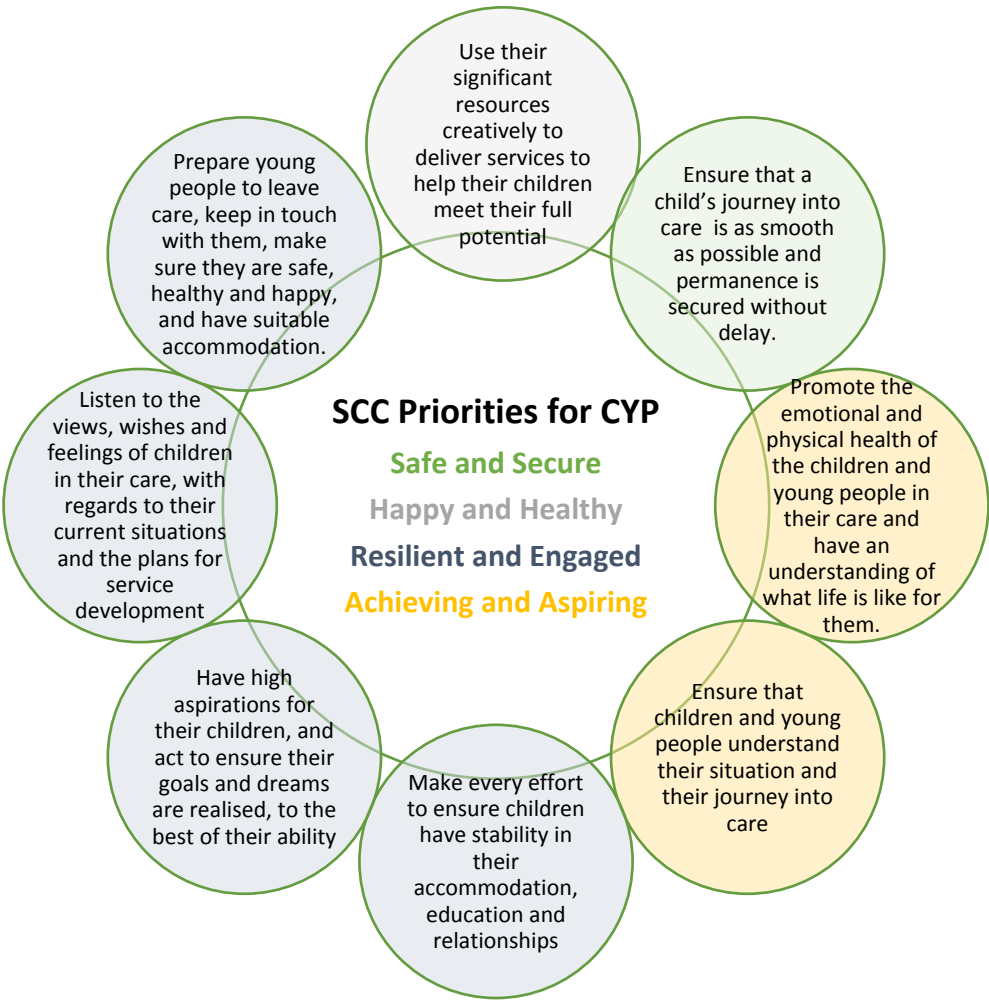
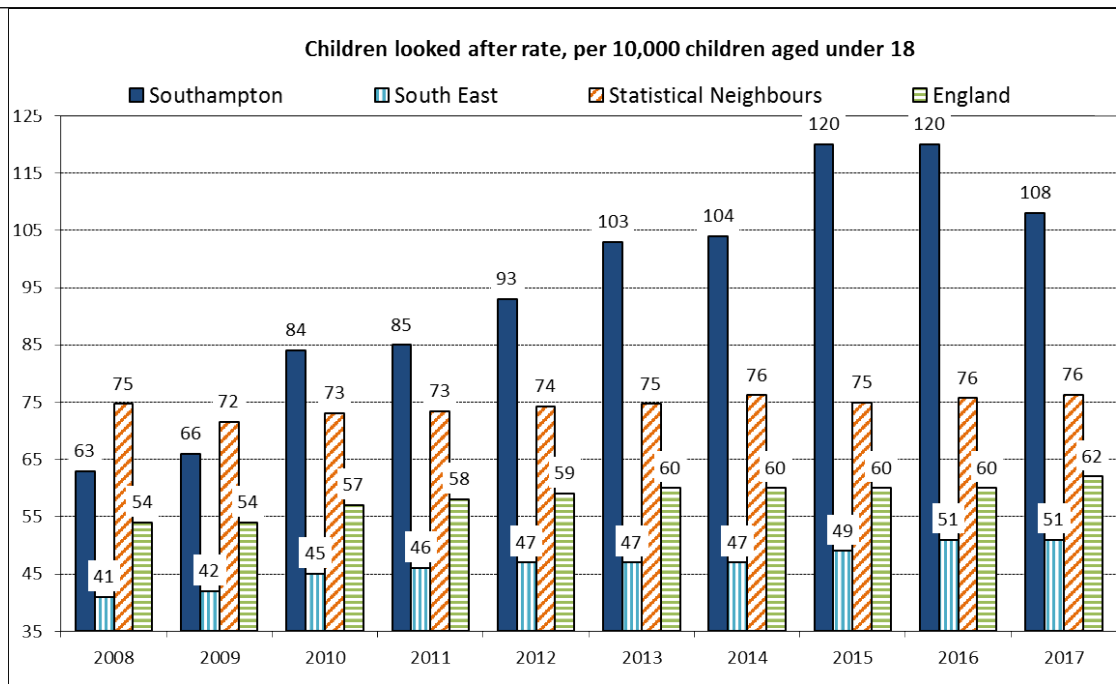


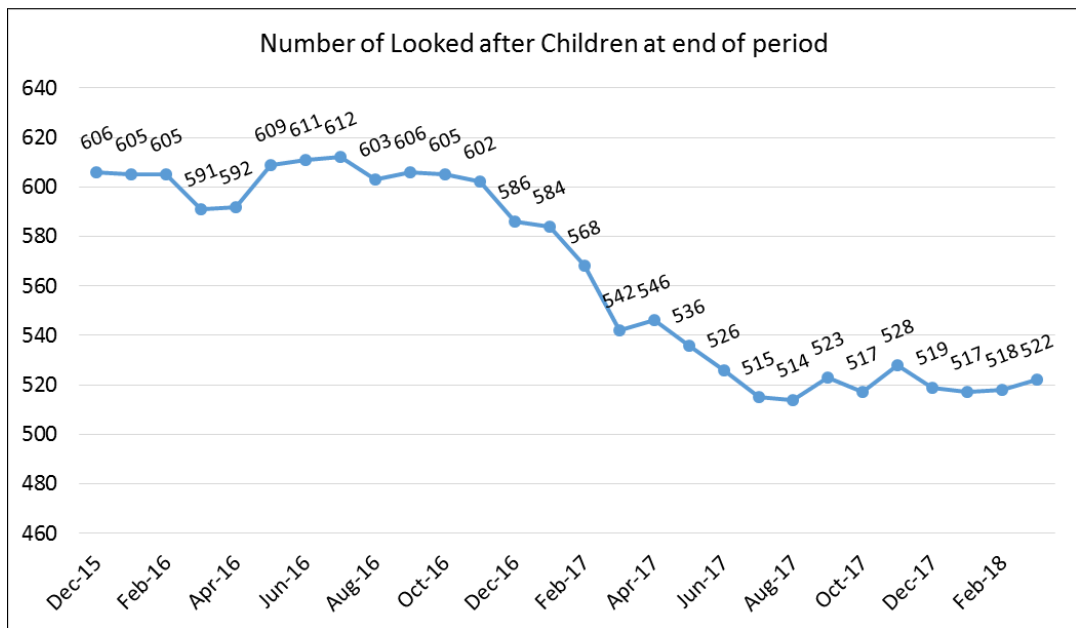
DECISION-MAKER:	COUNCIL		
SUBJECT:	ANNUAL CORPORATE PARENTING REPORT 2017/2018		
DATE OF DECISION:	18 JULY 2018		
REPORT OF:	CABINET MEMBER FOR CHILDREN'S SOCIAL CARE		
<u>CONTACT DETAILS</u>			
AUTHOR:	Name:	Julian Watkins Service Manager	Tel: 023 8083 3939
	E-mail:	Julian.Watkins@southampton.gov.uk	
Director	Name:	Hilary Brooks	Tel: 023 8083 4899
	E-mail:	Hilary.brooks@southampton.gov.uk	
STATEMENT OF CONFIDENTIALITY			
NONE			
BRIEF SUMMARY			
<p>The Care Planning, Placement and Case Review Regulations (2011) require Local Authorities to provide an annual report on the outcomes for Looked After Children (LAC). This report fulfils that requirement, and provides a profile of Southampton's looked after children and care leavers for the year 2016-17.</p>			
RECOMMENDATIONS:			
	(i)	To note and comment on the contents of this report.	
REASONS FOR REPORT RECOMMENDATIONS			
1.	This report is to provide evidence alongside with other reporting and scrutiny panels that our CIC are appropriately monitored and will also inform the ongoing work in raising outcomes for CIC in Southampton.		
ALTERNATIVE OPTIONS CONSIDERED AND REJECTED			
2.	None		
DETAIL (Including consultation carried out)			
3.	<p>The term 'Corporate Parenting' emphasises that we should have the same interest in and aspirations for children and young people in care (or leaving care) as we would for our own children. Looked after Children are those children and young people from birth to 18 years of age who are unable to remain with their family and are cared for by the local authority. This can be through a voluntary agreement reached with their parents or by virtue of a court order. Some are looked after by family or friends who have been approved as a foster carers. Looked after Children and those leaving care are some of the most vulnerable and disadvantaged children in the community.</p>		
4.	<p>The term 'care leaver,' refers to a looked after child/young person aged 16+ who is transitioning from childhood into adulthood. Local authorities have a statutory obligation to support care leavers until they are 21 years old. In addition, the Children and Social Work Act 2017, Royal Assent 27th of April 2017, introduces the additional requirement to offer support to persons aged under 25 who are former relevant children. The extended support role of the foster carer into</p>		

