.

This data will include not only data around health assessments but also information about the numbers of unaccompanied asylum seeking children, care leavers, those looked after because of the number of days accessing short breaks and those in secure units.

The collection of this data commenced this year and the process of analysis and reporting is under discussion. Therefore we will not see the full benefits of this data until later in 2020. This report contains data from previous KPIs (data sets) collected.

To note: the paper is not reflective of data and performance by the LAC CAMHS service. Work is underway as part of the Nottinghamshire CIC Service Improvement Forum to align the oversight of both the physical and emotional/mental health needs of LAC.

Provider services are subject to regular service contract meetings where performance data is reviewed and mitigating factors recognised. In addition, areas requiring improvement are discussed and plans put in place and good areas of practice of celebrated. We recognise that these are challenging times for our provider services and that every effort is made by all to work collaboratively on areas that require improvement.

## Initial Health Assessments

It has to be acknowledged that locally we currently report on the Initial Health Assessments (IHA) being completed within 20 working days from correct consent (rather than from entering care, as per statutory guidance). This was a commissioner led decision as the health providers have no control over the time to receive a referral after entering care.

It has to be acknowledged that the statutory timescales may not be achievable as an internal audit completed suggests that there is an average of 55 working days from a child entering care to the health provider receiving correct consent to instigate an IHA. This also impacts on the timeliness of the report being shared. We continue to work with the local authority to review the factors contributing to this delay.

The data below demonstrates once the correct consent is received the number of IHAs completed within 20 working days continues to be excellent.

**Table 1: Total and % CYP who receive an Initial Health Assessment within 20 working days of correct consent from Nottingham City Local Authority (living in area)**

| Total number and % of IHAs for CYP placed in area with appointment within 20 days of receiving correct consent in 2018/19 |       |      |
|---|-------|------|
| Q1 <sup>a</sup>   | 33/34 | 97%  |
| Q2 <sup>b</sup>   | 40/41 | 98%  |
| Q3 <sup>c1+2</sup>  | 39/42 | 93%  |
| Q4  | 50/50 | 100% |

Source: Nottingham University Hospitals CIC and Adoption team

- a 1 child was seen after the 20 days was because it was an appointment that had been booked prior to entering care with their paediatrician (for another health reason – not the CIC team).
- b The single breach was for a child with complex needs, well known to a local paediatrician who moved out of area and then back into area delaying her health review.
- c1 1 child was not taken to appointment that had been booked prior to entering care with their paediatrician (for another health reason – not the CIC team). This was a breach by 5 days. The social worker was aware in advance of the importance of attending and that it would be used for the IHA. The child then had to be booked with the CIC team.
- c2 2 children had appointments that had been booked prior to entering care with their paediatrician (for another health reason – not the CIC team). 1 was 23 days after consent (only 3 days over) and the other was 21 days after consent (only 1 day over).

**Table 2: Total and % CYP who receive an Initial Health Assessment within 20 working days of correct consent from Nottingham City Local Authority (living out of area)**

| Total number and % of IHAs for CYP placed out of area* with appointment within 20 days of receiving correct consent in 2018/19 |     |      |
|--|-----|------|
| Q1 <sup>a</sup>  | 0/3 | 0%   |
| Q2   | 3/3 | 100% |
| Q3 <sup>b</sup>  | 1/5 | 20%  |
| Q4 <sup>c</sup>  | 1/2 | 50%  |

Source: Nottingham University Hospitals CIC and Adoption team

\* It has to be acknowledged that our health provider has limited control over the performance of an external organisation who can be requested to undertake this IHA on our behalf

- a 3 breaches – Placements in Leicester / Burnley / Birmingham – no reasons given for late assessment
- b 4 IHA breaches – Placements in Coventry / Bedford / 2 Birmingham – no reasons given for late assessment
- c 1 IHA (not counted in this table) – young person 17 ½ years old – Kirklees refused so brought back and seen in Nottingham by CIC paediatrician at NUH within timescales
- c 1 IHA (not counted in this table) - offered in timescales by York - moved back to Nottingham before IHA date and seen / reported by NUH
- c 1 IHA breach – Placement in Rotherham – no reasons given for late assessment
- c 1 IHA offered in timescales – Placement in York – young person refused on the day

### Exceptions – IHAs

There are a number of reasons why an initial health assessment may not be completed within statutory timescales, including but not limited to:

- challenges in seeking parental consent
- a CIC being placed out of area, requiring assessment by a health provider local to that placement
- Non-attendance, cancellations, young people declining to be seen, or carers declining first available appointments.

The reason for non-compliance with the 20 day standard within statutory guidance, are numerous, and often not within the control of the provider. Not receiving the correct paperwork/consent from the local authority within timescales, placement changes occurring, discharges from care, carers or local authority cancelling appointments, lack of interpreters and young people refusing appointments are all reasons for non-compliance. In addition, IHAs are not the only clinical work undertaken for the local authority and urgency / demands for other work can affect capacity for IHAs. It should also be noted that the service provides an equivalent service for Nottinghamshire local authority for CYP originating from south Nottinghamshire CCGs. This data is not reported here but numbers have increased. Where health assessments fall outside of this timeframe, every effort is made to complete the assessment as quickly as possible.

A child or young person has a network of support around them including their carer, their social worker and universal health services, who work together to meet any health needs that may arise before a health assessment is completed. A social worker usually attends the health assessment, and can respond swiftly to any recommendations that may emerge.

Where a child is placed out of the Nottinghamshire area, the health provider local to that placement will usually carry out the health assessment. A local pathway has been drafted to strengthen and formalise these arrangements, aiming to better and more consistently support the health needs of children placed out of area. This includes processes to track completion of health assessments, assure the quality of these assessments, and establish clear payment mechanisms, as well as escalation processes and is being agreed and implemented by Nottinghamshire health providers, CCGs, Nottinghamshire County Council and Nottingham City Council across 2018-19.

## **Review Health Assessments (RHA)**

The aim of the review health assessment is to provide a holistic review of health development, gather information about emotional and physical health, engage the child or young person in their own healthcare, and provide information and advice to the child, their social worker and carers regarding their specific health needs. This is provided via a written report including health recommendations and an action plan, which is then discussed at each child's statutory, looked after review.

The data collected below is not entirely reflective of the overall specialist CIC service due to the following mitigating factors:

- Unlike for initial health assessments the current data still does not separate the timescales for children and young people placed OOA which are often out of timescales due to the reliance on other areas to complete the assessments. This will be separated out within the revised data.
- For children with an adoption plan RHAs will be seen as a priority in time or early to accommodate the local authority/court deadlines. These children tend to be under 5 years of age
- Not receiving the correct paperwork/consent from the local authority within timescales
- Placement changes occurring
- Discharges from care
- Carers or local authority cancelling appointments
- Young people refusing appointments

**Table 3: Review Health Assessments completed on time or up to a month early (under 5 years old)**

| <b>2018/19</b> |       |     |
|----------------|-------|-----|
| Q1             | 22/35 | 63% |
| Q2             | 24/34 | 71% |
| Q3             | 22/26 | 82% |
| Q4             | 31/32 | 97% |

| <b>2019/20</b> |       |     |
|----------------|-------|-----|
| Q1             | 16/23 | 70% |
| Q2             | -     | -   |
| Q3             | -     | -   |
| Q4             | -     | -   |

Source: Nottinghamshire Healthcare Foundation Trust CIC Nursing and Adoption team

**Exceptions – RHAs for < 5 years (Q1 2019 / 2020)**

All the exceptions recorded are for children who are placed out of area as 100% of those who originate from the city and placed in area were seen on time.

- 2 children were not seen on time due to the paperwork being received late
- 2 children were seen 5 days late due to the adoption process
- 2 children's appointments were organised by the Other Local Authority
- 1 child's carer cancelled the first appointment

**Table 4: Review Health Assessments completed on time or up to a month early (over 5 years old)**

| <b>2018/19</b> |        |       |
|----------------|--------|-------|
| Q1             | 35/103 | 44%   |
| Q2             | 46/95  | 48%   |
| Q3             | 52/84  | 62%   |
| Q4             | 54/63  | 85.7% |

| <b>2019/20</b> |       |     |
|----------------|-------|-----|
| Q1             | 60/94 | 64% |
| Q2             | -     | -   |
| Q3             | -     | -   |
| Q4             | -     | -   |

Source: Nottinghamshire Healthcare Foundation Trust CIC Nursing and Adoption team

## Exceptions - RHAs for > 5 years (Q1 2019 / 2020)

- 1 child was not brought due to change of foster placement
- 5 change of addresses resulted in the timescales not being met
- 5 children were not seen on time due to the paperwork being received late
- 5 no access visits were recorded for the 1<sup>st</sup> appointment, with one no access visit also recorded for the second visit
- 1 child was seen late in order to align the RHA with their siblings and 1 was seen late to align with other services
- 10 children were not seen within the timescales as the first appointment was cancelled by the carer or the young person themselves
- 1 young person declined the RHA
- 3 children were seen late by the other local authority
- 1 child was on holiday
- 1 child was seen late due to the first appointment being re-arranged by the nursing team

The data for 2018 2019 shows a positive improvement over the past year on performance that can be attributed to recruitment to vacancies within the CIC nursing team and extremely hard work including the elimination of a back log of overdue health assessments.

We encountered a drop in statutory compliance for Q1 2019/20 due to the CIC nursing team receiving a number of late referrals from the local authority. In addition to the 60 RHAs carried out within timescales, 19 additional ones were completed out of time frame. Likewise we anticipate a reduction in the number of RHAs completed in Q2 2019/20 due to the volume of annual assessments required during October and November following the elimination of the back log at the same time last year – all of the additional RHAs undertaken then, are now due for an annual review.

The designated professionals for looked after children, working on behalf of the city CCG, have an on-going active role in assuring the CCGs around performance and quality. Any risks are acknowledged and escalated appropriately to ensure the service is safe.

## Other Local Authority Children

It is important to recognise that Nottinghamshire CCGs and health providers, when requested by the placing authority, are also responsible for meeting the health needs of other local authority children placed in the Nottinghamshire area, all of whom receive the same standard of care. The number of children from other local authorities requiring both Initial and Review health assessments in Nottingham City is increasing significantly.

**Table 5: Requests from other local authorities to undertake health assessments**

|     | 2017/18 | 2018/19 |
|-----|---------|---------|
| IHA | 12*     | 16*     |
| RHA | 19      | 44      |

\* Please note that this data only includes those seen. It does not include the large number of requests that do not lead to an IHA or those where a piece of work is undertaken by the clinician to prepare for a booked IHA but then the CYP does not attend for multiple reasons

Source: Nottingham University Hospitals CIC and Adoption team/Nottinghamshire Healthcare Foundation Trust CIC Nursing and Adoption team

### Health Assessments: Quality

A quality assurance framework has been developed for Mid Nottinghamshire and Greater Nottingham CCGs by the Designated Professionals for CIC, including a quality assurance tool (in line with guidance from NHS England) to assess the quality of healthcare delivered to CIC. This includes data collection, audit and dip-testing. The framework covers the quality of the health assessment, ensures the voice of the child or young person is always central, and includes information given on leaving care.

### Strengths and Difficulties Questionnaires

Strengths and Difficulties Questionnaires (SDQs) are one way of assessing the emotional wellbeing of individual looked after children. The SDQ is a clinically validated brief behavioural screening questionnaire for use with 4-16 year olds, and supports social workers and health providers to form a view about the emotional wellbeing of individual CIC.

There remain challenges in SDQs being available to inform the annual review health assessment, which has been identified as a priority for improvement across partners and a working group has been established to improve this.

### Decliner Pathway

A pathway has been written and agreed by both the local authorities and health providers. This pathway will support around how best to meet the health needs of CIC when they refuse their statutory health assessment. The pathway will include liaison with other health professionals and ensuring adequate discussion is had around health within the looked after review process.

### Service Improvement 2-stage Audit

The Nottinghamshire CIC Service Improvement forum has acknowledged that to give assurance that the health needs of CIC are being met we must ensure that the statutory health assessments and recommendations made within these are reviewed and outstanding health needs actioned as part of the local authority Looked After Review process.

A 2-stage audit is being undertaken. The audit will review whether CIC health needs are discussed at looked after reviews, including recent statutory health assessments and recommendations.

This is ensuring that the statutory health assessments completed do not sit in isolation from the wider care pathway and support the children and young people receive.

## **Immunisations**

Immunisation status is reviewed at each statutory health assessment and recommendations made to the social worker to ensure these are actioned by the carers. For children under 5 years old the IHA or RHA will recommend booking with the GP. To support with older children we have a School age immunisation service that will be referred into.

There is a statutory return which requires the local authority to provide data regarding immunisation rates for children in care. In 2018/19 performance was 96%.

*Source: Children Looked After Return for Department of Education (2019)*

As part of the NHSE data project, work is currently underway around capturing immunisation status on entering care and at subsequent review health assessments to reflect catch up programmes. This will be available after Q1/Q2 this year.

## **Dental**

Social workers ensure CIC receive the healthcare services they require as set out in their health plan; this includes routine dental checks.

There is also a statutory return which requires the local authority to provide data regarding dental checks rates for children in care. In 2018/19 performance was 93%.

*Source: Children Looked After Return for Department of Education (2019)*

## **Eyesight**

Sight status is reviewed at each statutory health assessment and recommendations made to the social worker to ensure that appropriate interventions are actioned by the carers.

As part of the NHSE data project work is currently underway around capturing sight status from 4 years of age, in line with recommendations from Public Health England. This data will be available after Q1 this year.

