

## CORPORATE PARENTING COMMITTEE

WEDNESDAY 17 MARCH 2021

6.00 PM

[Peterborough City Council's YouTube Page](#)

### AGENDA

Page No

1. **Apologies for Absence**
2. **Declarations of Interest**

At this point Members must declare whether they have a disclosable pecuniary interest, or other interest, in any of the items on the agenda, unless it is already entered in the register of members' interests or is a "pending notification " that has been disclosed to the Head of Legal Services
3. **Minutes of the Meeting Held on 25 November 2020** 3 - 12

To approve the minutes of the meeting held on 25 November 2020.
4. **Update from Foster Carer Forum** 13 - 16
5. **Update from Youth Voice Coordinator for Children in Care Council** 17 - 20
6. **Annual Health Report** 21 - 28
7. **Report on the final structure for clinical offer for Children in Care** 29 - 34
8. **Report to confirm new Regional Adoption Agency and Fostering Structures** 35 - 40
9. **Performance Reports** 41 - 46
  - Placements of Children in Care
  - Scorecard
10. **Members Issues**

Members that are not part of the core CPC membership, but hold Corporate Parenting responsibilities, are invited to raise any issues they have with regard to the services provided to Children in Care.
11. **Date of the Next Meeting**

The next meeting dates will be decided at the Annual Council meeting on 17<sup>th</sup> May 2021.

"Did you know? All Peterborough City Council's meeting agendas are available online or via the [modern.gov](http://modern.gov) app. Help us achieve our environmental protection aspirations and view this agenda online instead of printing it."

### **Recording of Council Meetings**

Any member of the public may film, audio-record, take photographs and use social media to report the proceedings of any meeting that is open to the public. Audio-recordings of meetings may be published on the Council's website. A protocol on this facility is available at:

<http://democracy.peterborough.gov.uk/documents/s21850/Protocol%20on%20the%20use%20of%20Recording.pdf>

For more information about this meeting, including access arrangements and facilities for people with disabilities, please contact Karen S Dunleavy in the City Council's Democratic Services team on Peterborough 01733 452233 or by email at [democraticservices@peterborough.gov.uk](mailto:democraticservices@peterborough.gov.uk)

### **Committee Members:**

Councillors: Ayres, Bashir, Bisby (Chairman), Bond, C Harper, Haynes, Jones, S Lane (Vice Chairman), Robinson and Yasin

Substitutes: Councillors: Bond, Howard, Howell, Hussain and Skibsted

Further information about this meeting can be obtained from Karen Dunleavy on telephone 01733 452233 or by email – [karen.dunleavy@peterborough.gov.uk](mailto:karen.dunleavy@peterborough.gov.uk)

**MINUTES OF THE CORPORATE PARENTING COMMITTEE MEETING (FORMAL)  
HELD AT 6:00PM, ON  
WEDNESDAY, 25 NOVEMBER 2020  
VIRTUAL MEETING ON ZOOM, PETERBOROUGH**

**Committee Members Present:** Councillor Bisby, (Chairman (Chair), Lane (Vice Chairman), Councillors Ayres, Bashir, S Bond, Jones, Harper, Haynes and Robinson.

**Officers Present:** Nicola Curley, Assistant Director Children's Services  
Myra O'Farrell, Head of Corporate Parenting  
Sue King, Head of Service Permanency Services  
Shalina Chandoo, Quality Assurance Lead  
Karen Lloyd, Participation Officer  
Sarah Hamilton, Head of Safeguarding People, (Incorporating Designated Nurse Safeguarding Children)  
Katherine York, Designated Nurse Safeguarding Children  
Marya Ali, Youth Voice Worker  
Dee Glover, Head of Virtual Schools  
Michaela Berry, Group Manager: Corporate Parenting Peterborough  
Joe Gilbert, Specialist Personal Adviser  
Marie Saunders, Deputy Safeguarding Lead  
Linda Conroy, IRO and CP Independent Chair  
Jane Webb, Senior Democratic Services Officer  
Karen S Dunleavy, Democratic Services Officer

**Also Present:** Stephen Greene, Foster Carer Forum Representative  
Jenny Winters, Foster Carer Forum Representative

**1. APOLOGIES FOR ABSENCE**

Apologies for absence were received from Councillor Bashir.

**2. DECLARATIONS OF INTEREST**

No declarations of interest were received.