	<p>adulthood will require focus and we are required to produce a 'Care Leavers Offer,' which includes a clear local offer of entitlements.</p>
<p>5.</p>	<p>The concept of Corporate Parenting, introduced in The Children Act 2004, places collective responsibility on local authorities to achieve good parenting for all children in public care (duties of local authorities towards looked after children were listed before, in Children Act 1989, Part III, S. 22 onward). "Corporate Parent" defines the collective responsibility of the council, elected members, employees and partner agencies for providing the best possible care and safeguarding for the children who are looked after in public care. Good corporate parents champion every opportunity to help children and young people in care to achieve their full potential and to have a successful transition into adulthood. Elected members in Southampton carry out this duty through:</p> <ol style="list-style-type: none"> 1. Regular meetings between the Cabinet Member for Education and Children's Social Care and the Service Director, Children and Families Service 2. Scrutiny of regular reports at the Corporate Parenting Committee 3. Representation from the Young People in Care Council at some meetings and additional meetings including members of this group and the Lead Cabinet Member. 4. The Children and Families Scrutiny Panel led by Elected Members robustly examines the work and performance of services and outcomes for children and young people in the City and includes a targeted focus upon children in care and care leavers. <p>Below are the 8 corporate parenting principles that Southampton City Council have adopted as part of the Looked After Children and Care Leavers Service Delivery Plans going forward from 2018-21.</p>

	 <p style="text-align: center;">SCC Priorities for CYP</p> <p style="text-align: center;">Safe and Secure</p> <p style="text-align: center;">Happy and Healthy</p> <p style="text-align: center;">Resilient and Engaged</p> <p style="text-align: center;">Achieving and Aspiring</p> <ul style="list-style-type: none"> Use their significant resources creatively to deliver services to help their children meet their full potential Ensure that a child's journey into care is as smooth as possible and permanence is secured without delay. Promote the emotional and physical health of the children and young people in their care and have an understanding of what life is like for them. Ensure that children and young people understand their situation and their journey into care Make every effort to ensure children have stability in their accommodation, education and relationships Have high aspirations for their children, and act to ensure their goals and dreams are realised, to the best of their ability Listen to the views, wishes and feelings of children in their care, with regards to their current situations and the plans for service development Prepare young people to leave care, keep in touch with them, make sure they are safe, healthy and happy, and have suitable accommodation.
6.	<p><u>Profile of looked after children and care leavers</u></p> <p>As at 31st of March 2018, 522 children and young people were looked after in Southampton, compared to 542 at the same time in 2017 and 591 in 2016.</p> <p>The graph below shows Southampton's rates of children in care, compared to those of its statistical neighbours, England and the South East. Data for the end of the financial year 2017-18 will be published later this year, but based on our internal figures, the rate at the end of the financial year was 105, a small decrease from the previous financial year, but a notable drop from 2015 and 2016 rates.</p>



The following graph also shows the ongoing reducing trend in the numbers of children in care in Southampton, from December 2015 to the end of March 2018



7.

Children starting and leaving care

In 2017-18, 178 children started to be looked after (compared to 167 in 2016-17 and 210 in 2015-16). Of all the children that became looked after, 21 had been in care once or more sometime in their lives – the same number as in the previous year. In 2015-16 there were 23 children who became looked after for a second or subsequent time.

198 children left care during the year, compared to 220 in 2016-17 and 204 in 2015-16. This reduction will be in part due to a reduction in the number of adoptions completed over the course of the last 12 months, although this remains very high.

8.

Age groups

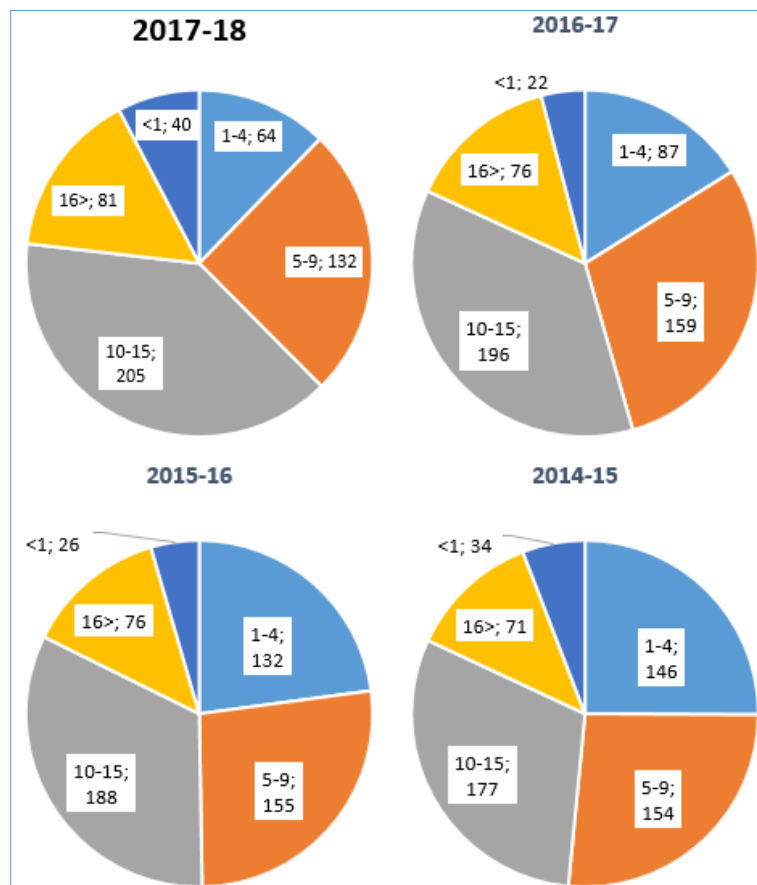
At 31 March 2018, the largest proportion of children in care was aged 10-15, as shown in the top left of the set of graphs below. 10-15 was also the largest age group in the previous three years, followed by children aged 5-9 years. These are predominantly our long term looked after children, for whom we have a long term corporate responsibility as “our,” children. The majority will become our care leavers of the future, and require excellent care, to support them to meet their goals and aspirations when they become older.

1-4 year olds represented 12.3%, and under one year olds 7.7% of looked after children at the end of 2017-18.

This is a lower, and indeed more transient LAC population, in that we are statistically more likely to support these children to find alternative permanency via adoption or Special Guardianship.

Under-fives are our most vulnerable group and this indicates a focus on early intervention with this cohort. We have seen a reduction in the number of 1-4 year old children looked after, but there was in 2017-18 an increase in the number of under one year olds in care when compared to 2016-17.

The table below the graph shows the proportion of each age group of all children in care at the end of each financial year.



Looked after children by age		2014-15	2015-16	2016-17	2017-18
Under 1		5.8%	4.5%	4.1%	7.7%
1-4		25.1%	22.9%	16.1%	12.3%
5-9		26.5%	26.9%	29.4%	25.3%
10-15		30.4%	32.6%	36.3%	39.3%
16 and over		12.2%	13.2%	14.1%	15.5%

9.

Gender

As at 31st of March 2018, 225 (43.1%) of the children in care were girls and 297 (56.9%) boys, which is similar to the previous year, when 44.3% of children in care were girls and 55.7% boys.

10.

Ethnicity

Of the 522 looked after children as at 31st of March 2018, 385 (73.8%) were white British and 21 (4%) white (other nationality). 35 (6.7%) were mixed white and black Caribbean. Other ethnicities represented cohorts of under 15 each.

