

Agenda

Children and young people scrutiny committee

Date:	Monday 16 July 2018			
Time:	2.00 pm			
Place:	Committee Room 1 - The Shire Hall, St. Peter's Square, Hereford, HR1 2HX			
Notes:	Please note the time, date and venue of the meeting. For any further information please contact:			
	Matthew Evans, Democratic Services Officer Tel: 01432 383690 Email: matthew.evans@herefordshire.gov.uk			

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Agenda for the meeting of the Children and young people scrutiny committee

Membership

Chairman Vice-Chairman Councillor CA Gandy Councillor FM Norman

Councillor CR Butler Councillor ACR Chappell Councillor JF Johnson Councillor MT McEvilly Councillor A Seldon

Co-opted members

Mr P Burbidge Mr A James Mr P Sell

Archdiocese of Cardiff Parent Governor Representative The Diocese of Hereford

Agenda

		Pages
1.	APOLOGIES FOR ABSENCE	
	To receive apologies for absence	
2.	NAMED SUBSTITUTES	
	To receive details of members nominated to attend the meeting in place of a member of the committee.	
3.	DECLARATIONS OF INTEREST	
	To receive any declarations of interest from members in respect of items on the agenda.	
4.	MINUTES	5 - 14
	To approve and sign the minutes of the meeting held on 14 May 2018.	
5.	QUESTIONS FROM MEMBERS OF THE PUBLIC	
	To receive any written questions from members of the public. Deadline for receipt of questions is 5:00pm on Tuesday 10 July 2018. Accepted questions and answers will be published as a supplement prior to the meeting. Please submit questions to: councillorservices@herefordshire.gov.uk.	
6.	QUESTIONS FROM MEMBERS OF THE COUNCIL	
	To receive any written questions from members of the council. Deadline for receipt of questions is 5:00pm on Tuesday 10 July 2018. Accepted questions and answers will be published as a supplement prior to the meeting. Please submit questions to: councillorservices@herefordshire.gov.uk.	
7.	FOSTERING AND ADOPTION SERVICE ANNUAL REPORTS 2017/18	15 - 76
	To receive the annual reports from the fostering and adoption services and consider any outcomes and recommendations. To make recommendations to the cabinet member on the operation of the services during 2018/19.	
8.	CHILDREN AND YOUNG PEOPLE'S PLAN 2018 - 2023	77 - 96
	To consider the draft Children and Young People's Plan 2018 - 2023, for pre decision scrutiny, ahead of its presentation to full Council.	
9.	CHILD PROTECTION NUMBERS	97 - 122
	To receive an update on action taken to reduce the child protection plan numbers following an increase in November, December 2017 and January 2018. To make recommendations on the approach and outcome of the action plan.	
10.	WORK PROGRAMME REVIEW	123 - 148
	To consider and agree the attached work programme for 2018/19, including proposals for two task and finish groups and a spotlight review.	
11.	DATE OF NEXT MEETING	

The next meeting of the children and young people scrutiny committee will be held on Monday 17 September 2018 at 10.15 a.m.

Herefordshire Council

Minutes of the meeting of Children and young people scrutiny committee held at The Council Chamber - The Shire Hall, St. Peter's Square, Hereford, HR1 2HX on Monday 14 May 2018 at 10.15 am

Present:	Councillor CA Gandy (Chairman) Councillor FM Norman (Vice-Chairman)			
	Councillors: ACR Chappell, DW Greenow and A Seldon Co-optees: Mr P Burbidge and Mr A James			

In attendance: Councillors PA Adams, J Stone and EJ Swinglehurst.

Officers: C Baird, Director of Children's Wellbeing (DCW), R Vickers, Assistant Director Care Operations and Commissioning, V Lawson, Interim Assistant Director Safeguarding and Family Support (ADCSF), L Tyler, Adult Social Care Commissioning Manager (ASCCM), A Russell, Senior Commissioning Officer (SCO), M Davies, Transition Coordinator, A Heath, Post 16 Senior Advisor (CWBSA), J Coleman, Head of Democratic Services and Statutory Scrutiny Officer

50. APOLOGIES FOR ABSENCE

Apologies for absence were received from Councillor CR Butler, Mrs Fisher, Councillor JF Johnson, Councillor MT McEvilly and Mr Sell.

51. NAMED SUBSTITUTES

Councillor DW Greenow attended the meeting as a substitute for Councillor MT McEvilly.

52. DECLARATIONS OF INTEREST

There were no declarations of interest.

53. MINUTES

RESOLVED: That the minutes of the meeting held on 16 April 2018 are agreed as a correct record.

54. QUESTIONS FROM MEMBERS OF THE PUBLIC

There were no questions from members of the public.

55. QUESTIONS FROM MEMBERS OF THE COUNCIL

There were no questions from members of the council.

56. LEARNING DISABILITY STRATEGY 2018-2028

The Committee was invited to review the draft learning disability strategy 2018 – 2028, particularly transitional arrangements between children and adults services, before its presentation to cabinet.

The Chairman welcomed all in attendance including the witnesses present to comment on the learning disability strategy.

The SCO provided the presentation, as attached to the agenda papers and introduced the strategy.

The following witnesses were then invited to speak: Helen Huxley, a local student; Ian Harper, Service Quality Director, Aspire; Jade Brooks, Deputy Director of Operations Herefordshire Clinical Commissioning Group; and Mary Simpson, Healthwatch.

In summary witnesses made the following principal observations:

Helen Huxley

Ms Huxley explained that she was a student who had recently passed through transition and had found a greater level of support after moving from a foster care arrangement to supported living. She enjoyed more freedom than she had experienced previously and wouldn't change anything about her transition. The transition from sixth form college to college had also been a positive experience and she had settled into the new educational environment very easily.

lan Harper

Mr Harper explained his involvement with local learning disability charities and advocacy groups. A challenge facing learning disabilities in the county concerned limited public transport and difficulty securing bus passes. There was also a problem in identifying what services were available with sites such as WISH providing some, but not all, details of services. A further challenge concerned the withdrawal of support for people with moderate or lower learning disabilities. Mr Harper explained that people with learning disabilities wanted to work or to volunteer and identified the 50/50 challenge in Gloucestershire as a good example of securing vocational opportunities for people with learning disabilities. Planning around transitions was felt to be too little too late and the impact on wellbeing and families was felt to be significant. It was queries when an alternative to 1 Ledbury Road would be opened and an accessible version of the strategy for people with LD was proposed.

Jade Brooks - CCG

It was important that the learning disability strategy linked to the children and young people plan. The strategy needed to support people with learning disabilities throughout

their lives and the links to employment and housing. Some elements of the strategy may only affect a small number of people but access to good healthcare was paramount. There was a challenge to address health inequalities and better access to healthcare. The strategy also provided for people transitioning back in to the county following receipt of LD services elsewhere.

Mary Simpson - Healthwatch

The tone and aspirations contained in the strategy were welcomed. There was a need to ensure the effective use and access to universal services and establishing best practice in ensuring reasonable adjustments are in place for people with learning disabilities. A system wide implementation of reasonable adjustments was required which should be commissioner-led. There appeared to be training initiatives in some areas of the strategy but not in others. Access to day opportunities and integrated services was important and the new tone in later iterations of the strategy was welcomed. It was important for people with learning disabilities to have varied and many opportunities to socialise. Job coaches are welcomed in the later version of the strategy as well as mention of other vocational opportunities. The engagement document at the end of the strategy was not clear how adults have been consulted; the new questionnaire was welcomed but there was concern that there was no room for comments or suggestions.

Following the witnesses the SCO provided points of clarification and explained that an accessible version of the strategy would be developed and a change to the questionnaire would ensure that comments and suggestions would be possible. It was confirmed that a link between the registers held at GP surgeries and council services would be an assistance to provide evidence for people with learning disabilities to claim bus passes.

Councillor PA Andrews spoke in respect of the strategy. This was a much needed longterm strategy and it was important that all those partners and organisations involved in the production of the document were co-ordinated in its delivery. The membership of the Learning Disability Board was unclear. Children's services look after people up to 25 years but adults services care for people for the rest of their lives with complex health needs. Herefordshire has traditionally been considered to provide good learning disability care. It was queried how the introduction of universal credit would impact upon people with learning disabilities. The SCO explained that the introduction of new benefits arrangements had the potential to have adverse impacts upon people with learning disabilities who may not fully understand the changes and their effects.

The points below were raised in the discussion that followed:

- The committee questioned why there was not a single, comprehensive, learning disability strategy across children and adults services? The SCO explained that from the age of 14 health action plans were directed towards transition and integrated commissioning. At 14 adult-focused work commenced which took account of aspirations moving into adulthood and provided alignment to adult services for people with LD.
- Priority 6 of the current children and young people plan concerned children and young people with disabilities. One of the objectives under the priority was the creation of an integrated pathway to provide multi-disciplinary support to disabled children and young people from 0 to 24 years old. The committee asked where this strategy left this aspiration. The CWBSA explained it was encouraging that the strategy included young people between the ages 14 – 25 and there was an alignment with the children and young people plan. The DCW explained that the children and young people plan focused on elements of

people's lives and the strategy linked to the disabilities priority contained in the Plan.

- The importance of domiciliary care was emphasised and how the council would ensure that providers delivered appropriate training to staff working with people with learning disabilities. The SCO explained that a new framework for contracting required potential providers to detail the training that was being undertaken. The ASCCM explained that the market for domiciliary care was problematic with challenges existing in the recruitment and retention of people to the sector. It was acknowledged that people with learning disabilities favoured consistency of carers and work force audits and business development plans would look into retention of staff. Karen Hall, Chief Executive, Aspire, explained that conscientious providers invested in good staff training and there was great value in settled staff and a stable workforce. At Aspire staff were encouraged to spend time with those who they supported to become familiar and learn more about them.
- The confusing legislative framework for learning disabilities was raised; the disability report in 2017 made difficult reading. In Herefordshire it appeared that the current guidance and legislation was being effectively put into practice. The SCO confirmed that the legislative picture had been confusing but the Care Act 2014 had sought to combine and coordinate the law into a form of comprehensive legislation.
- It was queried where NHS England was involved in the provision of services for people with LD? JB explained that the NHS delivered specialist services to people with learning disabilities such as heart surgery. People with LD were likely to be disproportionately affected by illnesses such as heart failure.
- How the LD strategy complemented the autism strategy was queried? The SCO explained that there were distinct pathways for autism and learning disabilities. It was important to retain separate strategies and it was explained that people on the autistic spectrum did not necessarily have learning disabilities.
- The positive comments from Ms Huxley were welcomed but there was also a concern regarding the transition from primary to secondary school for children with learning disabilities.
- The issue raised by Mr Harper concerning bus services was acknowledged and it was recognised that use of local bus services was falling. The ASCCM acknowledged that this was a complex issue and officers were working collaboratively across departments to attempt to produce a pragmatic solution.
- Detail regarding the function of the Preparing for Adulthood (PFA) tracker was
 requested and how it worked. The SCO explained that the Tracker included
 detail of 16-18 young people in transition whose trajectory to adulthood was
 tracked and whose needs were mapped across issues such as healthcare and
 housing. The tracker had been developed in collaboration with partners and
 further improvements to the facility would be sought.
- The amount of £5,000 for carers support shown in the strategy was queried. The SCO explained that the amount should be considered in the context of the wider care budget in Herefordshire.
- It was queried what assessment had been undertaken to ensure the strategy complied with the Equality Act 2010. *JB explained that GP surgeries registers could help inform reasonable adjustments that were required. Suggestions such*

as extending the length of appointments were reasonable adjustments; such adjustments would be informed through the registers held at GP surgeries.

- It was queried whether the adoption of the strategy would place greater pressure on GPs. JB explained that GPs were required to participate in annual health checks of patients with LD. In Herefordshire 63% of people with learning disabilities received a health check which was a figure that did not compare favourably to other areas and needed to be improved.
- The committee queried how the Council and the CCG, as employers and procurers of services, were seeking to support the employment of people with learning disabilities? The percentage of people with learning disabilities currently employed in the Council was sought and information on how the numbers of people going into internships would be measured. The SCO referred to innovative practice across the county and the need for the council to be an exemplar of best practice to other employers in Herefordshire. The creation of community interest companies and the identification of work where skills could be developed and gualifications gained was important. The SACWB commented that supported internships existed for young people between the ages of 16-24 with an education and health care plan. Internships were with local employers and consisted of a placement of a minimum of three days per week and were undertaken in conjunction with education. Currently there were 8 young people in an internship which also provided a social and friendship element. At the Council it was confirmed that one young person had started an internship with Balfour Beatty. Supported internships forums were new and intended to increase internships and employment of young people. The tracker helped to identify the number of people in internships and also to identify suitable placements. The detail of the current percentage of people with learning disabilities employed at the council would be provided following the meeting. -Action Note
- The importance of publicising the strategy was highlighted and it was felt that that the appointment of a member champion for LD would support this aim.
- It was queried how educational providers would be identified to deliver the study programmes identified for development in the strategy? The CWBSA confirmed that a number of the programmes were already being delivered. A preparing for adulthood further education group were developing curriculums. Work was also ongoing in partnership with Hoople for young people with EHC Plans to identify specialist educational programmes with the aim of moving into employment when appropriate. Work would be undertaken on provision for people with moderate learning disabilities. A recent funding change to community learning funding had affected the provision of services but work was ongoing with the job centre to create an employment pathway to support people with LD into employment and access to work funding.
- Given the low proportion of people with learning disabilities registered how would educational facilities be helping to identify people for diagnosis? JB highlighted the need to ensure staff working in public agencies could identify and be sensitive to people with learning disabilities particularly as people often became known to the public sector during times of crisis. The need for the raising of awareness was of paramount importance. The role of the LD champion would help make links with partner agencies and raise awareness of the strategy.
- It was queried when the implementation plan would be completed. The SCO confirmed that the plan would be updated before the Cabinet meeting in June at

which the Strategy would be considered and work would begin on the commissioning plan.

- The committee understood that the strategy highlighted an intention to identify models of best practice from local authorities and questioned whether there was also an ambition to work collaboratively with neighbouring authorities to develop specialised services for learning disabilities. *The SCO explained that learning from other local authority areas was in progress but it was acknowledged that some other areas had significantly higher levels of resource and that best practice had not transferred in full to Herefordshire. There was a need to incorporate in commissioning practices the identification and implementation of innovative solutions whilst ensuring there was adequate resource to deliver such programmes. Currently officers were looking at transforming care programmes and hospitalisations; there was the opportunity to work with other areas to address the causes of admissions with the intention of reducing the level of future hospitalisations.*
- The committee queried what specialist housing was being provided in Herefordshire and what pre-application planning advice existed to incorporate the needs of people with learning disabilities into new developments. The SCO explained that specialist services were provided by the Council and the planning process considered the needs of people with learning disabilities. A new development of flats had recently been completed which had been designed for people with moderate needs; housing solutions were also being worked on for people with more advanced needs. There were frustrations expressed regarding the changes sought by developers to reduce the number of affordable houses on development and the effect this could have upon housing for people with learning disabilities.
- The committee asked how many people with LD from outside Herefordshire were present in the county. The SCO explained that this was a very difficult statistic to produce and identifying numbers in the county was a perennial problem. The ASCCM explained that work was being undertaken to begin to compile information about people with learning disabilities resident in Herefordshire but from other parts of the country. This included a self-funder audit and questionnaire of residential and nursing homes in Herefordshire.

The committee proposed and seconded a series of recommendations, as below. The recommendations were approved unanimously.

Resolved – that the committee:

- (a) supports the strategy and requests the missing information, concerning health and wellbeing outcomes and social impact, and the implementation plan is shared with the committee when available;
- (b) requests that the executive prioritise the incorporation of improved metrics in the strategy to measure progress and provide evidence that objectives are realising desired outcomes;
- (c) requests that the executive considers making updates on the development and implementation of the strategy available through an appropriate forum e.g. the corporate budget and performance report;
- (d) asks the executive to provide a report to the committee, in due course, on the re-modelling of the Learning Disability Partnership Board;
- (e) asks the executive to consider appointing a member champion for learning disabilities;

- (f) asks the executive and the CCG to investigate methods of utilising learning disability registers, held by GP surgeries, to provide evidence for those with learning disabilities to more easily obtain bus passes;
- (g) asks the executive to investigate the promotion of a scheme, similar to the Gloucestershire 50/50 strategy, in Herefordshire to encourage employment opportunities for people with learning disabilities; and
- (h) ensures that following the adoption of the strategy, the CCG and the 2gether Trust are held to account for those elements of the strategy for which they are responsible.

Mr Burbidge and Councillor Greenow left the meeting at 12.17 p.m.

There was a brief adjournment at 12.17 p.m., the meeting re-convened at 12.25 p.m.

57. CHILDREN'S SAFEGUARDING AND FAMILY SUPPORT PERFORMANCE DATA

The committee received a report concerning performance in relation to children's safeguarding and family support for the quarter ending March 2018, together with trend data over the previous 12 months. The committee was asked to note the report and raise any items to include in future version of the report. The ADCSF introduced the report and outlined the achievements that had been accomplished in the last quarter and also some of the challenges contained in the report.

The Chairman welcomed Helen Richardson, Chief Nursing Officer at the CCG to the meeting.

In the committee's discussion the following principal points were made:

- A question was asked regarding the distinction between contacts and referrals listed in the appendix to the report. *The ADCSF confirmed that contacts were defined as queries received which required signposting or simple responses. Referrals were considered to be issues which required further work to gather more information.*
- It was commented that a high number of referrals from the police resulted in a no further action and a number of these referrals centred on domestic abuse cases. The committee asked for a report to be brought to the September meeting of the committee to look into the issue in greater detail and to include access to comparative data. It was also suggested that the Chair of the Herefordshire Safeguarding Children's Board be invited to the meeting. *The ADCSF commented that in all local authority areas the level of referrals from the police was high.*
- The committee asked whether there was any explanation concerning the decreasing number of child protection cases involving physical and sexual abuse in the appendix. *The ADCSF would provide greater detail following the meeting. Action note*
- A question was asked regarding the child protection conferences and whether the April figure for the conferences was unusually high given the backlog produced by the adverse weather during the start of the year. The ADCSF did not have the April figures to hand but would report these back to the committee following the meeting. Action note
- The committee noted an increase in the number of children on child protection plans. The ADCSF confirmed that this was a significant piece of work for the directorate to assess the thresholds and their correct application. However it was

explained that very few children had been on a plan for longer than 2 years which demonstrated their effectiveness.

- An update on joining the regional adoption agency was requested. The ADCSF explained that the general election in 2017 had delayed the process which had caused some impact on the recruitment.
- The committee noted the positive work that was being undertaken around placing older children into adoption but was concerned about recording practices on case documents, as identified by the peer review, and the consistency of reports which had been a significant area of concern at the council previously. *The DCW explained that performance was not reaching the targets set and this was an objective of the directorate to address this issue. The peer review had found that there was consistent high quality work but that recording needed to be improved. The ADCSF explained that priorities included the need to record the right data and clear case summaries provided on mosaic, the system used at the council. It was confirmed that social workers used mosaic and had mobile devices to facilitate recording.*
- It was requested that an update report on the recruitment and retention of social workers be added to the work programme. The ADCSF explained that this information could be incorporated into future safeguarding performance reports.
- The cabinet member confirmed that there were a number of challenges to the children wellbeing directorate presented by the peer review. Work was ongoing to address issues concerning caseloads, thresholds and capacity and support was being put in place to assist the reduction of caseloads. There was awareness that action needed to be taken in response to the peer review however progress was moving in the right direction with the number of children on child protection plans currently reduced down to 180.

Resolved - that a report concerning referrals to the MASH is added to the work programme for the committee in September to include an invitation to Sally Halls to participate in the item and access to comparative data from other local authorities.

58. WORK PROGRAMME REVIEW

The committee received and noted the draft work programme for 2018/19.

The chairman provided an update on a response received from Lord Agnew to correspondence regarding elective home education.

The committee received an update on the timings for the presentation of the autism strategy to cabinet and it was explained that this had been deferred to a later date to enable more work to be undertaken on the document.

The committee noted that the Bromyard children's centre decision would be presented to a meeting of cabinet before the committee next met. There would not be an opportunity for the committee to preview the decision therefore the chairman urged members to make their views known to their political groups.

The committee noted that there was an item on the forward plan concerning the childcare sufficiency report 2019 - 2022 which was due to be presented to Cabinet in November 2018. It was requested that the draft decision was previewed by the committee.

The committee agreed a change to the date for the November meeting. The committee meeting would now take place on 12 November.

Resolved – that:

- a) the childcare sufficiency report is called-in for pre scrutiny and considered at the meeting of the scrutiny committee in 12 November; and
- b) the meeting date in November be changed to the 12 November 2018.

59. MEETING DATES

The date of the next meeting was noted. The meeting would take place on 16 July 2018 at 2.00 p.m.

The meeting ended at 1.11 pm

Chairman

Herefordshire Council

Meeting:	Children and young people scrutiny committee
Meeting date:	Monday 16 July 2018
Title of report:	Fostering and adoption Service Annual Reports 2017/18
Report by:	Cabinet member young people and children's wellbeing

Classification

Open

Decision type

Non-key

Wards affected

(All Wards);

Purpose and summary

To review Adoption and Fostering Services performance and approve related documents.

The National Minimum Standards are issued by the Secretary of State under the Care Standards Act 2000 and detail the conduct and standards required for Adoption and Fostering Services and as such are taken into account during inspections by Ofsted.

Standard state that the executive side of the local authority:

- receive written reports on the management, outcomes and financial state of the agency
- monitor the management and outcomes of the service in order to satisfy themselves that the agency is effective and is achieving good outcomes for children and/or service users;
- satisfies itself that the agency is complying with the conditions of registration; and
- the executive formally approves the statement of purpose and reviews them at least annually.

Recommendation(s)

That:

- (a) the performance of the adoption service as outlined at appendix 1 to this report be reviewed, any risks to achievement of objectives noted and relevant mitigating actions approved;
- (b) the statement of purpose for the adoption service (appendix 2) be approved;
- (c) the performance of the fostering service as outlined at appendix 3 to this report be reviewed, any risks to achievement of objectives noted and relevant mitigating actions approved; and
- (d) the statement of purpose for the fostering service (appendix 4) be approved.

Alternative options

 Under the National Minimum Standards for Adoption 2014 and Fostering 2011 (NMS), Cabinet should receive updates on the management, outcomes and financial state of Herefordshire Council's adoption and fostering services; it is open to Cabinet to identify additional or alternative actions to improve performance, but in doing so regard must be had to the resource implications of additional actions.

Key considerations

2. The annual reports set out the activity and performance for the Adoption Service and Fostering Service during 2017-18.

Community impact

- 3. It is a council priority to "keep children and young people safe and give them a great start in life". The fostering and adoption services support the council in achieving its ambitions in key strategies in the corporate plan, health and wellbeing strategy and children and young people's plan.
- 4. Adoption provides a permanency option for looked after children and so where it is in the child's best interests enables children to become part of a family outside of the looked after system. Ensuring every looked after child achieves permanency is a key part of the Corporate Parenting strategy with adoption a key element of this.
- 5. Fostering provides a safe and secure home for looked after children enabling them to recover from trauma and supporting them to reach their potential. Providing sufficient local carers able to meet these needs is a key priority within the Corporate Parenting strategy.

Equality duty

6. Under section 149 of the Equality Act 2010, the 'general duty' on public authorities is set out as follows:

A public authority must, in the exercise of its functions, have due regard to the need to -

- (a) eliminate discrimination, harassment, victimisation and any other conduct that is prohibited by or under this Act;
- (b) advance equality of opportunity between persons who share a relevant protected characteristic and persons who do not share it;
- (c) foster good relations between persons who share a relevant protected characteristic and persons who do not share it.
- 7. The public sector equality duty (specific duty) requires us to consider how we can positively contribute to the advancement of equality and good relations, and demonstrate that we are paying 'due regard' in our decision making in the design of policies and in the delivery of services. The adoption and fostering services welcome applications from all sectors of the community and is ambitious in seeking placements for children whatever their level of need.

Resource implications

- 8. For 2017/18 the adoption service budget was £661k. At outturn the service had an overspend of £122k which was accrued as a result of purchasing inter-agency placements and being unable to meet the income target. The Council has been able to submit a claim to be able to recoup £54k costs from a central government fund, and also received a further £54k relating to claims for the previous year. Inter-agency placements are purchased if in-house adopters are not available to meet need either because a child needs to be placed outside of Herefordshire or because a suitable match was not available.
- 9. The adoption service had an income target of £74k on the basis that the service will be able to sell placements to other authorities. Over recent years it has been very challenging to achieve this target as the service has required more adoptive placements than we have been able to recruit. As other adoption services in the region are now part of regional adoption services they are choosing to place within their own areas. The service didn't sell any placements this year.
- 10. The fostering service had a budget of £4,305k with an outturn position of being overspent by £205k. This relates to the allocated budget being insufficient to fund the number of inhouse placements being provided. If the number of placements being provided in-house was reduced then this would result in an even greater spend for the external placements budget as we are required to provide placements for each of our looked after children.
- 11. The external fostering budget which is used to fund Herefordshire Intensive Placement Support Service (HIPSS), independent fostering agency and residential placements had a budget of £3,676k with an overspend of £1,758k. This budget is under pressure due to the very high numbers of looked after children in the service resulting in there being insufficient placements available in house despite the service being very successful at increasing the numbers of foster carers. The service continues to work hard at recruiting carers and is in the process of refreshing the recruitment strategy to focus upon more targeted recruitment of foster carers particularly for older children, sibling groups and children with a disability.

Legal implications

12. The scrutiny committee are undertaking a review of the performance of the fostering and adoption service and can make reports or recommendations to the executive concerning the discharge of this function.

Risk management

- 13. Without an effective adoption service, looked after children would spend longer in the care of the local council. This would be detrimental to their wellbeing and life chances. If the support needs of adoptive families are not met, children may return to the care system. An effective adoption and looked after children's service is important to ensure that we are able to offer a robust and timely approach to securing permanence for children unable to be brought up safely within their own families and to ensure access to services that will best support their individual needs.
- 14. Without an effective fostering service children who need to be looked after by the council may be placed away from their own community. This can cause disruption to their education and relationships with their families and friends.
- 15. If recruitment targets are not met, there is a risk of increased dependence on independent agencies and residential units located further away from a child's networks incurring higher costs and budget pressures.

Consultees

16. Chairs of the Adoption and Fostering panels have been consulted and had the opportunity to contribute to the annual reports.

Appendices

Appendix 1 – Adoption Service annual report 2017-18

Appendix 2 – Adoption Service statement of purpose

Appendix 3 – Fostering Service annual report 2017-18

Appendix 4 – Fostering Service statement of purpose

Background papers

None identified

Adoption Service Annual Report 2017-18

OFSTED Registration: SC057941

1. Introduction

Under the National Minimum Standards for Adoption 2014 (NMS), Cabinet should receive updates on the management, outcomes and financial state of the adoption service; it is open to Cabinet to identify additional or alternative actions to improve performance but in doing so regard must be had to the resource implications of additional actions.

The NMS are issued by the Secretary of State under sections 23 and 49 of the Care Standards Act 2000 and are issued for use by Ofsted who take them into account in their inspections.

Standard 25.6 states that:

The executive side of the local authority

- receive written reports on the management, outcomes and financial state of the agency every six months;
- monitor the management and outcomes of the service in order to satisfy themselves that the agency is effective and is achieving good outcomes for children and/or service users;
- satisfies itself that the agency is complying with the conditions of registration.

Standard 18.3 states that:

• The executive side of the local authority formally approves the statement of purpose and children's guides and reviews them at least annually

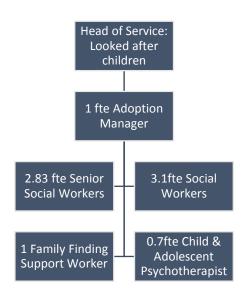
The Department for Education published 'Regionalising adoption' in June 2015 and 'Adoption: A vision for change' in March 2016, outlining plans to radically redesign the whole adoption systemthe structures, systems and workforce. In order to deliver their vision new service models were proposed, delivered through Regional Adoption Agencies (RAAs) and voluntary adoption agencies (VAAs) working together to deliver adoption services. By 2017 local authorities are expected to have effective plans and proposals in place and by 2020 all local authorities are to be part of a RAA, or to have delegated their adoption functions to a RAA.