**3. MINUTES OF THE CORPORATE PARENTING COMMITTEE MEETING HELD ON 20 NOVEMBER 2019**

The minutes of the meeting held on 20 November 2019 were agreed as a true and accurate record.

**4. UPDATE FROM THE FOSTER CARER FORUM**

The Corporate Parenting Committee received a report in relation to the recent activities and outcomes of the Foster Carer Forum meetings. Members were also advised of the training event that could not go ahead and an extra payment for foster carers.

The purpose of the report was to receive an update at formal committee meetings of discussions and actions from the Foster Carers Forum.

The Head of Service Permanency Services introduced the report and asked Members to note the update.

The Corporate Parenting Committee debated the report and in summary, key points raised and responses to questions included:

- Members recognised the dedication and importance of Foster Carers especially in relation to the impact of COVID-19.
- Members raised concerns about the Staying Put Policy notice period and the transport issues in relation to communications, organisation and Covid-19 safe journeys.
- Members were advised that it was intended that the Staying Put Policy to be a contractual arrangement and in some cases this arrangement had been successful, however some had not. A review of the policy was currently underway and the issues raised would be taken into account.
- Members were advised that the approach to home to school transport for Children in Care during the Covid-19 period, had been thought about carefully in order to manage a difficult situation.
- Members commented about the mental health support provided through the Covid-19 lockdown period.
- The Foster Carer Forum Representative advised that the extra support provided and the extra payment made by the Authority was welcomed by all foster carers.

The Corporate Parenting Committee considered the report and **RESOLVED** (Unanimously) to note the report

### **AGREED ACTIONS**

The Corporate Parenting Committee noted the report and raised concerns with lead officers. The Committee also agreed that:

- i) The Cabinet Member for Children's Services, Education, Skills and the University would explore the issues with transport and staying put policy notice period within the report and discuss these with the Assistant Director.
- ii) The Assistant Director of Children's Services would raise the transport issues with the Executive Director of Education.
- iii) The Assistant Director of Children's Services and the Head of Corporate Parenting would review the Staying Put Policy as part of the general policy reviews in this area.

## **5. CHILDREN IN CARE COUNCIL PARTICIPATION REPORT**

The Corporate Parenting Committee received a report in relation to the work of the Children in Care Council and the outcome of their discussions at meetings and events organised. In addition, Members were informed about the progress of coming into care packs, saying goodbye cards and collaborative partnership work with Cambridgeshire County Council.

The purpose of the report was to request the Committee to consider and note the contents in relation to updates from the Children in Care Council and participation services.

The Youth Voice Worker introduced the item to Members and asked them to note the report and raise any queries with officers.

The Corporate Parenting Committee debated the report and in summary, key points raised and responses to questions included:

- Members were advised that the survey feedback from YP in care included comments such as how they generally felt going back to school, support from social workers, good contact with IRO's, good support particularly in achieving their education goals. One young person highlighted that they would like more support.
- Members congratulated the Children in Care Council on a clear report to the Committee.
- Members commented about the good work undertaken by the participation team throughout the Covid – 19 with pandemic.

The Corporate Parenting Committee considered the report and **RESOLVED** (Unanimously) to note the report.

### **AGREED ACTIONS**

The Corporate Parenting Committee agreed to note the report.

## **6. APPOINTMENT OF CHAMPION MEMBERS**

The Corporate Parenting Committee received a report in relation to Corporate Parenting Champion Member appointments.

The purpose of the report was to review the current Corporate Parenting Champions positions and allocations, which was in line with the recent Cabinet and Committee changes made at Council on 29 July 2020.

The Democratic Services Officer introduced the report and asked Members to confirm the positions and appointments of Corporate Parenting Champions.

The Corporate Parenting Committee debated the report and in summary, key points raised and responses to questions included:

- The Cabinet Members for Children's Services, Education, Skills and the University asked for the Recreation and Leisure Activities position, once appointed, to incorporate the support on offer through the Music Hub.

The Corporate Parenting Committee considered the report and **RESOLVED** (Unanimously) to confirm the positions and appointments.

