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# **Corporate Parenting Board**

Date:

Monday, 15 July 2019

Time:

Venue:

3.00 pm Committee Room 2, County Hall, Dorchester, DT1 1XJ

# Membership: (Quorum 3)

Richard Biggs, Toni Coombs, Ryan Holloway, Stella Jones, Andrew Kerby, Cathy Lugg, Andrew Parry and Elaine Okopski

**Chief Executive:** Matt Prosser, South Walks House, South Walks Road, Dorchester, Dorset DT1 1UZ (Sat Nav DT1 1EE)

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# AGENDA

# 1 APOLOGIES

To receive any apologies for absence.

# 2 MINUTES

To confirm the minutes of the meeting held on 11 June 2019.

# 3 DECLARATIONS OF INTEREST

To receive any declarations of interest.

# 4 PUBLIC PARTICIPATION

To receive questions or statements on the business of the Board from town and parish councils and members of the public.

5	LAC REDUCTION DISCUSSION PAPER	15 - 28
	To consider a report by the Executive Director of People – Children.	
6	CHILDREN'S PLACEMENTS - USE OF UNREGULATED PLACEMENTS - PROGRESS REPORT ON ACTION TAKEN	29 - 34
	To consider a report by the Executive Director of People – Children.	
7	LOOKED AFTER HEALTH BRIEFING UPDATE - ESCALATION OF PERFORMANCE OF INITIAL HEALTH ASSESSMENTS - QUARTER 4	35 - 38
	To receive a report from the Designated Nurse for Looked After Children.	
8	INITIAL HEALTH ASSESSMENTS	39 - 42
	To consider a report by the Executive Director of People – Children.	
9	PATHWAY PLANS	43 - 46

To consider a report by the Executive Director of People – Children.

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#### 10 CHILDREN WHO ARE DISABLED

To consider a report by the Executive Director of People – Children.

#### 11 URGENT ITEMS

To consider any items of business which the Chairman has had prior notification and considers to be urgent pursuant to section 100B (4) (b) of the Local Government Act 1972. The reason for the urgency shall be recorded in the minutes.

#### 12 EXEMPT BUSINESS

To move the exclusion of the press and the public for the following items in view of the likely disclosure of exempt information within the meaning of paragraphs 1 and 2 of schedule 12A to the local Government Act 1972 (as amended).

The public and the press will be asked to leave the meeting whilst the item of business is considered.

# 13CLICC - LIST OF BROKEN PROMISES, CHALLENGE CARDS AND55 - 68UPDATE FROM PARTICIPATION PEOPLE55 - 68

To receive a list of the broken promises from CLICC and to consider Challenge Cards and receive an update from Participation People. This page is intentionally left blank

# Public Document Pack Agenda Item 2



# **CORPORATE PARENTING BOARD**

# MINUTES OF MEETING HELD ON TUESDAY 11 JUNE 2019

**Present:** Cllrs Toni Coombs (Chairman), Richard Biggs (Vice-Chairman), Ryan Holloway, Andrew Kerby, Andrew Parry and Elaine Okopski

Apologies: Cllrs Stella Jones and Cathy Lugg

## Officers present (for all or part of the meeting):

Antonia Dixey (CEO Participation People), Lynn Giles (Children's Services Manager, Dorset Advocacy and Independent Visitors Service), Ann Haigh (Participation Worker, Participation People), Madeleine Hall (Corporate Parenting Officer), Tanya Hamilton-Fletcher (Service Manager Care & Support), Sarah Parker (Executive Director of People - Children), Claire Shiels (Assistant Director for Commisioning and Partnerships), Mary Taylor (Acting Assistant Director for Care and Protection), Tim Wells (Senior Manager Placements & Resources) and Liz Eaton (Democratic Services Officer)

## 1. Election of Chairman

That Toni Coombs be elected Chairman for the year 2019/20.

#### 2. Appointment of Vice-Chairman

That Richard Biggs be appointed Vice-Chairman for the year 2019/2020.

#### 3. **Declaration of Interest**

No declarations of disclosable pecuniary interests were made at the meeting.

#### 4. Terms of Reference

The Terms of Reference were noted.

The Chairman understood that new Terms of Reference were being drafted and would be considered at the next meeting of the Board.

One member asked for the draft Terms of Reference to be circulated so that members of the Board could make comment.

#### **Resolved**

1. That Officers circulate the draft Terms of Reference to members of the Board for their comment.

2. That the new Terms of Reference be considered at the next meeting of the Board on the 15 July 2019.

# 5. **Children's Placements - Use of Unregulated Placements**

The Corporate Parenting Board considered a report by the Executive Director People – Children on Children's Placements – Use of Unregulated Placements.

The Senior Manager Placements and Resources explained that unregulated placements were temporary in nature. The challenge had been ending the placements and moving young people to regulated settings. Dorset was not unique and the picture was improving, it was hoped that in about a week's time the authority would only have 3 young people in unregulated placements, previously there had been 9. There were, however, 2 young people for whom it was extremely difficult to find a suitable placement.

An unregulated placement was defined by government as caravan type accommodation or bed and breakfast accommodation, Dorset avoided using bed and breakfast, or holiday rental cottage accommodation. On occasion an agency may be contacted to provide a placement and staff.

The Executive Director for People – Children explained that on occasion there would be a placement break down and a child had to be placed somewhere very quickly the best option would be to place them in a placement with Dorset staff.

The Senior Manager Placements and Resources confirmed the Council had acquired the Caretakers Bungalow at Colehill First School which had been refurbished and redecorated and would soon be ready for use as emergency accommodation within Dorset. The Council was also inviting foster carers to become retained foster carers to provide short term accommodation. The Executive Director for People – Children mentioned not all unregulated placements were in county. Two placements were, at present, in Somerset. Officers were working closely with Somerset County Council to look at what could be achieved around placement providers and sharing.

The Executive Director for People – Children confirmed they were currently developing re-establishing a children's home within the county to hopefully reduce the need to use unregulated placements.

The Senior Manager Placements and Resources explained one young person had a number of placements which had broken down and they had been placed in an unregulated placement and had been there for 8 months now and want to stay where they were. They had a good relationship with the staff and they wanted to stay where they were, any change would be extremely disruptive and harmful to them at present. A review plan of unregulated placements was regularly undertaken and officers visited weekly. They were constantly reviewing the search to ensure the best welfare of the child.

One member referred to one of the case studies in the report where the young person had 22 placements to date and asked over what period of time were the placements.

Officers explained in that particular case several arrangements had broken down over a period of time.

The Chairman asked how long the young person had been in the care system and how many moves had taken place. Officers mentioned the Psychologists had advised the young person should not be moved and that reviews were undertaken every 4 weeks. The young person had provided a pen picture of what he would like.

One member, although very pleased to hear the bungalow would be used for emergency placements was concerned about the quality of the accommodation inside the bungalow and whether it was safe.

The Chairman mentioned that whatever the authority did had to be right for that young person and Corporate Parenting Board had another remit, not only the young person's safety, but also the reputation and safety of the Council. The Executive Director for People – Children commented that Ofsted at the annual conversation held during March 2019 reported they were pleased with Dorset's transparency regarding placements.

The Corporate Parenting Officer suggested she and one of the members of the Board visit the caretaker's bungalow to ensure the accommodation was in a good condition.

Councillors Andrew Parry, Toni Coombs and Richard Biggs all agreed they would like to visit the bungalow.

The Executive Director for People – Children explained the authority were looking into establishing 3 residential homes located in close geographical area to one another as it would be more sustainable, and also looking at one of the authority's farms where therapeutic treatment could be provided.

One member commented that he had visited Shropshire County Council's farmhouse, the location was quite isolated and resulted in low level absconding. He commented that the authority needed to have a much more open conversation with Ofsted regarding unregulated placements.

Officers confirmed they would ensure that Ofsted were regularly updated regarding the authority's use of unregulated placements. This would include the numbers, the duration, those ended and those commenced.

The Chairman commented that if a young person was in an unregulated placement for 300 days, and if that placement was deemed to be suitable and it was working, what could be done to make it a regulated placement.

Officers explained the challenge was that there were some young people who were placed in unregulated placements because they abscond and take very risky actions. The current providers of regulated placements were not prepared to offer accommodation to these young people, which left no alternative other than to place them in unregulated placements. Ultimately the authority required more foster carers and its own residential placement.

The Children's Services Manager, Dorset Advocacy and Independent Visitors Service asked if it would be possible to have the names of the young people to ensure they were being provided with Advocacy. Officers agreed to let her have the names.

The Chairman referred to page 46 of the report and asked why the EHCP had been declined and what could be done to ensure this was not repeated. Officers informed the Board there had been a request for an EHCP unfortunately the request from school was not supportive and school felt they could manage the young person in school. Mum appealed and officers were in dialogue with SEN as they felt the young person should have an EHCP assessment.

The Executive Director for People – Children thought the majority of Dorset schools were quite liberal with the requests for EHCP's.

One member referred to the Care Plan and asked whether that was on course to happen in July 2019. Officers commented that unfortunately it was not as the builder had let them down. One officer confirmed he would look into the builders the Council used to see if they could assist with the work.