During 2016 Herefordshire and Birmingham City Council explored the potential of jointly becoming a RAA, alongside partners from voluntary adoption agencies. This proved not to be viable and Herefordshire then expressed a formal interest in joining Adoption Central England (ACE), comprising Coventry, Warwickshire, Solihull and Worcestershire.

A provisional draft plan was presented to the ACE Executive Group which proposed a separate but aligned project to consider Herefordshire, and Birmingham who have also expressed interest, joining after the RAA went live. The DFE were approached to consider additional funding for this however this decision was put on hold with the announcement of a general election last year. Discussions recommenced in late autumn 2017 and Herefordshire's application is due to be presented to the ACE Executive Board on 15th May 2018. ACE went live on 1st February 2018. Pending the views of ACE Executive Board a decision report regarding Herefordshire joining ACE will be brought to Cabinet in due course.

2. Establishment

As of 31.03.18 the adoption team had no vacancies.



3. Children

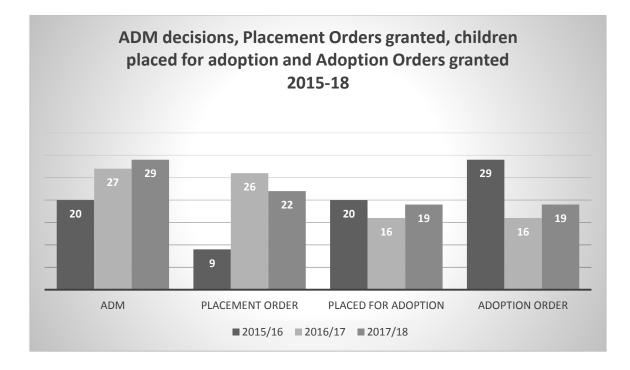
After four months of being looked after, all children should have a plan for permanence ratified at their second LAC review. When the plan is for adoption, a child's permanence report (CPR) outlining the family history, the child's needs and why adoption is the intended plan, is prepared by the child's social worker and presented to the agency decision maker (ADM). When the ADM decides adoption is the appropriate plan, this will become the care plan put to the court.

A child can only be placed for adoption if a court has granted a Placement Order or the parents have requested this and given their permission.

It is accepted that the younger a child is when placed for adoption, the better the outcome and local authorities are urged to consider placing children with foster carers who are also approved adopters so that the child does not have a change of carers. If this is not possible, an appropriate match with prospective adopters should be identified as soon as possible, ideally by the time permission to place the child for adoption has been obtained.

In 2017/18 the ADM decided that adoption should be the plan for 29 children; plans for 7 of these children subsequently changed. In 5 cases the Court did not grant the requested Placement Orders and for 2 children the plan was changed through the LAC Review process.

22 Placement Orders were granted and 2 birth mothers gave consent to their child being placed for adoption.



19 children were placed with adoptive families which included a 6 ½ year old with significant emotional difficulties and 2 sibling groups. A sibling group of 5 were placed over the end of last year/beginning of this year – 2 were placed together and 3 were placed separately, and whilst the placements are nationwide all the adoptive families are very committed to maintaining regular meaningful contact for the children, promoting and maintaining the sibling relationship. One child was matched for adoption with their foster carers, who they had lived with since becoming looked after.

Placement orders

As of 31.03.18 we had 12 children with a placement order but not yet placed for adoption. Prospective adopters had been identified for 5 of these children and active family finding was ongoing for the others.

One child has been subject to a placement order since 2008 whose care plan changed from adoption some years ago, but the order has not yet been revoked.

4. Recruitment and assessment

The assessment process for adopters is in two stages with the expectation that the first stage is completed within two months and the second stage within four months, though prospective adopters can take up to 6 months between the two stages if they choose. During Stage 1 prospective adopters attend an intensive 3 day 'preparing to adopt' training course, with a further one day training in Stage 2. Up until February 2018 we provided this training in collaboration with Worcestershire adoption service, enabling us to offer Stage 1 and Stage 2 training on a monthly basis, in line with the timescales for each stage. With Worcestershire joining the regional adoption agency, ACE, we are now providing the training as a sole agency.

With the timing of progressing to Stage 2 in the adopter's hands it is difficult to plan service delivery but to date no adopters wishing to progress have had to wait for an allocated social worker.

We had 60 initial enquiries over the year, down from 72 last year which reflects a national trend.

We have been holding quarterly information events, where people interested in adoption can meet with members of the team and adopters.

Over the year we accepted 18 Registration of Interest (up from 14 in 2016/17) of which: 7 families have progressed to a Stage Two assessment, and a further 6 are due to progress imminently. 4 families withdrew during Stage 1 of the process and we decided not to proceed to Stage 2 with one family.

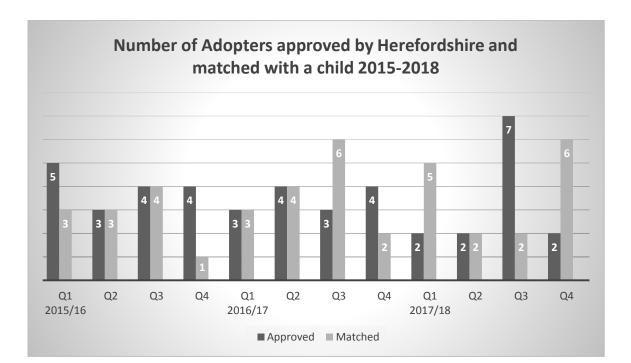
5 were 'fast track assessments', a process whereby certain previous adopters and foster carers can bypass Stage 1 and enter the process directly at Stage 2. Two of these were re-assessed specifically to enable them to be considered for a sibling of their adopted child and 1 family were in the middle of a second assessment when it was discovered that a sibling to their adopted child had been born in another LA and had a plan of adoption (they have subsequently been matched).

In 2017/18 13 families were approved as adopters (compared to 14 families in 2016/17 and 15 in 2014/15).

At the end of the year we had 9 families in Stage 1 and 2 in Stage 2. We had 4 families approved but not yet matched with a child, 2 of whom were being considered for a child.

The 2016/17 adoption scorecard indicates that 46% of Herefordshire adopters waited less than 3 months from being approved to being matched with a child; this compares with the England average of 26% and compared to our 10 statistical neighbours Herefordshire performed better than 9 others.

During 2017/18 we purchased 6 placements at a cost of £151,000. 2 children from other Local Authorities were placed with Herefordshire approved families, providing an income of £54,000.



5. Adoption panel

Report from Panel Chair, Avriel Reader.

"The role of the Adoption Panel is three fold

- a) to make recommendations to the Agency Decision maker(ADM) regarding adopters suitability to adopt
- b) to make recommendations to the ADM regarding the suitability of approved prospective adopters to be matched with a child
- c) to make a recommendation the ADM regarding whether a child relinquished by birth parent/s should be placed for adoption

The Adoption panel also has a responsibility to quality assure reports brought to panel and report on a regular basis to the Agency regarding quality and adherence to standards and regulations.

Child Permanence Reports (CPR) which are presented to panel at matching are generally of a good standard and in the main contain a good level of information. Sometimes gaps in knowledge about a child and his or her birth family could be more thoroughly researched. This information is critical to enable a good match to be made, to ensure the adopters have sufficient information to enable them to 'tell a child their story' and to enable the child/young person to understand their adoption journey. This understanding is critical to their self esteem and sense of self.

The adoption team is fortunate to have a very stable, experienced and committed group of staff who are clearly well managed. The reports prepared to assist in the approval process – Prospective Adopter Reports (PAR) continue to be of a very high standard which assists the adoption panel in making strong recommendations to the ADM. The number of prospective adopters coming to panel remains similar year on year with a slight reduction this year at 13.

Herefordshire continue to recognise the importance of bringing timely matches to panel which is reflected in the reducing timescales from becoming looked after to being placed for adoption (381), this is now well below the national target(426). Reducing this timescale is critical for enabling children to be placed as young as possible in their permanent home. Disruptions to placements remain low. It is recognised that one of the critical components of successful outcomes for adoption is the provision of adoption support post placement. Herefordshire have successfully bid for funding from the Adoption Support Fund, this year to £22,500 which is similar to the previous year and marks the commitment to adopted children and their adoptive families.

One of the key strengths of the Herefordshire adoption service is the continued employment of a child and adolescent therapist. This service is of considerable benefit in assessing children's needs prior to placement and assisting with transitions for the child from foster care to their adoptive placement. This service has assisted many children to make what is in many cases a very traumatic change to their new family. In some cases children who have experienced traumatic early lives and several moves are helped to try and make sense of this change and begin to make new attachments whilst being supported emotionally by the therapist, the social workers and the foster carers.

The adoption panel continues to have a committed core membership and panels are always quorate and supported by the agency advisor. The panel would benefit from inclusion of members from different ethnic and cultural groups which represent the local community and we will continue to seek new members where possible. Members of the panel have attended training based on the new methods used by the adoption team when training prospective adopters. We also attended an Adopt West Midlands event featuring the latest research on Foetal Alcohol Syndrome and the impact of Domestic Abuse in the developing brain of a child. Both were extremely valuable.

The panel are also supported by business support who hopefully benefitted from some training on administration of panels earlier in 2017.

By way of constructive comment in a learning organisation the panel raise the following issues.

- Sufficient time for quality assurance of all reports to panel continues to be important in maintaining standards and to ensure best available information on children is available to ensure the most suitable matches with prospective adopters.
- The panel have noted that Life story work/books continue to be the responsibility of the allocated social worker. Feedback to panel from adopters continues to indicate that this work is not done in a timely fashion or not done at all. Social Workers need to be allocated sufficient time for this critical task or offered support. These 'books' along with the CPR and the later life letters are vital to a child's/young persons growing understanding of why they were adopted and if well done are critical in building self esteem and emotional health, without them key building blocks to their understanding will be missing. It is particularly critical that this information is available early in placement for older children as they will be questioning their adopters at a very early stage in their development. It is continuing good practice that adopters are offered the opportunity to attend 'telling courses'. Many local authorities are reviewing their support to this vital service recognising that social workers need support to achieve the standards required"

6. Post adoption support

We have secured £22,500 of funding for specialised therapeutic support through the Adoption Support Fund (ASF) this year to support 10 of our adoptive families.

We received 24 requests for adoption support assessments, which resulted in the provision of 8 adoption support assessments (and applications to the ASF) alongside ongoing support from an adoption social worker. In addition to this there have been many contacts with families where brief interventions, often just the opportunity to talk through particular issues, has helped them through a difficult period, preventing the need for more intensive involvement/services.

Two 'Family Fun' days have again provided the opportunity for adopted children and their families to get together in an informal setting.

Regular workshops for adopters have been held covering subjects such as 'talking to your child about being adopted', understanding children's behaviour and therapeutic parenting. Support is also offered through consultations with our Child and Adolescent Therapist.

With dwindling numbers at monthly support groups we consulted with adopters as to what they would find helpful. In response an adopter has now set up a support group run by adopters for adopters. This is a relatively new group but initial feedback is very positive.

The Letterbox system is currently supporting the adopters of over 150 children to maintain contact with members of their birth families, involving approximately 500 exchanges of news per year. 52 new agreements were made during the year.

The agency also has a statutory duty to make available support for anyone living in Herefordshire who have been affected by adoption. This includes

- Counselling, seeking and sharing birth record information with adopted adults
- Counselling and supporting birth family members who have lost/are likely to lose a child through adoption
- Counselling and assessing those wishing to adopt through the non-agency route- usually step-parents.

We received 17 enquiries from adopted adults wishing to access their birth records, 14 of which had progressed to a referral by the end of the year. Locating and securing adoption files from across the country can be a time consuming activity and we have experienced a lot of delay with some agencies and Courts providing records.

The team has provided counselling and support to 3 pregnant women who expressed a wish to relinquish the care of their child at birth. 2 progressed with the babies being accommodated and one child returned home.

We received 12 referrals to provide support to birth parents whose children were in proceedings.

We received 31 non-agency adoption enquiries (all from step parents) – an increase from 2016/17 of over 25%. We continue to encourage people to consider alternative ways of obtaining parental responsibility and initial discussions with families focus on the lifelong implication of adoption for the child and of the need to focus on the child's needs, not the adults. If families decide to pursue an application to the court they have to give us 3 months' notice. It is encouraging to note that whilst the number of enquiries has risen the number of applications made to court has decreased, with only one being made during the year.

7. Training

In addition to the 'preparing to adopt' training for prospective adopters, adoption social workers also contribute to the training programme for foster carers on the process of family finding and moving children on to adoption.

Two members of the team undertook training in level 2 Dyadic Developmental Psychotherapy (DDP) and two completed Theraplay Level 1 training – both through AdoptWestMids. This training will be cascaded throughout the service, promoting understanding of the benefits of an attachment based style of parenting.

Workshops on planning for adoption and the preparation of Child Permanence Reports (CPRs) have been provided to the LAC and Child Protection and Court teams and training on sibling assessments is planned for the near future.

Adoption social workers continue to offer a 'buddying' system to support children's social workers without adoption experience through the process.

8. Performance and quality assurance

Regional and national data for 2017/18 is not available for comparison at the time of writing however the adoption scorecard for 2016/17 has recently been released.

Children					
	A1: Average time between a child entering care and moving in with its adoptive family (days)	A2: Average time between a local authority receiving court authority to place a child and the local authority deciding on a match to an adoptive family (days)	A3: Children who wait less than 14 months between entering care and moving in with their adoptive family (number and %)		
LA's 3 year average (2014-17)	547	255	50 (50%)		
Distance from 2014-17 performance threshold (426 and 121 days)	121 days	134 days	n/a		
1 year trend - Improvement from 2016 to 2017	Average time in 2017 was shorter than in 2016	Average time in 2017 was shorter than in 2016	n/a		
3 year trend - Improvement from 2013-16 to 2014-17	Average time in 2014-17 was longer than in 2013-16	Average time in 2014- 17 was longer than in 2013-16	n/a		
England 3 year average (2014-17)	520	220	11120 (53%)		

As reported last year, our 3 year average figures for indicators A1 and A2 will continue to be impacted by the cohort of children including two sibling pairs, one of which had been in foster care for more than six years and the other had previously been placed for adoption but had returned to foster care before being successfully placed the second time. The 'headline' figure does not reflect the very positive outcomes for these children. Similarly the successful placement of 2 six year old siblings within the last 12 months, who had been accommodated for almost 3 years prior to moving in to their adoptive family, will 'skew' future figures. However this should be celebrated as a great achievement for these children.

Without these 'legacy' cases, figures for 2017- 18 show the average number of days for indicator A1 reduced to 381 (well below the theshold of 426) and A2 reduced to 134 days.

	Number of days					
	2014/15 2015/16 2016/17 3yr Target 2017/18					
				average		
A1						
Becoming	515	706	467	547	426	381
LAC to						
placement						
for adoption						
A2						
Permission	245	333	132	255	121	134
to place to						
match with						
adopters						

22% of Herefordshire LAC children were adopted from care over 2014-17 compared with the England average of 15%. In comparison with our 10 statistical neighbours Herefordshire performed better than 9 others, with percentages ranging from 8 to 23.

Complaints, compliments, comments

Feedback is sought from prospective adopters, adoptive parents and social workers from within the council and from other agencies at various times throughout the adoption process. The preparation training for adopters is universally praised in terms of content and presentation and social workers involved in introductions of Herefordshire children to their adopters report very favourably on the thoroughness of the planning and the support provided during the transition from foster family to adoptive family, with the intervention of the child and adolescent therapist very much appreciated. Adopters overwhelmingly express their satisfaction with the service they have received from the adoption team and many compliments are received about individual social workers and the support offered by them in becoming adoptive families.

Prospective adopters often comment that they have approached a number of adoption agencies and chose to proceed with Herefordshire due to the friendly, efficient response they received during their initial enquiries.

One complaint was received in relation to the Letterbox process, but was not upheld.

There continue to be frustrations about the time taken for life story books and later life letters to be provided for children placed for adoption. To meet regulatory requirements these should be provided within ten days of the celebration hearing following the granting of the adoption order.

9. Key achievements during 2017-18

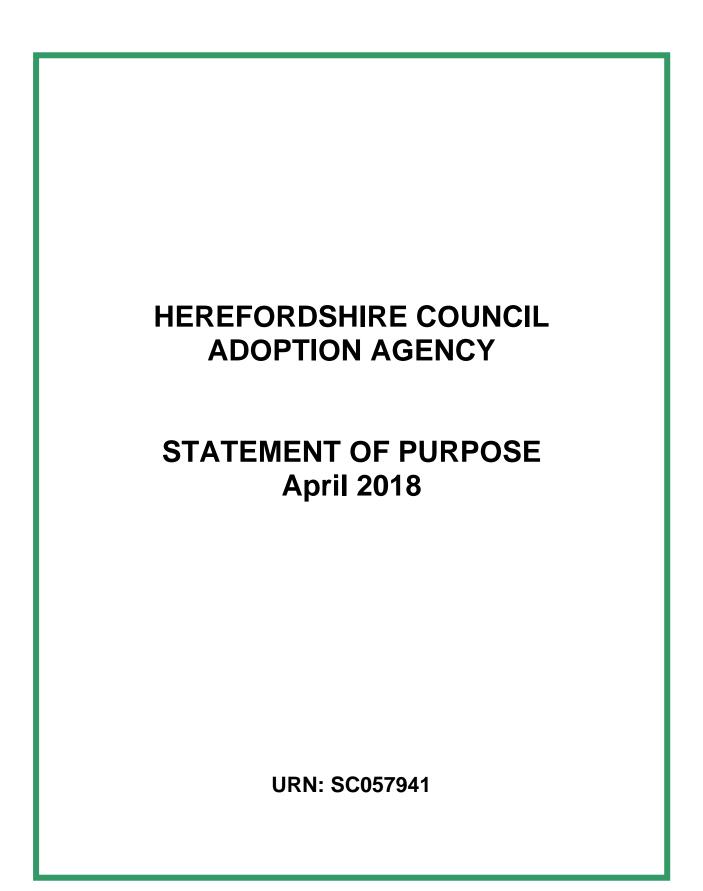
- 22 placement orders granted
- 19 children placed for adoption including 2 sibling groups and 2 children placed with their sibling who had already been adopted.
- 13 adoptive families trained, assessed and approved
- 29 ADM decisions for children
- 19 adoption orders granted for Herefordshire children
- Applications to the adoption support fund enabling Herefordshire adoptive families to benefit from specialist therapeutic support worth £22,500

10. Key priorities for development during 2018-19

- Acceptance into a Regional Adoption Agency
- Improve early permanence planning to increase numbers of children placed in fostering to adopt placements and improve timeliness between court authority to place a child and the local authority deciding on a match to an adoptive family
- Improved timeliness of life story books and later life letters and quality of child permanence reports
- Develop therapeutic support available for adoptive families

Appendix 2





CONTENTS

- 1. Aims and objectives of the local authority in relation to the adoption service.
- 2. Number, qualification and experience of the staff employed to deliver its specialist adoption service.
- 3. Systems in place to monitor and evaluate provision of services to ensure adoption services are effective and the quality of service provision is of an appropriate standard.
- 4. The procedures for recruiting, preparing and assessing, approving and supporting prospective adopters.
- Appendix 1 Herefordshire Council's complaints procedure (Full procedures can be accessed through Herefordshire Council's website)

1. Aims and objectives of the local authority in respect of its adoption service

The authority aims to provide a service to all its customers that is welcoming, user friendly and non discriminatory.

The adoption service endorses the values underpinning the National Minimum Standards in setting service objectives and strives to promote the following principles within the timescales laid down by regulation:

- All children should be protected from emotional, physical and sexual harm and neglect.
- All looked after and adopted children should be placed as soon as possible with carers who can provide safe and appropriate care.
- In preparing children for an adoptive family we will listen to their views and provide age appropriate information.
- All service provision will be sensitive to the needs and diversity of the individual children, their birth parents and adoptive parents.
- All service provision will be flexible, responsive and supportive of carers and children.
- Adoptive parents require access to specialist preparation and ongoing support to carry out the additional parenting tasks of adoption.
- Adopted children and their parents require additional tools to process their unique histories and to understand their permanent separation from birth families.
- The adoption service will act as a mediator and consultant with universal services to ensure sensitive inclusion.
- We acknowledge that adoption has lifelong implications for those adopted and their families.
- Partnership between all those involved in adoption is essential to deliver the best possible outcomes for children.

Based on these principles Herefordshire Children's Wellbeing directorate aims to provide a comprehensive adoption service to all those who require it. The service is consistent with Adoption Regulations and National Minimum Standards which are reflected in comprehensive policies and procedures.

Services provided by Herefordshire adoption service:

- Recruitment, assessment, preparation and support of a wide range of prospective adoptive parents to meet the placement needs of children locally and nationally.
- Counselling, information and support for birth parents who have lost or are at risk of losing their children to adoption.
- Counselling, information and support for pregnant women and parents who are considering placing their child/ren for adoption.
- Counselling for adopted adults in accordance with Schedule 2 of the Adoption and Children Act 2002. Those wanting intermediary services to trace birth relatives are signposted elsewhere.

- Advice and consultancy for social work practitioners and others who are working with children and families affected by adoption.
- Counselling, assessment and court reports in step parent and other nonagency adoption proceedings.
- A secure 'Letterbox' system to enable information to be safely exchanged between adoptive and birth families.
- Preparation of reports and attendance at other local authority panels when a match has been recommended for a Herefordshire approved family.
- Assessment of the support needs of adoptive families and provision of services before and after an adoption order has been made. This will include adoptive families unknown to the agency who reside in the county and request adoption support assessments 3 years post adoption order.
- Signposting, provision or commission of therapeutic services for children and their parents to ameliorate the impact of early trauma and abuse.
- Provision of adoptive families for children identified locally and nationally.
- Secure storage of adoption case records with appropriate measures taken to prevent theft, unauthorised disclosure, loss or destruction.

2. Adoption service staff

- Gill Cox, Head of Service for looked after children and adoption has been the registered manager for the adoption service since May 2017.
- In the absence of the registered manager, the adoption CSW manager, Gill Smith, will deputise. Responsibility for the service rests with the head of service for looked after children and young people.
- Nichola Leighton has been the adoption support services advisor (ASSA) since May 2017.
- Social workers preparing reports in relation to prospective adopters, adoption placements and other adoption specific reports are required to have three years post qualifying experience in child care social work (including direct experience of adoption work). The 5.84 full time equivalent adoption social workers meet this requirement and all are registered with the Health and Care Professions Council.
- Through supervision, annual performance appraisal and development interviews and specialist training Herefordshire Children's Services ensures that staff have the skills and knowledge to work effectively in the complex field of adoption practice whilst keeping up to date with safeguarding and legislative developments.
- The team have a stable core staff group with a wide range of experience in the field of child care and family placement, including a play therapist/child and adolescent psychotherapist who provides

consultations to social workers, carers and parents and works directly with children, young people and adopters.

- Written procedural and practice guidance, including safeguarding procedures are available to staff and this is updated regularly in light of practice and legislative changes.
- All members of the adoption service undertake regular safeguarding and data protection training.
- The adoption panel has a rolling programme of training with bi-annual half-day workshops in conjunction with the adoption service staff group.

3. The systems in place to monitor and evaluate the provision of services to ensure that services provided are effective and the quality of all aspects of service is of an appropriate standard.

Feedback is regularly sought from service users and used to improve services provided. The adoption panel provides independent quality assurance on practice and reports presented. Quarterly reports on adoption performance are presented to senior manager and elected members. Adoption services are inspected and rated by Ofsted as part of their inspections of services for children in need of help and protection, looked after children and care leavers.

Service planning information

- The adoption panel takes a proactive role in meeting its obligations to monitor the service's performance against national minimum standards.
- Annual reports of the adoption service's activities, management and performance are presented to the senior management team and executive of the council and to key stakeholders.
- Protecting children and giving them a great start in life is a council priority. The timeliness of permanence planning for children is demonstrated through the numbers of children placed for adoption and the DfE adoption scorecards.
- The adoption service maintains records of its work and ensures that legislative requirements governing the use and retention of information are adhered to. All members of the service undertake data protection training.
- The assistant accountant for children's wellbeing meets regularly with the nominated manager to ensure the financial viability of the service.
- Records are kept of any serious incidents, allegations or complaints about the adoption service and policy and practice are updated to improve the service.
- Adoption service staff attend regional events and training to keep informed about adoption practice development for the benefit of its diverse customers.

Monitoring of recruitment and assessment of prospective adopters

- All prospective adopters are directed to/given written information about the council's complaints procedure and about their right to apply to the independent review mechanism (IRM).
- All prospective adopters are required to attend 'Preparing to Adopt' training which until February 2018 was provided in partnership with Worcestershire adoption service. Evaluation forms are provided at each session and direct feedback is sought by the adoption panel. Feedback is used to inform course development.
- Timeliness of response to enquirers and throughout the approval process is measured and reported nationally.
- An evaluation questionnaire about panel attendance and experience is provided to all attendees including social workers and feedback from these is presented to panel to review its practices.
- On the granting of an adoption order all adopters are asked to complete a comprehensive questionnaire on their experience of the service offered by the agency.

Monitoring of child's adoption plan

- Children with a plan for adoption are monitored through the LAC review system by independent reviewing officers and regular auditing.
- Close liaison between children's teams and the professional advisor ensure sufficient time for consideration of adoption plans by the agency decision maker (ADM).
- Should a placement disrupt prior to an adoption order being granted, a meeting is convened to investigate and learn and reports are shared with the adoption panel and agency decision maker.
- The need for birth parents to receive independent counselling and support is emphasised to independent reviewing officers and children's social workers.
- Child permanence reports (CPRs) and adoption support plans are prepared by suitably qualified social workers, endorsed by their supervisors and quality assured by the professional advisor to ensure consistent quality.
- Comments by panel members on the quality of reports and presentation of social workers are collated and fed back to supervisors to improve practice and feed into staff appraisals.
- Training is periodically undertaken with the children's teams to emphasise the multipurpose and explicit requirements of high quality CPR's and adoption support plans that acknowledge the lifelong impact of early trauma and neglect.

Monitoring of adopter activities

- Timescales for responding to initial enquirers, accepting registrations of interest and completion of the two stages of the assessment process are collated and reported in nationally published data.
- All approved adopters are referred to AdoptionMatch (formerly known as the national adoption register) if no potential match has been identified within three months of approval.
- Where an adopter has been approved for over twelve months and has not been matched with a child, a review of their approval takes place with the adoption manager. If there is a significant change of circumstance the review report is considered by the adoption panel and the adopter/s invited to attend.
- Monitoring is in place to ensure that DBS checks and medical assessments remain valid for all approved and waiting prospective adopter/s.
- Quality assurance comments by adoption panel members on each case presented are collated and fed back to supervisors.

4. Procedures for recruiting, preparing, assessing, approving and supporting prospective adopters.

The agreed policies and procedures governing the functioning of the adoption service are available on the Intranet and Internet.

The key features covered by the policies and procedures are highlighted below.

Recruitment, assessment and training

- In accordance with the Children Act 1989 and Adoption and Children Act 2002 the needs of the child throughout their life are paramount when seeking adoptive family placements and the child's welfare, safety and needs are at the centre of the adoption process. The adoption system exists to serve vulnerable children, rather than adults who wish to adopt.
- The main aim of all aspects of preparation is to provide a lifelong family where a child will grow up in a secure and positive environment and reach their potential in all aspects of their lives.
- The needs of children who require adoptive placements are diverse and complex. In order to meet these needs, the adoption service will be creative and flexible and will be willing to consider all enquiries that offer the potential to provide a suitable adoptive home for a child.
- The adoption service will respond positively to applications to become adopters from people of all backgrounds, cultures, disability status, sexuality, marital status and religion in order to provide the maximum opportunity for children to be successfully adopted.