There is a no statutory return which requires the local authority to provide data regarding opticians checks for children in care, although this is discussed in looked after reviews and placement panel.

*Source: Children Looked After Return for Department of Education (2019)*

## Leaving Care

Support for care leavers is a priority under the Children and Social Work Act 2017, and also identified by NHS England.

The CIC Service Improvement Forum highlighted that care leavers were not always given sufficient information in regard to their own health and have limited information about their family history.

A distribution pathway has been agreed and implemented by the local authority and health partners with the aim of ensuring all care leavers have access to this information and signposting to national and local services. This pathway is currently being audited.

Other ways of health support has been strengthened including awareness raising regarding the specific needs of care leavers to all CCG GPs through information disseminated via newsletters and bulletins and on GP IT systems.

In addition the Designated Professionals for CIC contributed to the Nottingham City Local Offer published this year.

## Priorities Identified for 2019/20

### *in response to national priorities and key work streams identified by the Service Improvement Forum*

1. OOA pathway to be embedded and reviewed
2. LAC CAMHS element of the OOA pathway to be included
3. OLAC pathway to be embedded and reviewed
4. CAMHS element to the OLAC pathway to be included
5. Revised data sets to be embedded in contracts and reported upon by providers from Q1/Q2
6. Quality Assurance processes to be further implemented and embedded in practice as per the agreed quality assurance framework
7. Agreement and implementation of the “Decliner pathway” for those young people refusing a health assessment
8. Further work to be undertaken to bring together physical and emotional health within all pathways and work streams
9. Further work to be undertaken to consider “hard to reach groups” such as those young people who do not engage, UASC and those in secure accommodation
10. Further work to be undertaken to review process for those children and young people categorised as CIC due to the time needed for respite/short breaks

11. Further work to be undertaken to review process for those children and young people categorised as CIC due to being on remand; linking with specialist nurse for the Youth Offending Team
12. Further work to be undertaken to establish and strengthen the interface between the specialist CIC medical and nursing teams and both 0 – 19 services.
13. Consideration and planning to be given on the implementation of any additional priorities emerging from the NHS England Looked after Children Working group
14. All partners to work in cooperation in response to the IICSA enquiry/report published in August.
15. Liaison and advocacy for CIC and care leavers to be considered as high priority during the merging of the CCGs and the formation of the Integrated Care System, Integrated Care Providers and Primary Care networks.

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**Corporate Parenting Board – 16 March 2020**

|  |  |                                     |
|--|--|-------------------------------------|
| <b>Title of paper:</b>   | Independent Reviewing Service Annual Report 2018/19  |                                     |
| <b>Director:</b>   | Helen Blackman – Director, Children's Integrated Services  | <b>Wards affected:</b> All          |
| <b>Report authors and contact details:</b>   | Clive Chambers - Head of Service, Children in Care<br><a href="mailto:clive.chambers@nottinghamcity.gov.uk">clive.chambers@nottinghamcity.gov.uk</a><br><br>John Matravers – Strategic Lead for Safeguarding<br><a href="mailto:John.matravers@nottinghamcity.gov.uk">John.matravers@nottinghamcity.gov.uk</a> |                                     |
| <b>Relevant Council Plan Key Theme:</b>  |  |                                     |
| Nottingham People  |  | <input checked="" type="checkbox"/> |
| Living in Nottingham   |  | <input type="checkbox"/>            |
| Growing Nottingham   |  | <input type="checkbox"/>            |
| Respect for Nottingham   |  | <input type="checkbox"/>            |
| Serving Nottingham Better  |  | <input type="checkbox"/>            |
| <b>Summary of issues (including benefits to citizens/service users):</b>   |  |                                     |
| The report summarises the work of the Independent Reviewing Service during the course of 2018 - 2019. The service has three core functions, two of which directly relate to the Corporate Parenting function of Nottingham City Council: <ul style="list-style-type: none"> <li>• Oversight of the implementation of the care plan for looked after children.</li> <li>• Annual reviews of Foster Carers.</li> </ul> |  |                                     |
| <b>Recommendation:</b>   |  |                                     |
| <b>1</b>   | That Corporate Parenting Board members note the activity of the Independent Reviewing Service over the 2018 - 2019 financial year.   |                                     |

**1 Reasons for recommendation**

1.1 The report from the Independent Reviewing Service provides an important insight into the experience of highly vulnerable children and young people.

**2 Background (including outcomes of consultation)**

2.1 The service is based in the Safeguarding and Quality Assurance Section of Nottingham City Children's Integrated Services Directorate. The Independent Reviewing Officers (IRO) Service operates within the framework of the updated version of the IRO handbook, national guidance in Working Together to Safeguard Children 2018 and the national guidance for Fostering.

2.2 The report summarises the work of the Independent Reviewing Service during the course of 2018 - 2019. The service has three core functions:

- Children looked after – The primary focus of the Independent Reviewing Officer (IRO) with Children Looked After 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. Work in this area is based on national guidance contained within the IRO Handbook.
- Child Protection – In this context IROs chair Child Protection Conferences, which make decisions about whether children should or should not be subject to a protection plan, and scrutinise the work undertaken. IROs also chair meetings which look at specific risks to children and young people e.g. Child Sexual Exploitation.
- Fostering – The role of the Independent Reviewing Officer (Fostering), is to ensure that the Department’s Foster Carers provide suitable care to children in care and to a standard that meets or exceeds the Department’s legal responsibilities.

2.3 The report provides an update on the key achievements during the course of the year.

2.4 The Independent Reviewing Service Annual Report 2018 – 2019 is available in its entirety within the appendix (please see 8.1).

### **3 Other options considered in making recommendations**

3.1 None.

### **4 Finance colleague comments (including implications and value for money/VAT)**

4.1 None.

### **5 Legal and Procurement colleague comments (including risk management issues, and legal, Crime and Disorder Act and procurement implications)**

5.1 None.

### **6 Strategic Assets & Property colleague comments (for decision relating to all property assets and associated infrastructure) (Area Committee reports only)**

6.1 None.

### **7 Equality Impact Assessment (EIA)**

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

### **8 List of background papers other than published works or those disclosing confidential or exempt information**

8.1 Appendix 1: Independent Reviewing Service Annual Report 2018/19

### **9 Published documents referred to in compiling this report**

9.1 None.

# Nottingham City Council

## Safeguarding and Quality Assurance Service

### Annual Report

2018 – 2019



Safe, clean, ambitious  
**Nottingham**  
A city we're all proud of



**Nottingham**  
City Council

**This report sets out the contribution of the Independent Reviewing Officers to quality assuring and improving services for children whom Nottingham City Council are responsible for.**

This Annual Report provides evidence relating to the services in Nottingham City as required by statutory guidance.

The core business of the team includes the chairing of Children in Care reviews, Initial and Review Child Protection Conferences, Child Sexual Exploitation and Child Criminal Exploitation Strategy Meetings. Where appropriate this report contains information for all these areas.

The IRO Annual Report will be presented to The Corporate Parenting Board and the Local Safeguarding Children Board (LCSB).

**Purpose of Service and Legal Context.**

The service sits within the Safeguarding and Quality Assurance Service of Nottingham City Councils Children's Integrated Services Directorate. The Independent Reviewing Officer's (IRO) Service is set within the framework of the updated IRO Handbook, linked to revised Care Planning Regulations and Guidance, which were introduced in 2015.

**The Responsibility of the IRO (Children in Children).**

- The responsibility of the IRO changed from the management of the review process to a wider overview of the case. This includes regular monitoring and follow-up between reviews.

The IRO

- Plays a key role in relation to the improvement of care planning for children in care.
- Ensures a process for challenging drift and delay.
- Ensures that the views of the children, parents and carers are given sufficient weight in Care planning.

**The Responsibility of the Safeguarding area of the Service.**

- Chair Initial and Review Child Protection conferences.
- Chair Child Sexual Exploitation strategy meetings.
- Chair Criminal Exploitation strategy meetings.
- Chair Complex strategy meetings.
- Chair Child Death strategy meetings (where abuse or neglect is suspected).
- Chair Secure Panel meetings.
- Take part in Service Audits.

## **Professional Profile of the Independent Reviewing Officer Service (IRO).**

The IRO Service sits within the Safeguarding and Quality Assurance Service offering independence to the role. There are two Principal Managers responsible for Children in Care and Child Protection. Both sides of the service sit together to maintain some team cohesiveness.

To offer clarity of the roles and enable the development of specialisms each side of the Service is responsible for different elements of the service. To further promote clarity IRO's undertaking Children in Care Reviews are known as IRO's. However, the IRO's undertaking Child Protection functions are known as Child Protection Chairs (CPC).

The Local Authority Designated Officer (LADO) is also positioned within this service and is line managed by the Child Protection (CP) Principal Manager.

All IRO's and CPC's are qualified social workers, sufficiently experienced with a wide range of Social Care experiences which brings a positive level of depth and knowledge to the service.

### **Independent Reviewing Officers.**

Every child who is '*looked after*' (Nottingham City use the term "children in care") by Nottingham City Council must have a care plan. This document details the long-term plan for the child's upbringing, and the arrangements made by Nottingham City Children's Integrated Services to meet the child's day-to-day needs. All Local Authorities have a statutory duty to review the Care Plan regularly, within legislative timescales, as stipulated in the Care Planning and Case Review Regulations.

It is a legal requirement for every child who is in care to have an Independent Reviewing Officer appointed to them under Section 118 of the Adoption and Children Act 2002. The Independent Reviewing Officers Handbook (2010) outlines the statutory guidance for Independent Reviewing Officers and Local Authorities on their functions in relation to case management and review for children in care. The handbook specifies that the Independent Reviewing Officer should provide continuity in the oversight of matters relating to a child being in care and that they should strive to establish a consistent relationship with the child. The statutory duties of the Independent Reviewing Officer include the following:

- Monitor the performance of the Local Authority and their function in relation to the child's case.
- Participate in any review of the child's case.
- Ensure that any ascertained wishes and feelings of the child are given due consideration by the appropriate authority.
- Perform any other function, which is prescribed by the regulations.

From December 2012, the children in care population was extended to include those children placed on remand in a secure unit or youth offending institution under the terms of the Legal Aid Sentencing and Punishment of Offenders Act 2012. This legislation placed a responsibility on all Local Authorities to treat the child as a child in care, up to the age of 18 years, who is remanded into custody. Each of these children is required to have a Remand Plan, which is equivalent to the Care Plan.

### **Independent Reviewing Officers role in Short Breaks.**

The Statutory Guidance on how to safeguard and promote the welfare of disabled children using short breaks 2010 focuses in particular on the decision as to whether overnight short breaks should be provided under section 17 or section 20 of the Children Act 1989 and the consequences in relation to 'looked after' status if section 20 provision is made.

The guidance states (para 3.19) that reviews for children who are receiving short breaks under S20 arrangements but who are not looked after should take place at least every six months. Reviews for looked after children must take place in accordance with the Care Planning, Placement and Case Review Regulations 2010 and be undertaken by an IRO.

Within Nottingham City Council Short Breaks Services Policy is that IRO's are responsible for chairing all reviews where children are accessing Short Breaks for 36 nights or above.

### **Child Protection Chairs (CPC).**

An Independent Chair is required to chair Initial and Review Child Protection conferences as detailed in Working Together 2015.

#### **The Chair:**

- Should be a professional who is independent of operational and/or line management responsibilities for the case; and
- Should meet the child and parents in advance to ensure they understand the purpose and the process.

Where possible the same person should chair subsequent Child Protection Reviews.

### **Management Team and Staffing.**

The Head of Service is John Matravers, who is Strategic Lead for Safeguarding. We continue to have a permanent staff team of both full and part time workers. We have had no changes to the current IRO's in post which contributes to a stable workforce resulting in continuity for the children and young people.

As a service, we have attempted to provide a balance between male and female workers. We have a culturally diverse team, which reflects the diverse population of Nottingham City.

IRO's and CPC's work flexibly from home and can access other offices across the city to meet the needs of the service. There are fortnightly team meetings, but IRO's communicate with each other for support and advice and their Principal Managers between these meetings.

These steps contribute to ensuring a highly motivated integrated and well-supported team.