### **AGREED ACTIONS**

The Corporate Parenting Committee confirmed positions and appointments as follows:

- i) Housing, Finance and Benefits - Councillor Sandra Bond
- ii) Education Employment and Training and Access to Higher Education - Councillor Bashir
- iii) Health - Councillor Robinson
- iv) Recreation and Leisure Activities – Vacant
- v) Effective Care Planning - Councillor Jones

## 7. **A REPORT ON EDUCATION PROVISION DURING LOCKDOWN, ATTAINMENT AND EDUCATION OPPORTUNITIES FOR UNACCOMPANIED ASYLUM-SEEKING CHILDREN**

The Corporate Parenting Committee received a report in relation to the education provision during Covid-19 lockdown.

The purpose of the report was to provide information in respect of the education of children and young people in care during the closure of schools during the national lockdown, attainment of 2020 cohort and education provision for Unaccompanied Asylum-Seeking Children (UASCs).

The Head of Virtual Schools introduced the report and asked Members to note the contents and raise any concerns with lead officers.

The Corporate Parenting Committee debated the report and in summary, key points raised and responses to questions included:

- Members were advised at the start of the lockdown a survey was conducted to establish which children in care and young people had access to a laptop to continue their education. The Virtual Head had encouraged schools to purchase laptops using pupil premium. Laptops were also available through the DFE. It was confirmed that despite some delays with issuing laptop equipment, all children and young people in care had been allocated and could retain these indefinitely.
- The Virtual School had received confirmation from education providers over the work being allocated to children and young people in care during the lockdown. This could be evidenced through the CiC and YPs personal education plan process, which was monitored by the team. There had been challenges at the start of the pandemic such as a delay in issuing the education packs and the children's enthusiasm to learn online, however these obstacles had been overcome.
- The Virtual Head was content with the attendance results that had been achieved during the pandemic lockdown period. The Government had stated that some children and young people need to go into school during the lockdown. There had been a children's tracker which identified those who needed to be in school. Peterborough had been above the national average in attendance for CIC and YP in care.
- Recent feedback received had outlined that children had enjoyed being at home, in addition this had been shared with carers. Members were also advised that CIC would be assessed to see where the education gaps were.
- Members were advised that 3.6% children had been absent from school, which was thought to be a positive figure.
- Members were advised that successful results had been achieved for some children in care that had been placed into small social bubbles, rather than being overwhelmed by bigger classes prior to the pandemic.
- The Foster Carer Forum (FCF) representative thanked the Virtual School support during lockdown. The FCF representative also commented that the opportunity had made carers more aware of the education being undertaken by their children and the level that they were at.
- The Foster Carer Forum representative also commented that children had been able to develop relationships with teachers in a better way as a result of the Covid-19 due to the rules around smaller group numbers.

The Corporate Parenting Committee considered the report and **RESOLVED** (Unanimously) to note the report.

## **AGREED ACTIONS**

The Corporate Parenting Committee agreed to note the report.

### **8. UNIVERSITY EXPERIENCE FOR OUR CARE LEAVERS IN RELATION TO IMPACT OF COVID**

The Corporate Parenting Committee received a report in relation to university experiences for care leavers in relation to the impact of COVID-19.

The purpose of the report was to update Members about the university experience for Peterborough's Care Leavers in relation to the impact of Covid-19 and what services had been put in place to mitigate these impacts. The approach had also involved pooled resources with Cambridge County Council to support Care Leavers.

The Head of Corporate Parenting introduced the report and asked Members to note the update, raise any concerns they had with lead officers and make any recommendations they felt appropriate.

The Corporate Parenting Committee debated the report and in summary, key points raised and responses to questions included:

- Members were advised that where there had been no Staying Put contract arrangement for a Care Leaver (CLs) or any other benefit support, financial support was however, provided during the lockdown period.
- Personal Advisors (PAs) had continued to provide the 'staying in touch' service to CLs during the Covid-19 lockdown period. The standard support arrangement was eight weeks; however, Peterborough had conducted these appointments on a more regular basis utilising a virtual approach. It was positive to learn that some Care Leavers had reengaged with their PAs during the lockdown period to avoid loneliness; and it was thought that engagement had increase as a result of using the virtual platforms.
- There were 23 Care Leavers in different stages of their education, however it was believed that none of the students had not passed their exams to secure a university placement as a result of the pandemic.

The Corporate Parenting Committee considered and **RESOLVED** (Unanimously) to note the report.