- Our responsibility to maintain a child's safety and confidentiality means that it is often not appropriate to place Herefordshire children for adoption within the county. We therefore welcome prospective applicants from neighbouring authorities to enable us to place Herefordshire children with families assessed and supported by Herefordshire adoption service.
- Where it is supported by the social work teams, applications from foster carers who are already caring for a child whose plan is adoption, will be welcomed. They will be offered counselling and training/information particular to their circumstances and their assessments will be 'fast-tracked' to panel as will those who have adopted previously.
- We recognise that there is a national need for adoptive families and welcome applications from those able to meet the more complex needs of children such as large sibling groups, children with disabilities, older children and those from Black and minority ethnic backgrounds. If we feel unable to prioritise a particular application we will signpost prospective applicants to other agencies.
- Enquirers who are still having investigations or treatment in the hope of achieving a pregnancy will be advised that we will not accept an application until the treatment has ceased and they have come to terms with this. Given the prevalence of loss issues for children where adoption is the plan it is essential that applicants are as emotionally robust as possible and have come to recognise and accept their infertility.
- Information about the particular needs of children requiring adoption will be used to recruit prospective adopters to ensure well prepared adoptive placements within a timescale that is suitable to the needs of the children waiting.
- Where a placement cannot be identified from within Herefordshire's resources we will seek adopters via AdoptionMatch, family finding websites such as AdoptionLink and other local authorities and voluntary adoption agencies. The payment of an inter agency fee will not be an impediment to the placement of children within the shortest possible timescale appropriate to their needs.
- Approved adopters are encouraged to be proactive in identifying potential matches and to attend regional and national 'exchange days' and adoption activity days.
- Specialist profiling is undertaken at an early stage for children where experience indicates there may be delays in identifying a placement e.g. older children, children with complex needs or sibling groups of 3 or more children.
- Herefordshire welcomes interagency placements with families assessed, approved and supported by other adoption agencies. Efforts are made to place Herefordshire children within manageable travelling distances to minimise difficulties during transitions and ensure support from known social workers. Adoption support service provision is carefully detailed in an adoption support plan when placing children outside the county and

multi agency commitment is required. Its provisions are reviewed at each statutory review or at the request of the adoptive parent/s.

- There is a legal requirement that anyone applying to the court for an adoption order must be at least 21 yrs of age. We welcome applications from those with previous parenting experience and those of any age with the physical and emotional energy to care for a child throughout their childhood and beyond.
- Time will be taken at the outset to inform the enquirer about the particular additional needs of children waiting for adoption to ensure they have an understanding of the children's backgrounds and experiences and the implications for their future.
- A decision on whether to accept a registration of interest from an enquirer in the pre assessment stage is made by the adoption manager within 5 days.
- Within 5 working days of acceptance of the registration of interest and in partnership with a member of the adoption team, applicants will complete a stage 1 agreement to statutory checks, references, medicals and information/training to be provided. This is a 'sifting stage' led by the applicants, but guided by the adoption service. It is expected that stage 1 will be completed within 2 months, though acknowledged that longer may be needed by some applicants to complete their self evaluation.
- If as a result of information provided, the adoption manager considers applicants are unsuitable to proceed to stage 2, they will be informed of this in writing and advised of the complaints procedure.
- Applicants may take up to 6 months to decide whether they wish to proceed to stage 2, which is social worker led but guided by the prospective adopters. A further agreement will be completed with dates of training, assessment visits, and presentation of the prospective adopters report (PAR) to the adoption panel. It is expected that stage 2 will be completed within 4 months, but longer may be needed in some cases. The focus of the assessment will be the analysis of the strengths and capacities of the prospective adopters to meet the needs of children who have experienced trauma and loss and identification of potential vulnerabilities that may need additional support and training.
- Where any significant concerns arise during assessment, the adoption manager may decide that the social worker should present a brief report to the adoption panel. The applicant/s will be encouraged to attend and make their own representation to panel which will recommend whether the assessment should continue.
- The applicant/s will receive a copy of the PAR and be asked to sign it to confirm its accuracy and provide any comments.
- Applicants are invited to attend the adoption panel in order to address any questions themselves. Not all applicants may wish to attend and they are entitled to waive their right to do so without this affecting the panel's ability to make a recommendation as to their suitability to adopt.

Applicants will immediately be informed by the panel chair of the panel's recommendation to the agency.

• The agency's decision will be made within 7 working days of receipt of the panel's recommendation and final panel minutes and applicants will be informed orally within 2 working days and in writing within 5 working days.

Inter Country Adoption

- Many people believe they would not be able to adopt a young child in the UK and therefore seek to adopt a child from abroad. All enquirers will be asked whether they have considered adopting a looked after child in the UK and be given information about the children needing adoptive homes locally and nationally.
- The adoption duty social worker will provide initial information to inter country enquirers living in Herefordshire and inform them of the difference between domestic adoption and adoption of a child from overseas and the potential costs involved. Applicants will need to identify which country they wish to adopt from and research the requirements of that particular country.
- Where the service undertakes an assessment of applicants wishing to adopt a child from outside the United Kingdom a set charge is made for the work involved, half to be paid when an application is accepted and the remainder prior to presentation to the adoption panel. Where a subsequent match and supervision is required the agency will make additional charges to cover the costs to the adoption service.
- Where people are seeking to adopt a child who is a relative from overseas the set fee will usually apply.
- Intercountry adoptive applicants are required to access specialist information relating to their situation but will also be required to attend the 'Preparing to adopt' training.
- The process of assessment for those wishing to adopt from overseas is as outlined for prospective adopters above, but applicants will be expected to evidence how they will promote the cultural, racial and religious heritage of their child.

Support to placements pre and post adoption order

- During assessment and approval all prospective adoptive parents will have an allocated adoption social worker. Once a placement has been made the child's social worker will be involved in visiting the child in placement as required by regulations. The focus is to promote secure attachments for the child with guidance being provided from both social workers.
- Children placed for adoption are subject to statutory reviews under the Adoption Agencies Regulations/Care Planning Regulations. Independent

reviewing officers ensure that all aspects of the child's welfare and care and support plans for his / her future are progressing satisfactorily.

- The education and achievement of children with a plan for adoption is actively promoted; all children of school age have a personal education plan (PEP) which is reviewed as required and at least 6 monthly. Children's views are sought and achievements recorded. Out of school activities and educational trips are promoted.
- Adopted children are identified as a vulnerable group in the schools admission protocol and thus given priority. Adopters are informed of their child's entitlement to an enhanced pupil premium to support their education.
- It is a requirement that the child's allocated social worker prepares or commissions the preparation for each child of a lifestory book, and later life letter that includes advice on how to access their adoption file and care records.
- In order to meet a child's needs throughout their life, adoptive parents must have access to the fullest information about the child's pre adoption history. The child's adoption case record will be made available to the adopters' social worker and arrangements will be made for the adopter/s to meet with those able to provide information about the child. This may be done on an individual basis i.e through a meeting with the agency medical advisor and birth family members and/or through a child appreciation event.
- Where an adoption placement ends in an unplanned way or there is imminent danger of it doing so, the service will convene a meeting to consider the circumstances and to help with planning for the future. Reports of the subsequent disruption meeting are considered by the adoption panel to ensure they inform future service development.
- The agency recognises the need to be flexible in arranging comprehensive support to adoption placements. In order to achieve this, an adoption support plan is compiled for each child placed, with details of the support to be provided, including where appropriate financial support.
- Adoption support plans are routinely reviewed during the pre adoption order period and a review may be requested at any point by the adoptive parent/s.
- All adoptive parents eligible for adoption support services from Herefordshire who contact the agency requesting a service will be offered the opportunity to talk to an adoption social worker. Advice, information and signposting to other partners will be provided or a 'one-off 'service may be provided by the adoption social worker.
- Where on-going specific adoption support is indicated, an assessment will be undertaken in consultation with the family and partner agencies and a draft plan drawn up. Notice of the proposed provision of services will be given in writing to the person assessed and they will be invited to make representations before a final decision is made. In some cases a

multi agency adoption support meeting will be convened in order to facilitate and review the plan. The format and content of the review will depend on the circumstances of the case and need not always necessitate direct contact between the local authority and the adoptive parent, but may be limited to an exchange of correspondence.

- Where unexpected challenges arise and adoptive parents request an adoption support assessment every effort will be made to maximise universal service provision through CAFs, Multi Agency Groups and 'Edge of Care' initiatives. The level of needs pathway enables specialist advice and guidance to be drawn in from the adoption service without the need for an additional assessment.
- If specialist therapeutic support is assessed as required and is not available through statutory services, an application for funding from the nationally funded Adoption Support Fund will be considered.
- Sometimes it will be necessary to sensitively support adoptive families in making separate daily living arrangements for their child or young person. Every effort is made to maintain a link between the adopted child or young person and their family.
- Comprehensive guidance and support is provided to assist all parties to engage in effective contact that meets the changing needs of children throughout their childhood and into adulthood.
- Particular attention is paid to contact arrangement when siblings are placed for adoption separately. Some direct contact arrangements are actively managed but wherever possible once face to face contact is progressing well the agency will withdraw.
- A newsletter is produced twice a year to keep adoptive families informed of adoption related topics or events.
- Opportunities for contact with other adopters and other adoptive children are provided through a range of events e.g. support groups, and family fun days.
- Adoptive families are provided with information and encouraged to access the resources provided by adoption organisations such as Adoption UK; the adoption service will provide free membership to a limited number of adoptive families each year.

Services for adopted adults

- The adoption service has considered the need to provide advice and guidance to young people approaching 18 years, including the opportunity to extend letterbox arrangements. The service has information available for adopted young adults about managing an approach from a birth family member and registering a veto.
- The adoption service provides counselling to adult adoptees who wish to seek information about their birth family in accordance with schedule 2 of the Adoption and Children Act 2002.

- Following initial counselling the adoptee/ adult affected by adoption is signposted to registered adoption support agencies for tracing and intermediary services.
- The adoption service has established processes to register veto requests from adopted adults.

Services for birth relatives

- Children's social workers and the adoption service provide information and counselling to birth family members about the adoption process and its implications for them and their child. Birth parents are encouraged to be involved in planning for their child's adoption through contributing to the child permanence report (CPR), commenting on what is written about them and recording their wishes for their child's upbringing.
- Birth parents are kept informed of the progress of plans for their children and decisions are conveyed to them in a timely and sensitive way.
- Birth parents are encouraged and supported to meet their child's adoptive parents where it is considered appropriate.
- The adoption service actively promotes the exchange of information through Letterbox agreements. Adopters and birth family members are reminded to forward news in a timely way and efforts are made to initiate new arrangements and review historic arrangements to meet the changing circumstances of all users, whilst maintaining the focus on the needs of the adopted child/young person.
- Prompts are in place at every stage of the adoption process to remind birth relatives of available services.

Contacts:

Ofsted

Address: Telephone:	Piccadilly Gate, Store Street, Manchester. M1 2WD 0300 123 1231
	(for calls about children's services or any other aspect of Ofsted's work)
Email:	enquiries@ofsted.gov.uk

Herefordshire Council Adoption Service Nelson House Whitecross Road Hereford HR4 0DG

01432 383241 adoption@herefordshire.gov.uk

Fostering Service Annual Report 2017 - 2018 OFSTED Registration: SC056304

1. Introduction

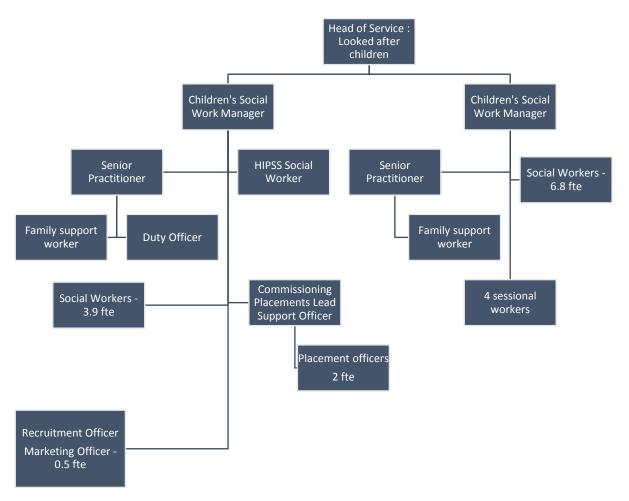
Report Owner – Carol Moreton (Registered Person) Childrens Social Work Manager, Fostering

Alison Forshaw – Childrens Social Work Manager, Fostering

Gill Cox (Responsible Person) – Head of Service for Looked After Children

This report complies with Standard 25.7 of the Fostering National Minimum Standards which sets out the condition that the Fostering Service Manager will monitor and report to board members and management members about the management, outcomes and financial state of the fostering service every three months.

2. Establishment



Following a restructure of the fostering service the two managers have shared supervisory responsibilities across kinship, SGO and general fostering domains. However with Alison Forshaw also covering the 16+ team from September 2017 the senior practitioners have been upgraded temporarily to help ensure supervision responsibilities within the above structure chart are met. The Placements Team joined the service in January 2017 to help provide greater continuity of placement searches – both 'stepping up and stepping down'. They are temporarily being lined managed by Business support to help streamline some administrative systems identified as requiring improvement and line management arrangements will be reviewed after 6 months in October 2018.

The restructure created some anxieties within the staff teams, especially when followed by stretching manager cover, however the changes are embedded and the teams are functioning well.

One part time worker has left in the year due to her family circumstances and some part time hours have changed enabling the creation of one full time vacancy currently being recruited; and a training officer post has been created, recruited to and will commence employment shortly.

There has been some turnover of sessional assessing social workers completing assessments needing to be 'fast tracked' which have been replenished in recent months.

3. Foster Carers

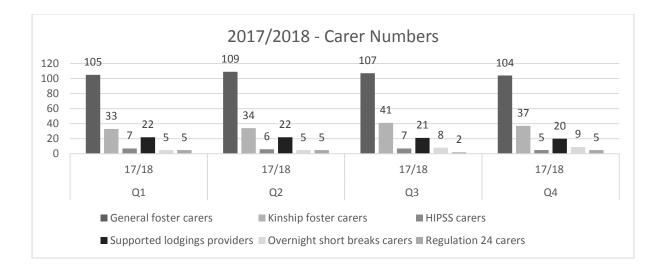
General Foster carers

Statistical national figures show most local Authorities still struggling to recruit at minus 1 to 1% growth. Herefordshire Fostering Service has continued to expand albeit at a slower rate of growth this year: (2015/16) performance of 15% growth, (131 households) 2016/17 overall growth was at 10% (144 households) and this year's growth of 155 shows continued growth at 7.6%. Overall including SLP and regulation 24 the figure of 180 represents 4% growth. Some of this reflects the increase in Staying Put, SGO and adoption conversions (refer to resignation data set below) and the more challenging nature of those children requiring placement.

	Q1	Q2	Q3	Q4	Q1	Q2	Q3	Q4
	16/17	16/17	16/17	16/17	17/18	17/18	17/18	17/18
General foster carers	102	101	107	104	105	109	107	104
Kinship foster carers	32	34	34	32	33	34	41	37
HIPSS carers	8	6	7	7	7	6	7	5
Overnight short breaks carers	3	5	5	5	5	5	8	9
Regulation 24 carers	5	3	2	3	5	5	2	5
SUBTOTAL FOSTER CARERS				151				160

Appendix 3

Supported lodgings providers	19	17	19	22	22	22	21	20
TOTAL	169	166	174	173	177	181	186	180



We have successfully recruited 26 new foster carers this year to the General, and OSB teams compared with 21 during 2016/17. HIPSS has temporarily dipped from 8 to 5 with 2 assessments booked into panel in April 2018.

We have exceeded last year's recruitment of 15 households with 18 new general fostering households approved during the year. We have continued to see a low number of foster carers transferring from us to other agencies – 2 during 2017/18 comparing with 2 during 2016/17 and 7 during 2015/16. By contrast we continue to recruit from other agencies with 3 currently in the process of transferring to the Local Authority. This would indicate that we are meeting carers need for additional support with our model of family support, buddy plans via the Foster Carers Association (FCA) and continued recruitment of respite carers.

However, despite the increased recruitment this year has also seen an increased number of resignations with 17 general carers resigning as compared to 12 during 2016/17 and averages of 10 – 11 in previous years.



Resignations were due to two carers transferring to an IFA, one specifically for a black heritage long term placement and specialist agency, 4 due to age retirement, 7 due to changes of circumstances i.e. move out of area or family changes/health.

We have had to implement a more vigorous approach to carers being "on hold" due to personal circumstances and unable to provide us with a resource as we still have to maintain regulatory requirements (training, DBS, medical) which detracts from support available to other carers and have advised several carers to withdraw and return for updated assessments when their situation has stabilised.

Retaining carers continues to be a challenge and there has been significant learning around placing 2 long term placements within families with young birth children and without prior experience.

Over the year we have introduced new respite support processes to enable carers to formally use their own support networks, particularly for support to long term placements and to help facilitate complex transport arrangements. To date 9 respite support assessments have been brought to Fostering panel this year. This involves DBS checks, references and checks being completed and a specific report written and presented to panel and Agency Decision Maker (ADM). It also makes clear children's wishes and feelings. The arrangement is reviewed at the foster carer's annual review. This provides children and families with a more "normal" family life where children can spend time with close family and friends of the foster family as is common for any family. It also reduces pressure on existing respite carer resources. We aim to increase this activity and incorporate such formal supports being available at the point of assessment or early on post approval.

HIPSS carers

HIPSS (Herefordshire Intensive Support Scheme) carers provide therapeutic placements for our most challenging children who are either currently in residential care or at high risk of requiring a residential placement. We aim to be able to place these children locally in Herefordshire within a family based setting.

The scheme has gone from 8 carers to 5 in the last couple of months:

During the year there have been 3 resignations: one resignation due to ill health; however, of the others, none have actually left Herefordshire Fostering service with 1 reverting to Supported Lodging Provider (SLP) status, 2 returning to general respite which evidences an ongoing commitment to the service and support offered.

All had been carers since the HIPSS scheme inception and it is important to recognise the additional emotional strain of such intense work with challenging placements.

There has been one new approval which has now taken a young person on a planned step down from residential care. Sufficiency has also increased in that one carer has been dual approved to take a new HIPSS placement and one has stepped down to a general foster placement.

4 young people have 'stepped down' from HIPSS provision to foster placements (all had previously been in residential care), one received outreach support to enable a reunification plan with family. One emergency intervention with a young female at high risk of child sexual exploitation (CSE), regrettably the risks within Herefordshire were so high she required placing in a specialist CSE residential provision to keep her safe.

Whilst the current number of HIPSS carers is below targets set of 10 HIPSS carers to provide 10 placements we have 2 assessments nearing completion and due to come to panel on 9th May. One will provide valuable respite support as part of an induction plan for both HIPSS and general carers.

A HIPSS recruitment strategy is in place and will be implemented again in summer 2018 with a new marketing officer in post. Across the region there has been interest in our success in recruiting therapeutic foster carers for the HIPSS project.

The contract for TISS ended on 31st March 2018 and so this service is no longer able to offer direct work to LAC children and consultations for foster carers will reduce significantly.

Carers have missed this additional resource, but HIPSS have become more responsive to crisis consultation to social workers. In order to mitigate the impact we are also opening more training across both agencies i.e. Positive handling, PACE to carers and PACE, emotional coaching and DDP training to staff to upskill fostering social workers.

During 2017/18 there were 3,001 residential bed nights purchased against a target of 1,774.

Quote from a child in care on HIPSS respite carer for her annual review:

'Hello Kelly, Its BH here. Alison was like family to HIPSS, the carers and the kids in care. This year Alison looked after me when V and Colin was on holiday. I had a lovely time with Alison... Alison was interested in what I liked to do in my own time. Alison was interested in history, movies and chess.'

Kinship carers

A Connected Person is defined as "A relative, friend or other person connected with a child. The latter is someone who would not fit the term 'relative or friend', but who has a pre-existing relationship with the child. It could be someone who knows the child in a more professional capacity such as (for example) a child-minder, a teacher or a youth worker."

Relative is defined as "a grandparent, brother, sister, uncle or aunt (whether of the full blood or half blood or by marriage or civil partnership) or step-parent."

In Herefordshire and other local authorities a connected person is referred to as a Kinship Carer. The term Friends and Family carer is sometimes used by other authorities. Locally the service can be directed by court to provide a 'kinship assessment' this can result in either a kinship fostering assessment or a Special Guardianship assessment depending upon the care plan for the child.

As directed by Regulation 24 of the Care Planning, Placement and Case Review (England) Regulations 2010 if a decision has been made that a child needs to become looked after and needs to be placed immediately with alternative carers the child can be placed with a 'connected person' and a temporary approval of the connected person can be made following initial safeguarding checks. The temporary approval can last for up to 16 weeks (with an extension of up to 8 weeks to be used in exceptional circumstances). During this 16 week period a full assessment of the carers is made as for any other foster carer.

There are currently 37 approved kinship foster carers and 5 temporarily approved kinship carers. Year on year there has been an increase in activity both in assessments and approvals over the year -18 approvals and 11 withdrawals within the Kinship cohort over the year. However of the 11, 4 have achieved permanency via Special Guardianship order (SGO), 5 children reunified to their birth family; 1 child was not placed and was placed with birth father; 1 has converted to staying put.

Compared with statistical neighbours Herefordshire LAC figures are high – the figures above represent positive permanence outcomes for Looked after children and Herefordshire has a LAC reduction strategy that is particularly focussed on supporting kinship carers to apply for SGO's where this is assessed to be in the child's best interests.

In total Herefordshire supports 109 Special Guardians. A SGO is a private order whereby the Special Guardian shares parental responsibility (PR) with the parent(s) but can exercise PR to the exclusion of all others. A focus over the past year has been to develop better support for special guardians and this has included a dedicated support group, giving special guardian's access to all fostering training, arranging consultations with TISS for special guardians, an online and telephone advice support service for Special Guardians, providing information via a quarterly newsletter, and the provision of an allowance policy that provides clarity and transparency. As the TISS service has now ended this will no longer be available from April 2018.

The fostering service completed 14 SGO assessments this year, of which 9 were SGO's to foster carers, kinship carers or temporary approved (Regulation 24) foster carers. The remaining 5 were private applications instructed by court. The fostering service also responds to instructions to review SGO contact arrangements or support plans if requested by court.

Our family support workers have continued to work directly with 13 special guardianship families, an increase from 7 last year, indicating a doubling of demand. Where a special guardianship order is made for a former looked after child then access to funding for therapeutic services is now possible through the Adoption Support Fund (ASF). To date 4 applications to the fund have been successful for a range of therapeutic and occupational therapy resources; two application are awaiting a decision (as compared with 2 the previous year).

Sleepover Scheme Carers

The Overnight Short Breaks Service was re-branded as the Sleepover Scheme when The Duchess of Gloucester visited the Fostering Service in September 2017. The change of name arose following formal consultation with birth families and children who felt this was a friendlier child centred title. The Scheme provides family-based overnight care to disabled children living at home with parents. We now have 9 Sleepover Scheme foster carers (up from 5 carers end of last year 2016/17) providing breaks to 8 children for a total of 348 nights a year (214 nights were provided in the financial year 2017-18). Two households have withdrawn due to changes in personal circumstances (pregnancy and new relationship). A total of 6 assessments have been approved over the year.

Number of carers:

	Year 1 (2016-17)	Year 2 (2017-18)
No. of Enquiries	86	17
No. of Carers Approved	6	6
Carer withdrawn/resigned (drop-off)	1	2

Number of Placed Children:

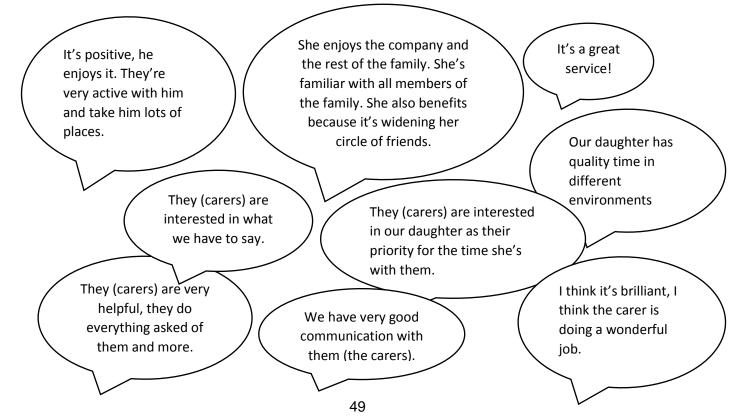
Year	2016/17			2017/18				
Quarter	1	2	3	4	1	2	3	4
No. of Children	1	4	3	3	6	5	6	8

We are developing the process of dual approving carers in order to meet the needs of children living with their parents and those who are looked after with specific planned overnight stays to help prevent placement disruption. It has proved extremely challenging for the fostering service to provide consistent respite care for children with disabilities as emergency placements or changes in plans for short term placements often displace plans for regular respite. However, those carers do need a similar level of respite support to that offered to birth families – especially if also providing other foster placements or having birth children as well as a child with complex needs. One foster carer is now receiving invaluable overnight respite for 4 nights per month for a child with highly complex health needs.

Stuart Barber, Sleepover Scheme co-ordinator, has moved to be based with the Children with Disabilities (CWD) team in order to streamline and raise the profile of the Sleepover Scheme and this is resulting in increased referrals and applications.

The Sleepover Scheme have formed their own support group facilitated by either the Sleepover Scheme Project Co-ordinator or Family Support Worker. Additional training is provided by colleagues in health for our carers usually on a child specific basis. OT assessment services are purchased privately on a case-by-case basis due to a lack of capacity in local NHS provision making all take-up of referrals much delayed and way outside the timeframe for placement planning.

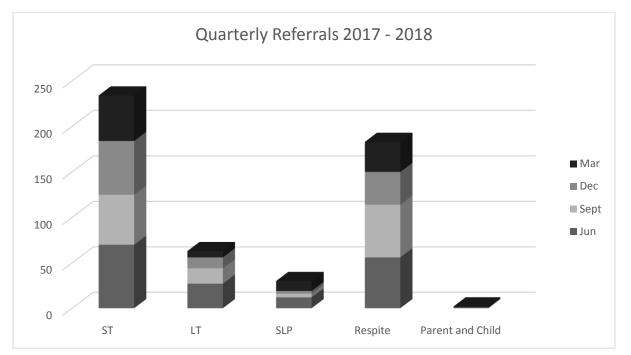
Feedback for the service is positive as evidenced by comments from parents (July 2017):-



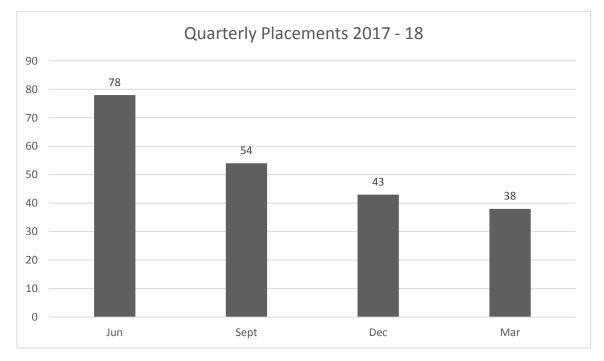
4. Placement activity

Referrals

There has continued to be a high number of placement requests during the year.

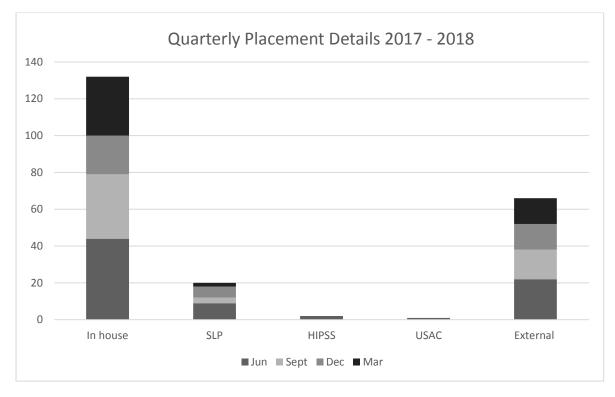


The graph above shows types and numbers of placement requests during the year whilst the graph below shows the total number of placement requests for each quarter. The lead up to summer is always a very busy period for placement requests but the reasons for a reduction in requests each quarter are unclear.