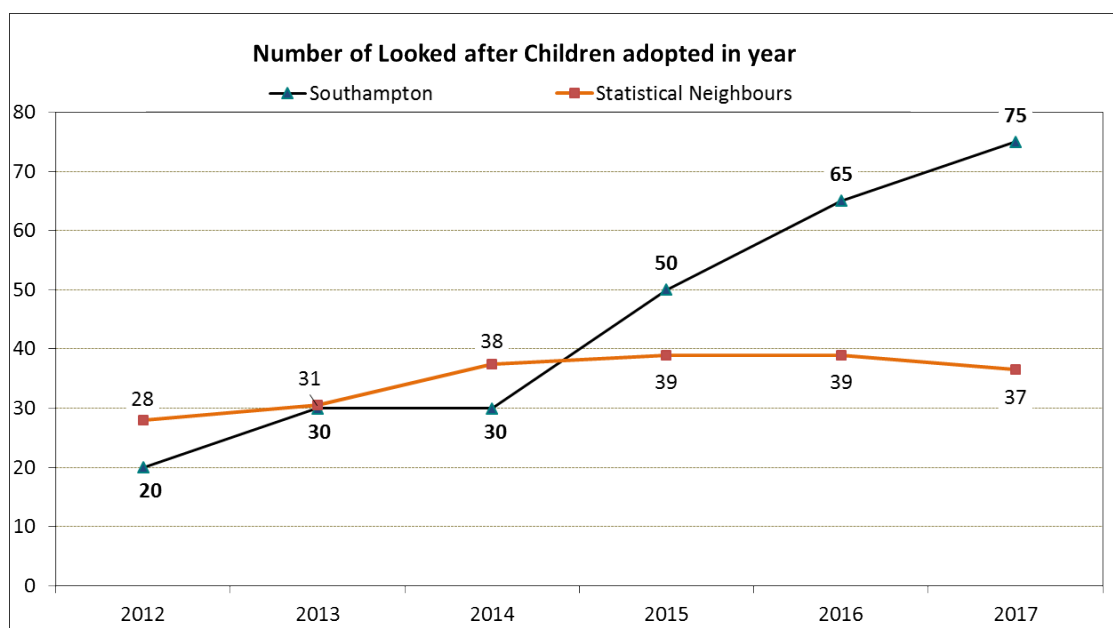
The latest published data from 2016-17 shows that in England overall, 74.7% of looked after children were white, with other ethnic background groups each representing under 10% of the total.

11.

Achieving Permanence

As at 31st of March 2018, our internally reported data shows that during the year, we placed 54 children with adoptive families. That is a reduction from the previous year, but still above the latest statistical neighbour average.

The latest published annual numbers of adoptions for Southampton are shown below, with statistical neighbours' average performance included for comparison. 2017-18 data will be published later on in the year.

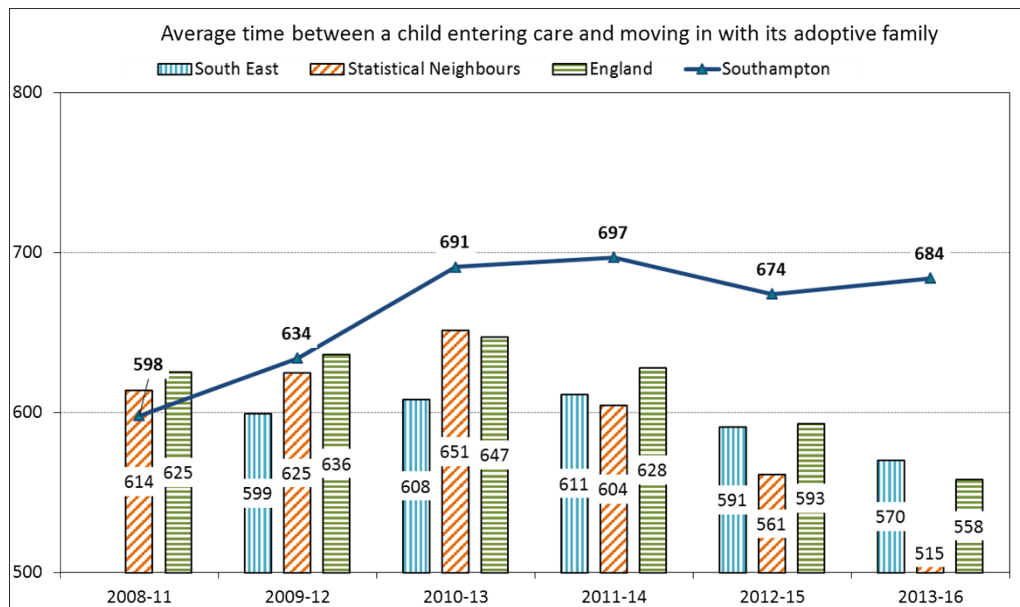


12.

Our internal data shows that as at the end of March 2018, the average number of days between entering care and moving in with their adoptive family for a child was 442 days. The length of time does tend to fluctuate due to each child's individual circumstances, and a complex case can increase the average significantly in some instances.

The graph below shows Southampton's performance compared to its statistical neighbours, England and the South East in three year time periods. It demonstrates that although Southampton's performance is good in terms of numbers of children adopted, the local authority has not been able to reach similar levels as its comparator areas when it comes to timeliness.

This said, a regular adoption tracking meeting is in place and this supports continued driving of care plans to ensure that family finding is prioritised for these children and drift is kept to a minimum.



13

Plans for returning children home when it is safe, and arranging for children to leave care, are considered as part of usual business and a full analysis of our looked after cohort took place in 2015-16.

In 2017-18, the rate of children ceasing to be looked after, per 10,000 0-17 year olds was 40. The rate has remained fairly similar over the last three years – approximately 45 in 2016-17 and 43 in 2015-16.

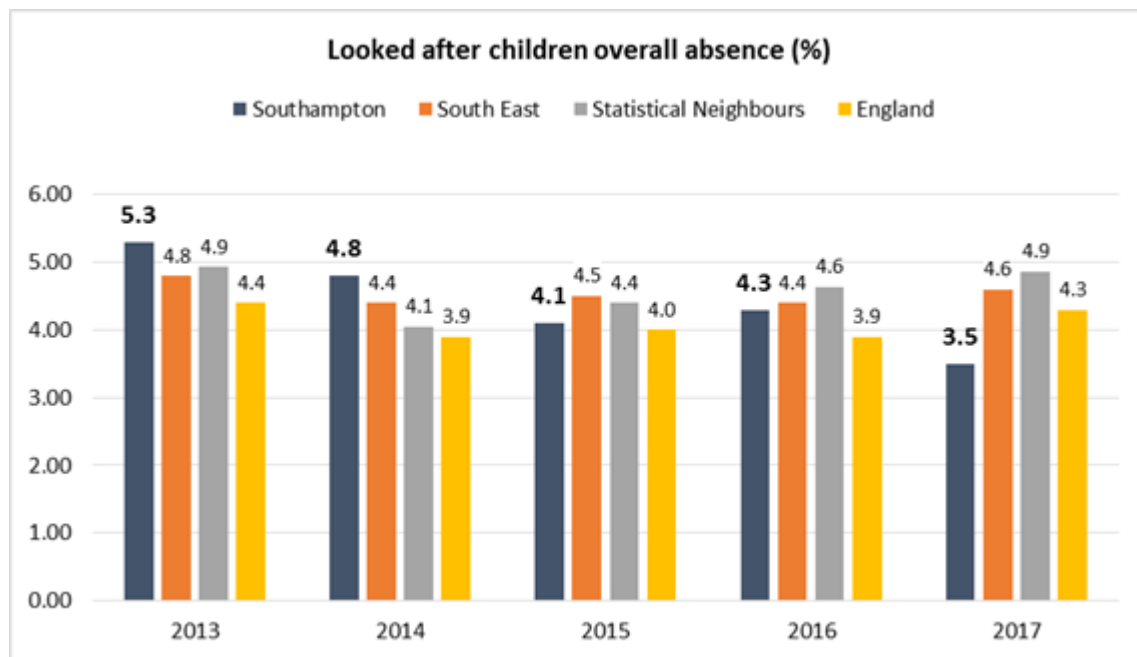
The rate of new looked after children per 10,000 0-17 year olds was 36 in 2017-18, 34 in 2016-17 and 44 in 2015-16.

14.