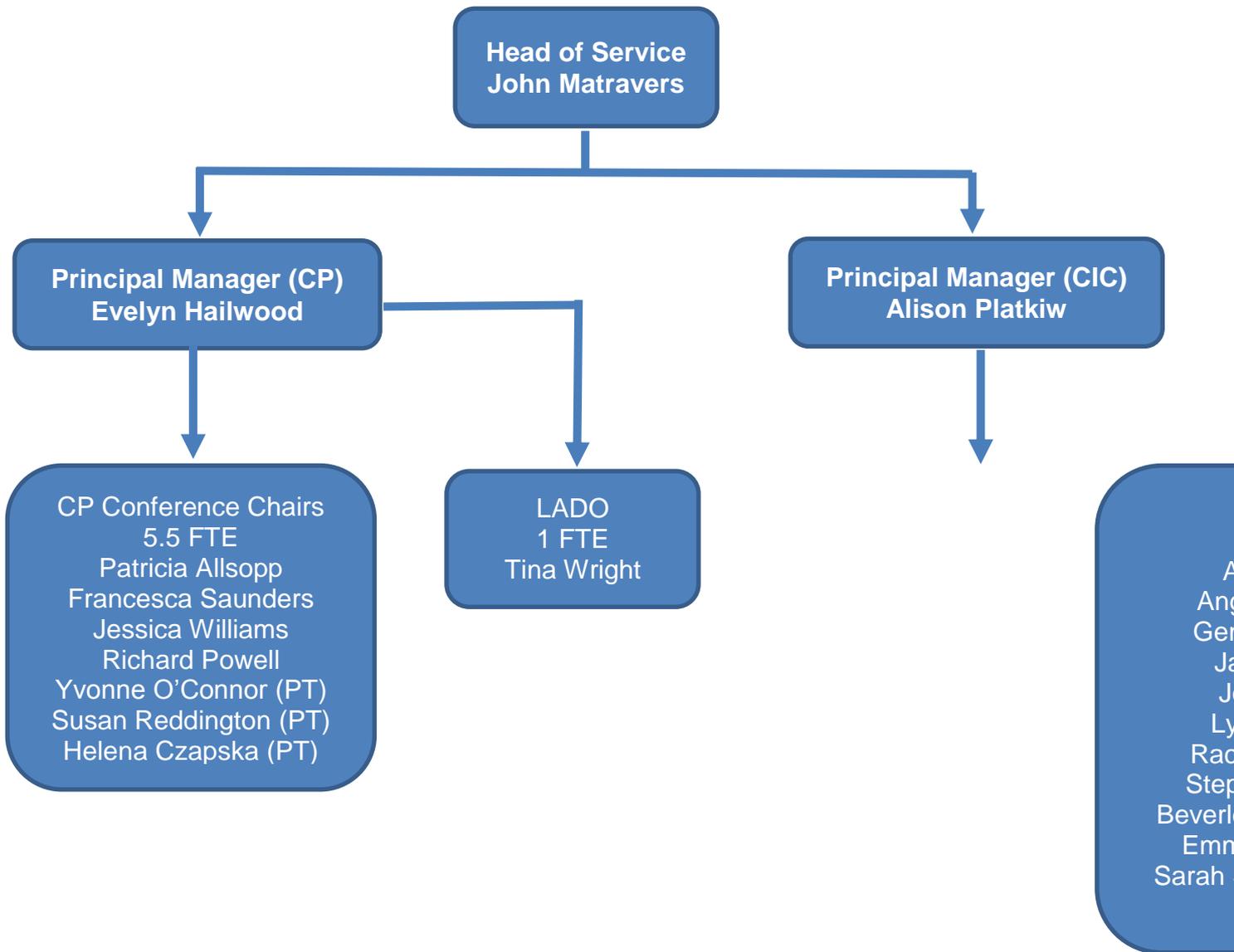
### **Supervision and Training.**

IRO's have monthly supervision and informal supervision when required. All IRO's have a yearly performance appraisal and are encouraged to attend training in line with the requirements of HCPC. All IRO's are required to undertake five days training /development each year as part of the HCPC requirements for continued practice. Both teams have the opportunity to attend regional workshops for IRO's, which are held four times a year.

Team members are able to access the training provided by the NCC learning and development team as well as the LSCB training opportunities. Partner agencies also offer a variety of training courses, which can be accessed.

Additionally the Children in Care IRO's have two sessions per year with CAFCASS. Within these seminars, we look at themes agreed by the Managers from CAFCASS and the IRO Service. This has increased communication and understanding of respective roles and continues to be fully attended by all parties.

**IRO Service structure chart:**



## **Updates on priorities set 2018-2019.**

1. To launch the “coming into care” packs for both children and their parent/carer – this has been completed and will start to be distributed from September 2019 as a child comes into care.
2. Develop a new child contribution paper – This will be completed by December 2019.
3. Develop a parent/carer contribution paper – this has been completed and will receive Senior Management in September 2019.
4. Develop an audit tool for minutes for CIC IRO’s – this was not completed as the Insight and Analysis Team are now able to report on all these matters from running Liquid Logic reports. These are undertaken on a monthly basis. Furthermore the reports can be accessed by all Social Care staff including IRO’s for quality assurance matters.
5. Develop a system to manage conflict resolution disputes more effectively and share these findings with the wider directorate – we have a system in place that works well as the resolved dispute now goes to the Principal Managers for oversight.
6. Develop a system for obtaining feedback form children/young people for case conferences - . This is still being developed and will be ready for senior sign off before the end of the year.
7. Liaise with advocacy services to enable this area of responsibility to be improved and reported on - . This has taken place and an action plan is being developed
8. Revise Liquid Logic to collect a variety of work streams/data for reporting purposes. This is now completed

## **Children in Care 2018-19**

### **Children in Care Population and the IRO Service Data.**

The Children in Care population for 2018/19 within Nottingham City Council was 629, excluding 43 short breaks. This figure has remained stable for the past 3 years. Caseloads are marginally higher at 71, than is specified in the IRO handbook, which recommends a caseload of 50-70 per IRO as being manageable.

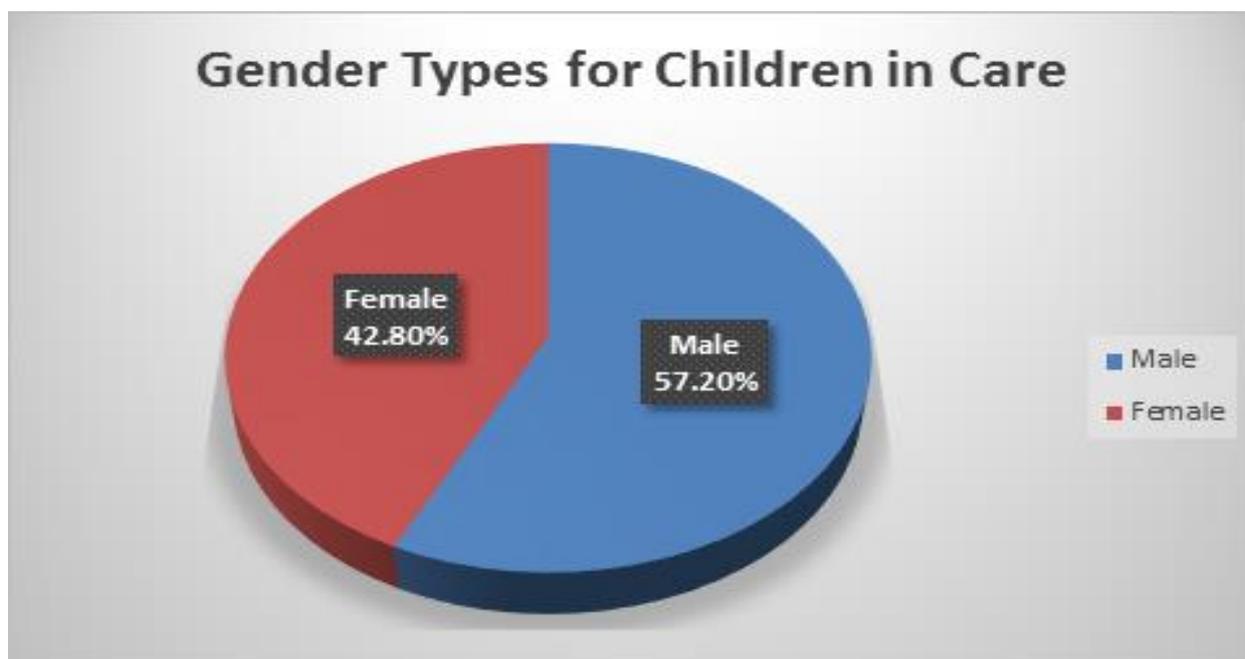
In terms of outcomes during 2018-19, there were 49 Adoption Orders granted, 10 Special Guardianship Orders granted (SGO) and 3 Child Arrangement Orders issued. Furthermore 68.7% of the population have remained in the same placement for at least 2 years or more.

**We can look at the data for children in care in age groups, ethnicity and gender as highlighted below:**

| <b>Age</b> | <b>2017</b> | <b>2018</b> | <b>2019</b> |
|------------|-------------|-------------|-------------|
| Under 1    | 6.7%        | 5.3%        | 6.4%        |
| 1 - 4      | 9.7%        | 12.3%       | 10.2%       |
| 5 - 9      | 18.5%       | 16.7%       | 14.9%       |
| 10 - 15    | 41.2%       | 41.6%       | 42.1%       |

|         |       |       |       |
|---------|-------|-------|-------|
| Over 16 | 23.9% | 24.1% | 26.4% |
|---------|-------|-------|-------|

| <b>Ethnicity of Children in Care</b>               | <b>2017</b> | <b>2018</b> | <b>2019</b> |
|--|-------------|-------------|-------------|
| Arab   | 3           | 24          | 0           |
| Asian / Asian British / Bangladeshi                | 1           | 1           | 3           |
| Asian / Asian British / Pakistani                  | 13          | 13          | 11          |
| Asian / Asian British / Indian                     | 3           | 3           | 3           |
| Asian / Asian British / Any other Asian background | 17          | 18          | 26          |
| Black / Black British / African                    | 29          | 23          | 35          |
| Black / Black British / Caribbean                  | 20          | 23          | 20          |
| Black / Black British / Any other Black background | 6           | 5           | 8           |
| Gypsy / Roma                                       | 3           | 3           | 8           |
| Mixed White & Black African                        | 8           | 8           | 9           |
| Mixed White & Asian                                | 6           | 5           | 5           |
| Mixed White & Black Caribbean                      | 71          | 78          | 68          |
| Mixed any other mixed background                   | 26          | 31          | 27          |
| Other ethnic group                                 | 16          | 0           | 20          |
| Unknown  | 5           | 1           | 2           |
| White British                                      | 362         | 356         | 348         |
| White Irish  | 7           | 7           | 4           |
| White any other White background                   | 24          | 19          | 32          |
| <b>Total</b>                                       | <b>620</b>  | <b>618</b>  | <b>629</b>  |



**Advocacy.**

The commissioning of advocacy services remains with the Children’s Society. They have been to a team meeting to introduce their service. Additionally the Children’s Society leaflet is included in the coming into care pack. IRO’s this year have actively accessed this service on behalf of children or have encouraged them to access this service.

**Timeliness of Children in Care Reviews.**

95.6% of Children in Care Reviews took place within the statutory timescales

### **Children's and Young People's Involvement in Reviews.**

89.9% of children in care participated in their review process through a number of forums either by attending the meeting, completing the contribution paper or for some having contact either by phone, email or a home visit with the IRO before their review is held.

IRO's continue to support and encourage young people to chair their own meetings or set their own agenda's where appropriate.

Contact with young people between reviews continues to improve as caseloads allow. Due to this IRO's have been able to develop relationships that are more meaningful and are being creative about this. An IRO can now record a home visit within a child's file on case notes allowing them to have a clear voice and visible presence on the child's file and their contact can also be monitored in terms of performance development.

IRO's make a conscious effort to further increase the participation of children by undertaking child friendly reviews, which are individualised to each child's needs and abilities. Furthermore, children are reassured in between reviews or before the review starts to give them the confidence needed to participate fully in their own review.

### **Progress and Activity between Children in Care Reviews.**

During this reporting period, the IRO's have been able to monitor the progress of their allocated children. This brings them into line with their duties outlined in the IRO Handbook (2010). Therefore, they have been able to monitor the progress of the Care Plan and intervene to escalate issues should there be a need. This has also improved communication with the Social Work teams.

All children at their initial meeting are given the contact details of their allocated IRO and every effort is made to ensure the IRO chairs any subsequent meeting, offering a level of consistency moving forward. Given the stable staff team this is working well for children as they now have strong relationships built with their IRO. Additionally we are also now able to monitor through case notes when an IRO has undertaken case oversight actions in terms of performance management.

### **Audits.**

IRO's contribute to the learning and improvement framework, which covers the auditing of selected case. Analysis is drawn from this information and action identified and addressed where applicable. This reporting year IRO's have audited 31 cases.

### **Management Oversight.**

Statutory Guidance states that operational Social Work Managers must consider the decisions from the Review before they are finalised. This is due in part to the need to ensure any resource implications have been addressed. Once the decisions are completed, the Manager has 5 days to raise any queries or objections. Managers rarely ask for any amendments to be made so at present this process appears to work well.

IROs have continued to monitor the quality of care plans, adoption plans and pathway plans and social worker reports. Where any issues were identified, the IRO's have attempted initially to deal with the matter informally to address these and on a few occasions have formally escalated concerns.