The Chief Executive of Participation People thought it might be a good idea for Care Leavers (and Children) in Care Council (CLICC) to start a campaign regarding placing young people in unregulated settings and felt the young person attending the Board meeting might like to start the campaign. The Board thought that would be a good idea if she was happy to do so.

The Chairman asked for a progress report on action taken at the next meeting of the Board.

# <u>Resolved</u>

1. That the Corporate Parenting Officer arrange a visit to the caretaker's bungalow at Colehill School with Councillors Richard Biggs, Toni Coombs and Andrew Parry.

2. That officers regularly update Ofsted regarding the authority's use of unregulated placements. This would include the numbers, the duration, those ended and those commenced.

3. That officers provide the Children's Services Manager, Dorset Advocacy and Independent Visitors Service with the names of the young people in unregulated placements to ensure they were being provided with Advocacy.

4. That the Senior Manager Placements and Resources contact the builders used by Dorset Council to see if they could assist with building work.

5. That the CLICC start a campaign about placing young people in unregulated settings.

6. That officers provide a progress report on action taken at the next meeting of the Board on 15 July 2019.

# 6. **Children in Care Council Update**

The Chief Executive of Participation People introduced a member of the Care Leavers (and Children) in Care Council (CLICC) who introduced herself and mentioned she would circulated dates for the diary of activities for 2019 which she hoped members of the Board would be able to attend.

She informed the Board of the activities CLICC had been involved in; one of which was face mask painting and African drumming. The awards ceremony was held in October. In May they had visited London and attended Children's Rights and talked to a poet who had been in care and discussed his experiences.

The Chairman mentioned she thought that everyone coming into Dorset was told about their rights. CLICC thought it might be easier if they received a sheet with their rights written on.

The Chief Executive Participation People confirmed during the past year they had produced a Looked After Children (LAC) Pack which was given to all young people coming into care. She referred to the annual satisfaction survey, and how they had spoken with young people about advocacy and how to complain and to the Board meeting held in February 2019 where CLICC had discussed being called LAC. The problems they had with travel arrangements and, as a result, she had been working with officers to resolve some of the issues. CLICC had produced a magazine and moving forward they would produce homework for CPB members to be given at every meeting of the Board. Training sessions on "What does it mean to be a child in care?" were being held during July, August and October which CLICC would like Board members to sign up to. An email would be circulated to members for them to respond.

The Corporate Parenting Officer discussed how to engage members who were not on CPB and suggested that CLICC offer some training days and asked CPB members to encourage other members to attend.

The CLICC member mentioned the Happy Dorset video and what would make Dorset a better place to live. The Chief Executive Participation People confirmed the aim was to inspire Corporate Parents to remind them of what it was like to be a young person, she would email Board members a link to the video.

Looking to the future CLICC informed the Board they would be performing Shrek the musical to be held at Stratton Village Hall on 31 July 2019, they were having a day of exercise and a CLICC logistic operation and problem solving afternoon. How to contact a social worker when they were on holiday and could not speak with anyone was proving a real problem as was broken promises. A day out for CLICC was to be arranged, probably to a theme park.

The Chairman referred to broken promises and changes of staff, it was not the first time she had heard this.

The Executive Director for People – Children mentioned the challenge was that social workers wanted to do their best but things were not easily followed through.

One member asked if the Board could receive a list of the broken promises, for example "We did promise an advocate and that was not forthcoming."

The CLICC representative gave an example regarding her social worker and that it took her about 2 weeks to get back to her when she requests to see her family. She had mentioned her birthday but hadn't heard back from her social worker. Officers confirmed that someone would get back to her regarding visiting her family and that the social worker would be able to make those decisions, there were other requests that would need to go to the team manager for consideration.

One member asked the young person what happened if she could not get hold of her social worker to make a complaint and who was it easier to get hold of her advocate or her social worker and how did she communicate with her social worker. The young person confirmed her advocate helped her a great deal and it was easier for her to get hold of her advocate. She did not have a direct way of communicating with her social worker.

Officers confirmed young people should have an email address to contact their social worker.

One member thought there must be better ways of communicating with the social worker even out of the office. He mentioned the timescale of 2 weeks for a social worker to get back to the young people was unacceptable and that 3 days turnaround seemed more reasonable.

The Executive Director for People – Children thought it would be interesting to hear what service standards young people would like.

The Chief Executive of Participation People confirmed that 3 days was what they were asking for.

# <u>Resolved</u>

1. That CLICC provide training days for members of the Board and they encourage members not on CPB to attend.

2. That the Chief Executive Participation People email a link to the video Happy Dorset.

3. That CLICC provide Board members with a list of broken promises.

4. That officers provide young people with an email address to contact their social worker and ensure communication between the Social Worker and young people improves.

# 7. Children in Care and Care Leavers Performance Overview

The Corporate Parenting Board considered a report by the Executive Director People – Children on Children in Care and Care Leavers Performance Overview. The Assistant Director for Commissioning and Partnerships informed the Board the report provided an overview of children in care and care leavers that looked back over the last 6 months and compared Dorset's performance against other councils nationally as well as with its statistical neighbours, which were councils that had similar characteristics to Dorset. As well as providing an overview of the numbers of children in care, new entries to care and children who had left care, the report showed different legal status of young people with a high proportion accommodated under Section 20. 10% of children in care had a disability and 86% of children had their review completed on time.

On page 30 the graphs showed the movement within the children in care cohort and looked at new children in care. 80 new children had come into care in the last 6 months and 93 had left care which included those children living in Christchurch. 16% of children left care due to adoption. Special Guardianship was low.

One member asked what Special Guardianship was and officers explained the Special Guardianship Court make an order when a child cannot live with their parents but can live with a member of the family or a friend. It was a legal order and people were assessed to ensure they were suitable to look after the child.

Page 31 showed that 70% of children were living in foster care, a reduction from 76%. Almost half of Dorset's children in care were living in the Council's own provision. It was explained that some Children Looked After (CLA) were placed out of county and in some cases that would be Bournemouth or Poole and others would be further away. Officers wanted to avoid too many placement moves and work was being undertaken on placement stability.

The Chairman thought it would be useful to have unregulated placements shown in the table.

One member asked why the information showed very low numbers of children being place for adoption. The Assistant Director for Commissioning and Partnerships agreed to investigate the accuracy of the data.

The CLICC representative asked why so many children were placed in Dorset for 2 or more years. Officers informed her that was because for some children staying in care it was the right thing to do and for various reasons being in a long-term foster placement was also the right thing, some young people would stay in care until they could live independently.

The Chairman asked if officers were receiving reports of those children not being seen why were there reports for 12-18 weeks. Officers informed the Board sometimes there was a time lag between someone inputting the system and the visit. This was being addressed. The Chairman commented that if there were outcomes of the visit to be written up and they were not being written up we were failing the young person. It was noted that the number of missing placements episodes had increased and the Board discussed performance relating to Return to Home interviews. These needed to be completed within 72 hours. Performance needed to be improved both in terms of recording practice and timeliness. Officers explained that multiple teams were undertaking these and that the process required improvement and best practice was that these interviews should be carried out by someone independent to the child's care plan. Officers would consider a range of options to make the improvements.

There were 221 young people leaving care. The Chairman raised concern at the number of young people who were not in education, employment or training (NEET) and mentioned the possibility of apprenticeships for young people.

Officers confirmed that they were looking at apprenticeship schemes for LAC young carers and there had been a commitment this would be going forward for Dorset young people from the Chief Executive. Local businesses and the Chamber of Commerce would need to be involved.

The Dorset Parent Carer Council member mentioned she could not see any data on those children with EHCP and asked for that to be provided in future reports.

The Assistant Director for Commissioning and Partnerships asked the Board when they would like to see further reports. The Board and Chairman agreed the report should be submitted every quarter.

The Children's Services Manager, Dorset Advocacy and Independent Visitors Service referred to page 34 and asked what constituted homeless, was it a period of days. The Assistant Director for Commissioning and Partnerships thought it would be useful to know if the authority was in touch with the young person concerned.

One member asked what was meant by other accommodation. The Assistant Director for Commissioning and Partnerships confirmed that in some cases this was a recording issue, with social workers not clear about how to categorise some forms of accommodation. For example, Dorset no longer had Foyer accommodation, but it was common for social workers to use that category to describe supported accommodation.

One member mentioned that the previous authority had looked into obtaining Council Tax exemption for Care Leavers but unfortunately that could not be agreed with the District Councils. He asked that officers look into the feasibility of obtaining Council Tax exemption for Care Leavers. The Assistant Director for Commissioning and Partnerships confirmed she would look into how this was undertaken in other areas and work with others to develop a proposal for Care Leavers in Dorset.

The Chief Executive of Participation People asked if they could work with officers on the language used in reports to make them youth proof.

The Executive Director People – Children asked when producing performance reports for the next quarter comparisons with the previous quarter's performance be included.

The Corporate Parenting Officer enquired of the Chairman whether the Board meeting should be a public meeting. The Chairman felt the intention was to be as open and transparent as possible although there would be some areas of the Board meeting which would go into closed session for the protection of young people.

The Chief Executive of Participation People considered that from their perspective it would be a barrier as young people would be nervous if members of the public were present. The Chairman explained that if young people were attending the meeting that would be in closed session and not open to the general public.