There are a number of initiatives in place to support children to remain with families wherever possible, including reunification programmes, edge of care interventions and a review of all our children's permanency arrangements. Their care plans are routinely reviewed by an independent reviewing officer, and they can and do

	<p>highlight areas of drift in rehabilitation plans, or potential rehabilitation possibilities on the rare occasion that this would not be in scope already.</p> <p>Of significance, a high proportion of our looked after children are subject to either an interim or full Court Order. This means a Court has agreed with the local authority that a child has met the Section 31 (Children Act 1989) threshold of 'significant harm'. To return them to their family therefore requires the Court to agree it is the correct course of action and it is safe. These plans are also scrutinised and ratified by Court advisors. Alternative permanent options such as special guardianship, adoption and child arrangement orders are therefore the only way forward in many cases.</p> <p>There is also new tracking processes within pre-proceedings work within children's services, with cases that are within PLO but which are not yet subject to care proceedings driven and scrutinised by a regular return to the legal gateway panel. This challenges any drift in planning and interventions, commissions appropriate assessments if required, and enables families a chance to turn things around at the highest level of risk management. This also allows decisions to be made to issue care proceedings when required should the risk increase, (or not decrease) and but also allows cases to step out of this high level of intervention in a planned way. It is important to note that the circumstances for these children are already viewed to be at the threshold where care proceedings, and work is continuing to manage this level of risk, and to prevent their entry to care, even at this stage.</p>
15.	<p><u>Children ceasing to be looked after</u></p> <p>Of the 198 children who left care in 2017-18, 33 (16.7%) returned home*, 38 (19.2%) became subject to a Special Guardianship Order (SGO)** and 54 (27.3%) were adopted***.</p> <p><i>* 28 planned and 5 unplanned.</i></p> <p><i>** Of which 24 with their former Foster Carer.</i></p> <p><i>*** 10 Adopted (unopposed) and 44 Adopted, consent dispensed with.</i></p> <p>In 2016-17, the figures were as follows: 35 (21%) returned home, 35 (21%) became subject to SGOs and 77 (46.1%) were adopted.</p> <p>In 2015-16, of the children who ceased to be looked after, 27.5% returned home, 15.2% were granted an SGO and 30.4% were adopted.</p>
16.	<p>The graph below shows the proportions of children who returned home, were adopted or where an SGO was granted. 'Other reason,' includes any other ceasing looked after episodes, including attaining the age of majority.</p>

	<p style="text-align: center;">Ceasing LAC, by reason</p> <table border="1"> <caption>Reasons for Ceasing LAC</caption> <thead> <tr> <th>Reason</th> <th>Percentage</th> </tr> </thead> <tbody> <tr> <td>Returned home</td> <td>16.7%</td> </tr> <tr> <td>Adoption</td> <td>27.3%</td> </tr> <tr> <td>Special Guardianship Order (SGO)</td> <td>19.2%</td> </tr> <tr> <td>Other reason</td> <td>36.9%</td> </tr> </tbody> </table> <p>Progress continues to be made in this area but it continues to be a challenge balanced against the complexities and number looked after.</p>	Reason	Percentage	Returned home	16.7%	Adoption	27.3%	Special Guardianship Order (SGO)	19.2%	Other reason	36.9%	
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17.	<p>Education of Looked after Children</p> <p>There is a specific report available to this meeting from the Interim Virtual Head Teacher. The City are currently recruiting for a substantive member to this role.</p> <p>Attainment is improving for our Looked After Children, however there is significant work to go. Moving forward the Virtual School will be asked to form part of a children in care panel which will aims to drive care planning for children in all areas.</p>											
18.	<p><u>Attendance and absence</u></p> <p>Pupil attendance is monitored and regularly followed up. A recent review by the Principal Education Welfare Officer judged the work of the virtual school on attendance to be at least good and taking all the appropriate action to support and maintain good attendance.</p> <p>The graph below shows Southampton’s percentage of overall absence for looked after children, compared to statistical neighbour average, England and the South East. The statistics show absence from school of children who have been looked after continuously for at least 12 months as at 31st March, for percentage of sessions lost due to both authorised and unauthorised absence.</p>											



At the end of March 2016, 10.8% of Southampton looked after children were classified as persistent absentees, a proportion higher than England average (9.1%), but lower than that of statistical neighbours (11.2%).

Our internal statistics source data from two different sources and can therefore give more insight into attendance – but due to differences in methodology, cannot be used to compare with publically available benchmarking data. The following statistics are collected from our internally collected education data for looked after children.

As at the end of Autumn term 2017-18, of the 486 students who were looked after children at the time, 27 (5.6%) were persistent absentees, with 20 of those students attending secondary school.

Of those pupils who had been in care for a year or longer (total 254 students), 22 (8.7%) were classified as persistent absentees, with 16 of them at secondary school.

We are now reducing our percentage of persistent absentees across the LAC cohort.

19.

Personal Education Plans are written three times a year and are produced collaboratively between social workers, schools, foster carers and the virtual school. The completion rate of Personal Education Plans at the end of the academic year 2015/2016 was 80%. This September Term we achieved 96.5 Pep completion within timescale.

This increase in PEPs being timely and a reduction in absenteeism across the LAC cohort, shows the impact of the increased quality drive by both the virtual school and the Looked after Children Service.

	It is of note that one of the “Bright Spots,” raised by our LAC population in the 2017-2018 survey was the interest that is shown by their carers, in their education, which was higher than the national average for the whole (non-LAC) population.																																																					
20.	The service is also piloting the use of some pupil premium monies being reserved for the support of specific hobby/activity based options for some Looked after Children with a view to supporting the development of the “whole person,” rather than simply academic attainment. This will be to support young people who may excel in other areas of their lives, other than academia.																																																					
21.	The educational outcomes data shown in the sections below is for the year 2016-17. The numbers represent the percentages of pupils reaching the national baseline and above and offer a comparison against the outcomes for all pupils nationally and against the outcomes for all children looked after nationally.																																																					
22.	<p>Key Stage 1 (Year 2, Age 7) 35 pupils (all), 20 pupils (CLA 12months+), 15 pupils (CLA <12months)</p> <table border="1"> <thead> <tr> <th>Subject</th> <th>All pupils nationally</th> <th>CLA nationally (12 months+)</th> <th>All CLA Southampton</th> <th>Southampton 12months + CLA</th> <th>Southampton Less than 12 months CLA</th> </tr> </thead> <tbody> <tr> <td>Reading</td> <td>75.5%</td> <td>51%</td> <td>40.0%</td> <td>40.0%</td> <td>40.0%</td> </tr> <tr> <td>Writing</td> <td>68.2%</td> <td>39%</td> <td>37.1%</td> <td>40.0%</td> <td>33.3%</td> </tr> <tr> <td>Maths</td> <td>75.1%</td> <td>46%</td> <td>37.1%</td> <td>35.0%</td> <td>40.0%</td> </tr> </tbody> </table> <p>The outcomes for this age group are broadly in line or below the outcomes for looked after children nationally.</p>						Subject	All pupils nationally	CLA nationally (12 months+)	All CLA Southampton	Southampton 12months + CLA	Southampton Less than 12 months CLA	Reading	75.5%	51%	40.0%	40.0%	40.0%	Writing	68.2%	39%	37.1%	40.0%	33.3%	Maths	75.1%	46%	37.1%	35.0%	40.0%																								
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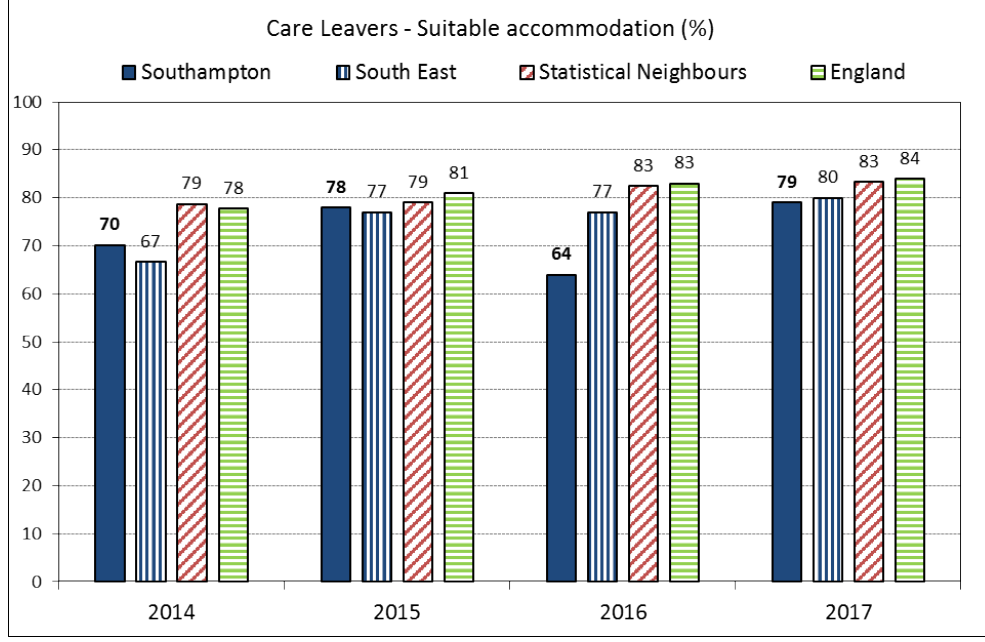
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25.	Looked After Children and young people share the same health issues and problems as their peers but often to a greater degree. They often enter care less “healthy” than their peers, in part due to the impact of poverty, abuse, neglect and inadequate parenting. They are more likely than the general population to have been exposed to harm in utero - e.g. drug and alcohol misuse. This can have a lifelong impact on the child affected.																																										
26.	Most children become looked after as a result of abuse and neglect. Although they have many of the same health issues as their peers, the extent of these is often greater because of their past experiences. Almost half of children in care have a recognised mental health disorder and two-thirds have special educational needs. Delays in identifying and meeting their emotional well-being and mental health needs can have far reaching effects on all aspects of their lives, including their chances of reaching their potential and leading happy and healthy lives as adults (Promoting the health and well-being of looked after Children DE, DH 2015).																																										
27.	<p>The NHS has a major role in ensuring the timely and effective delivery of health services to looked-after children. The Mandate to NHS England, Statutory Guidance on Joint Strategic Needs Assessments, Joint Health and Wellbeing Strategies and The NHS Constitution for England make clear the responsibilities of CCGs and NHS England to looked-after children (and care leavers). In fulfilling those responsibilities the NHS contributes to meeting the health needs of looked-after children in three ways:</p> <ul style="list-style-type: none"> • Commissioning effective services 																																										