Quarterly Placements made

The graph below shows the number and types of placements actually made during the year. The continued high numbers of looked after children have meant a continued reliance on independent fostering agencies.



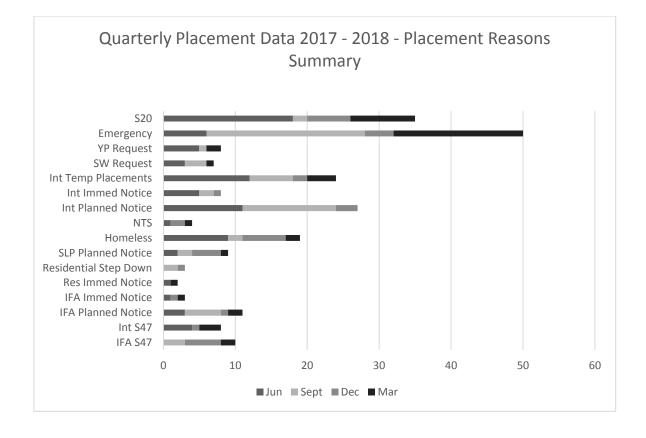
Placements Made – Summary of the Reason why the placements were needed

The levels of referral activity remain high as they were last year. There has been a reduction in the number of requests for long term placements through shared learning with referring teams. The levels of respite remain high in order to meet the demands of complex placements and older children in their teens.

The number of mother and baby placements has reduced since last year. The reasons for this are unclear but may be due to changes in the Child Protection/Court team culture.

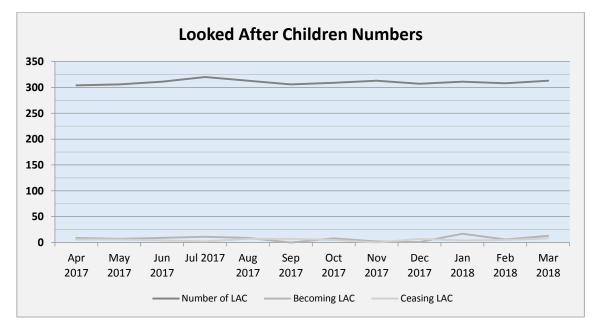
Further work is needed on early notification of placement requests to allow for planning times and good matching of placements and prevent the high level of emergency placement requests.

Placement panel has oversight of referrals and further work is planned to re-look at reviewing placement need for step down from IFA placements i.e. to long term placements or after assessment periods.



Children in placement

Through improvements within Mosaic and improved data gathering methods quarterly statistical data relating to children in different types of placements is now available and is being reported on a monthly basis. This has shown LAC figures continuing to rise over the year with 313 children looked after on 31st March 2018.



Again whilst increased LAC numbers is in line with national statistics (Ofsted 2016/17 national report) at 313 Herefordshire figures are high compared with statistical neighbours. We need to

improve planning and supporting arrangements to live with family members, reunification, SGO and adoption as above.

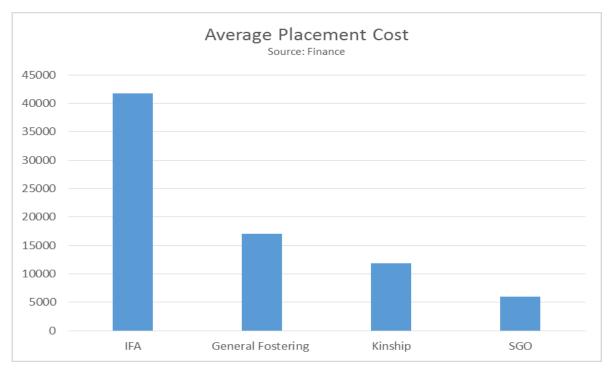
Placement stability

Placement stability has continued to improve throughout the year. This does indicate that support levels, the role of family support workers and formal support plans are working and is reflected in the increased Panel activity for long term matches (see section 6). However it is also indicative of the further work required to improve permanency for children outside of the looked after system.

Average placement cost

A greater number of looked after children are likely to move from a kinship fostering arrangement to an SGO arrangement than any other care arrangement. Kinship care arrangements cost on average £5k less than a general fostering arrangement. The number of kinship care arrangements continue to vary across local authorities. Herefordshire currently has 32 approved households and 5 temporarily approved households.

It should be noted that the costs of general fostering and kinship fostering placements are not directly comparable with the costs of IFA placements as they do not take account of staffing and infrastructure costs as IFA costs do. Work will be completed to inform the Placement Sufficiency strategy during 2018/19 to enable accurate comparisons.



Supported lodgings provider (SLP) and Staying Put carers

Supported lodgings providers have a shorter assessment than General foster carers, but include independent references, health and safety and safer carer policy. They are approved by the ADM outside of panel processes. Supported lodgings differ from foster placement in that they offer more 'long arm' support and advice and are expected to focus on development of independence skills, employment and education.

Following last year's successful recruitment on the back of national awareness regarding the need for placements for unaccompanied asylum seeking children we have had 2 providers resign and numbers have dipped from an average of 22 to 20. Of these 7 are dual approved SLP/ foster carers whose availability varies according to placement needs i.e. fostering or SLP.

Although the numbers of providers has dipped from 22 to 20 we have 2 providers who have moved to a larger house or are extending their accommodation and wish to increase their offer to us.

Work across the fostering service and 16+ has been focussed on reducing crises and more planned work. Qualitatively, SLP providers are reporting improved planning and less crisis driven work. An SLP support group is meeting monthly to discuss issues, practice and policy and guest speakers which is driving quality of care and planned moves to independence up.

The availability of an emergency temporary SLP in response to young people's representation to Corporate Parenting panel in 2017 has been positive and absorbed pressure from duty. This carer has had 6 emergency homeless placements, 3 placements did not progress as the young person chose to go elsewhere and 3 planned respite between placements.

However, inevitably some remain in situ longer than 48 hours and approval is increased to 'time limited placements' with a plan to move to other providers or independence.

Many young people struggle to reach independence but with planned high quality work they can be supported with a plan to achieve positive outcomes.

These young people have a higher than usual level of struggling to manage when they first move out of foster placements and, as for all our own children, often find 'leaving home' for the first (couple) of times extremely difficult facing higher levels of risk around budgeting, substance misuse, unemployment and unstable relationships.

One young person started two university courses – both ended in him leaving the course and accommodation debts. He was able to return to his previous SLP placement in June 2017. Support focused on maintaining a daily routine, obtaining secure employment, attending GP appointments and meeting his own mental and physical health needs with the aim to increase social interaction and support networks.

After 9 months the young person now has secure full-time employment with promotion and development opportunities in catering which he loves, he is ordering cook books, trying recipes, and purchasing kitchen equipment to cook a wider variety of recipes.

His annex is tidy and clean and he takes initiative in doing his own washing and shopping.

All previous debts have been resolved. The young person is now sending money to his younger sister at University to encourage and support her. He is also paying rent to SLP by standing order with an additional overpayment that will be returned to him towards a flat deposit when he moves on to independent accommodation.

The young person has friends who visit and go out socially together and they are even talking about getting a shared house together. He has attended GP and dentist appointments and is now managing these himself. He is looking well is able to buy his own clothes and takes pride in his appearance and has a girlfriend. Staying Put activity has continued to grow gradually year on year with an average of 5 - 8 placements at any one time. There tends to be a dip in the number of Staying Put placements emerging each summer, possibly because young people find this an easier time of year to move out at the end of college academic years.

Development work with the Housing Benefit team and a policy to set up Local tenancy agreements to claim Housing Benefit has been delayed due to changes in management cover over fostering and 16+ but will be pursued during 2018/19.

Unaccompanied asylum seeking children (UASC)

Nationally 13% of LAC over 16 year old are UASC. Herefordshire joined the National Transfer scheme in 2016. Whilst we have 2 SLP, one foster carer and one respite SLP support provider specifically available for UASC there has been significant difficulty with sustaining placements. This is in part due to the rural location which had not been anticipated by Asylum seekers expecting to be placed in a city but also due to concerns they cannot access the type of full time education they expected. The fostering service continues to offer twice a year training for foster carers and SLP on UASC and regional training is also being offered. Strategic work is planned with 16+ staffing and links with NTS to prepare UASCs more thoroughly before being placed in Herefordshire to help pre-empt unrealistic expectations.

Our SLP fostering social worker is working at full capacity with 17 providers to support, several with multiple placements.

5. Recruitment and Assessments

Analysis of recruitment and assessment activity 2017/18:

- 161 enquiries received
- 81 initial home visits
- 24 applications received
- 5 withdrawn 1 counselled out
- 18 continued to assessment with 6 of these already approved and the other 12 still in assessment
- 19 approvals over the year

There has been learning around our initial screening particularly focussing on health history and fitness to work. A long term difficulty has been trying to encourage GP's to prioritise foster carer medicals, a letter was sent out to GP's in relation to this over 12 months ago and further work is underway to help GP's understand the process and the impact of delays. When comparing regional data supplied from the West Midlands Recruitment Forum, it is clear that Herefordshire performs well with regard to enquiries, visits and overall approval of foster carers. It is evident at the forum meetings, that other LA's have increasingly large budgets on top of recruitment staff (some equating to £45,000) for recruitment and marketing purposes, using a lot of this to procure outside businesses and consultants to help with some of their social media, producing of materials, data research etc whereas in Herefordshire we employ the Recruitment Officer and also the Marketing Officer to cover these areas meaning the small budget that we have (£3,000) for this purpose is kept for marketing materials, advertising, and booking of events thus keeping the costs to a minimum.

Appendix 3

It is important to note that Herefordshire figures do not include enquiries into the Sleepover scheme, or kinship assessments

	Yearly totals
Approved starters (TC) - Birmingham	20
Approved starters (TC) - Coventry	36
Approved starters (TC) - Dudley	0
Approved startes (TC) - Hereford	19
Approved starters (TC) - Sandwell	6
Approved starters (TC) - Shropshire	0
Approved starters (TC) - Staffordshire	20
Approved starters (TC) - Stoke	5
Approved starters (TC) - Telford & Wrekin	11
Approved starters (TC) - Walsall	12
Approved starters (TC) - Wolverhampton	16
Approved starters (TC) - Worcestershire	16



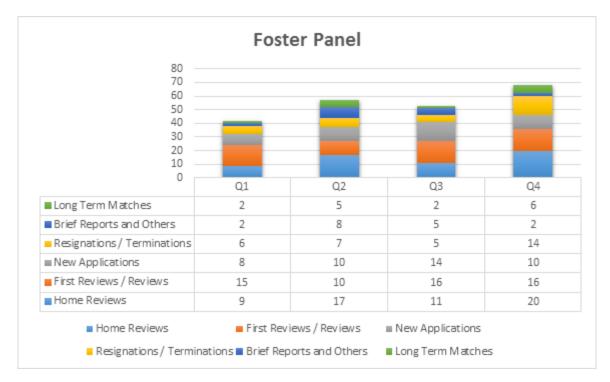
Recommendation (word of mouth) and website continue to be the top two ways in which enquirers are aware of fostering for Herefordshire. We have always been able to evidence that if we are not out in the community promoting fostering, the enquiry figures will dip.

A number of regional partners have asked for information about our recruitment strategy (Twitter, website and leaflets) particularly in relation to our use of the recruitment officer completing home visits (not a social worker) and specialist schemes such as HIPSS.

6. Fostering panel

The Fostering Panel meets regularly twice a month on average. Alison King is stepping down as Independent Chair, and this post has been successfully recruited to. We have also recruited 2 Vice Chairs, Hilary Jones (Virtual School Head) and Helen McNamara (previous employee of Herefordshire) as it became apparent one was not sufficient to cover eventualities such as sickness or holiday periods. A rotation pattern is in process to ensure consistency between panel chairs. Other members of the Central List include a registered foster carer, County Councillor, representative from the virtual school team, representative from the LAC health team, and staff members from fostering and HIPSS teams.

The panel is independent of the Local Authority and as such its remit is to make recommendations on whether applicants are suitable to foster, and if current foster carers should be re-approved. It also has a quality assurance and monitoring role in terms of the work of the fostering service. The majority of cases heard by the panel are either new applications, including from 'connected persons' (relatives or friends of the child/ren), and first reviews of foster carers, but panel also considers reviews post allegation, brief reports (where a concern has arisen partway through an assessment) and a variety of other matters. During the year the panel has considered some highly complex and contentious situations, one of which have resulted in a request by the applicants/foster carers for an independent review by the Independent Review Mechanism.



Feedback is sought from all those whose cases are presented to panel and is generally positive. The implication of negative feedback is carefully considered, and panel adjusts its conduct where necessary. Panel provides feedback on assessment reports presented to it, and over the last year has found these to be overwhelmingly of a good or excellent standard.

Policy development around quality assurance processes across the local authority has included a revision of panel quality assurance paperwork and the system for collating and reviewing the performance of staff and the quality of work presented which is being implemented from April 2018.

Other matters of concern relevant to the operation of the panel are fed back directly to the relevant Heads of Service. For example, this resulted in a shared training workshop to look at administrative processes across both fostering and adoption services with Business support and helped clarify expectations, minutes and times allotted on agendas.

7. Training

Fostering team:

- Managers have attended operational training where appropriate.
- A team member has been trained and has delivered two Graded Care neglect tool courses across the directorate.
- Family group Conferences for 3 staff
- Serious Case Review for S family
- Mandatory on line training, including information governance update
- DDP training for 1 member of staff
- UASC and independence planning for SLP
- Therapeutic parenting, PACE and emotional coaching workshops.

• Senior Practitioners are embedding a culture of "learning lunches" e.g. recognising and managing aggression towards foster carers, learning from good practice examples and case work reflections.

Foster carers

Foster carers have raised concerns that the CPD online and co-ordination of a varied training programme has been difficult this year following the decision that this role should be undertaken by the team instead of fostering panel co-ordinators. It is vital that we upskill and equip carers not just to manage challenging behaviour but also to offer therapeutic responses to children to help their recovery from trauma.

Consequently the staffing structure was reviewed to enable the creation of a new Training officer post which will be piloted initially for 12 months to develop the training programme for 2018/19. Given our small budget of £3,000 the aim is to co-ordinate with partner agencies offering or needing similar training and increasing joint training to social workers, HIPSS and fostering and education to ensure consistency of models and approaches.

All foster carers undergo the Preparation to Foster training and Induction. Mandatory training is monitored through formal supervision and the annual review process. It has been difficult to have clear numbers attending all of our courses due to loss of business support data gathering and co-ordination of course which will now be taken up by the Training officer post.

Additions to the fostering programme have been HIPSS training including direct 1-1 consultations and carer self-care.

8. Performance and quality assurance

See Section 3 for details of numbers of foster carers.

Quality assurance

The format for quality assurance of assessments has been reviewed this year with the new process due to be implemented for 2018/19. This will enable the quality of assessments to be monitored and reported in a standardised format.

Complaints

Four complaints were made by foster carers during the period. One was upheld in relation to communication between the Fostering and LAC teams; one was not upheld and responded to by another service; and two related to confidentiality breaches made by foster carers.

Three complaints were made by young people. One relating to respite arrangements; one relating to identifying an acceptable SLP placement; and one relating to house rules. All were resolved with the young people at an informal level.

Two complaints were made against the fostering service in relation to finance and nursery fees and neither were upheld following investigation.

Two complaints were made by birth parents and neither were upheld.

Opportunities to learn from complaints are considered in all cases and as a result of the complaints about poor communication with the LAC team joint learning lunches are now taking place.

LADO

There have been 6 referrals to the Local Authority Designated Officer (LADO) during the period. Two were substantiated, 1 kinship (child not placed) and 1 carer failing to report a safeguarding incident; 4 were unsubstantiated but related to concerns or allegations of mishandling by young people. In response an additional positive handling course has been arranged, jointly funded with the HIPSS service, and support plans were presented to panel alongside post LADO reports. One carer attended Panel due to practice concerns and a support plan to consider terms of approval.

Fostering Approval Decision Appeals

1 Independent Review Mechanism (IRM) appeal was made by a Foster Carer regarding the terms of approval being changed. Subsequently the carer was able to define her availability and type of fostering which has been positive for both parties and the carer continues to provide invaluable planned and emergency respite.

Compliments

Below is a small sample of compliments formally received during the last quarter.

'They were very complimentary about the prep training you facilitated this week. They felt the training was very good, the content very good and the delivery was excellent. They felt that the training was very much based in practice and that the trainers conducted themselves very professionally. They felt that you did a 'superb' job of bringing in case examples in a professional and anonymised way and that your ability to do this made everything seem very current. Although they intend to be introduced to fostering through OSB they felt on the back of the training that you offered that they may in the future progress to short-term fostering'. From SB, OSB co-ordinator.

...'I hope you do not mind me dropping you an email about the support me and my family have had from H B over the past few months.

Throughout this difficult period (which has coincided with other family issues of a serious nature) Heidi has been a significant help to myself, my wife and my family - not only has Heidi provided valuable support / guidance and practical help, she has gone the extra mile with ad hoc calls / dropping in on the way to other meetings/visits but more importantly she has always taken our calls / responded in a timely manner and as a family we can genuinely tell she cares about what she does and is devoted to us helping this through this period - it is obviously more than "just a job" to her.

There is much in the media about how poor our social services support is - but if Heidi is an example of how social services support families is in Herefordshire then the local community should be extremely proud of the services we have...Thank you Heidi we value your commitment and caring attitude to me and my family.' From an SGO family to fostering manager.

Recognition of achievements and good practice is very important and alongside the formal recognition of social work good practice we have now introduced a better way of recognising and celebrating our foster carers work, for example celebration event to be held during the Foster Carer Forum in June this year.

'D and B are an asset to the Fostering Service. They are compassionate and dedicated to the children placed in their care and I have seen how they do emotionally invest into the child too. Over the time of my involvement with D and B, I have seen how the couple have developed their skills. D's ability to be reflective is clearly evident. B has the balance of being a responsible caregiver and being a funloving person. D is calm and consistent – she has been able to demonstrate/apply PACE and together, they are a great couple who brings their heart into fostering the LAC of Herefordshire.' From CSW LC

' (they are) Helping me be happy...since I've been here I've had a lovely amazing life with HD and AD and everyone else in their family and also my mum and dad'..., I feel safe with H and A because they love us and they care about us so much'. Children in long term placement.

9. Key achievements during 2017-18

- Having an overall 6% increase in the number of carers from 148 to 154 carers despite restructuring, moving offices, some staff vacancy and the retirement and resignation of some carers.
- Increased permanence planning and placement stability via long term matching, kinship and SGO arrangements.
- New model of family support every newly approved carer has an allocated family support worker to help with the reality of having a first placement.
- Growth in over-night short break scheme, Kinship and Regulation 24 assessment work and providing placements for young people presenting as homeless
- Maintenance of SGO and SLP support groups
- Stability of staffing particularly following restructure, including management team
- Implementation of consolidation meetings to prevent placement disruption
- Better mechanisms for recognising and celebrating good practice from our foster carers
- Improved relationships and joint work with colleagues in Children's Social care teams around Regulation 24 and kinship work, LAC reduction planning and long term matching.

10. Key priorities for development during 2017-18

- Training development of a revised training programme to reflect greater skills around reparenting traumatised children including Solihull facilitators course for the 2 family support workers, DDP Level 1 & 2 for staff, joint training with HIPSS Impact of Trauma on Development, co-learning with LAC and Adoption
- Sufficiency increase in foster carer recruitment especially around teen, SLP and HIPSS carers and retention of carers, linking support planning and core group meetings with the LAC service and training development in emotional and therapeutic responses by foster carers, including workshops on 'self-care and resilience building' for carers.
- Increase in special guardianship arrangements for LAC
- Placement stability (and retention of carers).
- Supporting increasingly challenging placements and 'step down from HIPSS.
- Recruitment campaign to be driven by new marketing officer.
- Developing policies and procedures particularly the Foster Carer Handbook using Tri-x handbook
- Improving placement data gathering/statistical data via Mosaic and duty officer role.
- Development of Mosaic register and Form F Mosaic workflows through to panel process.

Carol J. Coeten

Signed Carol Moreton 20.4.18

Herefordshire Council Fostering Service 2018 Statement of Purpose OFSTED Registration: URN - SCO56304

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Introduction

This statement has been produced in accordance with the Fostering Services Regulations 2011 and National Minimum Standards for Fostering Services. The statement outlines the aims and objectives of the Fostering Service and the services and facilities provided by the Fostering Service.

The Statement of Purpose also links with the Children's Guide which is provided to all children, subject to the child's age and understanding when first placed.

The Statement of Purpose is available to Ofsted.

It is made available to staff of the organisation, foster carers, children and young people, parents and other professionals. It is reviewed on an annual basis and revised to reflect any changes as necessary.

What the fostering service aims to do (objectives)

Herefordshire council aims to develop and provide a high quality, comprehensive and integrated service that delivers excellent outcomes for children and young people in our care.

- To ensure that children are securely attached to carers capable of providing safe and effective care for the duration of their childhood.
- To ensure children are protected from emotional, physical and sexual abuse and neglect.
- To ensure children receive the education, health and social care they need to maximise their potential.
- To ensure that the services provided are flexible, responsive and supportive of carers.

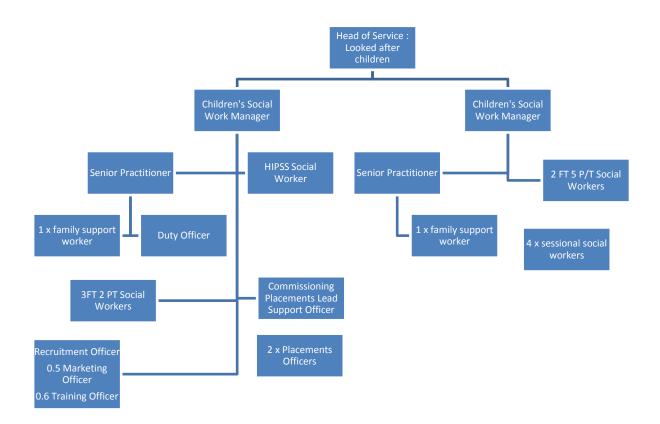
What the fostering service aims to do (objectives)

Our aims are underpinned by the National Minimum Standards for fostering to provide Herefordshire looked after children with appropriate foster placement provision primarily in Herefordshire.

- To ensure the views of children, parents and carers are sought and taken into account, having regard for their age and understanding, in the continuous development and improvement of the service.
- To take the wishes and views of children and young people seriously and to enable them to be part of any decision making process that affects them.
- To recognise the importance of and support appropriate levels of contact with family and community as is consistent with their welfare and care plan.
- To recognise and value the diverse nature of the community it serves and proactively engage with the local community to identify potential carers.
- To ensure there is a sufficient range of safe and appropriate placements available for the Looked after Children in Herefordshire.
- To actively monitor and supervise all placements to ensure children are safe, their needs are met and they are making progress to achieve positive outcomes.
- To contribute to and ensure effective multi-disciplinary and partnership working to meet the health, educational and social needs of children within placements.
- The service operates within the framework of equality of opportunity and antidiscriminatory practice. Children will not be discriminated against on the grounds of race, culture, religion, language, age, gender, sexuality, disability or social class in terms of service provision. Wherever possible children are matched within their own cultural, racial, linguistic and religious communities, and where this is not possible, plans must be put in place to keep the child's culture alive for them.
- Children with disabilities are to be placed in an environment that recognises and caters for their disability, and at the same time promotes their social inclusion.
- To ensure staff and carers are well trained and competent in delivering a quality Fostering Service, including opportunities for continued learning and professional development. To ensure all staff and carers have completed safeguarding checks and have a valid DBS.
- To provide all staff and carers support and supervision with clear lines of accountability and management.
- To provide each Foster Carer a named allocated Supervising Social Worker.
- To operate clear administrative records and financial management systems pertinent to the running of the service, including the maintenance of comprehensive and up-to-date records on all children placed.

- To ensure all complaints and allegations against carers/staff are investigated under departmental procedures in a timely fashion and lessons learned filter to improvements in future practice.
- The Fostering Service operates a Fostering Panel that provides a quality assurance role with regards to the recruitment and review of Foster Carers and Foster placements. The panel will ensure the welfare and safety of children is paramount in all decision making.
- Through the recruitment programme, specific training and supervision, foster carers are expected, with support, to give each child placed the best life chances available to them and an opportunity to be safe and secure, achieve in education, health, relationships and transitions to independence or moves back home to birth families.
- To meet the growing need for the fostering service to provide effective and prompt assessments of 'family and friend'.
- For those children who require external specialist placements (IFA or Residential placement), a referral is made to the commissioning team who aim to source and identify potential placements, working in collaboration with the child's social worker.
- A HIPSS (Herefordshire Intensive Support Scheme) has been commissioned from Action for Children and in-house fostering HIPSS project Co-ordinator to assess and meet regulatory requirements in relation to HIPSS carers to meet the needs of more challenging placements and reduce spend on IFA and Residential costs.
- We have continued to develop supported lodgings (16+ placements) and to recruit accordingly to provide placements for those young people who present to social care with needs that are additional to housing accommodation.
- To ensure assessment of carers seeking to provide permanency for children via special guardianship orders is completed effectively and efficiently.
- To ensure special guardians' assessed support needs are met and to reviewed at least annually.

Who makes up the fostering team



What types of fostering do we provide?

Short term or long term care

A child might come into care because of an illness or accident or a serious incident at home. Whatever the reasons, social services will be working with the family to resolve the issues so that the child can return home as soon as possible.

Brothers and sisters

Wherever possible siblings should be placed together. For many foster children, the relationship with their brothers and sisters is what they value most when separated from their family and staying together is very important.

Disabled children

We need carers with experience of caring for children with physical or learning difficulties and other additional needs.

Parent and child

We need carers who can help to give extra support in their home to new parents and their babies, particularly teenage mums.

Long term fostering

Some children are unable to return to their families. They will require a stable, long term fostering placement until they reach the age of 18 or beyond.

Family and friends

Family and friends carers play a key role in allowing children to remain living with adults that they know and trust if, for whatever reason, they cannot live with their birth parents. In such cases Herefordshire Council is committed to ensuring that, where possible, a child or young person can remain living within their own family network.

The support that family and friends carers receive is critical to the success of any placement.

Support Care

As part of a support package, day care and transport time limited support is provided.

Herefordshire Intensive Placement Support Service (HIPSS)

Herefordshire Intensive Placement Support Service (HIPSS) is a new therapeutic fostering service to children and young people looked after by Herefordshire Council with the most complex needs that would normally need to be cared for in residential care, away from their local communities and networks.

Therapeutic foster care gives children and young people who have experienced significant trauma in their lives an opportunity to overcome adversity and have the chance to form stable and secure relationships with their carers and live appropriately ordinary lives.

HIPSS is a dedicated friendly, creative team of professionals from psychology, education, social care, fostering and youth work. We work with children and young people aged 7-18 years with complex needs.

Staying Put

Staying Put arrangements are slowly increasing – where young people at 18 remain with their former foster carers until 21 years of age. Former carers continue to be supported by the Fostering service, as are young people e.g. by the 16+ team.

Supported Lodgings Placements

Young people often need support with becoming independent. Especially those people who have lived in care or have been homeless. Supported lodgings provide a safe place for them to become confident and learn about living as an adult: Carers who can inspire and provide them with an environment to help them build independent living skills and help them build a positive future.

Unaccompanied asylum seeking minors

For young people who have experienced significant trauma on their journey to the UK.