## Child Protection 2018-19

### Child Protection data.

#### Cumulative number of CP Conferences

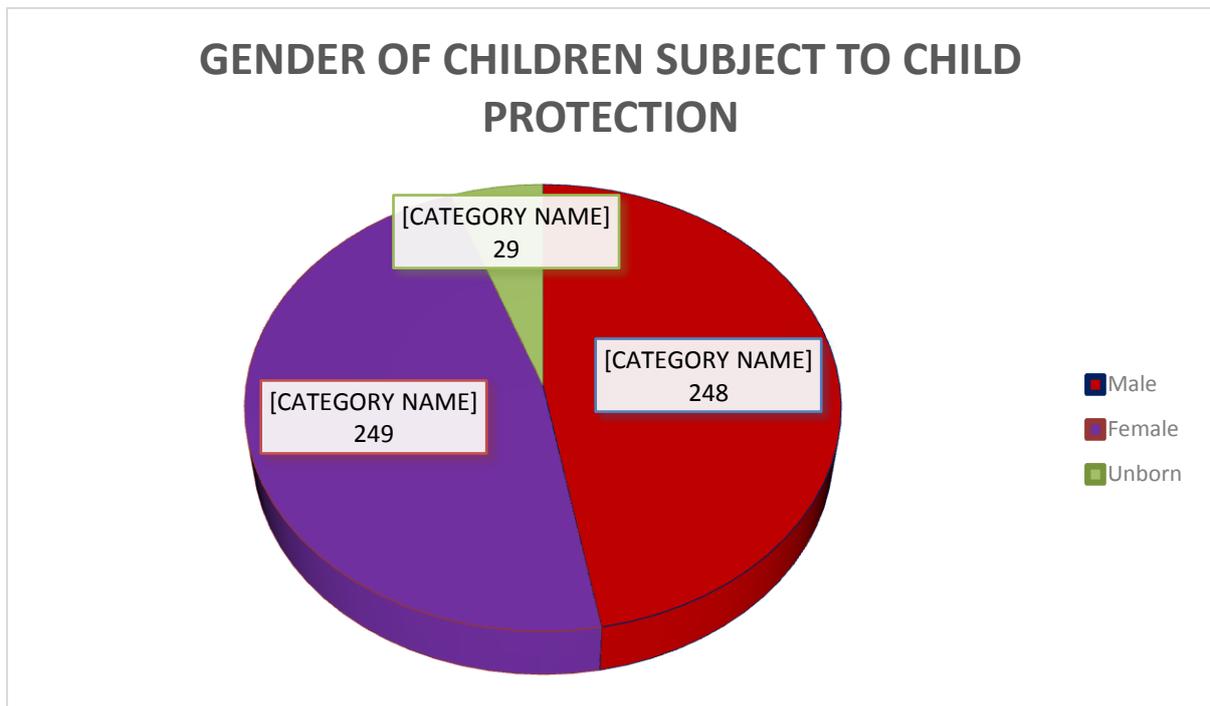
| Number of YP's    | ICPC | CPR |
|-------------------|------|-----|
| Apr 18 - June 18  | 217  | 439 |
| July 18 - Sept 18 | 225  | 430 |
| Oct 18 - Dec 18   | 256  | 385 |
| Jan 19 - March 19 | 195  | 410 |

| Category of plan    | 2016-17 | 2017-18   | 2018-19   |
|---------------------|---------|-----------|-----------|
| Physical abuse      | 6%      | 4% (24)   | 6% (33)   |
| Sexual abuse        | 3%      | 1% (8)    | 1% (6)    |
| Emotional abuse     | 27%     | 33% (189) | 31% (161) |
| Neglect             | 36%     | 40% (230) | 42% (222) |
| Multiple Categories | 27%     | 22% (128) | 20% (104) |

| Ethnicity                                       | Numbers on Plan |
|---|-----------------|
| Any other ethnic group                          | 4               |
| Asian / Asian Brit - Bangladeshi                | 1               |
| Asian / Asian Brit - Indian                     | 2               |
| Asian / Asian Brit - Pakistani                  | 34              |
| Asian / Asian Brit -Any other Asian background  | 9               |
| Black / Black Brit - African                    | 19              |
| Black / Black Brit - any other black background | 4               |
| Black / Black Brit - Caribbean                  | 15              |
| Chinese   | 0               |
| Gypsy / Roma                                    | 9               |
| Mixed - any other mixed background              | 22              |
| Mixed - White & Asian                           | 14              |
| Mixed - White & Black African                   | 13              |
| Mixed - White & Black Caribbean                 | 60              |
| White - Any other White background              | 22              |
| White British                                   | 250             |
| White Irish                                     | 2               |
| Unknown   | 5               |

| Age     | Numbers |
|---------|---------|
| Under 1 | 48      |
| 1       | 32      |
| 2       | 34      |

|    |    |
|----|----|
| 3  | 32 |
| 4  | 35 |
| 5  | 31 |
| 6  | 35 |
| 7  | 26 |
| 8  | 24 |
| 9  | 45 |
| 10 | 25 |
| 11 | 19 |
| 12 | 26 |
| 13 | 25 |
| 14 | 22 |
| 15 | 19 |
| 16 | 28 |
| 17 | 14 |



Number previously on a plan = 30%

**Length of Plan.**

- Over 2 years = 7
- 18 months to 2 years = 45
- 1 year to 18 months = 59
- 6 months to 1 year = 123
- 3 months to 6 months = 157
- Less than 3 months = 182
- Longest 34 months

**Timeliness of Reviews.**

96.6% of child protection meetings were held within timescale.

## **Advocacy.**

Because we have a new advocacy service contract provider the working relationship between the IRO service and the new service provider is something we will focus on during 2019/20.

## **Children and Young People's Preparation, Involvement in Initial and Review Conferences.**

Those children of an appropriate age are encouraged to attend their conferences and supported to participate. Young people who do not attend are invited in most cases to meet with the chair outside of the meeting process. We will also write to young people introducing ourselves in the hope of encouraging them to attend further meetings. There are good examples of children writing to chairs outlining their wishes and feelings.

## **Progress Monitoring Activities between Child Protection Reviews.**

Child Protection Chairs (CPC's) will monitor the outcomes in between reviews whenever possible. This gives them the opportunity to raise concerns, which are then recorded on the child's file.

CPC's have attend 'Edge of Care' panel and pre legal planning meetings when they have made a recommendation to progress a case to becoming a Child in Care.

## **Number of Different Meetings Chaired Per Quarter.**

| Date range        | ICPC | CPR | CSE | CCE | Complex Strat | Secure | Child death |
|-------------------|------|-----|-----|-----|---------------|--------|-------------|
| Apr 18 - June 18  | 119  | 218 | 33  | 10  | 22            |        |             |
| July 18 - Sept 18 | 98   | 209 | 37  | 12  | 17            |        |             |
| Oct 18 - Dec 18   | 125  | 204 | 30  | 15  | 11            |        |             |
| Jan 19 - March 19 | 99   | 243 | 30  | 21  | 10            |        |             |
| Totals            | 441  | 874 | 130 | 58  | 60            | 7      | 2           |

## **Child Sexual Exploitation (CSE).**

As a service, we work collaboratively with the CSE Co-Ordinator. The CP Principal Manager is the Vice Chair of the Multi Agency Sexual Exploitation Panel Meetings (MASE). We have developed a filter meeting for referrals into the service and meet alongside the CSE Co-Ordinator with the Police to consider high-risk young people.

When it is identified that more than two young people are linked we have a system of mapping to ensure all relevant links including adults of concern are highlighted and assessed for further action and safeguarded. All young people are encouraged to attend their strategy meeting and when this has not happened visits have been made to the young person to explain the worries their professionals have and to discuss the safety plan in place.

## **Child Criminal Exploitation (CCE).**

The criminal exploitation of children has continued to emerge as a significant concern as it evidenced in the data above and the Local Authority continue to respond positively.

The CCE tool kit is an essential tool for professionals to use to make a referral for a strategy meeting on children we are concerned are being criminally exploited. We continue to have regular Child Criminal Exploitation Panel Meetings (CCEP) to address this emerging issue.

### **Secure Panels.**

As already stated the procedures state that secure panel meetings are chaired by the Principal Manager. Both Principal Managers share this responsibility. 7 panel meetings have been held within this reporting period.

### **Complex Strategy Meetings.**

60 children have been subject to a complex strategy meeting. This is mainly because of mapping exercises that have identified further young people during CCE and CSE strategy meetings.

### **Audits.**

The IRO Service contributes to the learning and improvement framework, which covers the auditing of selected case files. Analysis is drawn from this information and action identified and addressed where applicable.

## **Dispute Resolution 2018-19**

### **Dispute Resolution Policy**

The majority of formal escalations have been responded to within agreed timescales. When there is a delay in response it is promptly followed up by the Principal Managers to seek a resolution.

The IRO's and CPC chairs follow through all dispute resolution's raised through the formal policy that has now been in place for one year. Thus ensuring that the young people are safeguarded appropriately in line with their care plan or child protection plan and the recommendations made at reviews and conferences are swiftly completed.

Over the last reporting year the service as a whole has raised 56 concerns, none of which have gone beyond the level of a Service Manager to achieve a resolution. This is from a total of 1500 meetings chaired during the year.

The main contributing factors to the disputes are:

- Lack of professionals in attendance.
- Lack of written up assessments for Child Protection Reviews
- Lack of progress in Child Protection Plan work.
- Drift on Care Plans in specific cases.
- Change in Social Workers

### **Compliments from the IRO Service.**

The policy also incorporates a system for IRO's to raise good practice in the course of their work. The IRO completes a compliments form and sends to all Senior Managers in order to share the positives that are seen out in practice. Some examples raised have been in relation to support and professionalism of individual Social Workers, well-written and presented reports and the positive Social Worker, child relationships observed.

### **Annual Work Programme and Key Themes for April 2019- March 2020.**

1. Develop a new child contribution paper across the service.
2. Develop a parent/carer and Foster Carer contribution paper.
3. To relaunch the Dispute Resolution Policy due to changes in Childrens services staff teams
4. Introduce the Coming into Care Pack in September 2019.
5. Launch a new child friendly minutes template on Liquid Logic.



Eve Hailwood  
Principal Manager (CP)



Alison Platkiw  
Principal Manager (CIC)

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## Corporate Parenting Board – 16 March 2020

|   |  |                                     |
|---|--|-------------------------------------|
| <b>Title of paper:</b>  | The Children's Society: Independent Advocacy Annual Report 2020  |                                     |
| <b>Director:</b>  | Helen Blackman<br>Director, Children's Integrated Services   | <b>Wards affected:</b> All          |
| <b>Report author and contact details:</b>   | Gabriel Hall - Area Manager<br>gabriel.hall@childrenssociety.org.uk  |                                     |
| <b>Other colleagues who have provided input:</b>  | Alison Smith - Advocacy Service Manager  |                                     |
| <b>Relevant Council Plan Key Theme:</b>   |  |                                     |
| Nottingham People   |  | <input checked="" type="checkbox"/> |
| Living in Nottingham  |  | <input type="checkbox"/>            |
| Growing Nottingham  |  | <input type="checkbox"/>            |
| Respect for Nottingham  |  | <input type="checkbox"/>            |
| Serving Nottingham Better   |  | <input type="checkbox"/>            |
| <b>Summary of issues (including benefits to citizens/service users):</b>  |  |                                     |
| Independent Advocacy Service provided to all Children in Care under Section 24D/26 the Children's Act 1989. Promotes Children's Rights and Entitlements supporting children and young people's meaningful involvement in decisions, which affect their lives. |  |                                     |
| <b>Recommendation:</b>  |  |                                     |
| <b>1</b>  | To acknowledge the method of fulfilling delivery of the Children's Advocacy Services contract as set out within the Service Specification dated 16th March 2018. |                                     |

**1 Reasons for recommendations**

- 1.1 For the board to acknowledge and discuss the Children's Society Advocacy Services Annual Report.

**2 Background (including outcomes of consultation)**

- 2.1 The Children's Society are a national charity that works with the country's most vulnerable children and young people. We have over 16 years' experience in providing advocacy services across the UK. The Children's Society deliver a number of services throughout Nottingham and Nottinghamshire including Child Sexual Exploitation, Child Sexual Abuse, Child Criminal Exploitation Anti-Knife Crime and The Next Generation Nottingham service for children and young people impacted by multiple disadvantage.

**3 Other options considered in making recommendations**

- 3.1 None.

- 4 Finance colleague comments (including implications and value for money/VAT)**
- 4.1 None.
- 5 Legal and Procurement colleague comments (including risk management issues, and legal, Crime and Disorder Act and procurement implications)**
- 5.1 None.
- 6 Strategic Assets & Property colleague comments (for decision relating to all property assets and associated infrastructure) (Area Committee reports only)**
- 6.1 N/A
- 7 Equality Impact Assessment (EIA)**
- 7.1 Not required as the report does not contain financial proposals or decisions.
- 8 List of background papers other than published works or those disclosing confidential or exempt information**
- 8.1 None.
- 9 Published documents referred to in compiling this report**
- 9.1 None.



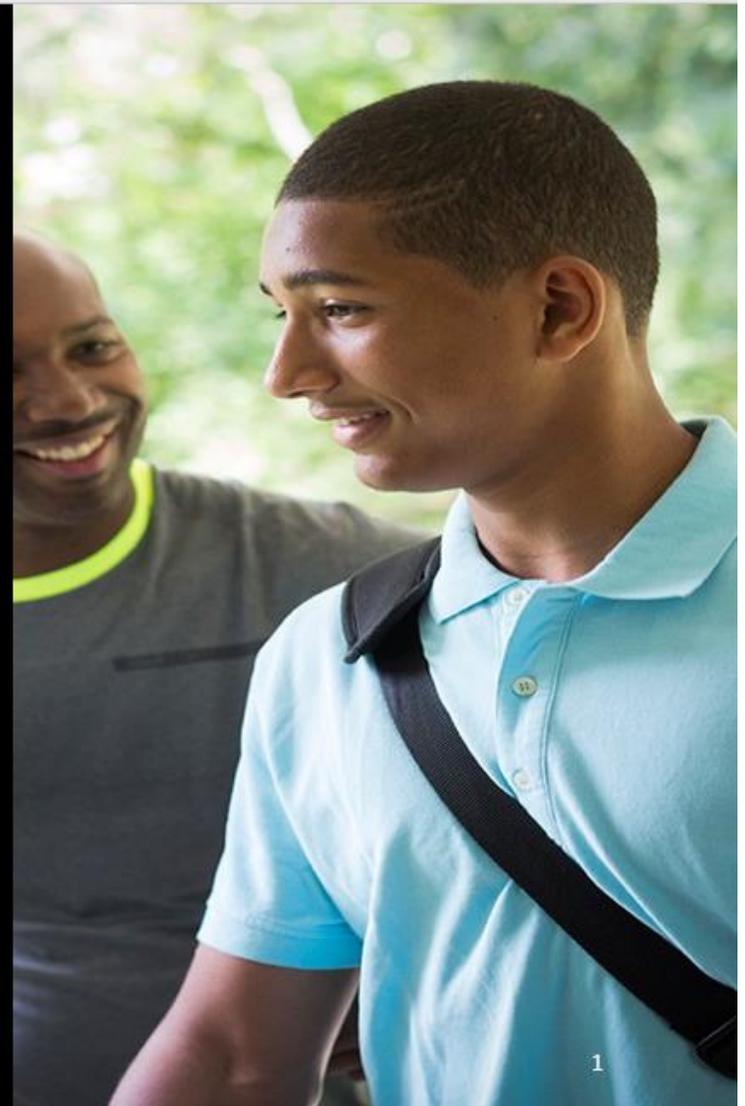
Nottingham  
City Council

# Independent Advocacy

Annual Report 2019

Area Manager – Gabriel Hall  
Service Manager – Alison Smith

The Children's Society



## Introduction

The Children's Society is jointly commissioned by Nottingham City and Nottingham County Council to deliver an independent and confidential Advocacy Service for all Looked After Children in their care. The Advocacy Service promotes children's rights and provides advocacy in line with the Local Authority's statutory duty.