	<ul style="list-style-type: none"> • Delivering these services through provider organisations • Delivering these services through individual practitioners providing coordinated care for each child.
28.	<p>Under the Children Act 2004, health professionals have a legal responsibility to promote the health and wellbeing of all children who they are responsible for, this is particularly pertinent with regard to vulnerable cohorts such as LAC. 'Promoting the Health and Wellbeing of Looked After Children' (DE DH 2015) sets out a framework for the delivery of care from health and social services to ensure their effectiveness to support and deliver care to LAC.</p>
29.	<p>NHS Southampton CCG employs a Head of Safeguarding who holds the role of Designated Nurse for LAC. This is a strategic role which provides oversight and guidance to the commissioned health services as well as assisting with service planning. The post of Designated Doctor for LAC (4hrs/week), a non-clinical, strategic role is currently vacant following the departure of the current post holder in June 2017. There have been a number of recruitment initiatives to fill the post however it remains vacant.</p>
30.	<p>NHS Southampton City CCG as the responsible commissioner for Southampton Looked After Children provides scrutiny of the LAC services through monthly reporting and quarterly oversight and scrutiny. The Designated Nurse also meets 6 weekly with the Named professionals to provide support and supervision as well as professional challenge.</p>
31.	<p>In June 2017, the Designated Nurse for LAC undertook a service review of the Solent LAC health team. This included a workforce demand and capacity review. The final report highlighted a slight deficit in the capacity of the medical hours however this has been addressed by Solent. There has been an increase in staffing within the LAC and paediatrician service, and this enables an increased flexibility to respond to the peaks when large numbers of children enter care.</p> <p>During 2017/18 the team has continued to expand, increasing clinical capacity in line with the service review. At the end of this financial year the workforce consists of:</p> <ul style="list-style-type: none"> • 4 admin posts, plus a joint post with Southampton City Council • 1 Named LAC Doctor /medical advisor for Fostering and Adoption • 1 sessional Dr Medical advisor for adult health forms (fostering) • 4 sessional LAC Drs (undertake clinical health assessment) • Named Nurse post is vacant • Designated Doctor post is vacant • 1 B6 Specialist LAC Nurse • 1 B5 LAC Nurse • 2 B6 Community Paediatric Medical Service nurses shared across LAC, Child Protection & Neuro-Disability teams • 2 B3 Clinic Support Worker with 1 vacant post
32.	<p>Over recent years, the issue of non-attendance for health assessments has been a challenge and was regularly reflected in monthly performance data. In July 2017, the team undertook a piece of work to review trends associated with non-attendance in order to understand whether there was any learning which could be introduced locally to improve the situation. This quality improvement work focused</p>

	<p>upon the high rate of children aged 11 -15 years that were not brought (WNB) to initial and review health assessments. The baseline data indicated that this group was the highest for non-attendance at 35% closely followed by 6-10year olds at 34%.</p> <p>The work included consultation with foster carers and young people across the age range and identified a variety of changes which if implemented, could reduce the volume of WNB. The team also identified ideas and as a result of this and other feedback, implemented the following changes:</p> <ul style="list-style-type: none"> • Checklist designed to confirm personal details of each attendee at clinic • Role of new Clinic support worker to collect this data on client arrival at clinic • Information sharing at Health & Social Care Partnership meetings • Communication tools e.g. Newsletters, posters, personal invites for young people, use of social media • Consultation on clinic venues and running after school clinics • Afternoon appointments at No Limits for 11-15 year olds • Personalised invite for young people aged 11-15 years • Various new processes related to appointment reminders and booking <p>A review of the performance data for WNB was undertaken once all of the steps had been implemented and the team have seen a reduction of over 10% in the volume of WNB.</p>
33.	<p>Whilst locally, the numbers of LAC fluctuate they have continued to reduce slightly over the past 12 months with the majority living in the Southampton area or within a 20 mile radius. As a result, the Solent LAC health service can be accessed to provide the quality health review and initial health assessments. However, performance data was used to highlight the challenges of children placed out of area that require a health assessment from another health provider. NHS Southampton CCG retains responsibility for this cohort of children and agrees and funds the out of area health assessments as part of the responsible commissioner guidance Who Pays? Determining responsibility for payments to providers (DH 2013).</p> <p>The Solent LAC team undertook a review of the placements for OOA children. The exercise enabled identification of placements nationally and an understanding of where Southampton had significant number of LAC. One key area identified with large numbers of LAC was Kent and Medway and possibly due to the volume of LAC placed nationally within those areas, the team noted lengthy delays for their health assessments. The LAC team liaised directly with the OOA health services to request assessments for Southampton children. This action has seen positive results and some of the outstanding health assessments for the OOA children have been completed.</p> <p>Ensuring that all LAC placed out of area receive quality and timely health assessments and have access to health services remains a challenge. Further work is underway within the team to review all those OOA children with an outstanding health assessment to gain oversight of their health and wellbeing needs and look at possible solutions to address the lack of health assessment. Options proposed by the team are: virtual assessment (if appropriate); other health professional already reviewing child; request a visit to Southampton clinic supported by visiting SW.</p>

	<p>The Quality standard created by the Designated Doctor is used by the team to ensure the quality of OOA health assessments and challenge reviews which do not meet the set standards.</p> <p>Unfortunately there is a national issue regarding the timeliness of OOA health assessments. This is a key work stream for NHS England and the Looked After Children Network.</p>
34.	<p>The LAC health assessment provides a holistic appraisal of the child / young person and includes sexual health. Sexual health promotion is offered within the assessment by the specialist nurses and also from the clinical support workers who have also received additional training. The young people can access urgent referrals to Solent Sexual health service and benefit from sexual health promotional resources. Further work is underway with the sexual health team which will enable young people to receive any sexual health support including contraception at the same time as the LAC health assessment.</p> <p>The team have received enhanced training related to child sexual exploitation and will undertake a risk assessment based upon Barnardos Spotting The Signs. The team has been fundamental in identifying risks and will discuss concerns with the young person before referring to sexual health outreach and liaising with the social worker to ensure that the risk is minimised or removed.</p>
35.	<p>The LAC health team provides clinics at the Royal South Hants Hospital in Southampton which has a dedicated waiting room and easy parking. These were both identified by carers and LAC as important elements of the health assessment. The clinical area is also accessible to other Solent led services such as sexual health and specialist dental services.</p> <p>The team continues to provide a monthly drop in for social workers at the Pathways office and continue to be flexible with their appointment venues and timings including home visits.</p>
36.	<p>Solent health team take a lead on the Strengths and Difficulties process incorporating information from education and sharing scoring with the local authority. All children and young people who meet the threshold are referred to BRS. A specialist nurse from the team supports the BRS panel and will ensure that cases referred by the SDQ process and health are supported by BRS or CAMHS if more appropriate.</p> <p>A further piece of work will be undertaken this year to develop a standard operating procedure for SDQs with an audit to support the referral process.</p>
37.	<p>As a result of the increased focus upon care leavers, the Specialist nurses have enhanced the existing care leaver's health care plan and developed a broader pathway for care leavers. This also includes a decliner pathway should the carer leaver or young person, not access their appointment. The new pathway ensures that those children and young people leaving care have full access to their health history and knowledge of how to access it in the future. Additional supporting health promotion information and guidance is discussed and explained to support the young person post care. The pathway reinforces the requirement that all outstanding health actions are liaised to the individual's GP.</p>
39.	<p><u>Care Leavers - Emotional Health</u></p> <p>Finding a means to enhance the emotional/mental health offer to Care Leavers across the City remains a priority for Children's Social Care. This is key to supporting our young people as they prepare to leave our care or do our care, and it is perhaps unsurprising that fragile emotional or mental health issues, rooted in</p>

	<p>previous life experiences continue to play a significant role in the lives of many of this vulnerable group. After housing, unstable emotional and mental health and any associated behaviours, are one of the most impactful issues that affect Care Leavers ability to maintain relationships, education and work, and become successful parents. We are continuing to explore with colleagues in health and adult services how we can best increase our mental health offer to our young people.</p>
40.	<p><u>Care leavers</u></p> <p>There has been continued progress against some measures of performance for young people leaving care but further work is still required to improve and maintain a consistently good level of outcomes and opportunities.</p> <p>Due to high numbers of looked after children, demands on the service have increased, requiring further consideration in terms of resource.</p> <p>The percentage of care leavers who were still in contact with Social Services at the end of March 2018 was 97.1%, compared to 98.5% in the previous year, 90.1% in 2015-16 and 89.0% in 2014-15.</p> <p>Clearly, this is a positive increase and provides opportunities for practitioners to work with young people to address and deliver improved outcomes in relation to identified needs.</p>
41.	<p>Our live quarter 4 data shows that the percentage of care leavers in contact and in suitable accommodation remains strong. The activity of the Multi-Agency Panel which is chaired by the Homelessness Manager continues and there is a strong, consistent contribution from the supported housing providers. We have increased the capacity of our Personal Advisor team, and are working to produce an App in a national project to assist in pathway planning, which should provide us with very strong live data around this metric, on top of the DFE reporting window.</p> <p>When on the occasion that Bed and Breakfast accommodation is used for our young people, the Pathways Team complete a short risk assessment prior to agreement, in order to manage the period of unsuitable accommodation. The young person's needs will then be presented to the subsequent housing panel and this continues to work well.</p>
42.	<p>The latest internal figures for Southampton show that as at the end of March 2018, 86.8% of care leavers were in contact and in suitable accommodation. The total number of care leavers being supported by Southampton at 31st of March 2018 was 177.</p>
43.	<p>The graph below shows the data publicly available for percentages of care leavers in touch and in suitable accommodation in Southampton, compared to statistical neighbours, England and the South East.</p>



Outcomes in the area continue to improve significantly, with our current live data showing this at 86.8%.