## <u>Resolved</u>

1. That unregulated placements be shown in the table in future.

2. That data relating to the number of children with an EHCP be provided in future reports.

3. That future reports be considered by the Board every quarter.

4. That the Assistant Director for Commissioning and Partnerships develop a proposal for Council Tax exemption for Dorset Care Leavers.

5. That future performance reports include comparison with previous quarters.

6. That all meetings of the Board be open to the public although some areas of the Board meeting would go into closed session for the protection of young people.

# 8. Initial Health Assessments

#### <u>Resolved</u>

That this item be deferred until the next meeting of the Board on the 15 July 2019.

#### 9. Update Report IRO Service - Annual Work Programme for April 2018 -March 2019

#### Resolved

That this item be deferred until the next meeting of the Board on 15 July 2019.

# 10. Pathway Plans

#### **Resolved**

That this item be deferred until the next meeting of the Board on 15 July 2019.

#### 11. Children Who are Disabled

#### **Resolved**

That this item be deferred until the next meeting of the Board on 15 July 2019.

Duration of meeting: 3.00 - 5.35 pm

# Chairman

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Agenda Item 5 **Corporate Parenting Board** 

Date of Meeting:	15 July 2019
Lead Member:	Cllr Andrew Parry – Lead Member for Children, Education and Early Help
Lead Officer:	Sarah Parker – Executive Director for People - Children

Executive Summary: This paper reviews current research on the rise in numbers of looked after children in England and Wales, and the differential rates of increase with the two countries. It also reviews some evidence about possible strategies to reduce the number of looked after children.

Equalities Impact Assessment: NA

Budget: NA

**Risk Assessment:** 

Having considered the risks associated with this decision, the level of risk has been identified as: Current Risk: LOW **Residual Risk: LOW** 

Other Implications:

Recommendation: The views of the board are sought to develop a strategy to reduce the number of children in care.

Reason for Recommendation: This is a discussion paper

Appendices: NA

Background Papers: Links are contained within the report

**Officer Contact** Name: Stuart Riddle Tel: 01305-225539

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#### WHY DO WE NEED A LAC REDUCTION STRATEGY?

#### The case for reducing the number of children in care

There are several reasons why it is important to have a strategy which focuses explicitly on the need to reduce the size of the population of children in care in Dorset. The <u>What Works</u> <u>Centre for Children's Social Care</u> summarises these as:

• Human rights - the principles of the United Nations Convention on the Rights of the Child

(UNCRC) 1989 and the Children's Act (UK, 1989), both of which emphasise the importance of a child being cared for by their parents

• Outcomes - Care-experienced individuals experience a range of adverse outcomes across the

life-course compared to the general population, including higher rates of psychological disorders, poorer educational attainment and lower rates of employment (Ford et al., 2007, Evans et al., 2017, Trout et al., 2008).

• Use of public resources to best effect - Out-of-home placements incur significant costs, with an average annual spend per head of £29,000-£33,000 for foster care and £131,000 -£135,000 for residential care in England (National Audit Office, 2014).

In general, the continued focus on service improvement in corporate parenting in the first decades of the 21<sup>st</sup> century (Children (Leaving Care) Act, Quality Protects, Care Matters etc) has led to local authorities foregrounding positive news and success stories, while forgetting the lessons of the research conducted in the last two decades of the twentieth century:

- Outcomes and life chances for children in care are worse than for their peers
- Drift sets in quickly when children are placed in care after six months, episodes are likely to be prolonged
- Most children in care return to live with their families in adulthood

#### Local background and context

The number of children in care has risen <u>nationally</u> by 17% in the years 2010 to 2018. In <u>Dorset</u> the number of children in care has risen from 344 in 2013 to 427 in April 2019, peaking at over 500 in early 2017. Meanwhile the number of children per 10,000 who are in care has risen to 64 from 60 nationally between 2013 and 2019. The rate of increase in Dorset has outstripped the national rise – rising from 44.4 per 10,000 in 2013 to 62.7 in April 2019. In addition, Dorset's rate per 10,000 has gone from being lower than south west authorities and statistical neighbours to exceeding both.

In Dorset in 2018, a total of 650 children were looked after during the year, with 170 starting to be looked after during the year, and 202 ceasing to be looked after. Although this is superficially encouraging, many of the young people who ceased to be looked after were

transitioning to being care leavers at 18. 38.7% moved into independent living or adult settings, were determined to be over 18 following an age assessment, or ceased to be looked after "by any other means". In April 2019, 63 young people were aged 17.

The only age bands where the percentage of leavers exceeded starters were 1-4 year olds and 16+. In terms of active effort to help children leave the care system, 34.8% of children who ceased to be looked after were adopted or became subject to a special guardianship order or a residence order. The adoption rate has finally matched the national figure, while the special guardianship rate exceeds the national rate. A lower percentage of children return to live with their parents (24.3%) than the national rate (32.7%).

44 children became subject to a care order, and applications were made in respect of 107 children. 70% of children who had been looked after for at least 2.5 years had been in the same placement for 2 years. 7% of children had had 3 placements or more. It would be important to match the destination data to the age profile to get a better understanding of typical care pathways. In April 2019, roughly half of all children in care had entered the system in the last three years, and half had entered in 2016 or earlier. The proportion of children subject to a care order has increased from 37% in 2014 to 65% in 2018. The population of children in care has both increased, and has become more static.

The percentage of children who returned to live with parents and relatives in an unplanned way was 6.4%, and the number who ceased for any other reason was 21.8%. The latter number should be investigated as, although it is in line with national and regional figures, it represents a significant cohort whose exit from the system is not accurately explained. The two figures combined hint at the existence of a cohort of children whose care episode was avoidable.

In order to reduce the number of looked after children in a sustainable measure, it is important that the number of leavers exceeds the number of starters. In order to get an accurate view of sustainable reduction the number of leavers should be adjusted to remove those who leave by virtue of reaching the age of 18. Overstating reductions created by transitions are misleading for two reasons

- The reduction in numbers may not reflect the underlying rate of growth of the population
- Care leavers remain the responsibility of the local authority until the age of 25 they continue to receive a statutory service, and this requires budget.

In summary, one can suggest

- The care population of Dorset is increasingly long term and static there will be a basic cost and commitment of staff which will not change markedly in year. This could be modelled to predict future service need and spending patterns
- Permanence planning appears to ensure that leavers exceed starters in the 0-9 age bands, however there needs to be some reflection on the Trowler report and whether the pursuit of permanency at all costs brings children into the system who could be supported to live with their parents.

- Increasing the number and percentage of planned returns to parents and relatives could be a productive strategy
- Nearly a third of all starters are aged 10-15 and this rises to 44% when over 16s are added. This is an age group where early help, edge of care, and diversionary services could have an effect in avoiding care

#### How can we understand the rise in numbers?

The rise in the number of looked after children is often attributed to a rise in "need" or "demand". These categories are treated as objective and material, and linked causally to:

- Partner agency behaviour change a rise in referrals after the Baby P case
- Austerity a rise in poverty and a reduction in services available to the public
- Complexity the idea that more people have more complex problems

Where a subjective element it acknowledged, it is usually attributed to increased professional knowledge and awareness of issues such a sexual exploitation, trafficking, brain science or neuropsychology.

In <u>Care Proceedings in England: The Case for Clear Blue Water (2018)</u> Isabelle Trowler concluded:

"The study found that the difficulties facing families in court proceedings today were very similar to 5 years ago. There was little evidence in the records of greater *complexity* of need. Indeed, members of the review team who had been in practice for many years recognised the continuum of needs as the same as 20 years ago. Certainly all the families whose records we reviewed were in need of help from the State."

Further, she wrote:

"In the last few years there has been a much greater and deliberate national focus on: - the early protection of the child, a stronger focus on lower level parenting concerns as signs of cumulative neglect with a risk of future harm, a greater sense of urgency to act and secure permanence without delay, and the need to act on the side of safety. .... In line with these expectations, the study found an increasing emphasis on predicting what *might* happen, rather than what *has* happened, and a *lower* (but inconsistent) tolerance of diverse standards of parenting."

In other words, the rise in court applications in the authorities in the study related to a change in policy and culture, rather than a rise in complexity or need.

In 2018, the All Party Parliamentary Group for Children published <u>Storing up trouble - a</u> <u>postcode lottery of children's social care</u>. This report identified significant differences in the thresholds and offers between different local authorities.

The issue has been studied in more depth by the <u>Child Welfare Inequalities Project</u> at Coventry University. The research is ongoing but has identified significant differences in

intervention rates between local authorities. The report acknowledged a strong link between deprivation and adverse life chances (based on a 2015 <u>rapid evidence review</u> commissioned from them by the Joseph Rowntree Foundation), but showed a complex and non linear relationship between rates of intervention and deprivation.

The research project is informed by the discourse around rights and is agnostic about whether high or low rates of intervention are good outcomes in themselves. Two complex patterns of difference which were identified were:

- There is a steep gradient in the level of intervention with the most deprived families - 60% of CPP and LAC live in the most deprived 20% of neighbourhoods, while 40% live in more affluent 80% of neighbourhoods.
- The gradient of intervention is not uniform across local authorities. The project has called this the "inverse intervention law" for equivalent levels of deprivation a child in a more affluent local authority overall is more likely to be on a CPP or to be a looked after child. There are also differentials in how likely BME groups are to be LAC or CPP.