The Children's Society's practice is underpinned by the *The National Standards for the provision of Children's Advocacy Services (2002)*.

The service aims to empower children and young people ensuring their rights are respected and that their views and wishes are heard in decision making processes. The service provides independent;

- Information
- Advice
- Advocacy
- Representation
- Support

The Advocacy process is led by children and young people and advocates follow the core principles below;

- Advocates work for children and young people and no one else.
- Advocates value and respect children and young people and challenge discrimination.
- Advocates support children in care to understand what is happening to them and to ensure they have a voice in decisions being made about them.
- Advocates help children and young people to raise issues and concerns about things they are unhappy with. This includes making informal and formal complaints under section 26 of the Children's Act 1989.

### **Nottingham City Advocacy Service**

Advocacy services are available for children and young people up to the age of 18 years or up to 25 years for those with a disability or in higher education. The Children's Society provides a free and confidential phone messaging service (available 24 hours a day and 7 days a week) for children and young people to make contact with the advocacy service.

### **Residential Visiting Advocacy**

The Children's Society is contracted to provide Residential Visiting Advocacy to Children's Residential Units at a minimum of once every eight weeks. This includes all residential units that are Local Authority maintained, private and secure accommodation. And covers units where children are placed out of the City boundaries, including Nottinghamshire and other locations in England.

### **Issue Based Advocacy**

The Children's Society provide issue based advocacy representing children and young people who have specific concerns that they wish to be supported with. This work has no specific time frames however advocates aim to resolve issues quickly. Once resolved the work is closed and if young people have subsequent issues these are raised as new pieces of work.

### **Independent Persons**

An Independent Person is provided to all eligible children and young people subject to current Secure Accommodation Orders. When requested the advocate will sit on a secure panel to ensure that children's rights and entitlements are upheld and that decisions are appropriate.

## **Promoting the service & networking**

To raise awareness of the Advocacy service The Children's Society has produced promotional flyers which have been distributed across Children in Care services including Social Work teams, Residential Units, Secure Accommodation and Foster Carers networks. To support an understanding of advocacy provision the service manager has attended a range of meetings and networking events including;

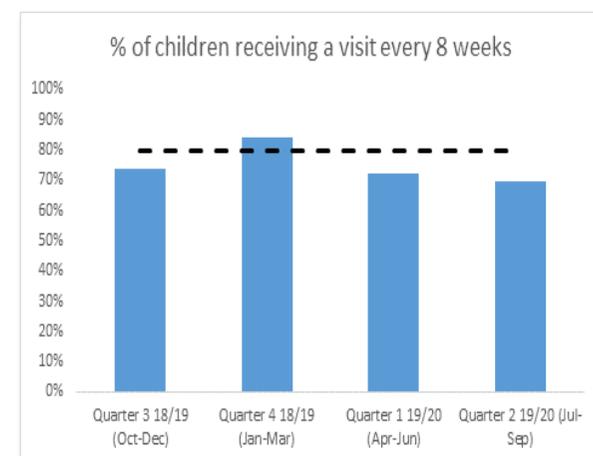
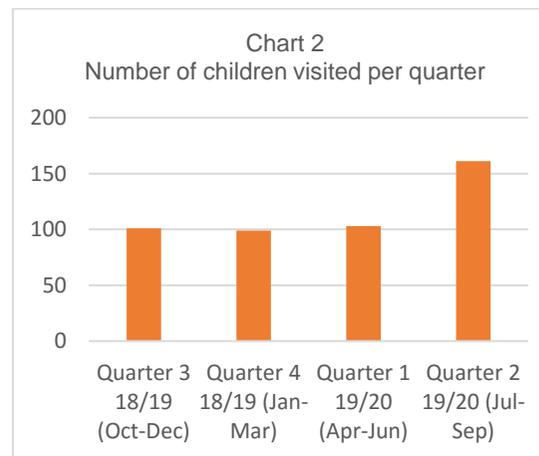
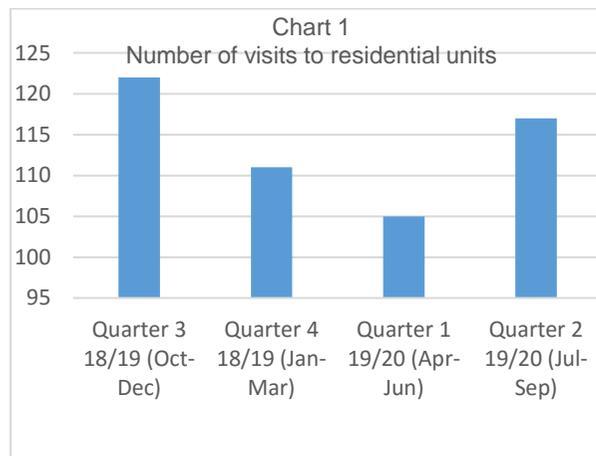
- Social Work team meetings
- Foster Carer Support meetings with the National Fostering Agency
- Foster Carer business meetings
- SOVA – Independent Visiting Service
- Young people's Refugee Forum and youth group

The Children's Society has promoted equal access and inclusion, through using interpreting services with young people who have English as a second language and through producing material in five languages including Arabic, Pashtu and Farsi.

### Performance overview

Residential Visiting Advocacy has a key performance indicator of visiting 80% of residential units no less than once every eight weeks. It is worth noting that many units are located outside of the east midlands region including places such as Birmingham, London, Doncaster, Bradford and Shropshire. Often residential settings support just one young person. It is therefore important that Visiting Advocacy is carefully planned ensuring efficient use of resource. This is managed through assigning staff residential units in clusters, requiring advocates to visit up to five units in one day covering distances of up to 250 miles (including overnight stays).

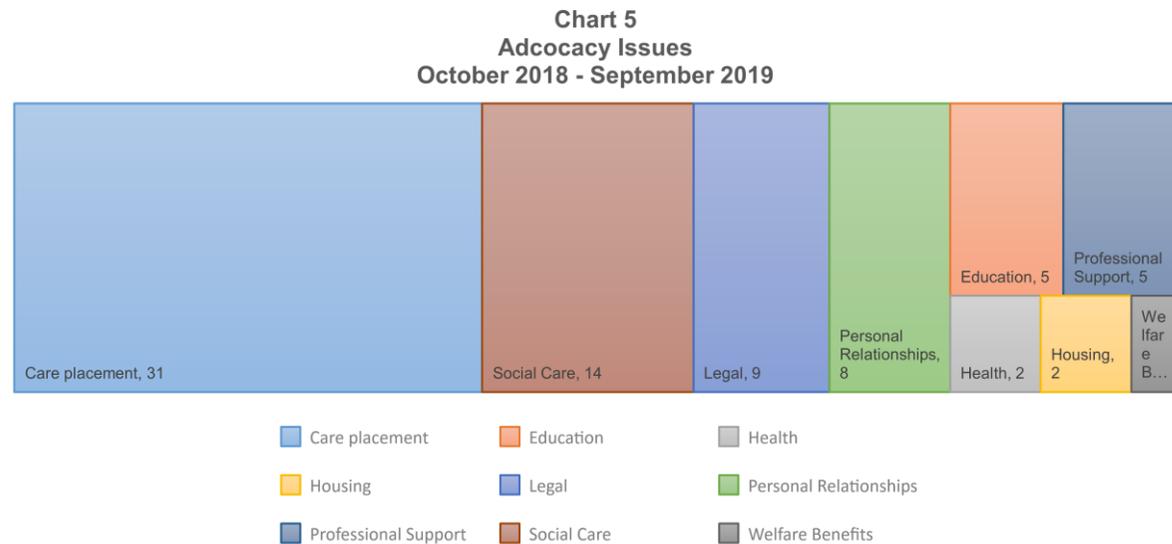
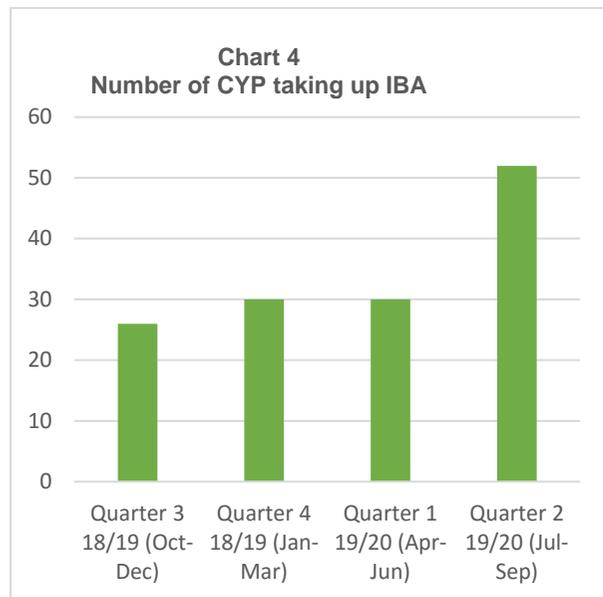
Chart 1 and 2 shows that between October 2018 and September 2019 The Children’s Society visited between 105-122 Residential Units to meet up to 161 young people. Chart 3 illustrates the percentage of young people receiving a visit every eight weeks against the benchmark 80%. And shows that visits against this figure move between 70% and 84% over the period. The benchmark figure of 80% has been difficult to achieve primarily because there has been a significant increase in the number of residential units across the contract (City and County). This number has risen from 109 units in 2017-18 toward 236 units in 2018-19 (note, the number of residential units housing LAC is in constant fluctuation due to young people’s regular movements ‘in’ and ‘out’ of placements).



## Issue Based Advocacy (IBA)

The number of children and young people supported with issue based advocacy from October 2018 through to September 2019 stands at 64. Chart 4 illustrates active cases throughout the quarterly periods showing a high of 52 in Quarter 2 of 2019 (this is up 48% compared Q2 last year).

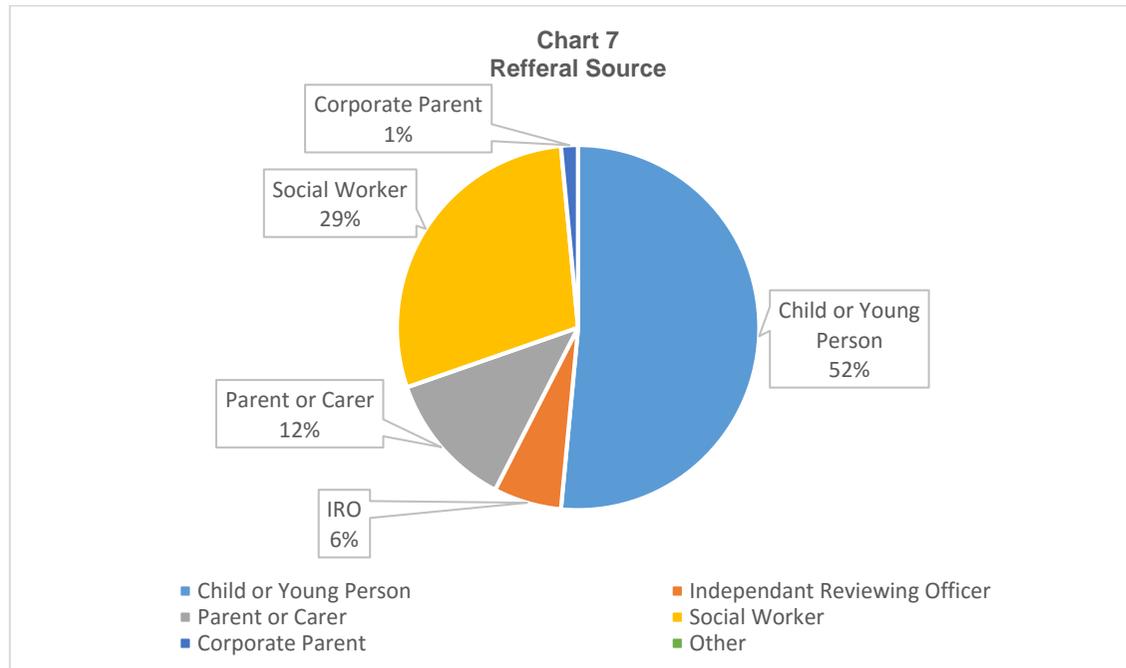
Chart 5 shows nine broad areas that young people required advocacy support for, with the majority being in relation to care placement. A more detailed breakdown of issues can be seen in Chart 6 (p.8) with full descriptions located in the appendix section of this report.