44. Local Authority continues to be committed to the National Care Leavers Charter; with an allocation of £2,000 for all Care Leavers to support transition to independence. Furthermore, we are working on the development of our Care Leavers' Offer, which will be published (at the latest) by January 2019. This will provide a transparent guide to our young people about what they can expect their City and Corporate Parents to provide for them as they leave our care.

45. The City currently undertakes a pathway needs assessment at 15yrs and 9 months for each young person who will remain looked after and therefore become a care leaver. It is expected that all young people have a complete and robust pathway plan in place by the age of 16years and 3 months.

The Pathways Team are consistently showing that a very high percentage of pathway plans are completed. Further, over this year we have been working with a not for profit company on a national project to design a digital pathway planning tool with two other local authorities. In the "discovery phase," of this project, comment was made that our Pathway Plans were SMARTer in nature in comparison to others seen.

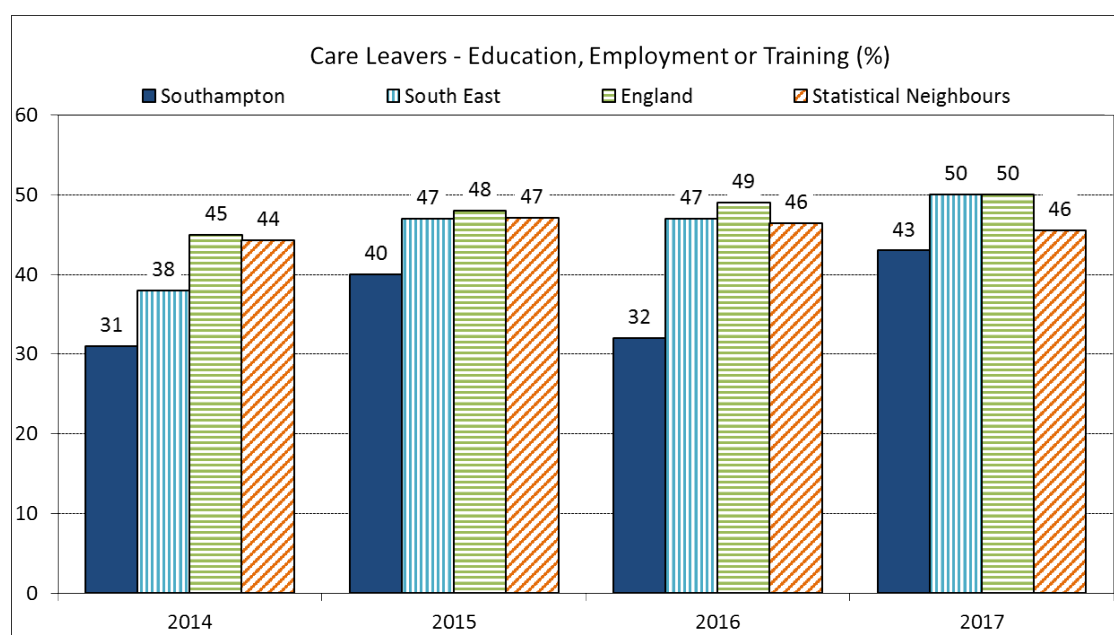
46. **Education, Training and Employment for care leavers**

According to latest published figures (2017), 43% of care leavers were in education, employment or training (EET) on their 19th, 20th and 21st birthday. That is a notable improvement from the end of financial year 2016, when only 32% of 19-21 care leavers were in education, employment or training. Southampton's care leavers in EET have fared less well compared to statistical neighbours (46%) and South East and England (both 50%). At the time of writing, data for 2017-18 has not been published.

When reflecting on progress in this area, it is worth considering where the service was in 2014, when this 18-21 cohort would have been 14/15/16, against the stronger and improving offer that our young people have now across their

care journey. This said, we continue to encourage, support and incentivise our young people to develop and reach for aspirations, and have regular tracking meetings with Personal Advisors where all young people who fall into the NEET other category are discussed, and planning around their individual needs, and any resourcing implications can be discussed.

There is a significant cohort of Care Leavers who are NEET due to “officially,” being too unwell to be available for work. The majority of this illness relates to their emotional/mental health. It is apparent that poor emotional health is a factor for many young people who are in the NEET “other,” category, and we need to work with partners in health and adult services to enhance our offer to this cohort, and subsequent cohorts going forward.



47.

Employment Training and Education remains a key priority improvement area, and a range of focussed activities are in place to secure better outcomes and performance. Over the last year we have:

- Improved tracking of personal education plans for year 10 and 11 looked after pupils transitioning towards independence.
- Monitoring and tracking of the cohort of young people not engaged in education, training and employment with partners within the council, educational provision and the third sector (including monitoring and reporting 16-17 year old Care Leavers to Corporate Parenting, which is over and above the statutory reporting requirement).
- Co-funded the placement of a dedicated member of the City Deal/Step Team within Pathways to work directly embedded within the team.
- Ensured that all “in house,” Southampton City Council Apprenticeships are advertised early for one week within the Pathways Team, prior to being advertised elsewhere.
- We have successfully included a careers fair in Care Leaver’s week.

	<ul style="list-style-type: none"> • All Care Leavers who fall into the NEET other category are discussed at NEET tracking meetings approximately 8 weekly, on top of regular supervision. This offers oversight and advice from the whole management team, and any resourcing decisions can be made fluidly around incentivisation issues. • We have increased management capacity within the team through the introduction of a further Assistant Team Manager. • We have increased the size of the Personal Advisor cohort to ensure more targeted support to individual care leavers, (and also to adapt to any increased workload from new duties from the 2017 Act). <p>Of note the careers service has been instrumental in supporting the offer for Care Leavers to remain in college, raise aspirations, become interview and work ready, and have been part of the journey to target and support young people who are not in education or employment into EET activity. They suggested the careers fair in Care Leavers' week and followed up all the young people who showed an interest, with some positive results. We are grateful for this partnership approach.</p> <p>It should be noted that funding and provision of services to support NEET young people fluctuates through external grant availability.</p>
48.	<p><u>Participation and engagement of children and young people</u></p> <p>The active participation of children and young people is a key priority for Children's Services and its partners. This year we have brought the participation service back into the Council, and appointed our own Participation Worker. She is developing the role of the Children in Care Councils and Care Leavers' Forum, and attempting to grow this. The Looked After Children Service Social Workers and Pathways' Personal Advisors promote participation within these forums. This is a slow process, but is developing and the participation worker attends a variety of foster carer functions, and Looked After Children functions to increase involvement.</p>
49.	<p>Children and Young People's views on their service permeate our service delivery plans with messages about what they have told us within the Bright Spot's Survey, and the discovery phase of our work with Social Finance Limited with Care Leavers.</p> <p>What Children and Young People in Care in Southampton have told us (Bright Spots Survey 2017)</p> <ul style="list-style-type: none"> • Most children (93%) reported always feeling safe • High proportions reported that their lives were worthwhile and they were positive about their future • Larger proportions reported their carers were interested in their education, compared with peers in the general population <p>What isn't so good about being in care?</p> <ul style="list-style-type: none"> • Some children don't always understand why they are in care • Some children don't always feel included in decisions made • Some children don't feel they see their family enough • Sometimes social workers change too often • Some children want to do more activities