The most credible explanation of the inverse intervention law is the culture and norms within those more affluent local authority areas. Dorset certainly fits the model of an affluent area with pockets of deprivation, and this is even more the case when life chances measures are applied to an area like Weymouth rather than static deprivation indices.

# What works, and what doesn't work?

The What Works Centre for Children's Social Care is conducting ongoing research into how <u>numbers of children in care can be safely reduced</u>. The focus is on three outcomes:

- reduction of initial entry to care
- reduction of re-entry to care
- increase in post-care reunification.

<u>Telephone interviews</u> with a range of local authority leaders established some consensus about factors associated with reducing the need for care:

- early help
- financial investment
- supportive leadership
- constructive scrutiny
- organisational culture
- good partnerships

A <u>survey</u> of all local authorities indicated that behind the consensus lies some muddled thinking with little agreed definition of terms. One important finding was:

"Local authorities that had seen a reduction in care were more likely to report having instigated their approaches 5 to 10 years previously."

This indicates what may be a realistic timescale for sustained improvement.

"Respondents were asked to select the top three approaches that they thought were most effective in preventing the need for children to come into care in their local authority. The most popular was a whole system approach, selected by 81.7 per cent, followed by edge of care services (61.7 per cent), early help (56.7 per cent), family group conferences (43.3 per cent), parenting programmes (18.3 per cent), short break services (15 per cent) and 'other' services which did not fit the categories offered (20 per cent)."

There was little commonality in some of the terms used, and little evidence base for some of the approaches, including self-evaluation. The next stage for the What Works Centre programme will be the systematic review of particular interventions, starting with Signs of Safety and Family Group Conferences. Although this will be valuable, there is a danger that it feeds into a magic bullet mentality about intervention models – these are seductive, and the roll out of training for such approaches may be lucrative for providers, provide an impression of activity for leaders, and some respite from the day job for practitioners, without any major impact on the lives of citizens. The important learning may be from the Coventry study giving authorities some insight about how they should position themselves to influence local systemic issues.

Studies have considered the interaction between deprivation and service quality and the possible effect on LAC numbers. While the total number of children in care increased between 2012 and 2017, the What Works Centre for Children's Social Care <u>Exploratory</u> <u>Analysis of the rates of children looked after in English local authorities</u> analysed publicly available data to try and understand why the number and rate of children in care remained stable or declined in 40% of local authorities.

"Poverty in the local area was an important factor. .... Whilst studies to date have established a correlation at one point in time (e.g. Bywaters et al., 2018) this is the first UK study to identify that average changes in poverty over time are associated with average changes in numbers entering care. .... Equally, our findings indicate that numbers of children in care are not solely a function of wider economic factors. Better Ofsted ratings and participation in the Innovation programme, for example, were both associated with reducing numbers of children in care. Put simply, good services help local authorities reduce the number of children in care."

<u>Bywaters et al</u> looked at the relationship between deprivation, expenditure on children in need, and OFSTED judgements. The evidence was that good or outstanding judgements were more likely for LAs in low deprivation areas, but that in high deprivation areas, there was a significant correlation between the judgement and the level of expenditure per child.

# What has been tried in Dorset?

Between 2017 and 2019 our looked after population reduced by around 50 children, however much of this reduction was driven by care leaver transitions.

Several measures were undertaken wholly or in part to address the situation. These were mostly top down approaches and had little of limited success.

- Restructure specialist services for children 0-12 and 13 to 25 were created in order to progress good quality care and permanency planning. At this time a specialist assessment service (FAST) was established to improve the quality of parenting assessment within the PLO and legal proceedings with the service also offering parenting support work. The Family Focus service was also established at this time to work with families and prevent children coming into care however was later reassigned to support the newly established MASH service.
- The Reinvigorating Social Work programme the programme was brought in to improve relationship/strength based assessment, planning and outcomes. The training programme lasts for 10 weeks programme and has been made available to all social workers and Team Managers across the service
- Decision to Issue Panel it had been noted that the process of decision making in relation to family proceedings varied between districts and teams and as a result some applications were being made without sufficient pre proceedings work being undertaken. The panel is chaired by the Service Manager for Support and Protection and meets weekly to consider any new applications to court, scrutinise the standard of work completed, clarify the care plan to be submitted and either authorise the application or establish what alternative planning and action is needed
- Care Plans In Spring 2018 it was established that following the implementation of MOSAIC a substantial number of children did not have an up to date care plan (74%). A recovery programme was implemented to correct this and within 3 months had risen to over 90% of children having a plan. Alongside of this the care plan was revised to improve content and briefing delivered to reinforce the principles of good care planning.
- Enhanced Monitoring Panel this is a monthly meeting which examines a) care
  planning for children under 16 subject to Sec 20 for 3 months plus to ensure that
  plans are being progressed to achieve return home or into proceedings b) Children
  who have been subject to Placement Orders for 1 year plus and not placed for
  adoption and c) children placed with parents to establish whether revocation of the
  care order is now appropriate
- Collaboration with Shropshire and Essex confirmed the need for a support service to prevent family/placement breakdown. The Meaningful Day provision is currently rudimentary and requires development early indications have been that in essence the project can contribute to reducing the number of looked after children
- Safe Families for Children this is a charity we have commissioned to provide a support service to families including offering hosting to children to avoid the need for children to become looked after. The service commenced on 01/04/2019.
- Management Instruction Notes a number of MIN's have been written in support of TriX procedures and cover a number of area's of practice including that related to

the monitoring required for unregulated placements to ensure a focus is maintained on permanency and care planning

• Performance reports – managers now receive weekly performance reports on a number of issues including completion of care plans, statutory visits to looked after children and supervision

These measures may have contributed to the maintenance of a slightly lower number of looked after children, but it is evident from service development in other authorities that in order to achieve more, and in particular to realign us with regional and neighbour comparators (population of 350 to 380 will result in per 10 k figure of 51 to 55), a fundamental change of approach will be required.

#### Where has it worked?

Some of the DfE Innovation Programme schemes have particular relevance for Dorset:

- <u>Project Crewe</u> Project Crewe demonstrated that a staffing model not wholly reliant on social work qualified staff could achieve positive outcomes for CIN. Cheshire East has some similarities with Dorset – mainly affluent with pockets of deprivation, and a silted up CIN system with poor outcomes and high re-referral rates.
- <u>No Wrong Door</u> The North Yorkshire County Council (NYCC) No Wrong Door (NWD) innovation provides an integrated service for young people, aged 12 to 25, who either are in care, edging to or on the edge of care, or have recently moved to supported or independent accommodation whilst being supported under NWD.
- <u>Family Safeguarding Hertfordshire</u> This is badged as whole system reform but can be more accurately described as a reform of late intervention. The project established multi-disciplinary safeguarding teams, some reformed practice measures, and a suite of interagency KPIs which show how families interact with all partners in the system.

The first two projects might be described as preventive, but this does not adequately capture the stratification of the response. Project Crewe intervenes upstream and effectively collapses a distinction between early help and CIN work. NWD is a crisis intervention.

What both have in common is a dedicated team of non social work staff who have

- low caseloads
- good interpersonal skills
- a defined set of intervention skills
- avoidance of bureaucracy and appointment culture
- stickability
- access to specialist input and coaching

#### What do we need to do about it?

1. Prevention

The conversation about reducing numbers of looked after children is often reduced to an issue of thresholds. Thresholds can be problematic for several reasons:

- Help is given at the point of crisis not at the point when future outcomes can be influenced in a positive direction.
- Consideration of risk, harm and options to help are seen purely through a social care lens, and partners are able to hand off responsibility as result.
- The culture of escalation removes the ability to apply influence to the system upstream to avoid care as an option.

Early Help approaches can be key to intervening with children who may be at risk of entering care, particularly those who are being escalated through parallel systems to social care, where local authority care can be seen as the ultimate resolution for system failure, such as

- School exclusion and alternative provision
- SEN
- CAMHS

More work needs to be undertaken to increase multi-agency ownership and a whole public sector system approach to avoiding late intervention and cost shunting where possible.

The preventive strategy in Dorset will need to be nuanced and include both early help and crisis intervention.

# **Options:**

- Multi-agency ownership LSCB, Strategic Alliance, Community Safety Partnership, Corporate Parenting Board should commit to a late intervention reduction strategy
- A place based model of service delivery should be adopted to enable Dorset Council to take a whole system approach to prevention
- A blended early help/CIN approach drawing on the Project Crewe model should be developed. This should shift a substantial amount of social work resource to early help teams.
- Focus social care activity on child protection and looked after children
- Develop an edge of care service which can respond to crisis, and support reunification.

#### 2. Business intelligence

Dorset Council currently has the indicators of a DRIP culture – Data Rich, Insight Poor – and more work (some of which is planned) needs to take place to unlock the power of the data which we routinely collect.