### Referrals for Issue Based Advocacy

The Advocacy service receives referrals from a range of sources including young people, parents/carers, social workers and other professionals. The largest proportion of referrals at 52% have come directly from young people (last year the figure was 34%), 29% have come via social workers with 12% being made by parents or carers (down from 19% in 2017-18). During 2017-18, 9% of referrals came from 'other sources' including schools and professionals. However during 2018-19 there have been no referrals made from these routes. Referrals from IRO's during 2017-18 was 6% this is the same as the year 2018-19.

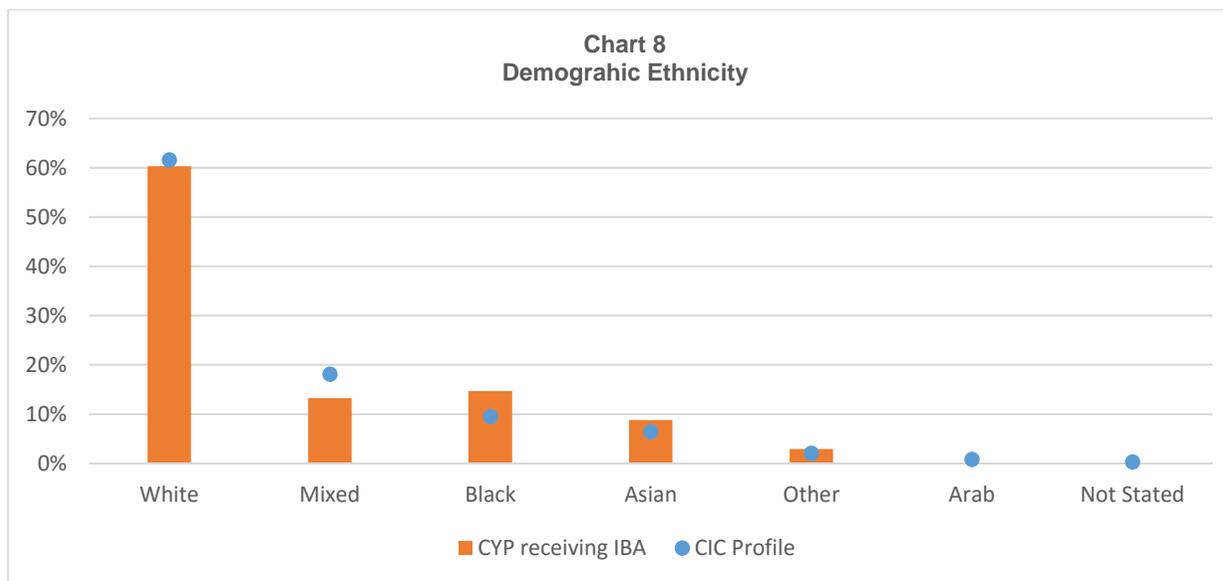


## Demographic data - Ethnicity

Chart 8 shows children and young people accessing Issue Based Advocacy support by ethnicity compared to the Children in Care population (Sept 2018 - August 2019, note ethnicities have been grouped to enable comparisons and presentation).

The largest group taking up advocacy at 60% were White British, this is consistent with 62% of the Children in Care population. However there are differences when looking at minority groups. For example 18% of Children in Care came from Mixed Heritage backgrounds making up 13% of those who have used the advocacy service. This represents a 10% increase from the 3% that accessed advocacy in 2017-18.

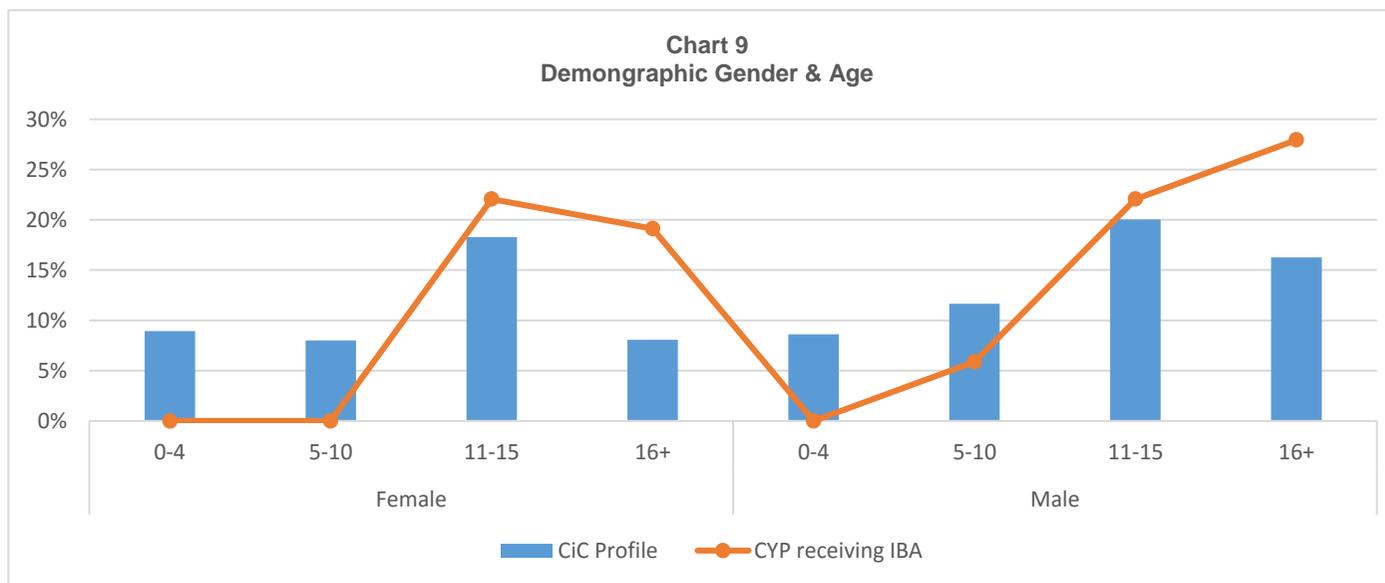
Children from Black British Caribbean, African and other Black groups make up 10% of Children in Care with 15% receiving advocacy support. Asian British, Indian Pakistani and other Asian groups make up 6% of Children in Care with 13% having accessed the advocacy service. Arab groups make up 1% of Children in Care, with 0% having accessed advocacy.



## Demographic data - Gender and Age

When comparing the age and gender of Children in Care with those receiving Issue Based Advocacy, we can see that males aged 16 years and over have been the largest group at 28% accessing support. This shows a change from last year when females 11-16 years were the group most likely to access advocacy at 50%.

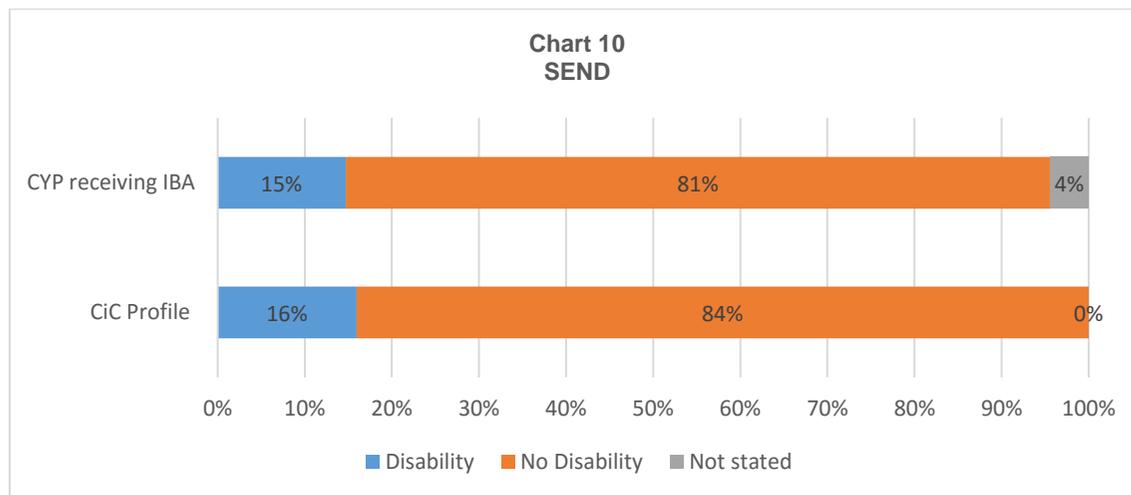
Males (22%) and females (18%) in the range 11-15 years were the second and third largest groups to access advocacy. While males in the 5-10 years range made up 12% children in care and 6% of those accessing support. Notably children in the range 0-4 years for both males and females made up 9% of children in care but 0% of those accessing advocacy (this shows a reduction from 2017-18 when 12% of males and 8% females took up advocacy in this group).



## Special Needs and Disability

The Children's Society provide a dedicated advocate whose focus is to work with Children in Care who have special needs and disability. The Advocate undertakes regular visits to Crocus Fields and Woodview Residential units who provide care for children with special needs and disability. When appropriate the service will provide non-instructed advocacy to support children who lack capacity to make decisions. In these cases advocate spends time getting to know the child, observing them in their environment in order to develop an understanding of how they communicate. Through this process (and through talking to parents/cares) the advocate builds up a picture of the young person's wishes and feelings.

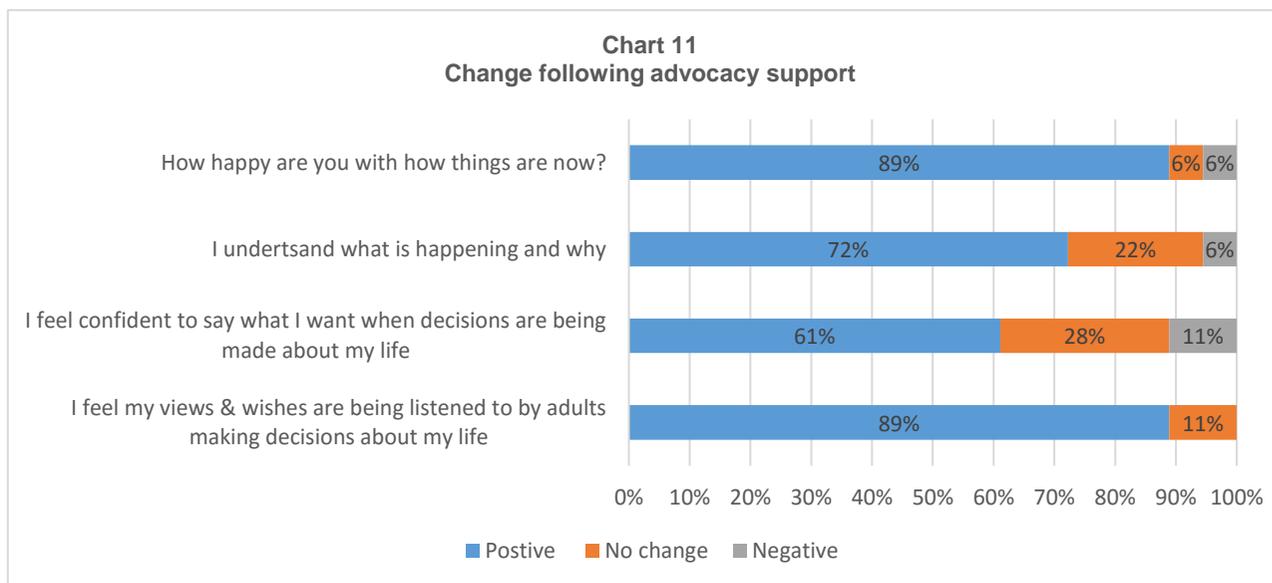
Chart 10 show that 16% of Children in Care have a recognised disability or special need. With the Advocacy service working with 15% of these children. This is an increase from 2017-18 when 9% of this group accessed advocacy from a profile of 17%.



## Children and Young People's Feedback (Issue Based Advocacy)

The service has developed an outcomes tool which is designed to track children and young people's views in relation to the resolution of issues they have raised. It needs be noted that Advocates have difficulty in obtaining feedback from young people once advocacy work has concluded. Anecdotal feedback (from advocates, professionals and young people) suggests that this is largely because young people consider that the advocacy process has finished, and therefore they feel they do not need to engage further with advocacy staff.

Between October 2018 and September 2019 25% of children and young people completed the feedback tool. Chart 11 shows that 89% of these were happier following advocacy intervention. With 72% indicating they understood what was happening (with their care) and why. While 61% 'felt confident to say what they wanted' and 89% 'felt listened to by adults making decisions'.



## **Conclusion**

The profile of the advocacy service has grown throughout the year which has supported an increase in Issue Based Advocacy requests and in particular self-referrals from young people. This demonstrates that the service is reaching young people and is embedding within the local offer for Looked After Children. It is worthy to highlight that following advocacy support, feedback from young people is overwhelmingly positive. This is good evidence that the service is able to listen to, and take on board children's wishes and feelings. Whilst at the same time working collaboratively with professionals to inform decision making processes ensuring that the rights and entitlements of children in care are upheld.

It is important to note that this year has seen pressures on the service with a 46% increase in the number of residential units requiring visiting advocacy. This, alongside higher volumes of Independent Person and Issue Based Advocacy requests has stretched the service. Therefore The Children's Society have worked closely with commissioners throughout the year to manage resource in line with Local Authority expectations. Commissioners have been positive regarding the quality of delivery and the level of output achieved. The Children's Society continue to work with Nottingham City colleagues ensuring that Looked After Children can benefit from Independent Advocacy.

## Appendix 1

### Row Descriptions: Issue Based Advocacy

Care placement - Support young person to express views to social care (whilst living in temporary placement) during move to another placement.