## **AGREED ACTIONS**

The Corporate Parenting Committee noted the report and agreed that:

1. The Head of Virtual Schools would provide the Committee with the current exam results for Care Leavers.

### **9. CARE LEAVER OFFER AND APPRENTICESHIP AND WORK OPPORTUNITIES UPDATE**

The Corporate Parenting Committee received a report in relation to the local offer for Care Leavers.

The purpose of the report was to advise Members of the Local Offer for Care Leavers, including the impact of Covid-19 and what services had been put in place to mitigate the impact.

The Group Manager: Corporate Parenting Peterborough and Specialist Personal Adviser introduced the report and asked Members to note the update, raise any concerns with officers and make any recommendations they felt appropriate.

The Corporate Parenting Committee debated the report and in summary, key points raised and responses to questions included:

- The Cabinet Member for Children’s Services, Education, Skills and the University complimented the team about the apprenticeship and opportunities work being undertaken.
- Members asked about the financial gap that was being experienced for the Kick Start Scheme. The Head of Corporate Parenting advised that this was a national issue and that it was difficult for Care Leavers as there was lack of support with the benefits scheme and as soon as they started working, they were responsible for their home bills. However, it was encouraged for CLs to follow their aspirations.
- The PAs contact with CLs had been valuable and using the virtual platforms was something that would stay in place, however, it would not replace a face to face visit. In addition, it was advised that the virtual platform opportunity had saved a lot of time for PAs as there was no need to travel around the country to conduct visits.
- The Assistant Director of Children in Care advised Members that there had been a change in the Children Act during the pandemic to allow certain temporary easements to services for children in care, but there were a number of continuing challenges to this. There was a statutory duty for LAs to keep in touch with young people in care and it had been anticipated that this arrangement would revert shortly. The caseloads for PAs were currently manageable, however would need to be reviewed in due course.
- Members commented that the Girl Guide association would be a good initiative to put forward as Corporate Aunts and Uncles.
- Members were advised that the service would want to be in a position to offer a choice in terms of contact for CLs with PAs. The preferred method would be achievable for some care leavers and children in care, however there was a statutory duty to ensure safeguarding, which meant that most arrangements would revert back to the provision before the COVID-19 pandemic period.

The Corporate Parenting Committee considered the report and **RESOLVED** (Unanimously) to note the update.

### **AGREED ACTIONS**

The Corporate Parenting Committee noted the report and agreed that:

1. The Specialist Personal Adviser would contact Councillor Bond in relation to the offer around the creation of links with the Girl Guide association to become part of the Corporate Aunts and Uncles initiative for Care Leavers.

## **10. REPORT ON WORK OF THE CORPORATE PARENTING COMMITTEE FOR THE CHILDREN AND EDUCATION SCRUTINY COMMITTEE 2019-2020**

The Corporate Parenting Committee received a report in relation to an annual report on the role of the Corporate Parenting Committee.

The purpose of the report addressed all areas of the Children in Care pledge and the Care Leavers’ Charter. It specifically demonstrated to Scrutiny how the Committee had addressed the increase in the Children in Care population; the changes to the partnership with TACT; and Children in Care and Care Leavers’ education and training needs.



The Assistant Director for Children's Services introduced the report and asked Members to agree that the annual report was an accurate reflection of the work of the Committee over the last 12 months and to submit the annual report to the Children and Education Scrutiny Committee for noting as per the Corporate Parenting Committee's Terms of Reference.

The Corporate Parenting Committee debated the report and in summary, key points raised and responses to questions included:

- Members commented that Corporate Parenting Champion briefing notes were submitted throughout the year and this should be reflected within the report.
- The Chairman thanked the Champions for all the work they had undertaken during 2019/2020.

The Corporate Parenting Committee considered the report and **RESOLVED** (Unanimously) to approve the report for submission to the Children and Education Scrutiny Committee, subject to the mention of the Corporate Champion Member briefing contributions.

### **AGREED ACTIONS**

The Corporate Parenting Committee agreed:

- i) The Assistant Director for Children's Services would update the report to reflect the briefing note contributions from Corporate Champion Members;
- ii) Subject to the amendments in relation to Corporate Champion Members briefing note contributions, the annual report was an accurate reflection of the work of the Committee over the last 12 months; and
- iii) To submit the annual report to the Children and Education Scrutiny Committee for noting as per the Corporate Parenting Committee's Terms of Reference.