Private fostering

Private fostering is when a child or young person under 16 (or 18 if disabled) goes to live for 28 days or more with someone who is not a:

- Parent (including step parent)
- o Legal guardian or person with parental responsibility
- Close relative (like grandparent, brother or sister, aunt or uncle)

Fostering Panel and Recruitment

The Fostering Panel

Hereford operates its own Fostering Panel for the approval, review, registration and deregistration of carers.

The Fostering Duty Service

A Duty Social Worker is available throughout office hours. The purpose of this service is to identify placements for looked after children and support carers in times of crisis when their own supervising social worker is not available.

Fostering Family Support Worker x 2

Herefordshire Fostering service has developed 2 family support worker roles, who are available to provide outcome focused, direct work with children, young people and their carers. Trained in the Solihull Parenting Approach, and with skills in therapeutic parenting, to further equip carers to meet the needs of the children in their care.

The Recruitment Service

The Marketing and recruitment officers are responsible for providing a recruitment strategy to respond to service needs and ensure we have sufficient placements for those children in need of Foster placements. This service involves marketing and advertising for foster carers at events and using websites and social media resources. The recruitment officer undertakes initial assessments,

checks and references – known as Stage 1 checks - to determine if an applicant meets the criteria required. The fostering social workers complete Form F assessments of those applicants in preparation for presentation to the fostering panel.

16+ placement providers are recruited and are subject to an assessment by the Supported Lodgings social worker that is then verified and approved by the fostering service management team.

The Training Service

The fostering team provides training for foster carers both prior to and post their approval. We have recently appointed a dedicated Training Officer who will have oversight of the training we provide as well as the training needs of our foster carers. It is planned that she will co- ordinate the existing training programme as well as helping to develop and source new courses.

Preparation training is carried out over three full days and covers basic underpinning knowledge and experiential learning relevant to the task of fostering. The course is underpinned by the seven Training Standards that carers are expected to meet in the first year of their approval, these standards are:

- 1. Understand Principles and Values
- 2. Understand your role as a foster carer
- 3. Health, Safety and Healthy care
- 4. Know how to communicate effectively
- 5. Understand the development of children and young people
- 6. Safeguard children and young people
- 7. Develop yourself

Carers are expected to meet with their supervising social worker within 6 weeks of approval and develop their Personal Development Plan in line with the Training, Support and Development Standards. It is at this stage that carers will discuss with their supervising social worker what they need to do to meet the standards within the first year of their approval. At this stage it is also expected for carers to have attended (or at least have signed up for) a day of Induction post qualifying training. Practicalities are covered such as recording, how to claim mileage and providing information about who's who within the Team, and detailed expectations about their role.

There is a programme of training for carers who are engaged in the fee payment scheme and who wish to progress through from level 1 at approval to level 3.

The training programme currently offers the following workshops

- \circ Diversity
- o First Aid
- Safeguarding
- \circ Induction
- o Solihull 12 week
- Legal
- Healthy Matters (age related)
- Education
- Attachment
- Record Keeping and Reflective practices
- Safe Caring
- Behaviour Management
- Working as part of a team

- Life story work and Memory box
- o Contact
- o Domestic Abuse
- o Improved Economic Wellbeing for Looked After Children
- Drug awareness
- Foetal Alcohol Syndrome disorder
- o ADHD and Autistic Spectrum when available from partner agencies
- Social Networking
- o Parent and Child Placements
- o Alcohol Awareness
- o Sexual Health Awareness
- o Allegations
- Moving Children Onto Adoption
- o Prevent
- o Data Protection
- o Family Finding
- o SELFIE Sexual Exploitation
- o Foetal Alcohol Syndrome
- o Appropriate Adult
- Positive Handling
- o Impact of Domestic Violence
- Sexual Abuse.
- Pathway planning for older teens
- o Attachment in teens & Trauma Attachment and Learning
- Dealing with Anger
- Appropriate adult training
- Hidden Minorities
- o Unaccompanied Asylum Seeker Training
- o Practice Issues Group
- o Memory Box
- Gypsy and Traveller Children
- \circ $\;$ E safety and social media
- Self care and wellbeing for Foster carers
- Emotion Coaching
- Literacy Difficulties and Dyslexia
- Attention Concentration and ADHD
- TISS bespoke training working with families, sexualised behaviour, therapeutic play, self harm, child development and working with challenging behaviour
- \circ NYAS advocacy
- o Forum annual

Carers are expected to undertake Safeguarding, Diversity and First Aid as Mandatory courses and will be expected to attend a refresher course at least once every three years for safeguarding and first aid.

The fostering service offers carers the opportunity to further their skills and knowledge by accessing Solihull training within the first three years of approval.

Any individual training identified for carers within their supervision will be considered by the fostering service manager and where appropriate to meet the needs of the placement, carers will be given the opportunity to attend individual training events.

Family and Friends carers equally have access to all training events and are actively encouraged to attend. Specific training for kinship carers is to be offered in recognition of the specific issues affecting them and their family.

Support Groups for Carers and Birth Children

The fostering team provides carers with the opportunity to attend support groups which is facilitated by a fostering social worker and provides a forum for debate, guest speakers and informal support.

A practice issues Group offers experienced carers a more intensive bi-monthly discussion group.

A Stay and Play group for carers with under fives also meets weekly to enable carers and young children have social interaction.

A well-attended Supported Lodging provider practice group has also been formed this year, and partners are joining this to share information about specific issues e.g. DWP.

There is also a support group led by fostering social workers for birth children which is known as FISS, providing birth children with the opportunity to meet with other birth children and share their feelings and views about the impact that fostering has on them.

Support to Approved Carers

Approved carers are allocated to a supervising social worker who supports and supervises the carer and their family. This supervision is underpinned by relevant legislation, the standards and the Fostering Regulations.

Carers are supported and assisted by supervising social workers to manage the complexities of caring for a looked after child which includes support to attend any professional meetings, advice and guidance on attachment issues, managing difficult behaviour and placement issues. Supervising social workers will help carers to manage contact issues with birth families and support any contact where appropriate.

Formal supervision will take place with every approved carer at least three times a year and a record will be kept on their file, signed by the carer, social worker and team manager. Regulations require an unannounced visit is undertaken annually and the Fostering service strives to complete 2 per annum to improve Standards.

Throughout the carers' first year reports and progress is recorded: an annual report is prepared by the supervising social worker which is presented to panel for consideration. Subsequent years are undertaken as part of a home review with return to panel every 3-4 years or if areas of concern require Panel scrutiny. In all cases a recommendation is then made by the panel for the carer in relation to their approval status.

Children and Adolescent Mental Health Services

A Clinical Psychologist provides advice to foster carers and social work staff on all aspects of behaviour, attachment and mental well-being through the HIPSS team as part of the TiSS Service.

Herefordshire Children and Adolescent Mental Health Service may also be available for children in the care of the Herefordshire Fostering Service.

Education

All children Looked After by Herefordshire Council are encouraged to access educational opportunities and develop to their maximum potential. The Education Liaison Service provides advice, guidance and additional curriculum support to all foster carers and children. All children in foster care should have access to a home computer and relevant educational software. Foster carers have a special link to reading schemes such as 'Letterbox'.

<u>Health</u>

The physical health needs of children are monitored by the Medical Advisor to the Fostering Service. Each child placed is registered with a General Practitioner. The Wye Valley NHS Trust has employed 2 specialist LAC nurses (1.5 f.t.e) to assist in meeting the health needs of Looked after Children.

Direct works Service

This service manages and supervises contact for many Looked after Children. Intensive support to support re-unification plans and prevent placement breakdown is also being developed.

<u>STEPS</u>

A number of sessional workers are available for specific pieces of work with a Looked after Child and can be accessed to provide support to young people to assist in maintaining placements.

Complaints, Monitoring

Complaints, Compliments and Comments

All Local Authorities are required to have complaint procedures under the National Health Service and Community Care Act 1990 and also, where children are involved, under the Children Act 1989.

We want everyone to be satisfied with the service they receive from Herefordshire Fostering Service and the complaints procedure in this authority can be instigated by anyone who is dissatisfied with the service they receive. Young people can also enlist the assistance of the Children's Rights and Advocacy Worker.

NYAS

Herefordshire Council has a complaints procedure, which is communicated to all service users and to foster carers, Looked After children and their families.

Allegations

All allegations of abuse made by children against foster carers or members of a foster carer family will be thoroughly investigated. Hereford's Safeguarding Board procedures for handling allegations are followed in all cases. The investigation of allegations against foster carers will be evidence-based and the decision of how best to proceed will be made in the best interests of the child. An independent Advice and Conciliation worker from Fostering Network is made available to support foster carers throughout the process. All foster carers receive the ongoing support of a Fostering Social Worker. A clear distinction is made between an allegation of harm and a concern regarding standards of care.

Confidentiality and Conflicts of Interest

Foster carers are provided with information about the children placed with them and expected to observe high standards of confidentiality. As an agency we maintain records on both foster carers and Looked after Children who are subject to national standards and Data Protection legislation. Staff and foster carers are expected to declare any potential conflicts of interest.

Foster Carers Charter

Herefordshire Fostering Service is committed to providing and promoting safe, stable and nurturing placements where the outcomes and life chances are positive for looked after children. In order to achieve this it is important to have a working relationship which is based on trust and respect among all children services that are involved in the care of the child.

The service has worked in partnership with foster carers to achieve the charter which was launched in 2012. The charter explains what the roles and responsibilities of the service and the carers towards each other and the children we care for.

Foster Carer Representatives.

Over the last 3 years we have developed the election of Foster carer Representatives to meet with the Team Managers on a monthly basis to liaise over key issues and improve communication between the fostering service and all foster carers – general, HIPSS and kinship. A quarterly Newsletter is produced and support group activities planned.

Monitoring

Herefordshire Fostering Service produce quarterly and annual reports. These are presented to the lead member of the Council along with the Senior Management Team at the Corporate Parenting Panel who act for the executive. Quarterly reports are also provided to the Looked after Children Practise Operational Group (LACPOG).

Other monitoring includes staff supervision linked to the appraisal system, 3 formal supervisions a year to foster carers, annual reviews, fostering panel, feedback from training sessions, case recording and practise audits.

Evaluating the Service

The information gathered through quarterly and annual reports, audit, inspections and customer feedback is evaluated by the managers of the fostering service, to judge its ongoing effectiveness and make changes where necessary.

The Fostering Service is also subject to formal inspection by Ofsted and inspections usually take place every three years.

Bullying

Bullying can disrupt an individual's personal, social and educational achievements. It is recognised that Looked After Children, because of their circumstances, are particularly vulnerable and the Fostering Service requires that steps are taken to prevent bullying by ensuring that foster carers and social workers understand what bullying is and the impact it can have on a child / young person's life. It provides advice and guidance on how best to deal with situations where bullying is occurring in order to help everyone involved with the child / young person remain alert to bullying behaviour both inside and outside the foster home.

Behaviour Management

Guidance on managing behaviour is made available to all foster carers through training, ongoing supervision and as part of the 'Discipline Sanctions and Rewards' section. No form of corporal punishment is permitted to be used on any child placed with a foster parent. No child placed with foster parents is subject to any measure of control, restraint or discipline which is excessive or unreasonable. Physical restraint is used on a child only when it is a last resort and is necessary to prevent likely injury to the child or other persons or likely serious damage to property. If such a risk is identified appropriate training in physical restraint is provided to the foster carer. All carers are to be trained in positive handling, care and control with an emphasis on de-escalation

<u>Recruitment, Pre-Approval Training and Support of Prospective Foster Carers</u> The Fostering Service provides a range of services to local people who enquire about becoming foster carers.

The following is a summary of the recruitment, assessment and approval process:

- Publicity and promotion of foster care to attract new foster carers is continuous throughout the year.
- Prospective carers are provided with information about foster care within 48 hours of making the request.
- Prospective carers who wish to have further information will be visited by a Fostering Social Worker within 10 days. Stage 1 checks are completed and if concerns arise the Team manager must respond within 10 days to inform prospective applicants their application will not progress to Stage2 assessment.
- Full statutory checks and references are undertaken on all applicants and CRB checks on any other adult in the household over the age of 16 years.
- All applicants complete a full medical questionnaire (British Agencies for Adoption and Fostering (BAAF) Form AH), which is made available to the agency Medical Advisor for comment.
- Applicants are enrolled in pre-approval training, which occurs prior to or concurrently with the Form F assessment, whichever provides the timeliest service. This training opportunity is also available to Kinship/family and friends carers. This is now planned for every two months throughout the next 2 years
- Assessments are undertaken by a qualified Social Worker in accordance with fostering service regulations and are completed using BAAF Form F.
- All applicants are invited to attend the Fostering Panel, which makes a recommendation to the Agency Decision Maker on the terms of their approval.

Support and Supervision

All foster carers are supervised by a Fostering/ supervising Social Worker. All new foster carers have an allocated family support worker.

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All foster carers have access to support groups. There are currently three support groups in operation as described above including a Special Guardians support group.

A Duty Fostering Social Worker is available throughout office hours. This is the first point of contact for all enquiries for fostering and requirements for placements. Outside office hours, foster carers can access the Herefordshire and Worcestershire Emergency Duty Team.

- Foster carers have access to Herefordshire Education Liaison Support Service for advice and support to ensure children's educational opportunities are maximised.
- HALO leisure vouchers can be used for all Looked after Children and a discount service is available for foster carers and their families to use Herefordshire's leisure facilities.
- Foster carers who require respite on a planned basis can access respite services from other foster carers.
- A 'buddying' system is facilitated by Fostering Social Workers between experienced carers and newly approved carers.
- Foster carers are provided with the Foster Carers' Handbook covering all aspects of fostering, together with a diary and the equipment required to record and store confidential records about individual children.
- Annually, a Foster Carer Forum is convened to celebrate and inform the work of Herefordshire foster carers in partnership with elected members, officers and fellow professionals. The forum also provides a multi-disciplinary training event and a social opportunity for carers.

Ongoing Reviews of Foster Carers

All carers are reviewed annually and their continued registration is considered by the Fostering Panel, which makes recommendation to the agency decision maker as to the terms of their continued registration. Minutes of home reviews are noted at the fostering panel.

Approval and Review of Statement of Purpose

This Statement of Purpose has been formally reviewed and up dated as of July 2018. It has been distributed to the following agencies/departments:

- OFSTED.
- The Herefordshire Council Website.
- Foster Carers.
- A children's version has been produced for dissemination to all children using the service.

Contact Details of Ofsted: Piccadilly Gate 4 Store Street Manchester M1 2WD

Tel: 0300123 1231 Email: <u>enquiries@ofsted.gov.uk</u>

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APPENDIX A: Legislative and Regulatory background:

Principles and Standards of care

The Fostering Service seeks to ensure that its policies, procedures and practice comply with the following:

- o Children Act 2004.
- Children Act 1989.
- National Minimum Standards 2011 (Care Standards Act 2000).
- Fostering Services Regulations 2011
- o U.K. National Standards for Foster Care (Fostering Network 1999).
- Care Planning Regulations 2010.
- Care Planning, Placement and Case Review and fostering Services (Misc amendments) Regulations 2013
- Code of Practice on the recruitment, training, management and support of foster carers (Fostering Network 1999).
- Training, Support and Development Standards (CWDC)
- Foster Carers Charter

Appendix B: Aims and Principles of the Fostering service:

The Fostering Service:

- Seeks to provide a sufficient choice of placements for all Looked After children wherever possible.
- Seeks to provide or commission placements with foster carers for all Looked After children who require placements in a family setting.
- Respects the ethnic origin, cultural background, religion and language of children and foster carers.
- Seeks to work in partnership with all those involved in the care of Looked After children, including children, their families, foster carers and Social Workers.
- Recognises that children with disabilities may have additional special needs for placement.
- Recognises and seeks resources and specialist provisions for those children who need it.

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- The central importance of the child's relationship with their foster carer should be acknowledged and foster carers should be recognised as core members of the team working with the child.
- Children in foster care deserve to be treated as a good parent would treat their own child/ren and to have the opportunity for as a full a experience of family life and childhood as possible without unnecessary restrictions.
- Seeks to ensure that the Fostering Service and the 16 plus Team work in partnership to maximise life chances for young people leaving care.
- Seeks the views and opinions of young people and carers when planning and reviewing services.
- Seeks to provide continuity through a placement service, which works in partnership with Herefordshire's Adoption Service.
- Seeks to recruit, train and assess carers to the highest standard in order to meet the needs of local children for local placements.
- Values the child as an individual and give personalised support in line with individual needs and background, in order to develop their identity, self-confidence and self-worth.

Herefordshire Council

Meeting:	Children's wellbeing scrutiny
Meeting date:	Monday 16 July 2018
Title of report:	Children and Young People's Plan 2018 - 2023
Report by:	Cabinet member young people and children's wellbeing

Classification

Open

Decision type

Budget and policy framework

Wards affected

(All Wards);

Purpose and summary

The Children and Young People Scrutiny Committee has identified the Children and Young People's Plan 2018 - 2023 as part of its work programme for pre-decision call-in ahead of its presentation to full Council for approval. It is presented to the scrutiny committee for the consideration of any recommendations to the Cabinet Member concerning the content of the Plan.

The draft Children and Young People's Plan 2018 – 2023 (CYPP) includes priorities which will enable continued service improvement to support positive outcomes for all children and young people throughout Herefordshire. The plan establishes key priorities and outlines how they will be achieved through work undertaken by all participating partner agencies.

More detailed delivery plans for each priority are being formulated alongside partners and relevant multi-agency groups that will identify specific actions, governance arrangements and expected timescales for realising the goals set out in the CYP Plan.

Recommendation(s)

That:

Further information on the subject of this report is available from Amanda Price, Richard Watson Tel: 01432 383047, email: amanda.price@herefordshire.gov.uk, rwatson@herefordshire.gov.uk

- (a) The Children and young people's scrutiny committee provide comment on the attached draft in order to inform development of the final version of Herefordshire's final Children and Young People's Plan;
- (b) That Children and young people's scrutiny committee considers its key role and any necessary action it should take in helping to achieve the proposed priorities

Alternative options

1. The Children and Young People's Partnership could continue to work within the 2015-2018 plan. This approach however, will mean the partnership is working to deliver priorities that are out of date, do not acknowledge achievements made since 2015, may not reflect current views of children and young people in Herefordshire, may not respond to trends highlighted within the latest Joint Strategic Needs Assessment, and does not enable the effective alignment to other relevant strategies across the partnership.

Key considerations

- 2. The Children and Young People's plan is an integral component of the Herefordshire Health and Wellbeing Strategy and together they form the strategic agenda of the Herefordshire Health and Wellbeing Board relating to children and young people.
- 3. The current Children and Young People's Plan covers the period of 2015 2018, with the aim of ensuring that 'The children and young people of Herefordshire have a great start in life and grow up healthy, happy and safe within supportive family environments'.
- 4. The Children and Young People's partnership have therefore been preparing for the development of a new plan which highlights progress over the current plan period, review the current evidence base on issues relating to local children and young people, and clearly set out improvement plans from now onwards.
- 5. The Herefordshire Children and Young People's Partnership oversees the development and delivery of the Children and Young People's (CYP) Plan. The partnership includes representatives from:

Herefordshire Council Herefordshire Clinical Commissioning Group West Mercia Police West Mercia Youth Justice Board 2gether NHS Foundation Trust Healthwatch Herefordshire Voluntary Organisations Support Service

6. The plan is an integral component of the Herefordshire Health and Wellbeing Strategy and together they drive the strategic agenda of the Herefordshire Health and Wellbeing Board relating to children and young people. Key partnership strategies including (but not limited to) Herefordshire Children and Young People Mental Health and Emotional Wellbeing Transformation Plan 2015-2020, the Joint commissioning Framework 2017 – 2020, and the Learning Disability Strategy have been considered alongside the development of the new CYP plan to ensure it aligns and supports their delivery:

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Health and Wellbeing Strategy: Priorities include mental health and wellbeing, dental health, supporting those who are most vulnerable, with underpinning themes of prevention, self help and working in partnership. A priority for 2018 is to deliver an integrated strategic approach to childhood obesity (and its impact on dental health) CYP Plan – alignment	Herefordshire Children and Young People Mental Health and Emotional Wellbeing Transformation Plan 2015-2020: Key ambitions include: Timely information, advice and support to promote the well-being, increase in awareness of mental health and emotional well-being and provision for vulnerable groups
Joint commissioning Framework 2017 – 2020	Learning Disabilities Strategy
Commissioning priorities align to the new plan in terms of promoting healthy lifestyles, early identification, mental health, responding to safeguarding needs and improving education and learning opportunities for children with disabilities.	This strategy includes priorities for training and employment, being part of the local community, keeping healthy and safe, and access to universal services.

- 7. A review of Herefordshire's current performance relating to the previous 2015-2018 priorities has been undertaken. Each priority area has been reviewed to determine areas of progress and to highlight areas where further focus is necessary over the coming years to further improve outcomes for children and young people in Herefordshire.
- 8. Achievements and challenges (2015-2018):
 - a. Priority 1 Early Help: The Family First programme has successfully supported over 890 families (target of 600) in need of early help, of which 198 have achieved sustainable change. Lead workers have been identified for each family who have co-ordinated relevant services to meet the family's needs. The programme continues to broaden its work with partners to support early identification, ensuring families are identified at an early stage.

The Early help offer was highlighted as an area to be strengthened throughout the engagement work undertaken, particularly with professionals, and a new Early Help Strategy will be prepared to consider actions that will help to tackle ongoing challenges for families in Herefordshire including domestic abuse and neglect.

b. Priority 2 - Early Years: The percentage of mothers who breastfeed their babies in the first 48hrs after delivery has improved (from 67.7% in 2014/15 to 74.8% in 2016/17) and is 0.3% above the national average. Seventy five per cent of children at the end of the reception year achieved a good level of development and Herefordshire was again in the top quartile of local authorities in England in 2017. The number of 3 & 4 year old children benefitting from early education in a good/ outstanding provider has risen from 87% in 2015 to 94% in 2017.

It is recognised that the prevalence children who are overweight or obese is still an issues that needs to be addressed locally, and although improvements have been recently reported in terms of oral health, Herefordshire continues to perform below the national average.

c. Priority 3 - Mental health and emotional wellbeing: A joint review into special educational needs and disabilities by the CQC and Ofsted in September 2016 acknowledged the low waiting times and flexible provision by Child and

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Adolescent Mental Health Services. Herefordshire has achieved improvements in both waiting times for assessment and treatment for these services. The Herefordshire Children and Young People Mental Health and Emotional Wellbeing Transformation Plan 2015-2020 has been refreshed, including a clear roadmap for further improvement.

Engagement highlighted mental health as a key area that must be reflected within the new CYP plan. Increasing awareness and early support around emotional wellbeing and mental health were particular areas of focus.

d. Priority 4 - Children and young people in need of safeguarding: Herefordshire has improved the local response to child sexual exploitation with strong partnerships in place, and an increased ability to identify those which may be at risk. We have increased the number of foster carers which bucks the regional trend.

The number of looked after children in Herefordshire remains high and the new plan will provide an opportunity to consider how a stronger early help offer can help to prevent children becoming looked after.

e. Priority 5 - Addressing challenges for teenagers: Admission episodes (crude rate per 100,000) for alcohol specific conditions is 40.7 for Herefordshire (14/15 – 16/17) and has continued to decline, in line with national trends. There have been improvements in the support available through the 16 plus team which supports young people as they transition into adulthood. The rate of first time entrants to the criminal justice system has reduced (from 565.2 in 2015 to 529 in 2016) although this is still higher than the England average and is a priority area for the Community Safety Partnership.

Increasing opportunities for children and young people to contribute to their local community and to be better prepared for adulthood were key themes through the engagement work with children and young people and are captured in the new plan.

f. Priority 6 - Children and young people with disabilities: The proportion of Education health and care plans issued within 20 weeks is in the top quartile, 89.84% compared to 55.65 nationally (2016) and Herefordshire has successfully ensured that 100% of children and young people with special educational needs statements now have a plan in place, meeting the national target of April 2018.

Recognition of the additional challenges faced by children with special educational needs and disabilities has been central to the increased focus on improving educational attainment and preparing for adulthood.

- 9. The new draft Children and Young People's plan 2018 2023 has involved significant engagement with children and young people, families, providers and staff across partner agencies, areas requiring further focus have been identified and are outlined below.
- 10. Over the next 5 years the partnership pledges are :

Keeping children and young people safe – BE SAFE FROM HARM Improving children and young people's health and wellbeing – BE HEALTHY Helping ALL children and young people succeed – BE AMAZING

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Ensuring that children and young people are influential in our communities – FEEL PART OF THE COMMUNITY

- 11. The draft CYP Plan sets out our vision and priorities for children and families in Herefordshire and recognises that everyone has a role to play in making Herefordshire an even better place to grow and prepare for adulthood, including communities, families and children and young people themselves.
- 12. The Plan (Appendix 1) is intended to be succinct, public facing, and to clearly highlight areas that require partnership focus over the coming 5 years in order to deliver positive change for children and young people in Herefordshire.
- The priority areas identified are summarised in the attached one page plan (Appendix 2). Both of the final documents will be made available once adopted by Herefordshire Council on our website.
- 14. The CYP partnership is developing more detailed delivery plans reflecting each of the priority areas. Progress will be reported on a quarterly basis to the CYP Partnership board.

Community impact

- 15. The county has an older age profile and numbers of children have declined in Herefordshire by around 7% over the last decade. However, the number of under-fives and births has been rising for the best part of the last decade. The next five years are expected to yield a gradual increase in the numbers of children, to around 33,200 by 2023.
- 16. The new CYP plan has taken into account relevant evidence relating to children and young people in Herefordshire, to ensure that partnership actions address key local priorities. The plan intends to provide a framework within which partners can not only bring about change within their own field, but will also enable partners to work together to target interventions successfully, and ensure maximum impact.
- 17. The plan also recognises the central role that individuals, families and communities have in improving the lives of children and young people, and this will be further reflected within more detailed delivery plans.

Equality duty

- 18. Under section 149 of the Equality Act 2010, the 'general duty' on public authorities is set out as follows:
- 19. A public authority must, in the exercise of its functions, have due regard to the need to
 - a. eliminate discrimination, harassment, victimisation and any other conduct that is prohibited by or under this Act;
 - b. advance equality of opportunity between persons who share a relevant protected characteristic and persons who do not share it;
 - c. foster good relations between persons who share a relevant protected characteristic and persons who do not share it.

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- 20. The CYP Plan is an opportunity to establish partnership actions which can promote equality, foster positive relations and address discrimination in Herefordshire.
- 21. The plan includes an Equality statement which states the partnership's commitment to equality and confirms that equality issues will be considered fully at each stage of any development of plans or implementation of new services. Where required this will include the undertaking of individual Equality Impact Assessments.

Resource implications

- 22. Although the new CYP plan will not have any direct resource implications, it does highlight investment in Children and young people's services across the partnership, and provides an opportunity to identify:
 - a. Priority areas which may be responded to more efficiently;
 - b. Emerging issues which may require review of available resources;
 - c. Opportunities to use partnership resources more effectively.
- 23. Any potential resource implications relating to specific actions will be fully explored within delivery plans and be reported via appropriate governance on a case by case basis.

Legal implications

24. The CYP forms part of the policy framework for the council in accordance with children and young people's plan (England) regulations 2005.

Risk management

Risk / opportunity	Mitigation
The plan does not effectively reflect key priorities that relate to children and young people in Herefordshire	The Plan has been developed alongside a number of key stakeholders, including over 300 children and young people. The consultation provides further opportunity to ensure the priorities contained within the plan are reflective of the views of children and young people in Herefordshire.
Ambitions reflected in the plan are unrealistic due to the limited partnership resource to support delivery	It is necessary for the plan to articulate key ambitions of the partnership, this will enable contributors to identify how resources available can be better aligned or more efficiently utilised. Quarterly monitoring will be undertaken in order to track delivery.
Lack of partnership engagement inhibits delivery	Joint ownership of the CYP plan will be explicit at the outset.

25. As an overarching strategic plan there are a number of risks associated with its development as highlighted below:

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The Plan has been aligned to other key partnership plans and strategies including the Health and Wellbeing Strategy for Herefordshire.