	<ul style="list-style-type: none"> • Some children are worried about their feelings or their behaviour <p>What our care leavers have said</p> <ul style="list-style-type: none"> • Relationships are really important to me – they need to be built, supported and nurtured • Focus more on my emotional and mental health • Let’s talk about my aspirations more • I want my Personal Adviser to appear available and approachable • Listen to my views and make sure my pathway plan reflects them • I want a goal orientated pathway plan with smaller achievable steps • A 6 monthly review of my pathway plan is too long – I only plan a few weeks in advance <p>Our onward service planning incorporates these messages, in response to listening to what our children and young people have said, and ensuring that this is factored in to how we think about delivering their service over the next 3 years.</p>
50	<p>Bright Spots is a survey of the views of Looked After Children and Care Leavers, about the care that they receive by their respective Local Authorities. This is run by a national Charity Coram Voice and Bristol University and occurs annually. Southampton have been partnered with Bright Spots for the past 3 years for the Looked After Children’s Survey, and have participated this year in the Care Leavers Survey at its inception.</p> <p>The purpose of the survey is to provide Local Authorities with information about what is going very well for their Looked After Children (their Bright Spots) but to also enable action planning going forward to improve service provision by placing Children and Young People’s views at the heart of business planning. Last year’s Survey results already feature in the business plan for 2018-21. It also allows a the national group of LAs to share best practice and learn from each other in a series of forums held throughout the year.</p> <p>Last year Southampton’s response rate to the survey was low at 24% overall, against a national average of 30% response, however it provided us with good but limited data about the views of our Looked After Children and questions about how representative the 24% of responders would be.</p> <p>This year we have participated in the bright spots survey again and also participated in the new Bright Spots Survey for Care Leavers. We have developed a real ethos across the LAC and Pathways Service around the importance of participation, and wanted to have a step change in the levels of participation of our children and young people in this survey, so that we can build on the messages our children and young people give us, and increase their voice in service development. This year we achieved a phenomenal 84% response rate overall, with a 97% response rate within the aged 11-18 category. A smaller, and at present unnamed LA has achieved 85%, but it has been noted by the organisers that they have a much smaller cohort of LAC. To put this achievement into</p>

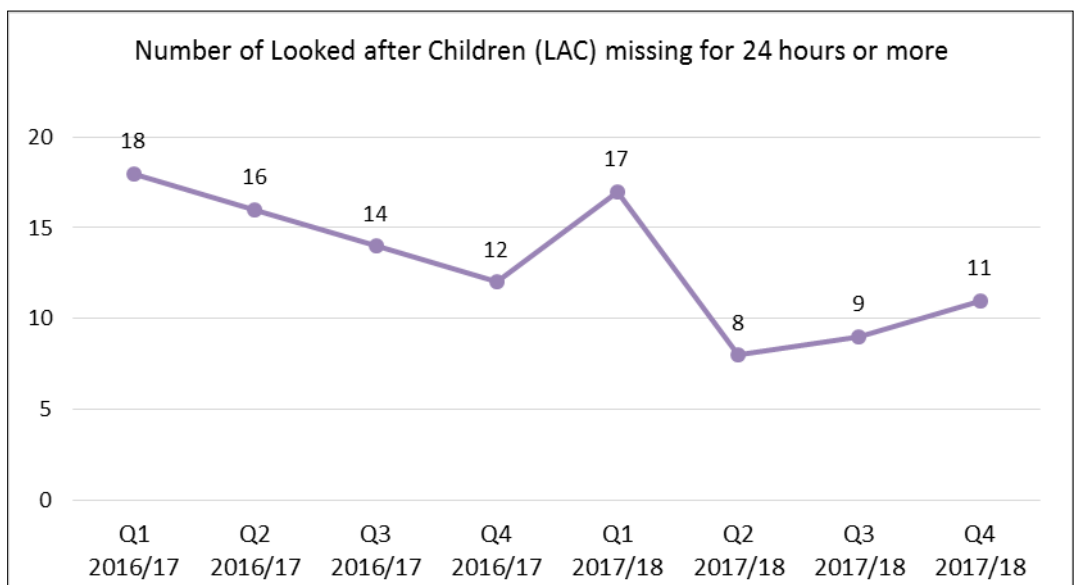
perspective the highest completion rate last year was 61% by the IOW, with a very low number of LAC in real terms.

Our care leavers have also responded very well at 51%, which will assist our planning around their needs, hopes and aspirations going forward.

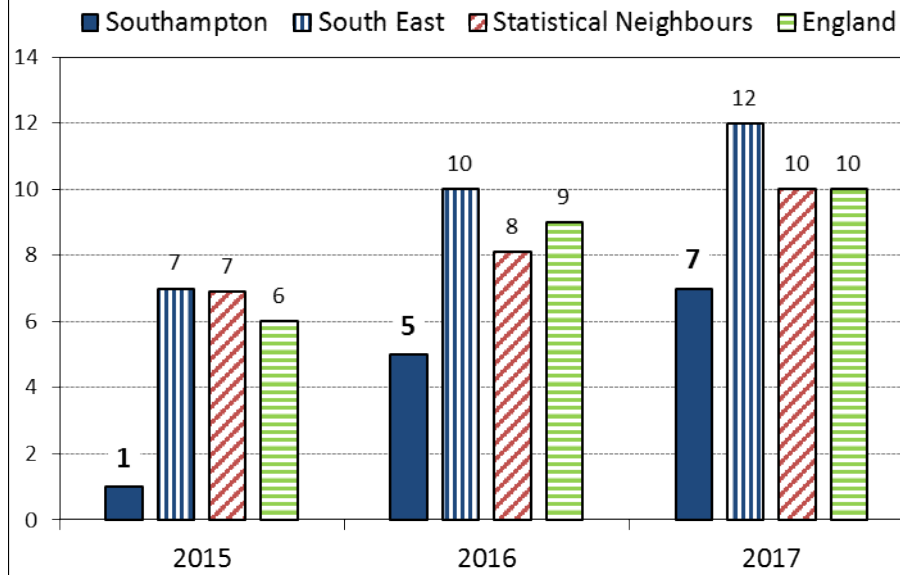
The change in the very real importance that we have placed on participation of our Looked After Children has received national recognition from the charity for LAC (Coram Voice). We await the outcome of our survey results with interest and will prepare for any positive, and indeed any hard hitting messages that may come from this. However, importantly whatever the results, we will listen to our children and young people, and determine how we can incorporate their thoughts, needs, wishes and feelings into our ongoing service development.

51. The Children in Care Council and Care Leavers Forum will be discussing how best to contribute to Corporate Parenting Committee going forward. They are considering piloting the making a short video to play at the start of corporate parenting meetings.

52. **Children Missing from Care**
 Southampton's internal data shows that over the financial year 2017-18, on average, 11 children had missing episodes per each quarter of the year. In total over the year, there were 45 missing episodes recorded for children in care. Note that these statistics only include episodes where the child was missing for 24 hours or longer, and where the child's whereabouts were not known. The graph below shows the internally recorded missing episodes per quarter over the last two year period.



The graph below shows the percentage of looked after children missing from care for Southampton, compared to Statistical Neighbour and England averages. Southampton had a somewhat lower percentage of looked after children going missing during the past three years. Figures for 2018 are not yet available.



53.

Children Missing From Care

The MET Hub co-ordinate the work children who are missing from care, across the city and within the Looked After Children and Pathway’s Team, staff and managers look for patterns in relation to any missing episodes and bring this into day to day work with the child or young person’s planning. Where concerns are prolonged or perceived risks are heightened, strategy meetings are co-ordinated, and where appropriate the MET Hub will attend both to advise, but also to share any relevant intelligence.

Where young people are placed away from Southampton and there is persistent and concerning missing activity, we do commission pieces of additional work around CSE/County Lines etc from other organisations, to offer a more intensive response to the young person, which their allocated worker may not be able to achieve at a distance.

Where missing episodes become extreme, and our young people are in positions where the risk to them is particularly heightened, this has attracted an individualised and child focussed letter from the Service Manager to the child or young person explaining how worried we are about them and why, our duty to keep them safe, and asking them to help us do this, in a bid to re-engage them with us to change the areas of concern. The letter also making it clear that where necessary we will reluctantly ask the Director and the Court to use powers to place him or her within the secure estate on welfare grounds, whilst they engage in activity to reduce onward risk through programme of advice and education. Obviously the use of any secure accommodation has to be proportionate, as it involves the deprivation of the liberty of one of our young people, and is not an action that we take lightly. We had to appropriately use this action on two occasions to protect our young people within 2017-18.

54.

Staffing in the Service

This year has been a positive year within the Looked After Children and Pathways service in terms of stabilising the Social Work and Personal Advisor staff group,

	<p>and Management Teams with substantive team members, and adding to the PA and Management Team within Pathways.</p> <p>It has been a focus for the service to create an environment where staff feel supported in the work that they undertake with this vulnerable cohort of children and young people, in order that the turnover of staff reduced and that therefore children who are looked after in the longer term are able to form lasting and enduring relationships with their Social Workers. It was a message from Bright Spots that children and young people who are in our care wanted a reduction in the number of Social Workers that they see.</p> <p>We now have appointed fully to this part of the service's management team and both Looked After Children's Teams. We have only one agency worker within the Pathways Service at present. Positively staff leaving the service only appear to be doing due to career progression. This has enabled the team managers and Assistant Team Managers to create a greater ethos around participation, permanency planning and quality assurance in recent months, ameliorated by the addition of an advanced practitioner within LAC, and a further Assistant Team Manager within Pathways. We have been able to jointly develop ambitions but achievable Service Business Plans going forward for the Service, incorporating the views of children within our care and our care leavers, and are now in a position to start to deliver on these.</p>
55.	<p><u>Placements of Children and Young People</u></p> <p>Southampton made 193 placements with Southampton foster carers in 2017/8 which is reflective of our foster carers flexibility .There remains a very high number of children placed in independent provision outside the city in both residential and with independent fostering providers In 2017/18 the focus is on recruiting increasing numbers of carers so that the number of new placements with independent provider reduces. In 2018/19 we will also explore options to bring children and young people who need it closer to home where they can access appropriate provision, local services and support networks. This will include initiatives to expand our service to meet the needs of our LAC cohort and increased focussed recruitment activity for in house carers.</p>
55.	<p><u>The Recruitment of Foster Carers</u></p> <p>The Fostering Team fell short of its recruitment target in 2017/18 with 16 new fostering households recruited. However, a refocused recruitment campaign late in 2017 has seen increasing numbers of those in assessment – currently there are 10 fostering households at stage 2 of assessment and 9 at stage 1. During the year there were 298 enquiries and currently there are 19 households in assessment stage. The number of enquires has increased by over 25 percent and has been reflective of a reinvigoration of the recruitment strategy particularly in respect of our digital presence.</p>
57.	<p>In order to ensure a range of foster carers that can meet the needs of Southampton's Looked after Children, a range of marketing and recruitment activities have taken place during the year. These have included outreach work; advertising; press coverage; and digital measures i.e. online posts/websites/Facebook. There has been increased interest on social media and the internet;</p>