## **11. ANNUAL REVIEWING OFFICER (IRO) REPORT**

The Corporate Parenting Committee received a report in relation to the IRO Annual Report.

The purpose of this report was to provide a statutory review and analysis of the Independent Reviewing Service.

The Deputy Safeguarding Lead introduced the report and asked Members of the Corporate Parenting Committee note the content and raise any queries with the lead officers.

The Corporate Parenting Committee debated the report and in summary, key points raised and responses to questions included:

- The use of technology had been successful in terms of engagement with children and young people in care. This had been important for IROs to keep relationships going.
- Members commented that the IRO role was an important one in terms of maintaining contact and delivering processes.
- The IRO team aimed to consult with all children and young people in care where possible for their pre review meetings. The data was collected in two ways as a whole cohort of children in care, and comparable data for children over the age of four. Sometimes the meetings would take place over virtual platform and this was an area that the team were trying to drive. Regularity of IRO support for families was maintained and it was rare to have to reallocate cases.

- Members complimented the IRO team in relation to the 100% success rate of children over the age of four that had engaged in their review to some degree, which informed the shaping of their care plan.
- The IRO team encouraged children and young people in care to chair or co-chair their review meetings and this helped to build up the children's confidence. This would be encouraged by asking children and young people in care to read out the agenda for their meeting. Some young people could be very vocal in their review meetings and tested the professionals at the meeting. In addition, the team planned to hold conversations with children and young people in care on how they would like their review to run and how their confidence could be encouraged further.
- Members were advised that the decrease in professional staff feedback forms was because some had lots of paperwork to undertake. In addition, it was advised that the feedback forms would only be provided if requested. Despite the drop in figures, feedback received had been qualitative and really helpful to the IRO team.
- The Chairman of Corporate Parenting Committee advised that the Children in Care Council had been invited to co-chair the informal committee meetings and that this had been very successful in terms of their growth in confidence at each meeting.
- The caseload rise outlined within the report of 50-70 had been captured over a twelve-month period and some IROs had caseloads that had fluctuated in number. Generally, the caseloads for IROs was static over the course of the year and monitoring of their cases was undertaken during the year.
- There had been a small spike of children and young people coming into care, however generally the numbers would be static within five to ten cases. The IRO service was very effective and all service areas for children and young people in care were scrutinised and monitored very well.
- Members commented that it was important to gain an understanding of staff caseloads to ensure their well-being, in order to continue to maintain support for children in care.

The Corporate Committee considered the report and **RESOLVED** (Unanimously), to note the report.

### **AGREED ACTIONS**

The Corporate Parenting Committee agreed to note the report and raise any queries with lead officers.

## **12. PERFORMANCE DATA FOR CHILDREN IN CARE AND CARE LEAVERS SEPTEMBER 2020**

The Corporate Parenting Committee received a report in relation to Children in Care and Care Leaver placements.

The purpose of the report was to provide Members with an overview in respect of the numbers of children and young people currently being looked after by the Authority and to provide a breakdown of the types of placements in which they were living. The report also provided information about the age, gender and ethnicity of those children and young people. The Assistant Director Children's Services introduced the report and requested Members to note the content and raise any queries they had with lead officers.

### **AGREED ACTIONS**

The Corporate Parenting Committee considered and **RESOLVED** to note the report.

## 12. a **PERFORMANCE – HEALTH REPORT**

The Corporate Parenting Committee received a report in relation to the Health service provision for Children in Care and Care Leavers.

The purpose of the report was to provide an overview of the Clinical Commissioning Group's (CCG) activities to ensure robust monitoring and quality assurance systems were in place to meet the health needs of the Looked after Children population in Peterborough. In addition, an update was provided about the recruitment to the Designated Nurse Safeguarding Children position, the regular health care meetings held with Peterborough City Council officers, the operational teams and the October health assessment figure improvements.

The Head of Safeguarding People, (Incorporating Designated Nurse Safeguarding Children) introduced the report and asked Members to note the contents and raise any queries they had with lead officers.

The Corporate Parenting Committee considered the report and **RESOLVED** (Unanimously) to note the contents.

## 13. **MEMBERS ISSUES**

Members that were not part of the core CPC membership, but held corporate parenting responsibilities, were invited raise issues they had with regard to the services provided to Children in Care (CiC).