Governance arrangements will be robust, with clear accountability.

A risk log will be developed alongside the plan and will be regularly reviewed by the CYP partnership.

Consultees

- 26. To ensure that the CYP Plan is informed by a broad range stakeholder perspectives a significant number of engagement activities have been undertaken involving over 400 representatives across Herefordshire. This has included direct engagement with children and young people (over 300), professionals involved in the delivery of key actions within the current plan, and a broad range of key partners including providers of services for young people and children. In total over 400 people have contributed to the development of the draft plan either through workshops, partnerships meetings or surveys.
- 27. Engagement included visits to schools across Herefordshire, groups including carers, children in care, children of service families, disabled children and their families, and children and young people with mental health needs. In summary:
 - a. The importance of mental health was prominent in almost all groups involved in the engagement work: 'There needs to be more understanding and better access to early help. Knowing where to get help is really important'.
 - b. Many groups focussed on increasing aspirations and supporting those who needed extra help to reach their goals: 'There is a lack of support for young people who are transitioning into adults'.
 - c. Some children and young people told us that that they sometimes didn't feel safe in some parts of the county. They also wanted more education on safety, including online safety and on healthy relationships.
 - d. It was clear from talking with children and young people that their communities and the local environment were issues that really mattered to them. They wanted to feel part of the community, find ways to contribute and to have their voices heard. Protecting the local environment, and having places locally where they could mix and be more active was a common theme.
- 28. The draft plan is now subject to a short period of consultation in order to ensure that it effectively reflects key priority areas, appropriate high level actions and key measures. The consultation period will also provide an opportunity to begin formulating more detailed delivery plans and reporting mechanisms to ensure effective oversight of delivery.

Appendices

Appendix A: The Draft Children and Young People's Plan 2018 - 2023

Appendix B: One Page Plan

Further information on the subject of this report is available from Amanda Price, Richard Watson Tel: 01432 383047, email: amanda.price@herefordshire.gov.uk, rwatson@herefordshire.gov.uk

Background papers

None

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Giving children and young people a great start in life

Herefordshire's Children and Young People's Plan 2018 - 2023

Foreword

The Children and Young People's Plan sets out our vision and priorities for children, young people and families in Herefordshire. We believe that everyone has a role to play; we can all contribute to making Herefordshire a great place to grow up.

Children and young people are at the heart of this plan. We have listened to their views and their experience of growing up in Herefordshire. They have told us about the things that matter to them and what things make a positive difference in their lives. We have listened to the views of families, staff and service providers as well as reviewed our local performance to help us to better understand the key areas for us to focus on in this plan.

It is encouraging that many children and young people have told us how much they like living in Herefordshire. They like the friendly communities, the good schools and report that interaction with professionals, including health professionals and social workers, is a positive experience; they also enjoy and appreciate the countryside, wildlife and quality of the environment.

There are also some exciting changes happening in Hereford in the coming years, including our new University focusing on engineering, and a new Cyber Security Centre, helping to make Herefordshire a more attractive place for young people to live, study and plan their careers.

We have achieved a great deal in the county over the last few years. The educational attainment of our children and young people is something to be proud of; this speaks to the unstinting efforts of our schools and teachers.

We have also worked with our partners to improve support for mental health and will continue our efforts to keep this important area in sharp focus.

The range of support provided for children and young people across the county makes a huge difference to their quality of life and supporting families at the earliest opportunity remains key to our approach. We need to ensure that there is a sound joint understanding of thresholds of need across our range of multi-agencies so that we can effectively keep children safe. However, we are living in challenging times when rising needs are making ever increasing demands on public services; we need to ensure that we are doing all we can to target support so that it makes a difference, particularly to our most vulnerable, so that we enable families to thrive and young people to make a successful transition to adulthood.

Herefordshire Council and its partners have the wellbeing of children and young people as a core priority. We are working hard together to deliver a high standard of care, education, opportunity and support to all our children and young people and to increase their understanding of living in our diverse communities. We work with multiple partners to bring an integrated approach which will underpin the safeguarding, wellbeing and nurturing of children and young people. This plan identifies the areas which are to be the focus for the plan period – we have achieved a great deal over the last few years to be proud of, but there is always more to do, improvements to make, more to achieve.....so, let's get on with it.

Our vision for Children and Young People in Herefordshire

We will work to ensure that:

'The children and young people of Herefordshire have a great start in life and grow up healthy, happy and safe within supportive family environments'.

A profile of Herefordshire

Herefordshire has the fourth lowest population density in England, with a land area of 2,180km² but a population of only 189,300 (2016).

Most of the county (95%) is rural and 53% of the population live in rural areas.

The county has an older age population profile than England & Wales, with 24% of the population aged 65 or older compared to 18% nationally; 16.8% of the current population are aged 0-15yrs compared to 19% nationally.

Numbers of children have declined by around 7% over the last decade. However, the number of under-fives and births have been rising for the best part of the last decade. The next five years are expected to yield a gradual increase in the numbers of children, to around 33,200 by 2023.

The percentage of pupils with special educational needs support is higher than the national average (15.4% in 20177 compared to 11.6%).

Unemployment in the county is low, but average earnings in the county are significantly below both the regional and national averages. Average house prices are high compared with elsewhere in the region.

The county receives annual net inflows of people of all ages except 18-20 year-olds moving elsewhere in the UK – the ages at which young people are most likely to be moving away to study.

Where are we now?

Since the previous Children and Young People's Plan was introduced in 2015, there have been many achievements to be proud of in Herefordshire. Just some of these are highlighted below:

- The teen pregnancy rate has reduced year on year in Herefordshire and is now 14.5% per 1,000, which equates to just 44 pregnancies (2016). This is the lowest rate in the region and one of the lowest compared to other similar areas (the rate has almost halved since 2010).
- Changes in models of care to support children in mental health crisis have been implemented, including extended provision for urgent assessments for young people experiencing a crisis. This is now available seven days per week in partnership with the local Children's Ward.

- A review into special educational needs and disabilities by the CQC and Ofsted in September 2016 acknowledged the low waiting times and flexible provision by Child and Adolescent Mental Health Services.
- 2017 saw Herefordshire youngsters out-performing pupils nationally in the Year1 Phonics Screening Check. 84 per cent of Herefordshire pupils achieved the threshold mark or better compared to 81 per cent across England. This represents a rise of 15 percentage points since 2013.
- There is clear evidence that standards are rising in both primary and secondary schools and academies across the county. In 2017 the performance of all pupils in Year R in Herefordshire ranked in the top 25% (top quartile) of all local authorities, with 75% achieving a good level of development; this maintains our positive

"Amazing schools" and "amazing town." Herefordshire child

upward trend since 2013. Boys in Herefordshire outperformed the England average in 2017 and Herefordshire girls were amongst the highest performers in the country.

- Great progress has been made in implementing Education Health and Care (EHC) plans¹ – all children and young people with special educational needs statements now have a plan in place.
- In total 198 families in need of early help have been supported to make sustainable change.
- We have increased the number of foster carers recruited by the council which bucks the regional trend.
- The rate (per 100,000 youth population) of first time entrants to the criminal justice system has reduced (from 565.2 in 2015 to 447 in 2017), although this is still higher than the national average (295) and is currently a priority for the Community Safety Partnership.

Establishing our focus for the next 5 years

In developing the plan, over 300 children and young people from across Herefordshire have been involved, through visiting schools, youth groups and clubs. This has included (but is not limited to) primary and secondary school aged children, children and young people with disabilities, those with mental health issues, children in care and young carers.

Children and young people have shared what it is like growing up in Herefordshire now, the main issues that affect them, and about what they believe are the most important things that need to change over the next few years.

Families and professionals have shared the challenges faced locally and ideas to make a positive change.

Alongside this performance in key areas has been considered, helping to identify areas that need greater focus.

The section below outlines the key findings:

¹ An EHC plan is the document which replaces Statements of SEN and Learning Difficulties assessments for children and young people with special educational needs

Health and wellbeing



The facts say:

Children and young people said:

'We want more opportunities to be active in our own community and better information and advice about keeping healthy'.

'Access to dentists can sometimes be difficult in rural areas'

The importance of mental health was prominent in almost all groups involved in the engagement work: 'There needs to be more understanding and better access to early help. Knowing where to get help is really important'.

- Almost a quarter of reception age children (4-5yrs) and over a third of year 6 children (aged 10-11yrs) are overweight or obese (2016/17). This was viewed as a key priority area for professionals.
- Recently released data shows that the percentage of five year olds free of decayed, missing or filled teeth has increased by 10.8% (2014/15 = 58.7%, 2016/17 = 69.5%,) however it is still below the England figure (76.7%). Engagement with professionals highlighted this as a priority area of focus.
- In Herefordshire, an estimated 8,620 children and young people require support with their mental health or emotional resilience. Although waiting times for assessment and treatment for Child and Adolescent Mental Health Services have improved considerably, there are a number of children that would benefit from support at an earlier stage with their mental health.

Education and moving into adulthood



Children and young people said:

Many groups interviewed focused on how some need extra help to reach their goals.

'There is a need to make sure every child has an equal education'

'We need more work experience opportunities, including jobs for under 16's'

'Make the most of the new university, support to follow your dreams'.

The facts say:

• As highlighted, standards have been rising in primary and secondary schools and academies but, children and young people who are eligible for free school meals continue to attain less well than their classmates.

- A recent national report highlighted that Herefordshire is a 'cold spot' in relation to social mobility² in fact ranking 271 out of 324 for local authorities across the country. Herefordshire children are less likely to be in education and training than the England average, and children have told us they want more opportunities to experience work and better chances to realise their ambitions and to prepare them for adult life.
- The achievement of children and young people with an Education Health and Care
 plan could also improve as this group achieves less well in Herefordshire than the
 same group nationally. Engagement undertaken with professionals has highlighted the
 need to better support children who may face challenges that could limit their
 achievement, including children with disabilities and children with autism.

Safe environments

In discussions on safety, children and young people focussed largely on community safety, safe environments outside of the home, and on their understanding of how to keep themselves safe. In developing the plan, additional aspects were considered in discussing with professionals who work with children and young people and in reviewing the data.



Children and young people said:

Children and young people told us that that they don't always feel safe in some parts of the county. They also want more education on safety, including online safety and healthy relationships.

Children and young people also highlighted concerns about the danger of traffic and that some poorer roads are difficult to cycle on:

'We want Herefordshire roads to be safer for children and young people'.

Professionals in Herefordshire who work with children and young people are aware of the high numbers of children who become looked after across our county. These professionals have consistently highlighted the need for a stronger approach to early identification and early help, including better intervention on specific issues such as domestic abuse and neglect.

The facts say:

- In Herefordshire between 2014 and 2016, 19 children per 100,000 have been killed or seriously injured on England's roads. Although the numbers are small, this is higher than the England average (17 per 100,000).
- In 2016/17 there were 300 looked after children in Herefordshire. This is 84 per 10,000 of the population which much higher than the national average of 62 per 10,000.

² Social mobility may be defined as the ability of individuals or groups to move upward or downward in status based on wealth, occupation, education, or some other social variable.

Environment and community



Children and young people said:

It was clear from talking with children and young people that their communities and the local environment are issues that really matter to them. They want to feel part of the community, find ways to contribute and to have their voices heard. Protecting the local environment, and having places locally where they could mix and be more active was a common theme for most children.

'Want to be involved in community developments and activities'

Many children and young people want to have a better understanding of people from different backgrounds, from different areas, or who are facing particular challenges, including disabilities. Children highlighted that they are keen to find ways to create more opportunities to be inclusive, and for local communities to be accessible for all.

The facts say:

This is a broad area and although there are a number of measures that could be used, a key theme is the involvement of children and young people in the shaping of their communities. More engagement work will be undertaken to explore these issues further and to determine how we can measure improvements.

Where do we need to be?

As a result of this work four priorities have been identified that will drive the work of the partnership.

Over the next 5 years our pledges are:

- 1. Keeping children and young people safe BE SAFE FROM HARM
- 2. Improving children and young people's health and wellbeing BE HEALTHY
- 3. Helping ALL children and young people succeed **BE AMAZING**
- 4. Ensuring that children and young people are influential in our communities FEEL PART OF THE COMMUNITY

For each pledge, we have considered where we want to get to, ideas of how change could be achieved, and how we will know if we've succeeded. This plan on a page is our roadmap for the next five years (see appendix 1).

Delivery of the plan

Those who have worked alongside us in the development of the plan are passionate about making a difference and improving the lives of children and young people across Herefordshire – it's not just about what we do but also how we do it. We have therefore agreed four principles that we will use to help guide the plan's delivery. These are:

Right time: Early identification of families and early intervention to prevent crisis

Right people: Recognising and involving all key partners in achieving change, including families, communities and children and young people.

Right solutions: use evidence to understand what works

Right place: wherever possible, supporting children, young people and families at home, in their communities.



We will ensure the child and young person is at the centre of all we do.

The Children and Young People's Plan is overseen by the Herefordshire Children and Young People's Partnership (CYPP) with partner agencies working together to address issues affecting children, young people and their families. The plan contributes to delivering the Health and Wellbeing Strategy for Herefordshire and is aligned with a number of key partnership plans.

All partners engaged in the delivery of this plan are committed to providing equitable rights for children and young people in Herefordshire, whatever their disability, age, gender, race, nationality, religion, marital status, maternity, sexual orientation or background. The plan is an opportunity to make sure equal rights are fully considered when:

- providing services
- purchasing and procuring services
- employing staff
- working in partnership with other organisations
- engaging with our communities

We believe that promoting equality is essential for the creation of a cohesive society and for a strong economy.

The Children and Young People's Partnership Board will oversee the development of more detailed delivery plans and identify or develop multi- agency groups that are best placed to deliver against our pledges.

Progress will be monitored on a quarterly basis by the board, including the ongoing review and development of targets to track progress. Children, young people and families will be involved in an annual review of what we have delivered to ensure the areas of focus and priority actions are the right ones for the whole plan period. There are no specific resources allocated to support the implementation of the plan, but partners, with an estimated spend of £42.6 million in children and young people's provision, will identify:

- Priority areas which may be responded to more efficiently;
- Emerging issues which may require review of available resources;
- Opportunities to use partnership resources more effectively.

Any potential resource implications relating to specific actions will be fully explored within delivery plans.

GIVING CHILDREN AND YOUNG PEOPLE A GREAT START IN LIFE

Herefordshire's Children and Young People's Plan 2018 – 2023

BY 2023 HEREFORDSHIRE CHILDREN AND YOUNG PEOPLE WILL:

OUR PLEDGES		WHAT ARE WE GOING TO DO?	HOW WILL WE KNOW IF WE'VE MADE A DIFFERENCE?
Be SAFE FROM HARM and	 Be safe with others You will live with supportive families and carers and have a better understanding of healthy and positive relationships. We will increase our early help and social care support; we will work together to make clear decision so you receive the right support at the right time. Feel safer You will know how to keep safe where you live so that you are confident when you go out. 	 Ensure that all agencies focus on and are accountable for the priorities identified in this plan Improve safeguarding in children's services by increasing social work capacity and improving social work practice; implementing a consistent approach to thresholds of need; developing our approach to edge of care services; building on our targeted early help to provide support at the right time. 	 Children's services will be rated good by Ofsted The number of children who either become looked after or are on a child protection plans will reduce so that it is in line with our population Young people will feedback that there are no unsafe locations in Herefordshire
တို့ Be HEALTHY and	 Lead a healthier lifestyle You will have better information to help you keep active and eat healthily. Have healthier teeth You and your family will receive better advice about the importance of good oral health. Be confident to talk about mental health You will have better support to meet your emotional and mental health needs. 	 Target support for children and families from pre-birth and maternity services through infancy to school readiness Ensure that there is a co-ordinated and comprehensive offer to support children's social, emotional and mental health Support dental health initiatives, including ensuring access to dentists in specific areas and for particular groups of children, and investigating the feasibility of fluoridation of water supply in Herefordshire 	 The percentage of reception age children who are overweight or obese will be below national average The percentage of children with decayed, missing or filled teeth will be no more than national average. Mental health hospital admission rates will reduce.
Be AMAZING and	 Have a great start in life We will support you to have a great start in life and to overcome barriers to your achievement. Be better prepared for adulthood You will receive better guidance on careers to help you make informed choices. Have better chances of success You will have more opportunities to develop the skills you will need for the world of work. 	 Implement the new education strategy so that there is a better range of curriculum options, particularly around technical qualifications and work-related learning, which enable all children and young people to succeed 	 Results in Herefordshire will be in the top 25% of all local authorities at the end of the primary and secondary phases of education, and in Year R, for all groups of pupils The proportion of young people who are either going to university or who are in education and training will be above national average
FEEL PART OF THE COMMUNITY and	 Live in a happier community With your help, we will tackle discrimination and ensure everyone feels valued in our community. Be more influential We will work with you so that you are involved both in decision making in our community and in delivering this Children and Young People's Plan. 	 Develop opportunities with partner agencies, including Herefordshire Council and NMITE, to engage children and young people on topical issues in our community 	 Surveys of children and young people's views will demonstrate that they feel engaged and positive about their ability to make a difference to their communities

Herefordshire Council

Giving children and young people a great start in life

Herefordshire's Children and Young People's Plan 2018 - 2023

By 2023 Herefordshire children and young people will:

BE SAFE FROM HARM and

Be safe with others

We will increase our early help and social care support; we will work together to make clear decisions so you receive the right support at the right time.

You will live with supportive families and have a better understanding of healthy and positive relationships.

Feel safer

Service

f hfdscounci

You will know how to keep safe where you live so that you are confident when you go out.

provide the right support at the right time



Be AMAZING and

Have a great start in life

We will support you to have a great start in life and to overcome barriers to your achievement

Be better prepared for adulthood

You will receive better guidance on careers to help you make informed choices

Have better chances of success

You will have more opportunities to develop the skills you will need for the world of work

This plan is owned by all agencies, working alongside children, young people, families and communities across Herefordshire to

Delivered in partnership with: West Mercia Police, Herefordshire CCG, HVOSS, 2gether NHS Trust and West Mercia Youth Justice



Be HEALTHY and

Lead a healthier lifestyle

You will have better information to help you keep active and eat healthily

Have healthier teeth

You and your family will receive better advice about the importance of good oral health

Be confident to talk about mental health

You will have better support to meet your emotional and mental health needs



FEEL PART OF THE COMMUNITY and

Live in a happier community

With your help, we will tackle discrimination and ensure everyone feels valued in our community

Be more influential

We will work with you so that you are involved in decision making in our community and to deliver the Children and Young People's Plan



To find out more see the full plan: xxxxxxx



Herefordshire Council

Meeting:	Children and young people scrutiny committee
Meeting date:	Monday 16 July 2018
Title of report:	Child Protection Numbers
Report by:	Director for children's wellbeing

Classification

Open

Decision type

This is not an executive decision

Wards affected

(All Wards);

Purpose and summary

To inform the children and young people scrutiny committee of the action taken to reduce the child protection plan numbers following the increase of the numbers during November, December 2017 and January 2018.

To allow the committee the opportunity to review and make further recommendations on the approach and outcome of the action plan.

Recommendation(s)

That:

(a) The children and young people scrutiny committee review the robustness of the action plan at appendix 1 and determine any recommendations it wishes to make to the executive to secure further improvement.

Alternative options

1. There are no alternative options; it is a function of the committee to make reports or recommendations to the executive with respect to the discharge of any functions which are the responsibility of the executive.

Key considerations

- 2. The purpose of a child protection plan is to address the safeguarding needs of the child. This intervention is planned and reviewed to enable a family to address the concerns held by professionals, it is not viable for a child to remain on a plan for over eighteen months without improvement.
- 3. The process that is followed that may lead to a child becoming subject to a plan is a referral into the multi-agency safeguarding hub (MASH) is assessed and considered in the line with the threshold document at Appendix 2. A multiagency strategy meeting is held where the outcome is a child protection investigation (Section 47) and the outcome of the investigation leads to an initial child protection conference.
- 4. This process is implemented across the country under the Working Together to Safeguard Children guidance 2015.
- 5. In November 2016 the number of children subject to a child protection plan was at its lowest point in recent years, throughout 2017 figures showed a steady increase to a figure in line with Herefordshire's under 18 population.
- 6. Between November 2017 and January 2018 the number of children subject to a plan increased by 53%. Following investigation into this increase it was found that;
 - there was an increased number of referrals being received;
 - that the threshold guidance was not being applied consistently; and that
 - there was a lack of challenge and oversight of decision making at the point of a strategy meeting and consequently following a children protection investigation.
- 7. In January 2018 an action plan was devised at appendix 1. This plan focused on;
 - Additional challenge and oversight of the decision making process
 - A review of all children made subject to a plan within the previous three months
 - Refreshing multiagency professional of the threshold guidance
 - A programme of training to support practitioners develop their skills
 - Increased management oversight of trends
- 8. Following the introduction of this action plan the number of children on a plan has steadily reduced, the number of children on a plan on the 25 June 2018 was 172. Included within the action plan at appendix 1 progress is commented upon.

Community impact

- 9. In accordance with the adopted code of conduct Herefordshire Council achieves its intended outcomes by providing a mixture of legal, regulatory and practical interventions. Determining the right mix of these is an important strategic choice to make to ensure intended outcomes are achieved. The council needs robust decision-making mechanisms to ensure our outcomes can be achieved in a way that provides the best use of resources while still enable efficient and effective operations. Decisions made need to be reviewed periodically to ensure that achievement of outcomes is optimised.
- 10. The council must ensure that it has an effective performance management system that facilitates effective and efficient delivery of planned services. Effective financial management, risk management and internal control are important components of this performance management system. Herefordshire Council is committed to promoting a positive working culture that accepts, and encourages constructive challenge, and recognises that a culture and structure for scrutiny are key elements for accountable decision making, policy development, and review.
- 11. It is a priority of the corporate plan to 'Keep children and young people safe and give them a great start in life'. The child protection process is fundamental to this aim.

Equality duty

12. Under section 149 of the Equality Act 2010, the 'general duty' on public authorities is set out as follows:

A public authority must, in the exercise of its functions, have due regard to the need to -

- a. eliminate discrimination, harassment, victimisation and any other conduct that is prohibited by or under this Act;
- b. advance equality of opportunity between persons who share a relevant protected characteristic and persons who do not share it;
- c. foster good relations between persons who share a relevant protected characteristic and persons who do not share it.
- 13. Protected characteristics and reasonable adjustments are considered for all children who are subject to child protection arrangements. Such consideration enables Herefordshire Council to meet its obligations under the Equality Act 2010.

Resource implications

14. None associated with the recommendation. Any resource implications of recommendations the committee may determine will inform the executive's response to those recommendations.

Legal implications

- 15. The Human Rights Act 1998 provides under Article 8 that:
 - a. Right to respect for private and family life.

- b. Everyone has the right to respect for his private and family life, his home and his correspondence.
- c. There shall be no interference by a public authority with the exercise of this right except such as is in accordance with the law and is necessary in a democratic society in the interests of national security, public safety or the economic well-being of the country, for the prevention of disorder or crime, for the protection of health or morals, or for the protection of the rights and freedoms of others.
- 16. The reduction in numbers of children on the child protection register reflects the authority implementing this principle. The department needs to be alert to children being repeatedly registered as this may reflect on going systemic family problems which need to be addressed.

Risk management

17. There is no identified risk for this recommendation, the risks identified below are in relation to poor application of child protection processes

Risk / opportunity	Mitigation
Inappropriate application of threshold which may lead to children being subject to a plan unnecessarily OR children not being made subject to a plan and left at risk	Refreshed multiagency awareness of the Threshold Document and put in place additional checks which included the employment of an independent reviewing officer
Missed opportunity to work with families at a more appropriate lower level	As above

Consultees

18. None

Appendices

Appendix 1 – CP reduction action plan

Appendix 2 – Threshold guidance

Background papers

None identified

	Action	Person	By When	Update	RAG
1	Recirculation of Threshold guidance for professionals attending child protection conferences (Steps document) to all Safeguarding and family Support staff	Responsible Jane Hoey	12/01/18	15/02/2018: Completed	
2	HOS CIN and team managers to meet to ensure Threshold Guidance (Steps document) is understood and being used by managers and staff	Jane Hoey	30/01/18	15/02/2018: Completed	
3	Fortnightly update to Chris Baird of Action Plan	Jane Hoey	Fortnightly commencing 29/01/18	23/02/2018: Ongoing 08/03/2018: Complete – regular updates ongoing	
4	Update CB weekly on caseload information throughout February	Jane Hoey	Weekly commencing 29/01/18	23/02/2018: Ongoing 08/03/2018: Complete	
5	Business case to employ an IRO for 3 months to chair RCPC of all cases identified in Q3	Cath Thomas	02/02/18	08/03/2018: Appointment made, IRO to commence on 19/03/2018	
6	Review data for CP/LAC dual registrations and follow process multiagency ratification to end CP Plan without RCPC	Cath Thomas	09/02/18	23/02/2018 - Completed on 2.2.18	
7	Review cases of 16- 17 year olds subject to CP Plan with a view to bringing RCPC forward	Cath Thomas	09/02/18	08/03/2018 – 8 young people identified in cohort, newly recruited IRO will progress to RCPC 03/05/2018 – 3 now ended plans, 3 still open – 2 of which in PLO process, remaining 2 reviewed and threshold met	
8	Review the data for all CP cohort to identify large sibling groups to enable a clearer understanding of the increase to CP numbers	Cath Thomas	09/02/18	23.02.18 – Cohort reviewed and 9 families = 42 children identified	
9	Scrutinize data weekly to monitor progress of action plan and take direct action	Jane Hoey	Ongoing	08/03/2018 – ongoing, further reduction to 215 02/04/18 ongoing further reduction to 201	

10	Update action plan for SMT, Budget and Performance Meeting	Jane Hoey and Cath Thomas	26/02/18	03/05/2018: further reduction to 183 (30/04) 16/05/2018: CP increased to 188 (14/05). 14/06/2018: CP reduced to 180 (11/06). 08/03/2018: Complete – regular updates ongoing	
11	Joint workshop with IROs and Team managers to consider the application of the Steps document	Jane Hoey and Cath Thomas	07/03/18	08/03/2018: Planned session for 07/03/2018 postponed to 24/05/2018 due to staff unavailability – Invites have been sent out. 03/05/2018: awaiting meeting 16/05/2018: meeting next week, planned to look at strengthening the CIN and Risk Management process to further reduce the numbers coming to conference 14/06/2018: Workshop held and recognised as a positive session. Looked at inconsistent practice, themes identified and the plans themselves. This should result in improved practice, a less risk adverse approach, picking up cases earlier during strats and section 47s. Follow up session booked for	
12	In quarter 4 (Jan-Mar), examine threshold decision making practice from Strategy Meetings/S47 to ICPC	Jane Hoey and Cath Thomas	Mid-April 2018	early September. 08/03/2018: discussion between SW & IRO at the point of recommendation for ICPC ongoing throughout Q4	

13	Consider CP cases that need to be 'stepped down' due to progress made to a CIN plan prior to planned review date. Using Step guidance proforma for sign off	CP/Court Managers and Cath Thomas and Jane Hoey	12/02/18	03/05/2018: IRO will be based in Nelson House as of 14/05 to facilitate this action. 16/05/2018: IRO now in Nelson, discussing all cases marked for progression 08/03/2018: Identified cases considered and progressed to RCPC 16/05/2018: All cases identified and stepped down as appropriate.	
14	Review thresholds for all children made subject to a CP Plan in Q3 (approximately 90 children) against the threshold document for Significant harm (Step document) using Step guidance proforma	Jane Hoey and CIN managers	02/03/18	08/03/2018: All information submitted (1 team to submit information). Newly appointed IRO to consider outcomes 03/05/2018: of the 37 families (82 children) 21 families had no evidence of the steps threshold being applied and 4 families querying whether threshold has been met. These 4 families have now been reviewed and the threshold is now being met.	
15	Reconfiguration of Weekly data report to allow more visible data and managers to discuss activity with staff and take action to address any emerging trends at an early stage	Paul Harris & Performance team, team managers	12/02/18	08/03/2018: Continuing delays due to performance team sickness. Workshop arranged for 02/05/18 to progress 03/05/2018: Workshop held and prioritised plan being developed. 16/05/2018: Plan in development, to be signed off by management team. 14/06/2018: Plan being worked through, however, impact of	

CP Reduction Action Plan Review- 14/06/2018 – V8

				OFSTED (as well as stat returns)	
				being felt in the performance team.	
16	Monthly information to be provided to establish trends earlier, allowing quicker resolution	Paul Harris & Performance team	26/02/18	08/03/2018: Continuing delays due to performance team sickness. Workshop arranged for 02/05/18 to progress 03/05/2018: Workshop held and prioritised plan being developed. 16/05/2018: Plan in development, to be signed off by management team. 14/06/2018: Plan being worked through, however, impact of	
				OFSTED (as well as stat returns) being felt in the performance team.	
17	Single point of requests for Strategy meetings and spread sheet to be kept re decisions made	MASH Manager, Sue Rogers	22/01/18	15/02/2018: Complete	
18	Meeting/discussion to be held following Sect 47 investigation between IRO and Children's Social Work Manager to decide if threshold has been met/ not met to convene an ICPC This will be a pilot for 3 months and then reviewed by Cath Thomas and Jane Hoey	IRO and Children's social work manager	Pilot to take place on 19/02/18 – 18/05/18	successfully. To be reviewed mid-	

				identified 2 families (4 children) not progressing where they might have previously. 14/06/2018: Pilot complete and will continue as BAU. Consultation with the IRO continues to be held too close to the ICPC, meaning limited value to the process. The importance of early consultation has been re-iterated with appropriate managers. IRO also to be given better oversight of S47's underway via the weekly report.
19	 Training Programme to be developed and delivered pending the outcome of the further analysis set out in this plan; including Training for the completion of Strategy requests and application of Thresholds for all managers Training for all social work staff in completing Strategy requests and applying thresholds Training on quality and application of S47 thresholds and analysis Training on making robust decisions at the strategy meeting; including the plan to safeguard the child, and how the investigation will progress 	The Academy/ Principal Social Worker	Following further analysis	08/03/2018: PSW appointed, awaiting start date. To be prioritised as part of PSWs work programme. 03/05/2018: PSW started 30/04, who will lead on training plan. IRO has identified some training needs and shared these with PSW. 16/05/2018: Starting training next week around Strat Discussions. Further plan to be developed 14/06/2018: Training has started on strats. for managers. Workshop with IRO & TM's has also strengthened the message of the early planning and thresholds. A formal plan will be being developed with Paul Rooney, as part of the wider workforce training schedule.