	<p>Fostering and adoption e-alert subscribers has increased from 35 to 604.</p> <p>Fostering and adoption Facebook page likes increased by 490 to 1,130.</p> <p>Average monthly hits on fostering web page have increased from 1,401 to 2,264, along with an increased average spend on the page from 6 seconds to 1 minute and 50 seconds.</p>
58.	<p><u>Connected Persons Assessments</u></p> <p>Between 1st April 2017 and 31st March 2018 the Friends and Family team had received 204 referrals in relation to assessing connected persons placements. They also completed 30 section 24 regulation temporary foster placements There were also completed 24 viability assessments. They completed 25 SGO reports. There were 5 full fostering assessments and 1 partial assessment.</p> <p>As of 31st March 2018 there were 55 (44 full and 11 temporary) approved connected persons' fostering households. These cared for 77 Looked after Children. The Friends and Family team are responsible for ensuring that these carers meet the fostering standards as set out in the National Minimum Standards. An area for service development in 2017/18 is for the supervising social workers in this team, to support their carers completing the Training Support and Development Standards (TSDs).</p>
59.	<p><u>Special Guardianship Orders</u></p> <p>The Friends and Family team also undertake Special Guardianship assessments for connected persons, other carers, court ordered assessments, and private arrangements. In 2017/18 there were 38 SGOs granted, 31 of which related to previously looked after children. There were also 59 additional court reports completed in respect of proceedings, and 3 therapeutic needs assessments This increase reflects the team's positive contribution to ensuring children achieve both psychological and legal permanence away from the care system.</p>
60.	<p><u>Summary of priorities for 2018/2019</u></p> <p>This report has summarised the progress made in a number of key areas as well as identifying where alternative approaches are being planned to enhance and improve our service delivery.</p>
61.	<p>The numbers of children in care at the end of March 2018 have reduced significantly, and they continue to gradually reduce, due to focussed interventions, SMART planning, and permanence opportunities.</p> <p>There is strong activity to turn around families in pre-proceedings and reduce the need to separate children from their families at the front end of the journey to permanence for children, with stronger tracking of pre-proceedings activity within a legal gateway forum. It is important to note that the children who are subject to this level of intervention have already met the Section 31 threshold (Children Act 1989) for a care application, and therefore work to turn around these families if both high risk management and true "edge of care" activity.</p> <p>Further initiatives and have been developed to strengthen available support to children and young people on the edge of care to remain in the care of their own families. There is a new edge of care service which has been formed and we are already starting to feel the impact of this service on the prevention of children entering care within pre-proceedings.</p>

62.	<p>In 2018/19 a high priority is to explore options to bring children and young people closer to home where they can access appropriate provision. There is currently project work being undertaken by an interim project lead to look at the viability of creating a local offer of residential provision locally. This viability study will continue into 2018/19.</p> <p>Our in house fostering service will continue to explore options to enhance our local sufficiency for young people needing placement of all ages, in a competitive market.</p>
63.	<p>We intend to enhance our permanency planning and matching processes for children who enter care and remain in our year. This will include the introduction of a children in care resources panel, which will add further scrutiny but also a greater degree of multi-disciplinary overview and drive to care planning. This aims to incorporate the virtual school, colleagues from BRS, and of course Social Care colleagues, to review plans for children and young people outside of the formal LAC review processes to drive planning for them until they are in a permanent placement matched to their needs. This panel will also be able to consider changes for children when rehabilitation home may be an option and consider what steps may be needed or what resource may be required when a significant change of care plan of this nature is planned and appropriate.</p> <p>We have identified through the Bright Spots Survey that we need to undertake more work with children entering care to ensure that they understand the reasons that this has happened. We will audit to ensure that there is a clear individual narrative for each child that develops with them as they do. This is a piece of work that both the Looked After Children’s Team and the PACT Teams will need to work together on, along with the Independent Reviewing Service.</p> <p>We also intend to develop a greater means of using IRO, Service User, complaint and Audit feedback to develop actions planning across the entire service in key performance areas, to place a greater focus on the qualitative impact of service delivery on our Looked After Children and young people, rather than simply quantitative data. Work is already underway with the Quality Assurance Team to determine how best to achieve this.</p>
64.	<p>We need to improve our educational outcomes. The virtual school are working hard to address outcomes for children in care, in particular the outcomes for KS4 which continue to present the greatest challenge. We need to maintain our high level of PEP activity on time, but ensure that outcomes set in these are realised, and that pupil premium monies are appropriately targeted to achieve this.</p>
65.	<p>One key area to develop around the health of our looked after children will be to improve activity in relation to SDQs. 60% of our children told us in the recent Bright Spots Survey that they were worried about their feelings or behaviour. We need to respond to this in terms of how we jointly assess, and meet the emotional health of children who are looked after. This will be part of the focus of the overall BRS review going forward.</p>
65.	<p>We have seen further improvements in our performance for care leavers, however the area of education training and employment remains a challenge and needs to be a key area of focus in coming months. As a whole council we are striving to improve our offer of opportunities to include work tasters and work experience opportunities as well as apprenticeships. We will continue to meet with our Personal Advisors to track their activity around the NEET cohort, and to offer advice and guidance as a management team. We will also look to enhance our</p>

	<p>emotional health offer to young people moving forward, as many of the barriers to being “work ready,” stem from other aspects of their lives. Our development of enhanced permanency and care planning for our Looked After Children earlier in their permanency journey should support the Care Leavers of the future to be more work ready. However we will continue to support the current cohort to be aspirational at every opportunity, to enhance opportunities that are available to them.</p> <p>We will continue to work with Social Finance Limited to create an App for Pathway Planning. We are one of 3 local authorities nationally to be involved in what will hopefully be a ground breaking project in how support to care leavers is developed. We are delighted that our Personal Advisors and more importantly some of our young people are part of something that may benefit care leavers across the country in the future.</p> <p>We are in the process of developing our Corporate Parenting Offer for our Care Leavers and Looked After Children. This needs to be published by January 2019, however we will do our utmost to develop and publish this prior to this.</p> <p>We are conscious of our new duties to Care Leavers aged 21-25 under the Children and Social Work Act 2017, and we will assimilate the support needs of this cohort into our work within Pathways over the following year on a needs led basis.</p> <p>We also want to increase our participation offer for Care Leavers over the coming year. This would not only be in terms of the Care Leavers Forum, but in terms of some real co-production of any action plans that arise out of the Bright Spots Survey, Our Care Leavers Offer, and a mentoring scheme where care leavers who have successfully left care are able to reach back to support younger Care Leavers and Looked After children on their journey.</p>
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RESOURCE IMPLICATIONS

There are no new resource implications arising from this report

Capital/Revenue

66.	None
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Property/Other

67.	None
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LEGAL IMPLICATIONS

Statutory power to undertake proposals in the report:

68.	The Children Act 2004 places a duty on local authorities to take collective responsibility for good parenting of children in care and looked after.
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Other Legal Implications:

69.	The corporate parenting responsibilities must be carried out having regard to the Equalities Act 2010, the Human Rights Act 1998 and all other pervasive legislation.
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POLICY FRAMEWORK IMPLICATIONS

70.	The proposals set out in this report are wholly consistent with the Council’s Policy Framework.
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KEY DECISION?	No
WARDS/COMMUNITIES AFFECTED:	N/A
<u>SUPPORTING DOCUMENTATION</u>	
Appendices	
1.	None
Documents In Members' Rooms	
1.	None
Equality Impact Assessment	
Do the implications/subject of the report require an Equality and Safety Im Assessments (ESIA) to be carried out?	No
Privacy Impact Assessment	
Do the implications/subject of the report require a Privacy Impact Assessment (PIA) to be carried out.	No
Other Background Documents	
Equality Impact Assessment and Other Background documents available for inspection at:	
Title of Background Paper(s)	Relevant Paragraph of the Access to Information Procedure Rules / Schedule 12A allowing document to be Exempt/Confidential (if applicable)
1.	None