The Corporate Parenting Committee considered and **RESOLVED** that there were no issues to raise.

## 14. **DRAFT WORK PROGRAMME FOR 2020/2021 AND REVIEW OF WORK IN 2019/20**

The Corporate Parenting Committee received a report in relation to the review of the Committee's work in 2019/2020 and the draft work programme for 2020/2021.

The purpose of the report was to provide Members with the opportunity to discuss the Committee's objectives and priorities for 2020/2021 and to approve the draft work programme for 2019/20. The report also provided the Committee with the opportunity to review its work conducted throughout the municipal year 2019/20.

The Democratic Services Officer and Assistant Director Children's Services introduced the report and requested Members to note the content of the report and raise any queries they had with lead officers.

The Corporate Parenting Committee debated the report and in summary, key points raised and responses to questions included:

- Members asked about the mental health item as a result of an action point raised in November 2019. It was advised that the report would be received at the March 2021 formal meeting.

The Corporate Parenting Committee considered and **RESOLVED** (Unanimously) to note the report.

## **AGREED ACTIONS**

The Corporate Parenting Committee considered and **RESOLVED** (Unanimously) to note the report and approved the work Programme for 2020/2021.

**15. DATE OF THE NEXT MEETING**

20 January 2021 - (Informal)

17 March 2021 – (formal)

CHAIRMAN  
6:00pm – 7:50pm

<b>CORPORATE PARENTING COMMITTEE (FORMAL)</b>	AGENDA ITEM No. 4
<b>17 MARCH 2021</b>	<b>PUBLIC REPORT</b>

Report of:	Wendi Ogle-Welbourn, Executive Director, People and Communities, Cambridgeshire and Peterborough Councils	
Cabinet Member(s) responsible:	Councillor Lynne Ayres, Cabinet Member for Children's Services	
Contact Officer(s):	Nicola Curley, Assistant Director, Children's Services	Tel. 864065

### **FOSTER CARER COMMITTEE UPDATE REPORT – OCTOBER 2020**

<b>RECOMMENDATIONS</b>	
<b>FROM:</b> Stephen Greene	<b>Deadline date:</b> N/A
<p>It is recommended that the Corporate Parenting Committee:</p> <ul style="list-style-type: none"> <li>• Notes the content of the report; and</li> <li>• Raise any queries they have with the lead officers</li> </ul>	

#### **1. ORIGIN OF REPORT**

1.1 This report is submitted to the Corporate Parenting Committee as part of a regular update schedule in line with the work programme.

#### **2. PURPOSE AND REASON FOR REPORT**

2.1 The purpose of this report is to update the committee about the activities of the foster carer committee.

2.2 This report is for the Corporate Parenting Committee to consider under its Terms of Reference No. 2.4.4.2 to receive statutory reports in relation to the adoption, fostering, commissioning, looked after children services and children's homes with a view to recommending any changes.

2.3 This links to all aspects of the Children in Care Pledge.

#### **3. TIMESCALES**

Is this a Major Policy Item/Statutory Plan?	<b>NO</b>	If yes, date for Cabinet meeting	
---	-----------	----------------------------------	--

#### **4. BACKGROUND AND KEY ISSUES**

4.1 The foster carer committee met on 11 February 2021 when the following areas were discussed:

- 4.1.1 Transport and C19 hygiene protocols: Some foster carers have expressed concerns about some aspects of transport in respect of children in their care. This relates to the cleaning regime and mask wearing for taxi drivers etc and there have been some issues on occasions when transport has arrived when it has not been needed. Committee has some suggestions and will invite the head of transport to the next FCCM.
- 4.1.2 Special occasions, birthday, festivals, Christmas payments: The committee asked that the celebration payment for Christmas 2020 be paid early due to foster carers needing to plan ahead as many presents were purchased online, which was very helpful. Committee would like to request that this could happen each year and also for birthday allowances to allow for planning and will discuss this with the Service.
- 4.1.3 Foster carers transferring to CCC. It was noted that some carers had enquired about transferring to CCC, but had been advised that as the organisations are aligned this would not be necessary as the services are to operate in the same way and allowances are now aligned.
- 4.1.4 Feedback to children's social work teams - the foster carer representative will discuss with colleagues about the increase in unannounced visits by children's social workers and the handover of information when social workers change. Staying put: Foster carers would welcome being part of the discussions with children's services about Staying Put arrangements, and the support that is received by the foster carers and the young person to work together on this.
- 4.1.4 Foster carer recording - Foster carers keep daily recordings about the children and young people in their care in A4 size books. Committee discussed their use and some members suggested that online recording may be easier. Members are aware that other counties (Suffolk was an example) use electronic devices carers which move with the child and also include key dates such as reviews and appointments.
- 4.1.5 Vaccinations for carers: - On behalf of carers the committee would like to thank PCC for their prompt response for carers receiving the vaccines as this has made carers feel safer and valued. All those carers who wished to take part in the vaccine roll-out have either received their first injection or have had their appointment dates confirmed.
- 4.1.6 Functions: We are delighted to report that Andrea Hughes has been appointed as function coordinator. The Christmas party has been booked for 28th November 2021 at the Fleet, along with a DJ. Fingers crossed, Covid restrictions will allow the party to take place this year. All are welcome.