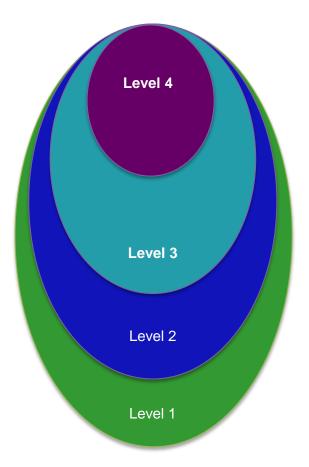
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Completed
On Track
In progress – potential problems
Delayed

Herefordshire
Safeguarding Children Board
Herefordshire Levels

Herefordshire Levels of Need Threshold Guidance

Multi - agency guidance on meeting the needs of children, young people and their families in Herefordshire.



Written by	Herefordshire Safeguarding Children Board
Date written	August 2014
Approved by	Herefordshire Safeguarding Children Board
Date approved	September 2014
Version	V1
Last revised	August 2017
Review date	September 2018
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Appendix 1: Level of Need Examples

Universal (Level 1) No additional support beyond that which is universally available	8
Early Help (Level 2))Children and young people where some concerns are emerging and who require additional support, usually from professionals already involved with them (Threshold to Consider EHA)	9
Targeted Early Help (Level 3) Children and young people who are causing significant concern or where concerns recur frequently (Threshold to initiate EHA)	11
Specialist) (Level 4) Children and young people who are very vulnerable. (Threshold to refer to Children's Social Care)	13

Appendix 2: Glossary / Abbreviations

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Introduction

The vision of Herefordshire Safeguarding Children Board is that children and young people in Herefordshire grow up in an environment in which their well-being needs are met and where they are safe from harm. Herefordshire Safeguarding Children Board's aspiration is that children, young people and families receive the right support at the right level at the right time.

This guidance replaces all previous guidance and meets the requirements of the statutory guidance in Working Together to Safeguard Children, 2015 which states:

The Local Safeguarding Children's Board (LSCB) should publish a threshold document that includes:

- the process for the early help assessment and the type and level of early help services to be provided;
- the criteria, including the level of need, for when a case should be referred to local authority children's social care for assessment and for statutory services under:
- section 17 of the Children Act 1989 (children in need);
- section 47 of the Children Act 1989 (reasonable cause to suspect children suffering or likely to suffer significant harm);
- section 31 (care orders); and
- section 20 (duty to accommodate a child) of the Children Act 1989.
- clear procedures and processes for cases relating to the sexual exploitation of children and young people

LSCBs with youth secure establishments in their area should ensure that thresholds and criteria for referral and assessment take account of the needs of young people in these establishments.

This document is intended to support practitioners at all levels, working in statutory, public, voluntary and independent sectors working with children, young people and families. It allows them to make decisions about how to respond to the needs of children and young people and their families they are working with. The framework is designed to help everyone to:

- **Focus on the lived experience of the child and hear their voice**
- Understand the child and young person in the context of their family and the wider community
- Shink clearly and achieve a holistic approach
- Note: Not
- Be non-discriminatory on the grounds of age, ethnicity, religious belief, faith, culture, class, sexual orientation gender or disability.

When thresholds are understood by all professionals and applied consistently this will ensure that the right help is given to the child at the right time. However the levels of need are not prescriptive and allow for practitioner judgement and decision making nor does it replace assessment analysis and planning. Throughout the electronic version of this document you will find links to Herefordshire's to support your decision making around a case, as well as supporting guidance from alternative sources.

A Shared Responsibility

Working Together to Safeguard Children states that ultimately, effective safeguarding of children can only be achieved by putting children at the centre of the system and by every individual and agency playing their full part, working together to meet the needs of our most vulnerable children.

All staff who are aware of concerns about the welfare or safety of a child should know:

- What services are available locally
- Now to gain access to services
- Who to contact in what circumstances
- When and how to make a referral to Children's Social Care.

When you have concerns you should:

- Solution Discuss with a manager or designated lead in your agency/service
- Discuss with the child/family where it is appropriate to do so (unless this will lead to risk of significant harm)
- Seek consent to disclose and share information
- Talk to other agencies/services involved
- Solution State State

If you are concerned that a child is suffering, or is at risk of suffering, significant harm always contact the Multi Agency Safeguarding Hub (MASH) -Tel: (01432) 260800

MASH contact details are available on the <u>3 Steps to Safeguard Children</u> page of HSCB's website.

What is a threshold?

For this guidance a threshold is a point at which something might happen, stop happening or change, in relation to support services for children and families. For example it describes the step when professionals are determining whether the criteria are met for statutory intervention in family life, or when a child should be receiving a specific type of support. It is also a way of describing transitions between different levels of needs and types of services.

The Herefordshire 4 Levels of Need Threshold

There are four levels of need described which range from Thriving (no unmet needs); May need extra help (which is usually available from professionals already involved); May need further help (which is required from a number of services), and, In need of serious help (requiring statutory and specialist services). This is illustrated in the diagram on page 7, and Appendix 1 gives more detail about the model including examples.

How to use the Herefordshire 4 levels of need framework: The majority of parents and carer's are able to meet their child's needs accessing universal services such as health and education as required. These services are often able to identify and offer additional support if the child develops additional needs or the family circumstances change. The Herefordshire 4 Levels of need should be then be used;

- To consider and discuss the child and family's situation as an individual practitioner or as part of an Early Help Assessment or Team around the family
- To consider whether to make a referral to Children's Social Care
- **%** To understand if an Early Help Assessment should be initiated
- To support a referral by helping describe concerns about a child, complemented where necessary by specific risk identification tools e.g. around CSE; FGM; Domestic Abuse referrals.
- To challenge the practice or decision making in another agency and support the escalation of your concerns.
- As a reflective tool when measuring the change in a child and family's situation, to understand if the intervention has had an impact on the child's outcomes, if the child's needs have been met and the risk managed and reduced.
- To consider if the risk identified has been managed so that the case can be 'stepped down' to a lower service response.

To identify where a managed 'step-up' to a more intensive response is required as the risk to the child or young person has increased. It should be read in conjunction with <u>HSCB's Multi Agency Child Protection</u> <u>Procedures</u> and used in conjunction with the Multi Agency Referral Form Guidance.

Wherever possible please refer to the electronic version of this document available at <u>Multi Agency</u> <u>Referral Form Guidance</u>

Child Sexual Exploitation

Where a Child Sexual Exploitation concern has been identified a pre-checklist will need to be completed which can be found at https://herefordshiresafeguardingboards.org.uk/herefordshire-safeguarding-children-board/child-sexual-exploitation-and-missing-sub-group/ accompanied with guidance? Please see the corresponding actions below:

Child Sexual Exploitation - Regional Procedures

Child Sexual Exploitation – Local Procedures

Child Sexual Exploitation Risk Assessment – Local Procedures

Description	Associated actions
No/Low risk A child who is at risk of being groomed for sexual exploitation.	 Liaise with Agency Designated Safeguarding Advisor for any advice/guidance. Inform CSE Coordinator of young person considered at risk of CSE (so information about the extent and profile of CSE is captured by LSCB). Work with child, young person and family to develop an awareness of the risks that can lead to a situation in which they may be exposed to sexual exploitation - delivered on a single agency basis or integrated into existing multi-agency plan Ongoing review of risk required particularly if there are any changes in circumstances.
Medium risk A child who is targeted for abuse through exchange of sex for	 A multi-agency approach will be needed to promote child's safety and well-being. Follow local procedures including referral to MASH who will lead the completion of a specialist CSE Risk Assessment on a multi-

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affection, drugs, accommodation and goods etc. The likelihood of coercion and control is significant	 agency basis. If concerns are substantiated, a CSE Risk Management meeting should be held to devise a safeguarding and support plan or such activity should be integrated into an existing multi-agency plan. The plan should include actions in relation to disrupting, investigating and prosecuting perpetrators. Risk should be closely monitored and regularly assessed as part of the risk management process. Inform CSE Coordinator of young person considered at risk of CSE (so information about the extent and profile of CSE is captured by LSCB).
Significant risk A child who is entrenched in sexual exploitation, but often does not recognise or self denies the nature of their abuse often in denial, and where coercion/control is implicit.	 A multi-agency approach will be needed to promote child's safety and well-being. Follow local procedures including referral to MASH who will lead the completion of a specialist CSE Risk Assessment on a multi- agency basis. If concerns are substantiated, a CSE Risk Management meeting should be held to devise a safeguarding and support plan or such activity should be integrated into an existing multi-agency plan. The plan should include actions in relation to disrupting, investigating and prosecuting perpetrators. Risk should be closely monitored and regularly assessed as part of the risk management process. Inform CSE Coordinator of young person considered at risk of CSE (so information about the extent and profile of CSE is captured by LSCB).

Resolution of Professional Disagreements

Occasionally situations arise when workers within one agency feel that the decision made by a worker from another agency on a child protection or child in need case is not a safe decision. The safety of individual children is the paramount consideration in any professional disagreement and any unresolved issues should be addressed with due consideration to the risks that might exist for the child.

All workers should feel able to challenge decision-making and to see this as their right and responsibility in order to promote the best multi-agency safeguarding practice. This procedures provides a means to raise concerns about decisions made by other professionals or agencies by:

- a) avoiding professional disputes that put children at risk or obscure the focus on the child
- b) resolving the difficulties within and between agencies quickly and openly.

Effective working together depends on an open approach and honest relationships between agencies. Problem resolution is an integral part of professional co-operation and joint working to safeguard children.

This additional guidance has been produced to support the West Midlands Procedures for the <u>Resolution of Professional Disagreements</u>.

CHILD OR FAMILY'S SITUATION		HOW PROFESSIONALS RESPOND	
IN NEED OF SERIOUS HELP	Level 4 Immediate intervention or Assessment required from MASH	REALLY CONCERNED, AND NEED TO TALK TO THE MASH TEAM	Children or young people with very complex needs or I am extremely concerned for their safety based on evidence of abuse or neglect or disclosure by the child. Referral to MASH.
COMPLEX NEEDS – WILL NEED FURTHER HELP	Level 3 Multiple Agency Intervention Required	NEED TO WORK WITH OTHER AGENCIES	Children or young people with identified vulnerabilities and needs that require a multi- agency co- ordinated a <u>p</u> proach. Undertake an Early Help Assessment.
ADDITIONAL NEEDS - MAY NEED SOME EXTRA HELP	Level 2 Relevant Agency Intervention Required	NEED TO OFFER SUPPORT, CAN DO THIS WITHIN OUR AGENCY	Children and young people with emerging vulnerabilities whose needs require targeted support. Consider an Early Help Assessment.
THRIVING	Level 1 No Intervention or Support Required.	NO EXTRA SUPPORT REQUIRED	Children making good overall progress in all areas of their development, broadly receiving appropriate universal services such as health care and education. They may also use leisure and play facilities, housing or voluntary sector services.

Level 1: Thriving - No additional support needs beyond those which are universally available

Level 1 of vulnerability:

Children and young people making good overall progress in all areas of their development, broadly receiving appropriate universal services such as health care and education. They may also use leisure and play facilities, housing or voluntary sector services. They may be living in circumstances where there may be worries, concerns or conflicts but these are infrequent, short lived and quickly resolved by the family or with support from extended family, community or the professionals with whom they usually have contact.

Universal services, working with communities, are those most likely to identify that a problem is emerging for the child or within a family.

CHILD

- Child is accessing universal services, such as schools, leisure centres, GP surgeries, other primary health care services, youth centres, etc.
- Child is accessing and being included in social activities
- The child has a secure relationship and is shown warmth and consistently is praised and encouraged
- The child is physically / psychologically healthy
- Has a nutritious diet, has appropriate clean clothing and is taken to health and dental appointments
- No substance misuse
- Sexual activity/ behaviour appropriate to age
- Sood attendance at nursery, school and college or other educational setting.
- Age appropriate independent living skills
- % Child is meeting their developmental milestones, including speech and language

PARENTS/CARERS

- The family unit usually functions well even during times of crisis
- The unborn is a wanted child, with parent(s) accessing ante natal care and preparing for the birth and is unaffected by parental substance misuse/ domestic abuse or mental ill health
- Parents / Carers provide appropriate guidance and boundaries to help protect the child from harm and to develop appropriate values.

HOME / ENVIRONMENT

The facilities and hygiene within the child's accommodation are appropriate

Level 2: Additional Needs - Consider an Early Help Assessment to identify additional needs and how best to meet them.

Early Help Assessment Guidance

Level 2 of Vulnerability:

safeguarding children is everyone's business - safeguarding children is everyone's business

Children and young people with emerging vulnerabilities whose needs require additional supporting the form of advice, direction and sometimes planned intervention or additional resources; these would usually be provided by professionals who are already involved such as health, early years or education staff.

Potential Indicators	Further Policy and Guidance
 this is not an exhaustive list 	
CHILD	
Health	
 Slow in reaching milestones including delayed speech and language Missing occasional routine health checks/appointments Persistent minor health problems Pre-natal health needs Issues of poor bonding /attachment Minor concerns re healthy diet/hygiene/ weight /dental health Children with Disabilities 	
 Education and Learning Coccasionally unpunctual or absent from school Escalating behavioural issues 	
 Not reaching educational potential / expected attainment Limited opportunities for social interaction 	
and play	
 Emotional and Behavioural Development Signs of deteriorating mental health /self- harm 	
Poor self-esteem /withdrawn unwilling to engage	
Some concern / occasional substance misuse	
Some difficulty with peers- May be experiencing bullying or bully others	



Parents and Carers	
Inconsistent boundaries – parents require	
advice on parenting issues	
Can behave in anti-social way	
Relationship between carers and child not	
always stable	
Acrimonious relationships impacting upon the	
child	
Parental health difficulties / additional needs	
or vulnerabilities	
Poor home routine	
Child has caring responsibilities	
Poor / inappropriate housing	
Low income / unemployment	
Low level parental substance misuse	
HOME /ENVIRONMENT	
Environment not always appropriate	
Family isolated socially and/or	
geographically	

Level 3: Complex Needs - Threshold to initiate an Early Help Assessment (EHA): Multiple Agency Intervention Required

Early Help Assessment Guidance

Safeguarding children is everyone's business - safeguarding children is everyone's business

Level of Vulnerability: Children or young people with complex vulnerabilities and needs that require a multi-agency co-ordinated approach supported by a clear co-ordinated action/ care plan. Undertake the Early Help Assessment and develop a co-ordinated package of intervention

Potential Indicators	Further Policy and Guidance
– this is not an exhaustive list	· · · · · · · · · · · · · · · · · · ·
CHILD	
Child/young person who is consistently failing to reach their developmental milestones and concerns exist about their parent's ability to care for them	Recognising Neglect and using the Graded Care Profile
Experiencing chronic / life limiting health condition	
Children with Disabilities	Recognising Neglect and using the Graded Care Profile
Unsafe sexual behaviour / at risk of CSE	Child Sexual Exploitation Risk Assessment (local)
	Child Sexual Exploitation (National)
	Sexually Active Children & Young People (Including Under Age Sexual Activity)
Failure to attend medical appointments on a regular basis	
Problematic substance misuse	
Persistent truanting / short term exclusion / poor school attendance	Children missing from care, home & education
Appearance reflects poor care / hygiene despite offering of advice and support	Recognising Neglect and using the Graded Care Profile
Child is expected to undertake caring role for others in the family	

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Missing from home on occasions	Children missing from care, home & education
Puts self or others in danger	Self-harm and suicidal behaviour
Non engagement with ante natal appointments	
Conception under 16 years	
Education and Health Care plan required.	
Children who are young carers and wish to access their right to an assessment	
PARENTS/CARERS	
Parents or carers are experiencing, on an on- going basis, one or more of the following problems significantly affecting their parenting: mental ill-health, substance dependency or domestic abuse/ potential honour based violence / forced marriage / learning disability	Recognising Neglect and using the Graded Care Profile (Local) Neglect (Regional)
Representation of the second secon	
Revenue 1 Parental involvement in crime	
Chronic / serious relationship problems between carers	Domestic Violence and Abuse
HOME /ENVIRONMENT	
Family is socially excluded / very isolated	Recognising Neglect and using the Graded Care Profile (Local) Neglect (Regional)
Novercrowded housing	
Risk of eviction /homelessness	
 Home in poor state repair / poor hygiene within home 	
R Debts / poverty	
Family seek asylum / refuge	

If help and support is refused, consideration must be given as to whether this will adversely impact the child's safety, health and/or development and, therefore, meet the threshold for Statutory Assessment at Level 4.

Level 4: Threshold to refer to Children's Social Care:

Immediate Intervention or Assessment Required from the Multi Agency Safeguarding Hub (MASH)

Multi-Agency Referral; Reporting Concerns (MARF)

Level of Vulnerability:

Sexual activity under age of 13 years

Safeguarding children is everyone's business - safeguarding children is everyone's business

Children or young people with very complex needs OR I am extremely concerned for their safety based on evidence of abuse or neglect or disclosure by the child. The child's health and development is being adversely affected.

Potential Indicators	Further Policy and Guidance
– this is not an exhaustive list	
 Children where there has been a disclosure / allegation of harm or where 	Recognising Neglect and using the Graded Care Profile
children are identified at risk of suffering	Bruising non mobile babies
serious harm through physical, sexual, emotional abuse and neglect	Strategy Discussions / Meeting
	Quick guide to CP medicals and CP health assessments
	Child Protection Procedures – Additional Guidance
Children where the following is suspected:	
Fabricated illness	Fabricated or induced Illness
Allegations of harm by a person in a	Person posing risk to children
position of trust	Allegations about a Colleague / Professional
	Allegations against Staff or Volunteers
Female genital mutilation (FGM)	Female Genital Mutilation
% Honour based violence	Honour based violence
Forced marriage	Forced marriage
Sexual exploitation and trafficking	Child Sexual Exploitation Risk Assessment
	Trafficked children
	ESafety: Children exposed to abuse through digital media

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Child Sexual Exploitation Risk Assessment (local)

	Child Sexual Exploitation (National)
	Sexually Active Children & Young People (Including Under Age Sexual Activity)
Children whose parents are unable to provide care, for whatever reason	Children of parents with mental health problems Parental substance misuse, hidden harm and the impact on children and young people Domestic Violence and Abuse
Children who disappear or are missing from home or care regularly or for long periods	Children missing from care, home & education
Children who are in contact with persons who have been assessed as Posing a Risk to Children (PPRC)	Person posing risk to children
 Children whose health and development are adversely impacted/significantly impaired because parenting is compromised as a consequence of: Mental health issues; Substance misuse; Domestic abuse Learning difficulties Poverty Prolific offending/in custody despite interventions and support at Level 2 and 3 	Children of parents with mental health problems Parental substance misuse, hidden harm and the impact on children and young people Domestic Violence and Abuse Recognising Neglect and using the Graded Care Profile Neglect (Regional)
Children whose behaviour is so extreme they are at risk of removal from home e.g. control issues, risk taking, dangerous behaviour	Children affected by gang activity & youth violence Self-harm and suicidal behaviour
Children who are experiencing extreme forms of bullying that adversely impact upon their health and development	Bullying Self-harm and suicidal behaviour
 Children who are abandoned, rejected , become subject of police protection or Children aged 16 and 17 who present as homeless Adoption breakdown 	
Children whose health and development is being adversely impacted through parental	Recognising Neglect and using the Graded Care Profile

non-engagement with services despite interventions at Level 2 and 3 including parents who are unable to protect their children and to prioritise the needs of their children above their own	Families who resist change including disguised compliance
 Where a pre-birth assessment has identified an unborn child's health or development is being adversely impacted Unborn to parents unable to care for previous children 	Quick guide to CP medicals and CP health assessments Pre Birth Assessment Recognising Neglect and using the Graded Care Profile
Children with Disabilities requiring significant support	Children with disabilities
Children who are Privately Fostered	Children living away from home
Children subject to care proceedings including children / young people subject to care order, wordship, EPO, supervision order or remanded to LA care	
Unaccompanied Asylum Seeking Children	Children from abroad
Children Who Harm / abuse Others	
High Risk /Experiencing CSE	Child Sexual Exploitation Risk Assessment (local)
Persistently displays extremist views / radicalisation	Safeguarding Children and young people against radicalisation and violent extremism

Support will be offered to children and families at Level 3 as part of the Step-Down Process from Level 4



Herefordshire Council

Meeting:	Children and young people scrutiny committee
Meeting date:	16 July 2018
Title of report:	Work programme
Report by:	Governance services

Classification

Open

Key decision

This is not an executive decision.

Wards affected

Countywide

Purpose and summary

To review the committee's work programme.

Recommendation(s)

THAT:

- (a) the committee approves an additional meeting on 15 October and the work programme as set out at appendix a, subject to any amendments the committee wishes to make;
- (b) the committee approves the draft terms of reference in appendix b for two task and finish groups – i) Special Education Needs (SEN) Provision; and ii) Pupil Referral Unit (PRU) Referrals – and agrees the appointment of chairpersons for the two groups; and
- (c) the committee agrees the arrangement of a spotlight review on the afternoon of 17 September concerning dental health and childhood obesity; and
- (d) the committee notes the recommendation tracker in appendix c.

Alternative options

1 It is for the committee to determine its work programme to reflect the priorities facing Herefordshire. The committee needs to be selective and ensure that the work programme is focused, realistic and deliverable within existing resources.

Reasons for recommendations

2 The committee needs to develop a manageable work programme to ensure that scrutiny is focused, effective and produces clear outcomes.

Key considerations

Work programme

- 3 The work programme needs to focus on the key issues of concern and be manageable allowing for urgent items or matters that have been called-in. Two additional items have recently been proposed for consideration by the committee; the Youth Justice Plan and the Education Strategy. The Youth Justice Plan is a Policy Framework Item which will be considered by full Council on 12 October and there is a desire to expedite arrangements for the review and finalisation of the Education Strategy. To accommodate these two items it is proposed that they are allocated to the committee meeting arranged on the 17 September
- 4 Should committee members become aware of any issue they think should be considered by the Committee they are invited to discuss the matter with the Chairperson and the statutory scrutiny officer.
- 5 The work programme has been updated following the annual scrutiny work programme workshop on 4 June. The current version of the work programme is attached as appendix a .

Constitutional Matters

Task and Finish Groups

- 6 A scrutiny committee may appoint a task and finish group for any scrutiny activity within the committee's agreed work programme. A committee may determine to undertake a task and finish activity itself as a spotlight review where such an activity may be undertaken in a single session; the procedure rules relating to task and finish groups will apply in these circumstances.
- 7 The relevant scrutiny committee will approve the scope of the activity to be undertaken, the membership, chairperson, timeframe, desired outcomes and what will not be included in the work. A task and finish group will be composed of a least 2 members of the committee, other councillors (nominees to be sought from group leaders) and may include, as appropriate, co-opted people with specialist knowledge or expertise to support the task. In appointing a chairperson of a task and finish group the committee will also determine, having regard to the advice of the council's monitoring officer and statutory scrutiny officer, whether the scope of the activity is such as to attract a special responsibility allowance.

- 8 Two task and finish group have been proposed following discussions at the committee's work programme session on 4 June 2018. A task and finsh group relating to SEN Provision has been proposed to assess the allocation of children with SEN to appropriate schools. A further task and finish group has been proposed to investigate the current level of referrals to the PRU. Terms of reference for both task and finish groups are attached at appendix b which the committee is asked to approve and appoint a chairperson for each group. The terms of reference include the scope of the activity to be undertaken desired outcomes and what will not be included in the work. The final membership of the task and finish groups and the timeframes for their operation will be finalised in consultation with group leaders and the chairpersons of the groups following this meeting.
- 9 A spotlight review has also been proposed concerning childhood obesity and dental health. It is proposed that the review takes place in the afternoon of 17 September review following the committee meeting in the morning. The spotlight review will gather evidence from local organisations and bodies with responsibility for obesity and dental health services. Representatives will be invited to answer questions and participate in a roundtable discussion to enable the indentification of any gaps and to consider potential recommendations. The programme for the review will be finalised shortly and shared with the committee.
- 10 The Committee is asked to determine any matters relating to the appointment of a task and finish groups and the chairperson and any special responsibility allowance or undertaking a spotlight review including co-option (see below).

Co-option

- 11 A scrutiny committee may co-opt a maximum of two non-voting people as and when required, for example for a particular meeting or to join a task and finish group. Any such co-optees will be agreed by the committee having reference to the agreed workplan and/or task and finish group membership.
- 12 The Committee is asked to consider whether it wishes to exercise this power in respect of any matters in the work programme.

Tracking of recommendations made by the committee

12 A schedule of recommendations made since July 2017 and actions in response is attached at appendix c.

Forward plan

13 The constitution states that scrutiny committees should consider the forward plan as the chief source of information regarding forthcoming key decisions. The current Forward plan is available to Members through the Councillors' handbook intranet site. Forthcoming key decisions are also available to the public under the forthcoming decisions link on the council's website:

http://councillors.herefordshire.gov.uk/mgDelegatedDecisions.aspx?&RP=0&K=0&DM=0&HD=0&DS=1&Next=true&H=1&META=mgforthcomingdecisions&V=1

Further information on the subject of this report is available from Governance Services on Tel (01432) 383690

Community impact

14 The topics selected for scrutiny should have regard to what matters to residents.

Equality duty

15 The topics selected need to have regard for equality and human rights issues.

Financial implications

16 The costs of the work of the committee will have to be met within existing resources. It should be noted the costs of running scrutiny will be subject to an assessment to support appropriate processes.