Further investment in business intelligence solutions will improve the ability of services to act constructively where there is a risk that children may become looked after by the local

authority. This can be combined with a multi agency early help strategy to ensure that help is given without creating a situation where too many children are drawn into the scope of specialist services.

The demographic predictors of a care career are well understood, but real time data and the use of visualisation tools such as theographs greatly increase the ability of services to identify cohorts at risk. For those children who do require a care intervention, we know enough from research to offer a response differentiated according to age, presenting factors and risk – rather than a permanency for all approach.

## **Options:**

• Further investment in BI required to develop our ability to identify children at risk of care, track children through the system, and develop multi-agency KPIs

# 3. Culture and decision making

The reduction of the number of children in care will require a change of culture around decision making. Decisions will need to be made earlier which can impact positively on families and reduce the need for care. – in a situation where many practitioners and managers feel overwhelmed by demand, there is comfort to be had in only providing a reactive service that is referral driven. Likewise, for many managers, resource management is part of their traditional approach, and waiting for a crisis to emerge and then providing the minimal response required seems like common sense and good stewardship. The Forward Together for Children Stage 1 report noted:

"There does seem to be a culture in Children's Services of spending time talking about whether to spend money or not. This is understandable given the budgetary pressures, but focussing on costs is likely to cost more than not focussing on costs. Learning organisations are organisations that understand that concentrating on meeting needs and designing the flow of work from the customers point of view, rather than concentrating on cost, will actually reduce costs. This can sound counter intuitive and it can be hard to let go of managing costs but there are many case studies that back up this point of view."

Combined with a risk averse approach, it produces a world view where rising LAC numbers are a part of the natural order of things, and where overspends are produced by inadequate budget allocation.

Efforts to control the numbers of children in care in Dorset have largely been focussed on escalating and centralising all aspects of decision making about children in care – exaggerating the inbuilt bias of the organisation towards a command and control model. Alongside this, expensive panel structures have proliferated and claimed a significant proportion of the working week for senior managers. Natural wastage in the system – the fact that children leave care on their 18<sup>th</sup> birthday – has been claimed as a reduction in numbers, when the underlying rate of increase has not changed.

The main drawback of the approach is that senior managers are drawn into the decision making process too far downstream, where the ability to influence events is limited. There is also some anecdotal evidence that the process can be "gamed". Needless to say, the approach has been ineffectual, and has contributed to a sense of disempowerment and disengagement in the wider workforce.

The <u>Forward Together for Children Stage 1</u> report identified the costs of the command and control approach within Children's Services, and the case is more compelling than ever. Moving towards a devolved decision making culture would mean:

- An increase in accountability
- Decisions being taken more quickly and closer to the citizen
- A decrease in cost and transaction cost

Work needs to be carried out with the IRO service to inject more challenge into the review process. Is the possibility of a return home routinely considered seriously in reviews? Is the first six months of placement seen a crucial time period in which reunification could take place, or is all effort marshalled to delivering permanency? Could the outsourcing of the service deliver this better, by making it a key performance criteria for the new provider?

## **Options:**

- Embed an understanding of LAC reduction strategy within workforce, focussing on the reduction of harm and a rights based approach rather than the management of risk
- Replace existing decision making panels with an accountability and quality assurance function
- Robust consideration of the prospect for reunification should be a component of all LAC reviews.

# 4. Sufficiency

Dorset is currently in the bottom ten local authorities in England for the number of children placed more than twenty miles from home. While it is sometimes necessary to place children some distance from their home, either for their own protection or to access specialist services, in most cases, placement closer to home will enable a child to maintain contact with family and friends, continue at their existing school, and continue access any specialist support services.

At time of writing, 178 children are placed in external placements. Of these, 20% (35) are placed with providers in Dorset. Of the external placements which are out of county, 60% (101) are placed in authorities which border Dorset. This pattern suggests that some determined engagement with the market might be able to either bring providers into

Dorset or unlock existing provision in Dorset so that the number of children placed within the local authority can increase.

Approaches to sufficiency include:

- Frameworks Dorset Council is a member of a number of framework arrangements for residential and fostering provision. This approach uses the bargaining power of a consortium of local authorities to set a pricing framework with providers, but it does not guarantee access to placements as such. There is a view that we have reached the limit of the benefits which can be delivered by a framework approach.
- Block contracting Dorset Council's predecessors were wary of entering into block contract arrangements with providers, however in retrospect, given the continuous rise in numbers of looked after children, this approach would have carried very little risk of over provision, and would have potentially locked in local or sub-regional providers in a relationship which would have guaranteed access to local placements. The price lever in this instance is the guarantee of continuous business from a single local authority rather than access to a preferred provider list of a consortium.
- SIBs There has also been little appetite for Social Impact Bonds in predecessor councils although they would be worth exploring to either fund additional preventive capacity, or provide the capital for new residential provision.
- In house fostering Dorset Council has issues around recruitment of and support to in house foster carers. The current cohort has not grown in line with the rising numbers of locked after children, and there is a perceived lack of resilience in the system which leads to placement instability and rising costs as placements escalate. While there is work to be done to improve the service, or put it at arms length, it will also be important to avoid an in house first policy for placements – making the best match on the basis of identified need is likely to result in more stable placements, improved outcomes, and reduced cost over time.
- External fostering a substantial number of children looked after by other local authorities live in Dorset with external providers could these placements be rededicated to Dorset children?
- Market shaping there has been a lack of market engagement and dialogue with providers. Such an approach could either guarantee access to provision in Dorset, stimulate inward investment by providers, or lead to innovation.

# **Options:**

- Transfer all commissioning spending and staff to commissioning team
- Bring directly provided services (fostering, residential homes, CRWs etc) into an internal commissioning framework
- Strengthen brokerage team

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# Agenda Item 6 Corporate parenting board

Children's Placements – Use of Unregulated Placements

Date of Meeting: 15th July 2019

Lead Member: Cllr Andrew Parry – Lead Member for Children, Education and Early Help

Lead Officer: Sarah Parker- Executive Director for People – Children

#### Executive Summary:

This is an update and progress report regarding looked after children placed in unregulated arrangements. Members are asked to consider the content of the report and the impact of the use of an unregulated placement for a child or young person and the measures in place to ensure that child or young person's safety and well being

A report on the use of unregulated placements is a standing agenda item for this board.

Equalities Impact Assessment:

There are no equalities implications arising from this report.

#### Budget:

N/A

Risk Assessment:

Having considered the risks associated with this decision, the level of risk has been identified as:

Current Risk: LOW (Delete as appropriate) Residual Risk: LOW (Delete as appropriate) (*i.e. reflecting the recommendations in this report and mitigating actions proposed*)

(Note: Where HIGH risks have been identified, these should be briefly summarised here, identifying the appropriate risk category, i.e. financial / strategic priorities / health and safety / reputation / criticality of service.)

Other Implications:

Recommendation:

Report is for Information

Reason for Recommendation:

Report is for Information

#### Appendices:

#### Background Papers:

Management Instruction note (under review) Transforming Children's Services – House of Commons Committee of Public Accounts (March 2019) Children Act 1989 and subsequent regulations and guidance Ofsted guidance regarding the regulation and registration of children's placements

Officer Contact Name: Tim Wells Tel: 01305 225738 Email: tim.wells@dorsetcouncil.gov.uk

#### 1. Introduction:

1.1 The update and progress report on the use of unregulated placements is a standing agenda item for Corporate Parenting Board members and offers board members a summary of the current situation for young people who are placed in unregulated settings and the progress towards finding a suitable regulated alternative.

1.2 Children's services and partners remain committed to ensuring young people for whom a care placement is needed can feel safe, well cared for, listened to and remain close to their family and friends. Our priority is to achieve this within a well matched regulated placement.

1.3 The number of children and young people who are placed in unregulated settings is reported weekly to the Executive Director (Children), the Assistant Director (Children's Services), the Corporate Parenting Officer and the manager of the Independent Reviewing Officer service.

1.4 The weekly update report tracks the duration of the placement, any significant events, the current planning framework, meetings and visits and any exit planning. The weekly report shows the current number of young people in unregulated arrangements and a rolling record of the total for the year and the end dates

#### 2. Progress on activity noted in previous report.

2.1 The development of a retained foster carer scheme has led to two households being identified as suitable to offer out of hours emergency placements. The retainer payment and foster carer agreements are being signed off. The first carer household will be available from the 9<sup>th</sup> July.

2.2 A suitable council property has been identified to provide emergency placements for young people. Work has been completed on the property and health and safety checks have been undertaken. The property can be made ready for use once the actions arising from the checks have been completed.

2.3 Members of the board have requested to visit the property. The Residential Services Manager will arrange this.

#### 3.0 Current position:

3.1 At the time of writing, the number of children accommodated in unregulated arrangements has reduced to 3.

3.2 As reported previously and as anticipated, the care planning for 3 young people has led to planned endings to the unregulated arrangements in which they were placed.

- One young person moved to a regulated children's home in West Dorset
- One young person made a successful transition to a residential school which will meet his education and care needs.
- One young person returned home with support.

3.3 During this reporting period, one young person came into care over a weekend and was placed in an emergency unregulated setting. The week following saw the child moved to a regulated foster placement within two working days.