## **5. CONSULTATION**

- 5.1 N/A

## **6. ANTICIPATED OUTCOMES OR IMPACT**

- 6.1 The outcome of the report is that committee will be updated about the foster carer committee activities.

## **7. REASON FOR THE RECOMMENDATION**

- 7.1 Corporate Parenting Committee members have a duty to review performance of Children's Social Care.

## **8. ALTERNATIVE OPTIONS CONSIDERED**

- 8.1 N/A

## **9. IMPLICATIONS**

### **Financial Implications**

9.1 *There are no financial implications as this report is for information only*

### **Legal Implications**

9.2 There are no legal implications as the report is for information only.

### **Equalities Implications**

9.3

### **9.4 *Carbon Impact Assessment***

Carbon impact in relation to this report has been considered and there is a neutral impact.

### **9.5 *Other Implications***

The work of the Foster Carer Committee relates to children in care and care leavers and therefore has an impact on them.

## **10. BACKGROUND DOCUMENTS**

Used to prepare this report, in accordance with the Local Government (Access to Information) Act 1985

10.1 *N/A*

## **11. APPENDICES**

11.1 *List any appendices to the report.*  
*N/A*

This page is intentionally left blank



<b>CORPORATE PARENTING COMMITTEE</b>	AGENDA ITEM No. 5
<b>17 MARCH 2021</b>	<b>PUBLIC REPORT</b>

Report of:	Wendi Ogle-Welbourn Executive Director People and Communities	
Cabinet Member(s) responsible:	Lynne Ayres Cabinet Member for Children's Services, Education, Skills and the University	
Contact Officer(s):	Marya Ali, Youth Voice Worker Shalina Chandoo, QA Lead	Tel. 01733 863731

## CHILDREN IN CARE COUNCIL PARTICIPATION REPORT

RECOMMENDATIONS	
<b>FROM:</b> <i>Nicola Curley Assistant Director Children's Services</i>	<b>Deadline date:</b> <i>N/A</i>
<p>It is recommended that the Corporate Parenting Committee:</p> <ol style="list-style-type: none"> <li>1. <i>Notes the content of the report.</i></li> <li>2. <i>Raise any queries they have with the lead officers.</i></li> </ol>	

### 1. ORIGIN OF REPORT

1.1 This report is submitted to each formal and informal Corporate Parenting Committee.

### 2. PURPOSE AND REASON FOR REPORT

2.1 The purpose of this report is to provide an update from the Children in Care Council and participation services.

2.2 This report is for the Corporate Parenting Committee to consider under its Terms of Reference:

2.4.4.1 To act as advocates for looked after children and care leavers.

2.4.4.6 To monitor the quality of care delivered by the City Council and review the performance of outcomes for children and young people in care.

*(a) Raise the profile of the needs of looked after children and care leavers through a range of actions including through the organising of celebratory events for the recognition of achievement.*

*(b) Ensure that leisure, cultural, further education and employment opportunities are offered and taken up by our looked after children and care leavers.*

*(c) Promote the development of participation and ensure that the view of children and young people are regularly heard through the Corporate Parenting Committee to improve educational, health and social outcomes to raise aspiration and attainments.*

*(d) Hold meetings with children and young people in care, frontline staff and foster carers to inform the committee of the standards of care and improvement outcomes for looked after children.*

2.3 This report links to the Children in Care Pledge under:

*1. Respect - We will respect you as individuals, with differing wants, needs and beliefs and tailor the service you get to fit you.*