Legal implications

17 The council is required to deliver an overview and scrutiny function.

Risk management

18 There is a reputational risk to the council if the overview and scrutiny function does not operate effectively. The arrangements for the development of the work programme should help mitigate this risk.

Consultees

19 The work programme is reviewed at every committee meeting and during business planning meetings between the Chairperson, Vice Chairperson, Director of CWB and Statutory Scrutiny Officer.

Appendices

Appendix A – Work Programme 2018/19

Appendix B – Proposed task and finish groups– i) SEN Provision ii) PRU Referrals

Appendix C – Recommendations tracker

Background papers

None identified.

Children and Young People Scrutiny Committee

16 July 2018

Work Programme 2018/19

Meeting date: 14 May 2018	3 – 10.15 a.m. Despat	ch: 3 May	
Item	Description	Report Author	Form of Scrutiny
Learning Disability Strategy 2018 - 2028	To preview the draft learning disability strategy before it is presented to the cabinet for approval. The committee is asked to agree recommendations and comments to submit to the cabinet member health and wellbeing for consideration during the finalisation of the strategy.	Adam Russell	Pre-decision call-in
Children's Safeguarding and Family Support Performance Data	To receive a quarterly performance report on safeguarding measures.	Vicki Lawson/Chris Jones	Performance review
Briefing	NEETs – current level of NEETs, new data recording system; and breakdown of statistics around rural/urban/market towns/gender/traveller community.	Louise Tanner	
	Regional Schools Commissioner – briefing note on role of the RSC and areas of overlap with the council.	Lisa Fraser	
	Provision of children's rights and advocacy service	Sandra Griffiths	
Meeting date: 16 July 2018 – 2.00 p.m. Despat		ch: 6 July	
Children and Young People Plan	To receive the draft children and young people plan ahead of its presentation to Cabinet and Council. To make recommendations on the draft plan.	Richard Watson, Amanda Price	Pre-decision call-in
Adoption Service and Fostering Service annual reports	To receive the annual reports from the adoption and fostering services and consider the outcomes and recommendations. To make recommendations to the cabinet member on the operation of the services during 2018/19.	Gill Cox	Performance review

Child Protection Numbers	To receive an update on the number of children currently subject to child protection arrangements and to make any necessary recommendations to the Cabinet Member.	Jane Hoey	Performance review
Meeting date: 17 Septemb	er 2018 – 10.15 a.m. Despat	ch: 7 September	
Youth Justice Plan	To endorse the Youth Justice Plan 2017/18 for approval by full Council and consider whether there are any comments the committee would wish to make that would inform the production of the Plan for 2018/19.	Keith Barham	Pre-decision call in of Policy Framework Item
Education Strategy	To receive a report concerning referrals to the MASH from agencies and in particular the Police. To include comparative data other local authorities.	Lisa Fraser	Pre-decision call in
Implementation of the Corporate Parenting Strategy action plan	To consider the updated action plan to the corporate parenting strategy and receive a performance report against the objectives	Gill Cox	Performance review
Children's wellbeing self- assessment – 2018/19	To consider if the children's wellbeing self-assessment provides the necessary assurance for the committee. In addition to agree any comments and recommendations to enable the self-assessment to be developed further.	Chris Baird	Performance review
Briefing paper	Autism Strategy update Improvement Plan – three monthly report of progress against the improvement plan.		
Meeting date: 15 October 2		ch: 5 October	
Herefordshire Safeguarding Children's board annual report	To consider the annual report and any recommendations contained within it. To assess if the report provides assurance and make comments and recommendations to the council and cabinet.	Sally Halls	Performance review
Referrals to the Multi Agency Safeguarding Hub	To receive a report concerning referrals to the MASH from agencies and in particular the Police. To include comparative data other local authorities.	Liz Elgar	Performance review/policy review and development

Section 20 Task and finish group – recommendations and outcomes	To present the final report of the task and finish group to the Children and Young People Scrutiny Committee	Chairman of T&F	Policy review and development
Meeting date: 12 Novembe (Potential alternative venu		ch: 2 November	
Budget and Medium Term Financial Strategy (MTFS)	To seek the views of the committee on the draft medium term financial strategy (MTFS) 2017-21 and the budget proposals for 2017-18 relating to Children's Wellbeing. To include an engagement session with young people, school councils regarding budget priorities.	Andrew Lovegrove, Josie Rushgrove, Audrey Harris	Pre-decision call-in/Policy review and development
Childcare sufficiency report	To preview the draft childcare sufficiency report before it is presented to the cabinet for approval. The committee is asked to agree recommendations and comments to submit to the cabinet member young people and children's wellbeing for consideration during the finalisation of the strategy.	Andrew Hind, Julia Stephens, Nicola Turvey	Pre-decision call-in
Section 20 Task and finish group – recommendations and outcomes	To present the final report of the task and finish group to the Children and Young People Scrutiny Committee	Chairman of T&F	Policy review and development
Meeting date: 18 February	2019 – 10.15 a.m.	Despatch: 8	February
Young Carers Service	To consider an update report on progress with the implementation of the young carers service.	Danielle Mussell	Performance review
School Examination Performance	To consider school performance of summer 2018 and make recommendations to cabinet on how the effectiveness of the school improvement framework and strategy could be enhanced.	Lisa Fraser	Performance review
Implementation of the Children and young people Mental Health and emotional wellbeing transformation plan 2015 – 2020.	To receive an update on the Herefordshire Children and Young People Mental Health and Emotional Wellbeing Transformation Plan 2015 – 2020 including a presentation from the children and young people mental health partnership if appropriate.	Jade Brooks/Christine Price	Performance review

	To receive detail of the outcomes of Healthwatch's work concerning children's mental health.		
Briefing paper	Improvement Plan – six monthly report of progress against the improvement plan.		
Meeting date: 25 March 20	19 – 10.15 a.m.	Despatch: 5 March	
Work Programme 2019/20 and meeting dates	To agree the Committee's work programme and meeting dates for 2019/20.	Matt Evans	

Scrutiny Panel – a panel of two members of the committee is currently in operation to provide an oversight of progress against the savings proposal to reduce the number of looked after children. Councillors Gandy and Seldon comprise the Panel.

Task and Finish Groups – Section 20 Orders, scope and terms of reference agreed at meeting on 16 April. Three meetings of the Group will take place with a final report of the Group's recommendations to a future committee meeting.

- Proposed task and finish groups relating to SEN/Inclusion and PRU referrals.

Spotlight review – Dental Health and Childhood Obesity.

Business to allocate

- Bereavement Services
- 12 month report of progress against the improvement plan
- Public Health nursing update

Children and Young People Scrutiny Committee

Special Education Needs (SEN) Provision Task and Finish Group – Scoping Docume	ent

SEN Provision Task and Finish Group
· · ·
The Children and Families Act 2014 introduced wide-ranging changes to the organisation and arrangement of special education needs (SEN) provision. Since the introduction of this legislation there have been claims that the number of children with SEN, allocated to inappropriate forms of educational provision, has increased. It is contended that children with moderate needs are too readily admitted to schools offering specialist SEN provision when their education and development would be better served in mainstream educational establishments with SEN support. The claims maintain that the consequence of this trend has been a detrimental impact on the principle of inclusion and the broader educational and development needs of all pupils in the county. This review will examine these claims in greater detail to assess if they are substantiated by evidence in Herefordshire.
 The review contributes to the following objectives contained in the Herefordshire corporate plan and other key plans and strategies: Keep children and young people safe and give then a great start in life; and Secure better series, quality of life and value for money.
 Summary: To assess the introduction of the new legislative requirements and impact on SEN provision in Herefordshire. To test claims that children are too readily admitted to inappropriate forms of SEN provision. The review will look at: SEN provision in Herefordshire and the relationship between special and mainstream schools; local and national policy informing the placement of children in appropriate facilities; trends and statistics relating to SEN and comparisons with national and regional figures; the contention that inclusion is being undermined in favour of specialist facilities and that children are being placed in the wrong environment. Terms of Reference: The task and finish group will: develop a detailed understanding of SEN provision across Herefordshire;

	1
	 interpretation). Including local policies and practices; examine the introduction of new legislative requirements included in the Children and Families Act 2014; develop an understanding of the processes around Education, Health and Care Plans (EHC Plans) and assessments of need in educational provision; examine trends and statistics relating to children with EHC Plans and consider national and regional comparative data; examine how the Council co-ordinates EHC Plan assessment /SEN provision with Academies and Free Schools develop an understanding of and assess Herefordshire's Local Offer; examine evidence to establish whether Herefordshire children with SEN are being allocated to an appropriate educational setting; and test the contention that children with moderate needs are allocated to specialist SEN schools which are not appropriate to their level of need. Membership (to be determined):
	initial recruitment of members on the committee.
What will NOT be included	• The examination of any individual cases concerning EHC Plans or allocation to SEN Provision.
Potential outcomes	 Assurance that children with SEN are allocated to appropriate educational settings; Assurance that the development and educational needs of all children in Herefordshire is met by local SEN policy and practice; and Assurance that the Local Offer provides good access to information for parent to raise awareness of EHC Plans and SEN Provision.
Key Questions	 To consider: Has the number of children in specialist SEN schools increased since 2014? Is this in proportion to population growth in the county? Is it consistent with regional/national trends; Has the number of children with SEN in mainstream schools increased? Is this in proportion to population growth in the county? Is it consistent with regional/national trends; Has the proportion of children with EHC Plans increased, what has been the trend since 2014; What have been the consequences of the transition to EHC Plans under the Children and Families Act 2014; How is the appropriate SEN provision for a child assessed? Does an assessment carried out in an EHC Plan determine the educational establishment to which a child with SEN is allocated; Does the information contained in the Local Offer raise awareness of appropriate provision for children with SEN to their parents;

	 Are parents aware of the Local Offer and understand EHC Plans; the allocation to S consequences of such allocation; and How will the Council work with Barrs Cou ensure that pupils enrolled in the new sp allocated appropriately? 	EN provision and rt Academy Trust to
Cabinet Member	Cabinet member young people and children's w	ellbeing
Key stakeholders / Consultees	Internal - Children's Wellbeing officers	
	External – teachers from SEN specialist schools	
	 SENCOs from mainstream schools 	
	Parents of children with SEN	
	Members of governing bodies.	
Potential witnesses	 Headteacher of SEN school Teachers from special schools/SENCOs Author of article concerning Herefordsh Parents 	ire SEN provision
Research Required	 Trends and statistics relating to EHC Plans and SEN provision; Legislative requirements introduced under the Children and Families Act 2014; and The Local Offer. 	
Potential Visits		
Publicity Requirements	Following the conclusion of the task Report back young people scrutiny committee.	k to the children and
Outline Timetable (to be scrutiny committee to co	determined): (following decision by the children mmission the Review)	and young people
Activity		Timescale
	s of Reference, programme of ovisional witnesses/meeting dates	Committee meeting – 16 July 2018
Present final report to Ch	nildren and Young People Scrutiny Committee	

Group Members	
Chair	
Support Members	
Support Officers	J Coleman
	M Evans

Title of review	PRU referrals	
Scope	-	
Reason for review	The cabinet member has suggested that the current level of referrals to the PRU should be reviewed by the scrutiny committee	
Links to the corporate plan	 The review contributes to the following objectives contained in the Herefordshire corporate plan and other key plans and strategies: Keep children and young people safe and give then a great start in life; and Secure better series, quality of life and value for money. 	
Summary of the review and terms of reference	Summary: The review will look at: pupil referral units in Herefordshire; current referral levels; recent trends in permanent exclusions and referral levels including comparative data nationally and regionally; national and local policy.	
	 Terms of Reference: The task and finish group will: develop an understanding of the structure of the Herefordshire Pupil Referral Service and the Hereford Integrated Behaviour Outreach Service (HIBOS); learn about policies and guidelines (and local interpretation) which support schools to determine when referrals to the PRU are appropriate; learn how the Council works with HIBOS (a multi-Academy Trust) to address concerns regarding referral levels; assess trends in the level of permanent exclusions and pupil referrals to determine any recent increases. Compare such trends against regional and national statistics; engage professionals in the sector to determine the reasons behind recent trends; investigate any impacts on referral numbers resulting from changes to the educational landscape e.g. academies and free schools; and consider statistics relating to the success of pupils who transition from the PRU to mainstream schools in Herefordshire. 	
	Membership (to be determined):	

Pupil Referral Unit (PRU) referrals Task and Finish Group – Scoping Document

	Group leaders will be contacted to fill any remaining vacancies following initial recruitment of members on the committee.
What will NOT be included	A review of individual cases.
Potential outcomes	 To determine current trends around referrals to the PRU and if an increase has been recorded; To understand the reasons behind any recent trends in referrals; and Gain assurance that effective co-ordination between the Council, the PRU and local schools exists to address increases in referral numbers.
Key Questions	 To consider: What are the current level of referrals; are there any discernible trends in the level of recent referrals; Where are referrals originating; is there an even distribution across maintained schools, academies and free schools; How does the Council coordinate/liaise with the PRU and schools (maintained and non-maintained) to ensure there is alignment and consistency; How long do pupils remain at the PRU and how successful are transition arrangements for pupils leaving the PRU; how many return to the service; What thresholds/policies/guidelines are in place for schools to follow to undertake referrals for those pupils not permanently excluded; and Has there been any impact upon referral numbers as a consequence of academies and free schools in Herefordshire?
Cabinet Member	Cabinet member young people and children's wellbeing
Key stakeholders / Consultees	 Internal – education officers concerned with additional needs. Headteacher/representative from management committee – PRUs
Potential witnesses	 Headteachers from schools with high permanent exclusion/referral rates Management Committees at PRUs Governing Bodies at maintained schools Parents of permanently excluded children or at PRU Head Teacher from PRU
	 Head Teacher from PRO Management Committee members Governing bodies members
Research Required	 Statistics relating to permanent exclusions and referral numbers; current data and previous years to determine any trends; Comparative referral data – national and regional; Policies and guidelines issued to schools to manage permanent exclusions and referrals.

Potential Visits		
Publicity Requirements	Following the conclusion of the task Report bac young people scrutiny committee.	ck to the children and
Outline Timetable (to be determined): (following decision by the children and young people scrutiny committee to commission the Review)		and young people
Activity		Timescale
Confirm approach, Terms	of Reference, programme of	Committee meeting –
consultation/research/provisional witnesses/meeting dates		16 July 2018
Present final report to Children and Young People Scrutiny Committee		

Group Members	
Chair	
Support Members	
Support Officers	J Coleman
	M Evans

Appendix c

Schedule of Children and Young People Scrutiny Committee recommendations made and actions in response

Meeting	item	Recommendations	Action	Status
5 July 2017	Corporate Parenting Strategy 2017 – 2020	 The committee welcomes the strategy, supports the priorities identified and agrees to provide a summary of comments and recommendations to the cabinet member; The committee requests annual performance reports relating to the action plan in the strategy; The committee provides a forum, where appropriate, for children and young people in care and care leavers to hold their Corporate Parents to account; The members of the committee facilitate training, with officers, on corporate parenting to all members of Herefordshire Council; The committee recommends that the cabinet member reviews the measures for success and outcomes sought in the action plan on a regular basis to see whether any measures need to be strengthened; The committee recommends that procedures are introduced to ensure that significant decisions of the council take account formally of likely implications for looked after children; 	Response of executive: The draft strategy was discussed at the children's scrutiny committee on 5 July 2017; they are supportive of the strategy and associated action plan and have requested that an annual update on its implementation is presented to the committee. The recommendations have been considered by the cabinet member young people and children's wellbeing and as a consequence children's scrutiny is referred to in the action plan: <u>Corporate Parenting Action Plan 2017-20</u>	Action plan implementation update to be scheduled for 16 July 2018.

		 appropriate, for looked after children to share skills and experience to help enhance personal development and there is consideration of how this is best facilitated and publicised; and The committee recommends that methods and strategies are investigated to engage partners and businesses in corporate parenting. 		
	Annual reports for the fostering and adoption services	 Resolved – that: a) the committee notes the annual reports from the adoption and fostering services and agrees to feedback comments to the cabinet member; and b) the adoption and fostering reports are considered as separate agenda items in future years. 	Adoption service and Fostering service annual reports allocated to the draft work programme 2018/19 for committee on 16 July 2016.	Completed
2 October 2017	Commissioning intentions for universal and early help services for children, young people and families	 Resolved - That the committee: supports the extension of the family befriending services contracts with the existing providers to the end of March 2018; has significant concerns about the commissioning exercise proposed. The cabinet members for health and wellbeing and young people and children's wellbeing are asked to have regard to the committee's concerns, particularly: i) The reported lack of consultation concerning safeguarding arrangements and engagement 	Response of executive: i) The intention to re-procure health visiting and school nursing services has been in the public domain since August 2016. CCG colleagues have been involved in steps taken thereafter to inform future commissioning intentions. There has been an opportunity to raise any issues or questions regarding procurement, during this time. A generalised concern regarding safeguarding arrangements had been	Completed. Committee may wish to request an update report on the implementation of the contract.

 with the Herefordshire Safeguarding Children's Board; ii) The provision of services in rural areas; iii) The requirement for additional detail in the report, in particular the contract specification ; and iv) A reported lack of communication with the CCG. requests that, before a decision is taken on the proposal, the cabinet members share additional information with the committee, including the contract specification. 	raised by the CCG very recently prior to the scrutiny committee meeting and reassurances were provided to the CCG that discussions to understand the detail would be welcome and these have since been initiated. Issues relating to <i>safeguarding</i> commissioning responsibilities are resolvable through further discussion. There is no requirement to present the commissioning proposal to the Herefordshire Safeguarding Children's Board, because the service will be required to adhere to all national and local policies, guidance, standards and procedures. Further discussion and an agreed way forward have been made with the Chair of the Children's Safeguarding Board, including a request to include reference to safeguarding within this paper (see para 7). ii) It is recognised that there are challenges in delivering timely and accessible services across a rural county and this has been reflected in the draft specification. To respond to those challenges, the provider will be required to ensure that access is available via drop-in sessions (which could	
	be held in any community facility or venue), clinics, home visits, telephone contact, texting and other formats appropriate for the families and community. Broadband	

coverage across the county is currently 83% (30Mbps) so the provider will need to demonstrate how they will work with families who currently have no access to broadband or where phone signals are not available. The provider will also be expected to be organised around geographical areas/localities and pragmatically structured in line with local children's centre reach areas. The provider will also identify a named public health nurse link to each GP practice, children's centre and school, in order to facilitate local liaison, information- sharing and joint working in the best interests of families.	
iii) the draft specifications for the commissioning of 0-25 PH Nursing services and family mentoring services, to which have been added the requested additional detail relating to targets and outcomes and key issues outlined in the JSNA, have been made available, by exemption, to council members of the Children's Scrutiny Committee	
 iv) This concern is not accepted and a summary of engagement activity is provided below: Representatives from the CCG have been engaged since August 2016 when CCG requirements were reviewed; 	
	 (30Mbps) so the provider will need to demonstrate how they will work with families who currently have no access to broadband or where phone signals are not available. The provider will also be expected to be organised around geographical areas/localities and pragmatically structured in line with local children's centre reach areas. The provider will also identify a named public health nurse link to each GP practice, children's centre and school, in order to facilitate local liaison, informationsharing and joint working in the best interests of families. iii) the draft specifications for the commissioning of 0-25 PH Nursing services and family mentoring services, to which have been added the requested additional detail relating to targets and outcomes and key issues outlined in the JSNA, have been made available, by exemption, to council members of the Children's Scrutiny Committee iv) This concern is not accepted and a summary of engagement activity is provided below: Representatives from the CCG have been engaged since August 2016 when CCG requirements were

lerefordshire	Resolved – that:	 in November 2016; stakeholder engagement events To which GP and CCG representatives were invited were held during December 2016 through to end of January 2017; feedback events were held in February 2017; an early years review/scoping workshop held in May 2017; Soft market testing was undertaken June/July 2017; Updates have been provided to a Joint Commissioning Board which includes representatives of the CCG and reports to the CCG Board in August/September 2017; Engagement/information session with GPs on key principles to be incorporated into the specification, was held in October 2017.and ongoing engagement agreed re implementation arrangements.
afeguarding		Update from Chair of HSCB containingCompletedModel Initial Parish Action Plan forCompleted

	children's board (HSCB) annual report 2016/17 and business plan 2017/19	 a) The annual report and effectiveness of the safeguarding arrangements for children and young people in Herefordshire as assessed by the Board are noted; and b) The strategic priorities identified by the Board are noted. 	<i>Promoting a Safer Church</i> and latest detail with reference to work on the role of Parish Councils in safeguarding children.	
	Outcomes of casework peer review	Resolved – that the committee notes the report and offers congratulations to the teams involved in the review for the positive feedback received.		Completed
	Children's Wellbeing self- assessment	Resolved – that the committee notes the draft self- assessment document for the Children's Wellbeing Directorate.		Completed
4 December 2017	Children and Young People Mental Health Partnership	That the committee: supports the response of the CCG to the task and finish group recommendations; supports the objectives of the Herefordshire Children and Young People Mental Health and Emotional Wellbeing Transformation Plan 2015 – 2020; and requests an update report on the implementation of the plan in 2018.	To determine the timing an update on the implementation of the plan in 2018.	Ongoing
	Children's Wellbeing self- assessment – update	That the Committee: endorses the self-assessment in its current form; and	Excerpt of minutes detailing the discussion sent to the cabinet member for Children and Young People.	Ongoing
		agrees that the comments raised by the committee are circulated to the cabinet member.		

5 February 2018	School Examination Performance	Resolved – that the committee: Recognises positive attainment in a number of areas of school examination performance but in particular in the field of phonics; Requests a briefing note on the current level of NEETs, the new data recording system and a breakdown of statistics to include indicators around rural/urban/market towns/gender/traveller community; Requests a briefing note on the role of the Regional Schools Commissioner and a focus on areas of overlap with the Council; and Agrees to write to government to express concern regarding the lack of regulation and monitoring in respect of home schooling. The correspondence should include reference to the potential impacts of home schooling upon the educational achievements of children and safeguarding responsibilities of the Council.	Correspondence sent to Nadhim Zahawi MP, Parliamentary Under Secretary of State for Children and Families. Copied to Jesse Norman MP and Bill Wiggin MP. Response received.	
	Children and Young Peoples Plan	Resolved - that the committee: Supports the inclusion of: obesity; dental health; mental health and wellbeing; transport; and youth facilities as key areas of focus for the plan; Supports the implementation of a robust monitoring framework for the new version of the Plan; and	Allocated to the committee's draft work	Completed
		Asks for the draft Plan to be presented to the	Allocated to the committee's draft work	Completed

		committee ahead of consideration at Cabinet and full Council.	programme 2018/19 for committee on 16 July 2018.	
16 April 2018	Autism Strategy for Herefordshire 2018 – 2021	 Resolved – that: (a) the significant successes achieved in the first Herefordshire autism strategy published in 2014 be recognised; (b) the outcomes identified by the strategy and the means in the action plan to achieve these ends be supported but noting that the committee would like to see more detailed milestones; (c) it be requested that as the action plan evolves additional base line data is included in the action plan to ensure tangible and quantifiable measures of performance and success, particularly in respect of improving diagnosis rates; (d) the executive be asked to investigate the development of a system/process to ensure an accurate picture of the incidence of autism across Herefordshire can be produced; (e) efforts to improve diagnosis rates and the recording of autism within GP patient records be supported and Herefordshire Clinical Commissioning Group asked to take this initiative forward as a matter of priority; (f) the executive be asked to take steps to work more closely with independent and private schools in Herefordshire to share data regarding enrolled autistic pupils to enable the production of comprehensive statistics of pupils in the county with 	Resolutions of the Committee sent to the Executive for a response. Resolution (e) sent to the Herefordshire CCG for consideration.	Awaiting Executive Response. Strategy to be presented to Cabinet later in 2018

	autism;		
	(g) the executive be asked to consider methods to promote employment at the council to people with autism;		
	(h) the executive be asked to consider contacting key local organisations, such as Halo leisure, to ensure they promote autism-friendly service provision;		
	(i) the executive be asked to ensure that the Herefordshire branch of the National Autistic Society and the Hereford Autism Partnership are consultees during the planning process to ensure that new housing and public access buildings have autism- friendly design considerations;		
	(j) the executive be asked to investigate proposals to ensure that new and existing council buildings and facilities are autism-friendly; and		
	(k) the executive be asked to consider autistic- awareness training for new members of staff and elected members of the Council and ensure that all members are able to disseminate good practices within their local communities.		
LGA Safeguarding Peer Review Feedback	Resolved – that: (a) a report be submitted on the referrals to the MASH, in particular those by West Mercia Police, for review by the Committee;	(a) scrutiny arrangements to be determined at work programming session for 2018/19.	Ongoing
	(b) it be requested that corporate parent training for all members be made mandatory;	(b) corporate parenting is a mandatory training module and must be completed within three months of being elected.	Completed

		 (c) progress on actions in the finalised improvement plan is reported to the Committee, at 3, 6 and 12 months to enable it to be monitored; and (d) the Committee's recognition and support of the work of staff in this challenging area be noted. 	(c) briefing notes for progress at 3 and 6 monthly intervals added to the work programme. The 12 month progress report to be allocated to the first committee in the new term.	Completed
14 May 2018	Learning Disability Strategy 2018 – 2028	Resolved – that the committee: (a) supports the strategy and requests the missing information, concerning health and wellbeing outcomes and social impact, and the implementation plan is shared with the committee when available;	Executive response, 7 June: (a) Agreed. The information will be circulated to committee members by 01 October 2018 and it will be for the committee to determine whether to include further consideration in its work programme;	
		(b) requests that the executive prioritise the incorporation of improved metrics in the strategy to measure progress and provide evidence that objectives are realising desired outcomes;	(b) Agreed. This will form part of the first years activity in the implementation plan.	
		(c) requests that the executive considers making updates on the development and implementation of the strategy available through an appropriate forum e.g. the corporate budget and performance report;	(c) Agreed. Progress will be reported through the quarterly corporate performance reporting process.	
		(d) asks the executive to provide a report to the committee, in due course, on the re-modelling of the Learning Disability Partnership Board;	(d) Agreed. The information will be circulated to committee members by 31 December 2018 and it will be for the committee to determine whether to include further consideration in its work programme	
		(e) asks the executive to consider appointing a member champion for learning disabilities;	(e) Agreed. A draft role profile will be prepared and the Leader of the Council will consult with political group leaders before making an appointment.	

	(f) asks the executive and the CCG to investigate methods of utilising learning disability registers, held by GP surgeries, to provide evidence for those with learning disabilities to more easily obtain bus passes;	(f) Not agreed. Whilst the problem is recognised, there are still complex issues with accessing and sharing learning disability registration data in order to achieve this specific outcome. The requirement for and provision of qualifying information for exemption schemes will be considered across the whole of the health and wellbeing pathway.	
	(g) asks the executive to investigate the promotion of a scheme, similar to the Gloucestershire 50/50 strategy, in Herefordshire to encourage employment opportunities for people with learning disabilities; and	(g) Agreed. Knowledge gained from the Gloucestershire 50/50 learning disability employment strategy will be incorporated into planned work to promote employment opportunities for people with learning disabilities in Herefordshire and that this will form part of the 2018-19 implementation plan;	
	(h) ensures that following the adoption of the strategy, the CCG and the 2gether Trust are held to account for those elements of the strategy for which they are responsible.	(h) This is not a function of the executive. The scrutiny committee may review and scrutinise any matter relating to the planning, provision and operation of the health service in its area and make reports and recommendations directly to the relevant body.	
Children's safeguarding and family support performance data	Resolved - that a report concerning referrals to the MASH is added to the work programme for the committee in September to include an invitation to Sally Halls to participate in the item and access to comparative data from other local authorities.	Item added to the Committee's work programme for 17 September.	