Tim Wells Senior Manager Placements & Resources

#### Appendix - Case examples (Exempt?)

1.1 At the Corporate Parenting Board Meeting of the 11<sup>th</sup> June, members of the board requested more detail about the living arrangements and opportunities for young people who find themselves in unregulated placement arrangements.

1.2 Therefore the individual case summaries are now incorporated into an appendix in a way that maintains anonymity and offers a wider view of a young person's environment.

1.3 Child A (aged 15) has been supported in an unregulated setting for 302 days. This was initially extended to cover the duration of care proceedings, however, has been extended given the child's expressed wish to remain in this setting.

There have been particularly challenges in finding a suitable alternative due to the child's specific needs, despite extensive placement searching. Providers with specific expertise in working with complex needs are being invited to discuss placement provision directly with the Placements and Commissioning Team to see if they can create a bespoke regulated setting for this young person. Progress in this matter can be reported at the next board.

The young person's accommodation is 3 bed terraced house in a quiet residential area on the outskirts of a town in a neighbouring county. The internal décor is modern and well maintained. The property has rear garden and Wi-Fi. The young person has their own room and there are no other young people at the accommodation. Two staff provide the day and night care and support. The young person has an educational programme agreed by the virtual school for children in care.

1.4 Child B (aged 15) has been supported in an unregulated setting for 122 days. The young person's accommodation is a 2- bed duplex apartment located approximately 5 minutes' walk from the centre of a town in a neighbouring county. Although it is near the centre of town, the road itself consists of residential properties and is quiet. The property has been redeveloped in past 2 years and décor is clean and modern. The young person has their own room and no other young people reside at the property. The young person is supported by two staff to access the community for education and leisure activities. There is an active plan for this young person to return home and building work to offer the family and the young person more space and ease tensions is underway. Completion date will be end of August. A return home plan is being formulated.

1.5 Child C (aged 15) has been supported in an unregulated setting for 82 days. The accommodation consists of a small modern semi-detached house in a residential road in a town in a neighbouring county. Two staff support the young person. The young person has their own room. It has been particularly difficult to engage this young person in purposeful activity and they have been very clear about where they will or will not live. Plans are now in place for this young person to move to semi supported accommodation on or after their 16<sup>th</sup> birthday. The young person agrees with the plan as it is within the area where they wish to live. The young person has more actively engaged with the current accommodation and the staff who will assist with the move in early July.

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# Agenda Item 7

# Health Briefing Paper for Dorset Council Corporate Parenting Board

## Date: 15th July 2019

Author: Penny Earney Designated Nurse for Looked after Children Dorset Clinical Commissioning Group

# Title: Escalation of Performance of Initial Health Assessments Quarter 4 Briefing Update to Dorset Council Corporate Parenting Board

**Risk:** DC are failing to meet their statutory responsibility for children accommodated; to receive an Initial Health Assessment within the Statutory 20 Working Day time frame, in accordance with The Care Planning, Placement and Case Review (England) Regulations 2010.

# 1. Introduction: Escalation of Performance of Initial Health Assessments

1.1 The CCG Directors have asked for this area of continued poor practice to be raised as a concern formally at the CPB via a briefing IHA performance update each quarter.

1.2 Concerns raised regarding the on-going poor performance of IHA's.

The following points are asked to be noted by the CPB members;

- Children being accommodated by DC are not having their health needs assessed, identified and met, this is a risk to their EH&WB and disadvantaging carers in having a full picture of their health needs to be able to support the child within the placement.
- Delays in Social Workers providing health with timely notification and consent has been identified as the main reason for delay, with the second reason for delay by social workers and or foster carers declining initial health appointment offered or not attending on the day preventing IHA's being completed within the 20-day statutory time frame.
- Delays by DC are preventing the CCG commissioned health provider in meeting their contractual arrangements.
- This area of risk has been entered onto the CCG Risk register.
- The child/YP Health Plan is not being added to or reviewed as part of their statutory LAC Care Plan.
- Request to have the risk added to the CPB action plan to be monitored until improvement had been achieved and sustained for a 12-month period.

# 2. Performance of Health Outcomes for Children in care for Dorset

2.2 Performance for Q4 2018/19 saw a slight increase for DC of IHAs completed within statutory timeframe from 44.7% to 52.9% which remains considerably below the agreed indicator of 95%. Overall performance for 2018/19 52.6% fell against 2017/18 which was 56.5%. Performance remains variable significant improvement is still required if performance in meeting children health need accommodated by DCC is to be sustained. The current trends are still showing that statutory responsibility by DCC is not being met, thus preventing health from meeting theirs.

Per Quarter Three 2017/18	Q1	Q2	Q3	Q4
Children new into care	43	36	39	34
Number who require an IHA (Excluding those who left before 20 working days)	35	30	38	34
Initial Health Assessment Completed in 20 working days	23 (65.7%)	14 (47%)	17 (44.7%)	18 (52.6%)
Number of IHA's completed within 21- 30 working days.	4 (11.4%)	6 (20%)	7 (18.4%)	10 (29.4%)
Number completed after 30 days	7 (20%)	8 (27%)	3 (7.9%)	2 (5.9%)
Number still outstanding after 30 days, see exception reporting.	1 (0.9%)	2 (6%)	11 (34.5%)	4 (11.8%)

# 2.3 IHAs DC completed within Quarter One 2018/19

# 2.4 Q4 IHA's DC Performance by month plus April 2018/19

Quarter Four by Month	Jan	Feb	March	April
Children new into care	7	14	13	16
Number who require an IHA (Excluding those who left before 20 working days)	7	14	13	16
Initial Health Assessment Completed in 20 working days	5 (71.4%)	7 (50%)	6 (46.2%)	9 (56.3%)

Number of IHA's completed within 21-30 working days.	1 (14.3%)	4 928.6%)	5 (38.5%)	2 (12.5%)
Number of IHA's completed on or after 31 working days	1 (14.3%)	0	1 (7.7%)	0
Number still outstanding see exception reporting.	0	3 (21.4%)	1 (7.7%)	5 (31.3%)

- 2.5 The Designated Doctor and Named Nurse for LAC DHC have reviewed the IHA process within health and in consultation with DC Senior Leads have agreed a Pan Dorset IHA Pathway with notes for social workers, which should improve communications between Children's Social Care and health and give clear guidance as to statutory responsibility. Senior managers are also keen to support the new revised IHA pathway and are working with operational leads to implement. This was implemented on the 1<sup>st</sup> June and performance against this will be monitored over the next quarter.
- 2.6 There has been increasing challenges on Paediatrician availability firstly due to a vacancy not being filled. There is a national shortage of community paediatricians. Our provider is looking at alternative models of delivery to attempt to fill this gap. Secondly there has been an increase where social workers appear not to appreciate the statutory time frame and constraints on the medical service to provide timely appointments, often declining the first IHA appointment offered. This then creates a back build and further limits availability of IHA appointment for children accommodated later in the month. This area of delay was highlighted in March when IHA appointments offered in February were declined and rebooked causing delays of availability in March.
- 2.7 Fostering Managers are keen to support the IHA process and are meeting with the Designated Doctor this month to resolve delays by foster carers.
- 2.8 Reasons for delays for January, February and March Q4, November and December 2018/19:

#### January: (71.4% completed with 20 working days)

1 delay in notification No other delays reported for this period

#### February (50% completed in 20 working days)

2 delay in consent 1 declined by Foster Care 1 DNA of IHA appointment on the day 3 place out of area (OOA)

# March (46.2% completed within 20 working days)

6 1<sup>st</sup> available IHA Appointment 1 out of area.

Penny Earney Designated Nurse for Looked after Children Dorset Clinical Commissioning Group 25.06.2019



Agenda Item 8 **Corporate Parenting Board** 

Date of Meeting:	15 July 2019
Lead Member:	Cllr Andrew Parry – Lead Member for Children, Education and Early Help
Lead Officer:	Sarah Parker – Executive Director for People - Children

Executive Summary: Local authorities have a duty to ensure that the health needs of children in care are assessed, and that there is a plan in place to ensure that these needs are met. This report provides an update to the board on performance and compliance in respect of this duty during the last financial year 2018-19.

Equalities Impact Assessment: NA

Budget: NA

**Risk Assessment:** 

Having considered the risks associated with this decision, the level of risk has been identified as: Current Risk: LOW **Residual Risk LOW** 

Other Implications:

Recommendation: That the board notes this report, and monitors progress at future meetings

Reason for Recommendation: Officers in Dorset Council and the Clinical Commissioning Group are working to develop an action plan to address the timeliness of health assessments

Appendices:

Background Papers: The full range of statutory obligations and duties on local authorities and clinical commissioning groups (CCGs) to support and promote the health of looked after children is set out in Statutory Guidance on Promoting the Health and Wellbeing of Looked After Children. It also contains detailed practice guidance to support the work of practitioners across agencies in carrying out these duties.