Care Placement: issue regarding rules/sanctions at placement

Care Placement: issues around independence

Care Placement: other ('Notes' field to provide more detail)

Care Placement: other ('Notes' field to provide more detail); Housing: other ('Notes' field to provide more detail)

Care Placement: support to challenge change of placement

Care Placement: support to challenge change of placement; Care Placement: support to request change of placement

Care Placement: support to request change of placement

Education: accessing education

Education: appeal against permanent exclusion

Education: other ('Notes' field to provide more detail)

Health: other ('Notes' field to provide more detail)

Health: support to challenge medical diagnosis

Housing: other ('Notes' field to provide more detail); Other: other (Please use 'Notes' field to provide more detail).; Personal Relationships: maintaining contact with family (detail)

Legal other ('Notes' field to provide more detail)

Legal other ('Notes' field to provide more detail); Social Care: support in LAC review meeting)

Legal: support around immigration issues

Legal: support regarding child custody / removal

Personal Relationships: maintaining contact with family

Professional Support: other ('Notes' field to provide more detail)

Social Care: issue with leaving care ('Notes' field to provide more detail)

Social Care: support for other, formal meeting

Social Care: support for other, informal meeting

Social Care: support in LAC review meeting

Welfare Benefits: support to challenge level of benefits paid

Social Care: Issues with leaving care ('Notes' field to provide more detail)

Professional Support: delays in implementing agreed care plan ('Notes' field to provide more detail)

Education: accessing education

Care placement - Support young person to express views to social care (whilst living in temporary placement) during moving to another placement

**END**

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## Corporate Parenting Board – 16 March 2020

|   |   |                                     |
|---|---|-------------------------------------|
| <b>Title of paper:</b>  | Independent Visitor Service – CGL formerly Sova             |                                     |
| <b>Director:</b>  | Helen Blackman – Director, Children’s Integrated Services   | <b>Wards affected:</b> All          |
| <b>Report author and contact details:</b>   | Gillian Black – Project Manager<br>gillian.black@cgl.org.uk |                                     |
| <b>Relevant Council Plan Key Theme:</b>   |   |                                     |
| Nottingham People   |   | <input checked="" type="checkbox"/> |
| Living in Nottingham  |   | <input type="checkbox"/>            |
| Growing Nottingham  |   | <input type="checkbox"/>            |
| Respect for Nottingham  |   | <input type="checkbox"/>            |
| Serving Nottingham Better   |   | <input type="checkbox"/>            |
| <b>Summary of issues (including benefits to citizens/service users):</b>          |   |                                     |
| <i>To update the corporate parenting board on the independent visitor service</i> |   |                                     |
| <b>Recommendation:</b>  |   |                                     |
| <b>1</b>  | <i>For service to continue.</i>                             |                                     |

**1 Reasons for recommendations**

1.1

**2 Background (including outcomes of consultation)**

2.1 Invitation to provide information by Daniel Pridmore Contracts Officer. CGL is an independent charity with a national reach; delivering services for carers, children and families, health and wellbeing, substance misuse and the criminal justice system they have a volunteer base of 1670. CGL have a network of 11 Independent Visitor services and provide the Independent Visitor Service for Nottingham City and Nottingham County Council.

2.2 CGL meet quarterly with the commissioning manager and provide quarterly monitoring reports.

**3 Other options considered in making recommendations**

3.1 None.

**4 Finance colleague comments (including implications and value for money/VAT)**

4.1 None.

**5 Legal and Procurement colleague comments (including risk management issues, and legal, Crime and Disorder Act and procurement implications)**

5.1 None.

**6 Strategic Assets & Property colleague comments (for decision relating to all property assets and associated infrastructure) (Area Committee reports only)**

6.1 None.

**7 Equality Impact Assessment (EIA)**

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

**8 List of background papers other than published works or those disclosing confidential or exempt information**

8.1 Appendix 1: CGL - Nottingham Independent Visitor Service

**9 Published documents referred to in compiling this report**

9.1 None.



## Change Grow Live - End of Year Report 2018-19 Nottingham City Council Independent Visitor Service

On March 1st 2019 Sova merged with Change Grow Live (CGL) to form a larger stronger more focussed service provider. Our mission at CGL is to help people change the direction of their lives and live life to its full potential. Our objective is to deliver services which improve the health and wellbeing of the young people we support helping them to achieve life affirming goals. CGL have over 53 projects across England and Wales attracting more than 2000 volunteers and in excess of 3500 staff. Through our service on behalf of Nottingham City Council in 2018-19 we supported 23 children and young people by providing the independent visitors; those children have enjoyed 137 separate trips, meals and adventures! We pride our service delivery on the passion for equality which drives our staff and volunteers.

### Quality Assurance

CGL are committed to delivering high quality, safe and cost effective services. In 2018-2019 CGL continued to operate under the following quality frameworks and approved provider standards;



### Your Independent Visitor Service



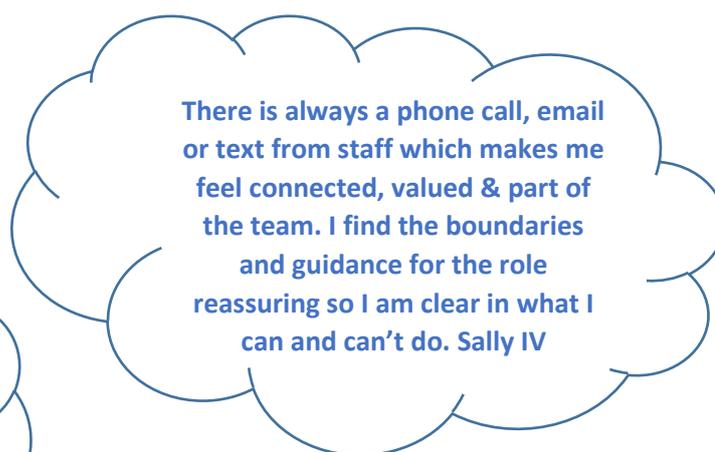
CGL are commissioned by Nottingham City Council to deliver their Independent Visitor Service.

Our practice is underpinned by the National Standards for the provision of Independent Visitors 2016. Positive stake holder partnerships are maintained by providing reports and meeting with commissioning managers quarterly to ensure close monitoring and review of the service.

We have built links with independent reviewing officers, social work area teams, fostering services and the Children In Care Council together with third sector organisations to ensure the service is accessible, transparent and independent.

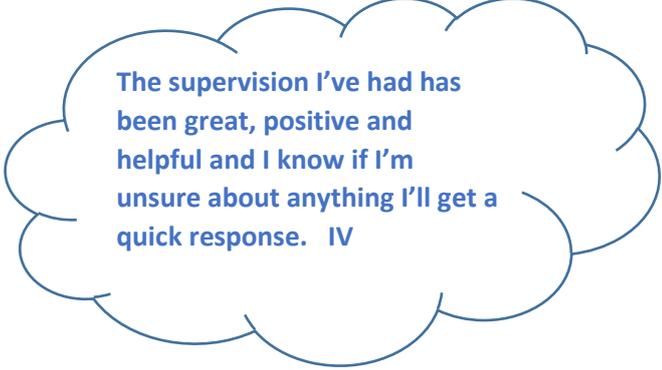
## Our Volunteers

Our model is to recruit, train, deploy and supervise volunteers. We are passionate about equality and create an inclusive environment where everyone feels welcome and valued. We want our volunteers to reflect the diverse communities of Nottingham City we encourage applications from all members of the community including those with previous experience of the challenges our young people may face. Existing volunteers continue to be our very best ambassadors and receive a Rolls Royce experience in terms of training, opportunities for development, support and supervision. Here is a sample of what our volunteers have to say:





The training was great. It gave a really good grounding into the care system, what the YP may be facing & things to look out for along the way. Primrose IV



The supervision I've had has been great, positive and helpful and I know if I'm unsure about anything I'll get a quick response. IV

We currently have 47 volunteers involved in our service either already active or in progress, we are delighted to boast a husband and wife team reinforcing the caring, nurturing nature of our volunteer profile. With such strength within our team we are able to offer a unique service to your looked after children; Our staff team of two are tenacious in recruitment linking with a hub within CGL projects nationwide to find support for young people. Networking is essential on a local level too, drawing interest and developing relationships with agencies such as The Fire Service at community events, Derby Radio, Nottingham Trent University, Nottingham Further Education, Sheffield Hallam University, Derby University, Churches and other third sector groups.

Under CGL we adhere to a national volunteer training programme ensuring all are embedded into the organisation, sharing our values and committed to our service. The recruitment process nationally and locally is:

- Initial interest / application and interview
- References & DBS
- Classroom training including core elements and project specific information.
- Safeguarding ELearning
- Completion of assessment pack
- Pre-start discussion



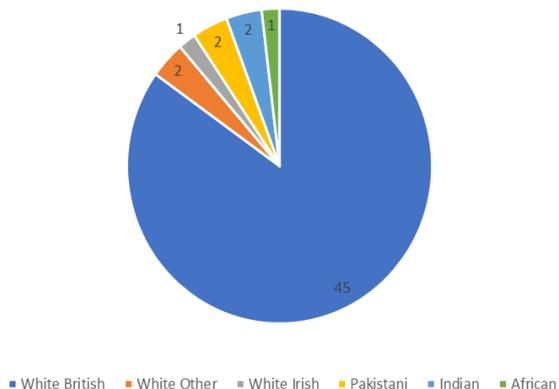
• **In 2018-19 We Delivered:**

I get guidance and feedback from the staff team, frequent meet-ups to share experiences with other volunteers and plenty of training opportunities. Sue IV

Expenses are paid quickly, I know the contact sheets notes are read, digested, feedback given & advice offered if necessary. Alison IV

- 8 training sessions for volunteers
- 6 volunteer support group meetings.
- 4 tailored and informative Newsletters
- 2 minimum supervisions for each volunteer
- National Celebration event for former Sova & Volunteers

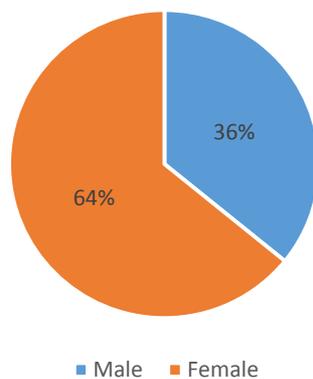
Volunteers by Ethnicity Percentage



Age of V



Volunteers Gender profile



I enjoy having something different to do  
Aged 16

## The Independent Visitor Service

Independent Visitors are heroes to our young people. They provide on-going tailored companionship, role models offering a long term supportive relationship. They meet with the child/young person on a monthly basis and engage in activities they both enjoy with a view to raising the self-esteem of the child/young person and help their confidence to grow.



## Where we have fun!

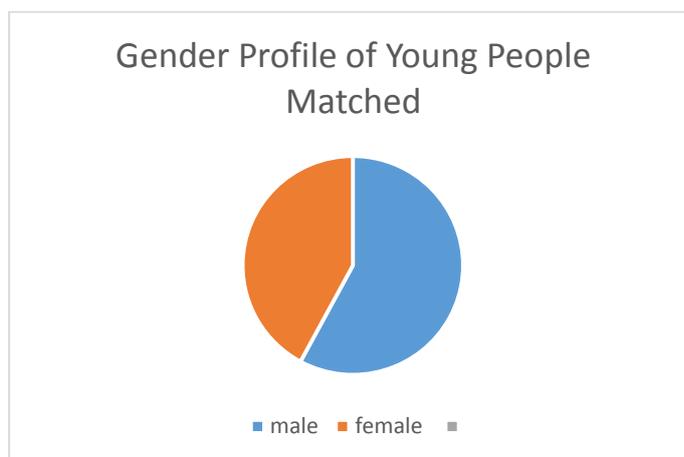
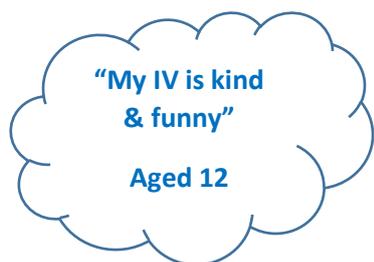
A selection of activities this year include:

Playing football, Cadbury's World, Alton Towers, The Light Cinema, Playing Pool, Cinema , Ashover Rock Wooley Moor Show, Barton & Willington Marina - mug painting, Recording studios, Dove dale, Pic-nics, Walking, Canal side Heritage Centre, National Videogame Museum, Tutbury Castle Ghost Walk, Lakeside Theatre Nottingham Arts Centre, City Farm , Eating out , Rugby matches, Football Matches, Horse riding, Go Karting, Window Shopping, Comic Com, Exhibitions, City walks, Crazy golf, Sledging,



## Young People Matched with Independent visitors

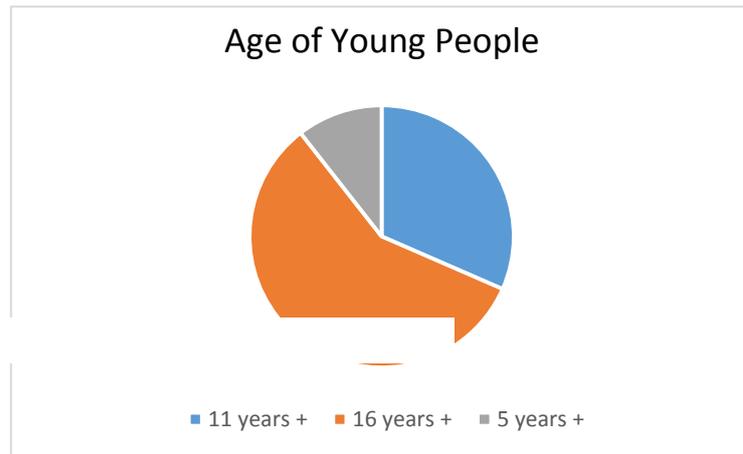
We end 2018-19 with 23 young people matched and 12 on our waiting list.