<u>Officer Contact</u> Name: Jonathan Wade Tel: Email: j.wade@dorsetcouncil.gov.uk

1. The duties of local authorities in respect of undertaking health assessments for children in care are summarised in <u>Children Act guidance and regulations 2015, Vol.</u> 2, Care planning, placement and case review

## Health assessments

2.49 The responsible authority is required to make arrangements for a registered medical practitioner to carry out an assessment of the child's state of health and provide a written report of the assessment [regulation 7(1)]. The aim of the assessment is to provide a comprehensive health profile of the child, to identify those issues that have been overlooked in the past and that may need to be addressed in order to improve his/her physical and mental health and wellbeing, and to provide a basis for monitoring his/her development while s/he is being looked after.

• • • •

2.51 It is the responsibility of the responsible authority to make sure that health assessments are carried out. In general, CCGs have a duty to comply with requests by local authorities for assistance to make sure that the assessment happens. The responsible authority must inform the CCG (or the local health board if a child is being placed in Wales), as well as the general medical practitioner, when a child starts to be looked after or changes placement [regulation 13(2)(f) and (g)].

2.52 Where the child is to be placed out of area, local authorities should notify the CCG for the area in which the child is currently living, and the CCG and local authority for the area in which the child is to be placed.

2.53 The first assessment must be carried out by a registered medical practitioner while subsequent assessments may be carried out by a registered nurse or by a registered midwife, so long as this is done under the supervision of a registered medical practitioner [regulation 7(3)].

2. Initial Health Assessments must take place within 20 working days of them becoming looked after. The target of 20 working days relates to the completion of the health assessment and the notification of such back to the local authority. The local authority will therefore need to notify the health authority in a timely manner in order for this target to be achieved.

It is therefore critical that the assessing social worker make the appropriate notification in order that there is sufficient time for the health authority to schedule, undertake and report the IHA back to the local authority.

3. There are 3 targets within the IHA process:

- The number of working days between a child becoming LAC and the initial notification to health authority. The local target is within 5 working days.
- The number of IHA appointments booked within 20 working days
- The number of IHAs completed with 20 working days

4. For the period April 2018 to March 2019 the number of eligible children or young people becoming looked after was 123.

The percentage of occasions in the same period where the local authority notified the health authority of the need to undertake an initial health assessment within 5 working days of a child or young person becoming looked after was 80.5%

Our target is 95% or better which flags this indicator as RED.

5.The Health Authority offered IHA appointments within 20 working days for 77 children or young people. This equates to 62.6% and similarly flags this indicator as RED.

6. For 68 out of the 123 children or young people, an IHA was achieved within 20 working days (55.3%). Unfortunately, this means that this was not achieved for 55 children or young people. This sadly flags this indicator as RED also.

7. These whole year data are summarised in the table below:

# April 2018 to March 2019

Notification Timeliness (number <=5)	99	80.5	%
Appointment Timeliness	77	62.6	%
IHA Timeliness	68	55.3	%

8. A number of factors can impact on the ability of the CCG to carry out health assessments

- A small number of young people are looked after for less than 20 days
- Some young people are competent to refuse consent to a health assessment, including unaccompanied asylum seekers

• Some young people will be placed outside of Dorset and the responsibility to carry out the IHA will fall to another CCG.

9. Early indications for the current financial year are encouraging. Figures for April and May show that notifications were on target for timeliness.

10. Work is currently underway between officers of the local authority and clinical commissioning group

- to review processes and ensure that communication and forward planning in both organisations is seamless and timely
- identify issues caused by capacity or organisational silos which have a negative impact on delivering the service

The initial diagnostic and action plan will be available at the next board.



Corporate Parenting Board

Agenda Item 9

Date of Meeting: 15 July 2019

Lead Member: Cllr Andrew Parry - Lead Member for Children, Education and Early Help

Lead Officer: Sarah Parker – Executive Director for People - Children

#### Executive Summary:

This report gives detailed information in respect of completion rates for pathway plans for looked after young people aged 16 and 17.

85% of young people aged 16 &17 have a pathway plan in place though only 79% have a plan which has been updated within the last 7 months. Action is required to improve performance in this area. During the next 8 weeks, there will be a clear focus on ensuring that all young people who should have a pathway plan have one which has been updated within 7 months.

Equalities Impact Assessment:

Not applicable

Budget:

Not applicable

Risk Assessment:

N/A

Other Implications:

None identified

Recommendation:

N/A

Reason for Recommendation:

Appendices:

N/A

Background Papers:

N/A

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#### 1. Background

**1.1:** There is a statutory requirement for all Looked After Children (LAC) to have a care plan in place and for this to be reviewed regularly through the LAC reviewing process. These reviews must take place at no more than six monthly intervals and are chaired by an Independent Reviewing Officer (IRO). The care plan should be updated following each review to reflect any changes to the plan

**1.2:** The care plan must set out the long-term plan (permanency) for the child's upbringing and state how the child's developmental needs in relation to health (physical and emotional/behavioural), education, identity, family and social relationships, social presentation and self-care skills are to be met.

**1.3:** From birth up to 15 years this is recorded on a LAC care plan document and from 16yrs onwards this document is replaced with a pathway plan. The pathway plan document has an increased focus on the development of independence and life skills and forward planning including transition to adulthood. The first Pathway plan has to be completed within 6 months of the young person's 16<sup>th</sup> birthday and updated as part of every subsequent LAC review

**1.4:** It is good practice to co-produce all care plans with the looked after child (dependant on age and understanding) but there is a particular expectation that the pathway plan is a coproduced document so that the young person's wishes and aspirations can be fully captured and brought into planning for the future. If the plan is not cowritten with the young person, the plan should be fully discussed with them as soon as practicable.

**1.5:** Performance is monitored in two ways, firstly by how many children and young people have a plan in place, and secondly, by identifying how many of those plans have been updated within the last 7 months, i.e. following the most recent LAC review.

**1.6:** As part of its quality assurance role, the IRO Service reaches a judgement at each LAC review on the quality of the looked after child plan using the OFSTED ratings.

**1.7:** The Service Manager Care and Support and the IRO Manager meet monthly to track and review performance regarding care/pathway plans. The quality of care/ pathway plans has shown a steady and sustained improvement in quality over the past six months (as judged by the IRO Service)

# 2: Completion rates (as of 04/07/19)

#### <u>Table 1: Overall LAC with a plan (includes all teams and both LAC Care Plan and Pathway</u> <u>Plans)</u>

Percentage of <b>all</b> LAC with a plan (care or pathway)	95%
Percentage of <b>all</b> LAC with a plan completed within past 7 months	89%

<u>Table 2: LAC 16/17yrs with a Pathway Plan within Care and Support (excludes District</u> <u>teams)</u>

Team	No of 16 &17yr olds	No of 16/17yrs olds with pathway plan	No of 16/17yr olds with pathway plan within 7 months	% with pathway plan	% with pathway plan within 7 months
13-25 LAC		20		0.49/	00%
Team 1	38	36	34	94%	89%
13-25 LAC					
Team 2	49	39	34	79%	69%
CWAD East	4	2	2	50%	50%
CWAD S'th	10	9	9	90%	90%
CWAD West	5	2	2	40%	40%
Totals	103	88	81	85%	79%

**2.1:** The first table shows overall care / pathway plan completion across the whole of Care and Protection. This is as of 04.07.19.

**2.2:** Table 2 identifies the 16 &17year olds who should have a pathway plan by virtue of age. District teams have been excluded from these figures as there were only 8 such young people allocated within District teams at the point that the report was run and were recent care entries.

**2.3:** As can be seen by table 1, the percentage of looked after children with a plan was 95% on 01.07.19 and has been consistently above 90% for several months. This figure will not be 100% as it includes children that have recently entered care and for whom the LAC plan has yet to be confirmed. The expectation is that the LAC care plan is written after the first LAC review which takes place within 4 weeks of care entry

**2.4:** Unaccompanied Asylum Seeking Children (UASC) aged 16 and over have to have a pathway plan within 3 months of entry into care.

**2.5:** Caution should be applied to the CWAD figures for pathway plans as 17yr olds within that service with complex needs will be in active transition to adult services and have a detailed transition plan setting out their adult needs which can become the primary planning document. Numbers are also very small and can affect percentage scores significantly for that service as with District teams. Additionally, CWAD will occasionally have 16/17yr olds entering care and so the 4-week period to write the plan described in 2.3 will apply impacting completion percentages.

**2.6:** Over the 8 weeks there will be a continued focus on the completion of pathway plans, both overall and within the 7 month timescale. The recent development of the Mosaic dashboard provides an up to date accessible tool to monitor performance that is updated daily direct from Mosaic. This is monitored by the Service Manager Care and Support and a whole service workshop involving Care and Support Operational Managers and Team Managers will be held on 08.07.19 led by the Service Manager.

**2.7:** It is intended that a new pathway plan (please note name may change dependent on feedback from young people) is produced, codesigned with young people. This will assist in ensuring that this is a meaningful document for the looked after young person and something that is valued and helpful for them and those within their support network to plan for their transition to adulthood



Agenda Item 10 **Corporate Parenting Board** 

Date of Meeting:	15 <sup>th</sup> July 2019
Lead Member:	Cllr Andrew Parry – Lead Member for Children, Education and Early Help
Lead Officer:	Sarah Parker – Executive Director for People – Children
Executive Summary	: information in respect of the Children who are Disabled (CWAD)

Service performance and covers the year from 1<sup>st</sup> April 2018 to 31<sup>st</sup> March 2019. As at 31.03.19 there were 49 children who are disabled in our care supported by the CWAD Service. Of these, 26 were placed with foster carers with 3 placed at home with their parents while subject to Care Orders. 18 were placed in residential care due to the level and complexity of their needs.

Timeliness of assessments has improved through the year, starting at 44.5% in Q1 and rising steadily throughout the year to 97% in Q4.

Equalities Impact Assessment: N/A

Budget:

**Risk Assessment:** N/A

Other Implications:

Recommendation:

N/A

Reason for Recommendation: N/A

Appendices: N/A

**Background Papers:** N/A

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# Corporate Parenting Board Report June 2019 - Children who are Disabled

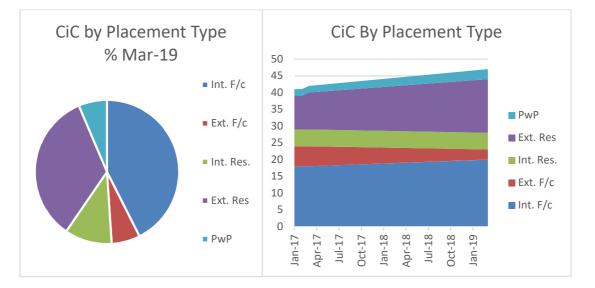
#### 1: Introduction

- **1.1:** Dorset Council's Children who are Disabled (CWAD) Service provide support, care and protection services to children who have complex Special Educational Needs and Disabilities (SEND).
- **1.2:** There are three social work teams covering East, West and South areas. Paediatric Occupational Therapy and specialist Early Help services are provided on council wide basis and are located within the wider service structure.
- **1.3:** Staffing levels with the social work service have stabilised over the last 6 months having previously shown high levels of vacancies and staff churn. Vacancies remain in the Dorchester base. Staffing levels within the occupational therapy and early help services have remained stable throughout this period.
- **1.4:** The social work teams support both children who are disabled and are looked after and those that remain cared for by parents or carers in the community, including those children and young people in receipt of short breaks. The social work teams therefore provide both child in need and child protection services as well as services to looked after children on a specialist basis
- **1.5:** Some children who are disabled have multiple physical, intellectual and sensory impairments which result in substantial long-term difficulties in daily living. They can experience societal barriers and discrimination.
- **1.6:** Children who are disabled and who are looked after may have experienced abuse and neglect prior to coming into care and have been subject to care proceedings. However, many will be in care only because their needs are too complex for their parents or carers to meet safely within their family homes. Children in this latter group may pose a risk of significant harm to themselves or others by reason of their level of need and can require highly specialist care settings.

# 2: Children who are disabled and in care as of 31/03/19

#### **Children in Care** 60 50 40 30 20 10 0 Jay-15 Jul-15 Jan-16 Mar-16 May-16 Jul-16 Sep-16 Vov-16 Jan-18 Mar-18 Jan-15 /ar-15 Sep-15 Vov-15 May-18 Jul-18 Sep-18 Jov-18 Jan-17 Jul-17 Mar-17 May-17 Sep-17 **Vov-17** Jan-19 Jar-19 CWAD W CWAD E CWAD S Total

- 2.1: The 2016-17 increase in the number of children in care in CWAD teams does not reflect an increase in the overall number of disabled children in the care of Dorset but those allocated specifically to a social worker within CWAD. This was due to the expansion of the service criteria in September 2016 to include children with Autistic Spectrum Disorder (ASD) and those children transferring in from other social work teams into the CWAD service.
- **2.2:** The overall number of disabled children in care for Dorset has remained stable since January 2017
- **2.3:** Many children who are disabled are looked after in specialist placements where they receive intensive support due to their level of need. These are often outside of the Dorset Council area
- **2.4:** As of 31<sup>st</sup> March 2019, CWAD East had 16 children in care, CWAD West had 12 and CWAD South had 21 resulting in an overall total of 49



## 3: Children who are disabled and care: placement type as of 31/03/19

- **3.1:** 53% (26) of children were placed with foster carers (DC and IFA)
- **3.2:** 6% (3) children were placed with parents under placement with parent arrangements.
- **3.3:** 36% (18) children were placed in residential care of which 5 were placed at the Cherries
- **3.4:** 2% (1) young person was placed in a semi-independence placement (has since moved on)
- **3.5:** 2% (1) young person was placed in an unregulated placement with a plan for return home following completion of building work to the family home to give him his own bedroom. This building work has now commenced

4: Children who are disabled and in care: LAC Care plan and visit performa	<u>ince up to</u>
<u>31/03/19</u>	

Timeliness of Visit Status	Number of Visits	Percentage %
Completed Late	97	20.42
Completed on Time	369	77.68
Overdue	9	1.89
Total	475	100

Team	Total LAC	Total LAC 0-15	Total LAC 16+	Total Care Plans Completed	Care Plans last 7mths	Total Pathway Plans Completed	Pathway Plan last 7mths	Total with a Plan	% With a Plan	% Plans last 7 Mths
East	16	11	5	13	10	4	3	15	93.75	81.25
South	21	11	10	16	10	10	10	21	100	95.24
West	12	7	5	12	8	1	1	12	100	75
Total	49	29	20	41	28	15	14	48	97.96	85.71

- **4.1:** Numbers within CWAD of looked after children are relatively small and so percentages can be significantly impacted by 1 or 2 children numerically
- **4.2:** There will be a 4-week period after care entry when a LAC care plan has yet to be confirmed via LAC review which presents a challenge in maintaining a 100% performance figure for this Service
- **4.3:** Care Plan performance in CWAD showed improvement over quarters 3 & 4 (October 2018 March 2019) across the service and this improvement has been sustained into the current reporting year
- **4.4:** East performance regarding care plans within 7 months dipped slightly in quarter 4 due to impact additional work to prepare cases for transfer to BCP due to LGR. Performance has now stabilised again within that team
- **4.5:** Visiting performance can be impacted by children who are looked after and having more than 75 nights short breaks but remain within the care of their parents and by those that are designated long term placements through permanence arrangements. Both such arrangements will have a less frequent visiting pattern agreed through LAC reviews but can show as late LAC statutory visits as the Mosaic report measures the fixed statutory visiting requirements. Work is now being undertaken on the Mosaic reporting to differentiate such arrangements and give improved accuracy of visiting frequency reporting

Team	Quarter 1: April – June 2018	Quarter 2: July – September 2018	Quarter 3: October – December 2018	Quarter 4: January – March 2019	End year performance full year 2018/19
CWAD East	47% (23)	61% (34)	71% (14)	94% (18)	67%
CWAD South	32% (28)	87% (16)	100% (15)	100% (12)	70%
CWAD West	33% (36)	39% (23)	100% (21)	100% (9)	58%
Total Service performance by quarter	Quarter 1 44.5%	Quarter 2 58%	Quarter 3 93%	Quarter 4 97%	66%
Total no of assessments	96	81	58	44	Assessments in year 279

# 5: Assessments completed within the statutory 45 working days.

- **5.1:** Assessment performance showed marked improvement over quarters 3&4 in 2018/19 from a low baseline in quarters 1&2. This was as a result of sustained focus and weekly management oversight.
- **5.2:** CWAD West were the last team to stabilise staffing and so did not show sustained improvement in assessment performance until quarter 3 when this was achieved
- **5.3:** It is important that all assessments are undertaken and completed within the maximum of 45 working days a timely assessment gives a more responsive service and support to families. It also ensures that those families that do not require social care involvement are linked to appropriate services appropriate to their needs quickly
- **5.4:** Strong assessment performance has been maintained so far into this reporting year by CWAD. Performance for Q1 2019/20 is 93% of assessments completed within 45 days across the Service

## 6: Summary

- **6.1:** The CWAD social work service has showed sustained improvement across a number of statutory requirements such as LAC visits and plan completion and assessment timeliness over the last three reporting quarters in 2018/19. These improvements have been sustained so far into 2019/ 2020 reporting period suggesting that the needs of children who are disabled and in the care of Dorset Council continue to be generally well met
- **6.2:** The number of children who are disabled and in the care of Dorset Council has remained largely unchanged for the past reporting year. This would suggest that families are continuing to be successfully supported to continue to care for their children within communities through short break provision and support. The most popular source of short break support continues to be through a Direct Payment with a small number of children with complex needs (and often challenging behaviour) receiving residential short break support
- **6.3:** There continue to be challenges in securing new placements, particularly for children whose behaviour challenges, and especially for those whose behaviour towards others can be violent and present risk.
- **6.4:** Additionally, there has been an increase in the identification of young people who may be at risk from Criminal Exploitation/ Child Sexual Exploitation and those who have missing episodes. This is due to the widening of the disability criteria for the service to include young people who have capacity to make choices that can result in them being potentially exposed to risk coming into the CWAD service, having previously been supported through District teams.
- **6.5:** Social Work recruitment to the Dorchester base continues to be an area of focus, while other teams have seen increased stability over the year.

Tanya Hamilton Fletcher Service Manager Care and Support 28<sup>th</sup> June 2019

# Agenda Item 13

By virtue of paragraph(s) 1, 2 of Part 1 of Schedule 12A of the Local Government Act 1972.

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