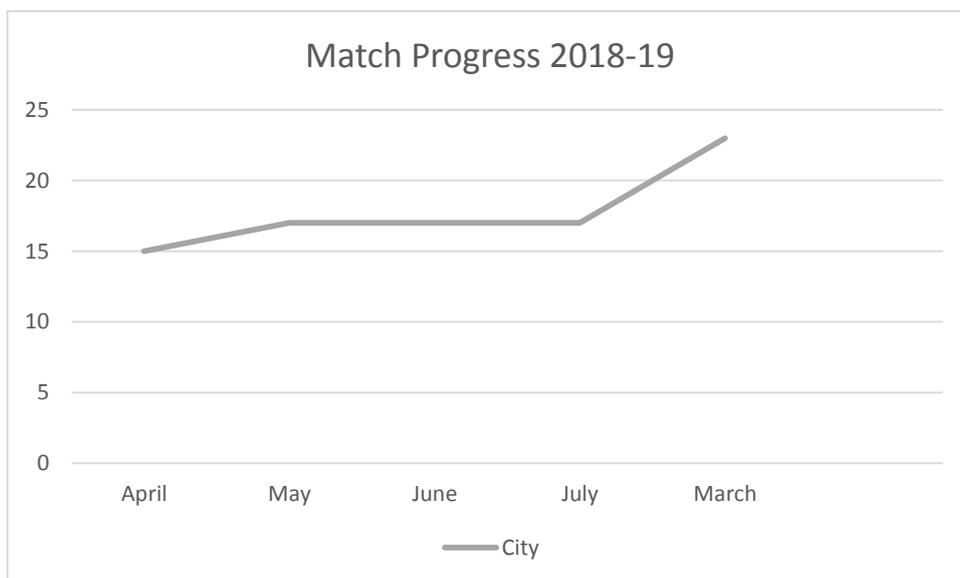


“We have fun, we talk about 101 things!” Aged 14

My IV is really funny I like everything about him. Aged 14

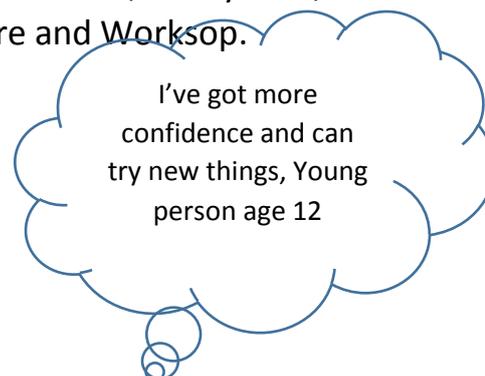
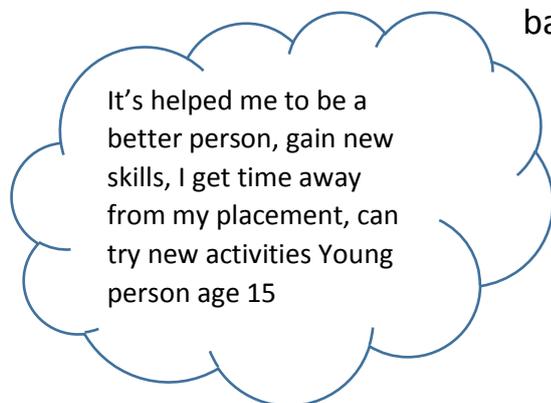


**2018-19** We received 24 new referrals on behalf of young people and completed initial assessments for all. We made 15 new matches and support 23 matches overall exceeding the target by 16% for Nottingham City. The average waiting time from referral to match in 2018-19 was 63 days.





We provide case studies at quarterly meetings to illustrate the quality of the matches made and the enjoyment the young people have. Distance is no barrier to our service, we have young people matched in Newark, Derbyshire, Lincolnshire and Worksop.



### Matters beyond our control impacting waiting times

- Referrals made but risk assessments are missing or incomplete
- Referrals made but young person changes their mind about wanting to engage in the service at match point.
- Young people are moved and the service is not notified of the change of address
- Work load of social worker causes delays in responses for additional information
- Difficulties contacting foster carers & coordinating availability of all parties for initial assessment
- Difficulties coordinating availability of all parties to identify match date;
- Young person having complex needs requiring specialist support rather than a volunteer
- Volunteers identified but awaiting paperwork to fully progress e.g. references or DBS
- Capacity of staff to provide training days to coincide with availability of volunteers who are frequently working full time.

### Solutions

- Rolling programme of recruitment offering weekends and weekdays, working in partnership with other CGL providers;
- Ensuring all available means of communication are captured mobile phone, land line, email addresses for carers, social workers and volunteers;
- Staff work flexibly to accommodate needs of the young person, volunteers and foster carers



## What do our Independent visitors say?

Over the last twelve months X and I have enjoyed spending time together and she has grown in confidence and visited new places. When I arrive at her foster carer's she is always ready and waiting with a big smile. We usually have a drink and snack and chat about which places she has enjoyed the most. Visiting Santa on the narrow boat comes out pretty high!

I've thought for very many years that looked after children and young people get a raw deal (having taught for 35 years) so when I retired I began as an IV. A few things have changed for the better since then (9 years ago) but I still think it's really important for X (and others) to have a person they trust who is independent from the foster carers. IV

Being an IV means that I might just be doing someone else some good during my life, it means that I can invest the experiences I have from my past, and to some degree feel as though my own time being brought up in what would now be classed as an institution, is now being reinvested to positive effect. I have grown to appreciate how lonely it must be inside for a YP who does not have a guaranteed place to live, and could be asked to leave at any moment, which birth parents cannot just do, it must feel like being on permanent trial. We have had some good times doing stuff – walking along the Trent, Wall Climbing, Cycling, Mini Golf and the Cinema. YP is not at all demanding and just as happy to operate on a low budget as to have money spent, this is important to me because I see this as a signal that we both turn up because we get on, and not because there is something in it for us. To some degree, because as an IV I operate under choice, the relationship between YP and IV is real, and not in place because the system places us there, so as an IV, I do feel as though I can speak to, and respond to the YP in a more straight forward manner than those who have a greater level of responsibility, I hope bring some normalised adult interaction to the world of the YP. IV



## Conclusion

**“When everything is going well for the young person it’s good to just enjoy our time together, talk about things, building trust. If things go very wrong for the young person that is when an IV can be the one bit of stability in their life” Belinda IV**

**2018-19** has been a successful year for the Independent Visitor Service. Participation is at the heart of what we do,

- We encourage young people to participate in the National Independent Visitor Service event in London.
- Young people were contacted a minimum of three times per year by staff to seek their views on the service in addition to a written invitation to participate in “feedback fortnight” with a prize drawer incentive for responding to our survey – to ensure we capture the voice of young people and are able to adapt our service to meet their needs.
- Young people are invited to our volunteer training to provide guidance and advice to future independent visitors;
- We welcome senior care leavers from all local authorities to our volunteer team willing to share their own care experience for the benefit of all.
- We visit the Children in Care council to obtain feedback into our leaflets and publications to encourage others to take part and recruit volunteers.
- We have invited all young people to get involved in our interview panels when recruiting new volunteers.

CGL will continue to work closely with stake holders to ensure delivery to the highest possible standard of service as they continue to exceed expectations of commissioners.





## Corporate Parenting Board

### Reporting Schedule: Forward Planner

#### 2020 - 2021

| Report<br>(Corresponding Strategic Priority Statement)   | Report Lead  | Draft Report submitted for Advice | Draft Report Submitted for Departmental Sign-off | Draft Report Submitted to Constitutional Services | Chair's Briefing | Final Report Submitted to Constitutional Services | Corporate Parenting Board |
|--|--|-----------------------------------|--|---|------------------|---|---------------------------|
| <ul style="list-style-type: none"> <li>▪ Effective Board – remit / items for the year etc.</li> <li>▪ Round Table Exercise – Health of CIC</li> <li>▪ What Is Corporate Parenting? (Presentation)</li> <li>▪ Children in Care Council (Verbal Update)</li> <li>▪ Report Forward Planner</li> </ul>               | <ul style="list-style-type: none"> <li>▪ Sophie Russell?</li> <li>▪ Kathryn Higgins / Matthew Jenkins TBC</li> <li>▪ Sophie Russell / Clive Chambers</li> <li>▪ Jon Rea</li> <li>▪ Cllr Barnard</li> </ul> |                                   |  |   |                  |   | June                      |
| <ul style="list-style-type: none"> <li>▪ Care Leavers' Service Annual Report</li> <li>▪ Independent Reviewing Officer Service Annual Report</li> <li>▪ CiC Performance Report (Q3/Q4 19/20)</li> <li>▪ Children in Care Council (Verbal Update)</li> <li>▪ Report Forward Planner</li> </ul>                     | <ul style="list-style-type: none"> <li>▪ Colin Brooks</li> <li>▪ John Matravers</li> <li>▪ Clive Chambers</li> <li>▪ Jon Rea</li> <li>▪ Cllr Barnard</li> </ul>  |                                   |  |   |                  |   | July                      |
| <ul style="list-style-type: none"> <li>▪ Pathway Planning / Transitions</li> <li>▪ Fostering and Adoption Panel</li> <li>▪ Adoption and Permanency</li> <li>▪ Round Table Exercise – Educational Attainment CIC</li> <li>▪ Children in Care Council (Verbal Update)</li> <li>▪ Report Forward Planner</li> </ul> | <ul style="list-style-type: none"> <li>▪ TBC</li> <li>▪ Audrey Taylor</li> <li>▪ Audrey Taylor</li> <li>▪ Jasmin Howell</li> <li>▪ Jon Rea</li> <li>▪ Cllr Barnard</li> </ul>                              |                                   |  |   |                  |   | September                 |

| <b>Report<br/>(Corresponding Strategic Priority<br/>Statement)</b>   | <b>Report Lead</b>  | <b>Draft Report<br/>submitted for<br/>Advice</b> | <b>Draft Report<br/>Submitted for<br/>Departmental<br/>Sign-off</b> | <b>Draft Report<br/>Submitted to<br/>Constitutional<br/>Services</b> | <b>Chair's Briefing</b> | <b>Final Report<br/>Submitted to<br/>Constitutional<br/>Services</b> | <b>Corporate<br/>Parenting Board</b> |
|--|---|--|---|--|-------------------------|--|--------------------------------------|
| <ul style="list-style-type: none"> <li>▪ Mind Of My Own Report</li> <li>▪ HYS Survey Feedback</li> <li>▪ Performance Report (Q1 and Q2 2021/22)</li> <li>▪ Round Table Exercise – Voice</li> <li>▪ Children in Care Council (Verbal Update)</li> <li>▪ Report Forward Planner</li> </ul>   | <ul style="list-style-type: none"> <li>▪ TBC</li> <li>▪ Jon Rea</li> <li>▪ Clive Chambers</li> <li>▪ TBC</li> <li>▪ Jon Rea</li> <li>▪ Cllr Barnard</li> </ul>  |  |   |  |                         |  | <b>November</b>                      |
| <ul style="list-style-type: none"> <li>▪ IV Service Report</li> <li>▪ Advocacy Service Report</li> <li>▪ Foster Carer Recruitment and Retention</li> <li>▪ Reducing Offending Behaviour</li> <li>▪ Round Table Exercise - Community</li> <li>▪ Children in Care Council (Verbal Update)</li> <li>▪ Report Forward Planner</li> </ul> | <ul style="list-style-type: none"> <li>▪ CGL</li> <li>▪ Children's Society</li> <li>▪ Audrey Taylor</li> <li>▪ Sam Flint / Natalie Pink</li> <li>▪ Sam Flint / Kay Sutt</li> <li>▪ Jon Rea</li> <li>▪ Cllr Barnard</li> </ul> |  |   |  |                         |  | <b>January</b>                       |
| <ul style="list-style-type: none"> <li>▪ Year In Review</li> <li>▪ Children in Care and Care Leavers Strategy Review</li> <li>▪ Complaints Service Report</li> <li>▪ Children in Care Council (Verbal Update)</li> <li>▪ Report Forward Planner</li> </ul>   | <ul style="list-style-type: none"> <li>▪ Sophie Russell?</li> <li>▪ Clive Chambers</li> <li>▪ Patrick Skeete</li> <li>▪ Jon Rea</li> <li>▪ Cllr Barnard</li> </ul>  |  |   |  |                         |  | <b>March</b>                         |

## **ATTENTION: IMPORTANT NOTE ON REPORT SUBMISSION**

All reports from City Council staff for presentation to the Board must be produced and submitted through the corporate report management system, here: <http://gossweb.nottinghamcity.gov.uk/nccextranet/index.aspx?articleid=10263>.

When submitting a report for advice, you will be prompted to select reviewers. You should select the following reviewers:

- Sophie Russell
- Clive Chambers
- Jordan Whatman

When submitting a report for departmental sign-off, you should select the following reviewer:

- Helen Blackman

External partners should submit reports via email to [jordan.whatman@nottinghamcity.gov.uk](mailto:jordan.whatman@nottinghamcity.gov.uk), no later than 10:00am on the date stated.

Please note that additional reports may be added to the schedule by request of the Chair or other Board Members. Reports May also be subject to schedule changes.

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