*5. Listen – We will support you to have a voice in your care plan and make sure you are listened to. We will ensure you know how to make a complaint or compliment about your care. You will have access to advocacy support to do this if wanted.*

### 3. **TIMESCALES**

Is this a Major Policy Item/Statutory Plan?	<b>NO</b>	If yes, date for Cabinet meeting	
---	-----------	----------------------------------	--

### 4. **BACKGROUND AND KEY ISSUES**

4.1 The Children in Care Council (CiCC) has continued to meet virtually throughout lockdown and in person when Government restrictions have allowed this. Virtual meetings have not impeded the CiCC work plan and the CiCC continues to work on projects and be consulted by Children’s Services teams. The CiCC however do look forward to a return to face-to-face meetings once restrictions have been eased, so that they can take part in some team building activities and celebrate the success of their recent projects together.

4.2 ‘Good goodbyes’ was a theme that came out of feedback from young people which highlighted the importance of social workers saying goodbye to the young people they work with. Over the last quarter, a key focus for the CiCC has been finalising the designs of the goodbye greetings cards which staff can use to write personal goodbye messages when saying goodbye to children and young people. The cards were designed by the CiCC using young peoples’ submissions for the Virtual Art Exhibition in 2020 with their consent. The final designs have been digitally reproduced and will be made available for all staff to give to children and young people.

4.3 The CiCC’s Coming into Care Packs project was launched in October 2020. Twenty five children and young people aged between 2 and 17 years old have received a pack according to their age group to date. Feedback from children and young people has been positive with children reporting that they liked the items in the packs, especially the teddy bear and squishy toy. Some of the feedback indicated that the written information provided had not been looked at by the children and young people yet, and so feedback will be sought again after a period of time to measure the usefulness of the written materials and refine these as appropriate.

4.4 During the CiCC’s February meeting, members discussed the issue of mental health awareness and said that while Children in Care had access to information on mental health support services, other young people might not be as aware of the support available. The CiCC decided to make this one of their campaign focuses this year and will be discussing specific ideas to tackle this issue at their next meeting. Another area of focus for the year is ‘Celebrating Success’ including planning the annual CIC awards, more face-to-face activities and celebrations when restrictions allow this, and looking at other ways they can help celebrate the success of children and young people.

- 4.5 The CICC also spent some time discussing a suggestion of the Corporate Parenting Committee that social workers could send cards to CiC to let them know a bit about themselves, their likes and interests. The CiCC members looked at different options and concluded that they would like to set a challenge to social work teams to create profiles of themselves which could include a photo, hobbies and information about their job role to give to young people. The CiCC would be interested to see some examples of the profiles at future meetings.
- 4.6 The CICC members were pleased that members of the Corporate Parenting Committee expressed an interest in attending their meetings. The group discussed the format of this and decided they would like to invite one member at a time for a slot during their meetings and would like a profile from the member in advance explaining a bit about themselves. The CICC also will prepare some questions to ask members during the meeting to help them understand their role better. Corporate Parenting Committee Members are requested to contact the Youth Voice Worker to confirm.
- 4.7 The CiCC participated in various virtual opportunities over the last quarter. Members of the CICC co-hosted an animal themed quiz with the Cambridgeshire CiCC during the February half term virtual event for Children in Care. They also attended a regional quiz night with other Children in Care Councils from across the East of England. This was hosted by the Essex County Council Involvement Service and organised through the Regional Participation Network.
- 4.8 Throughout the Covid-19 pandemic, the Participation Team have been sending out newsletters and offering virtual events where restrictions have not allowed face to face activities. These have been refined in line with feedback from children and young people and as a result, numbers attending these sessions have increased significantly.
- 4.9 During February half term, the Participation Team invited Children in Care from Peterborough and Cambridgeshire to an animal themed virtual event titled 'February Fun'. The interactive session premiered a special video message for the children from local celebrity Aston Merrygold of pop band JLS, showing his support and encouragement to young people during this time. The session also featured a live video tour from Sacrewell Farm, showing the young people the farm's animals and answering their questions. The CiCC hosted a multiple-choice animal themed quiz that they had created themselves. In addition, there were games, craft activities and a competition. Young people also received a goodie bag in the post in advance with resources for the craft activities. Feedback was positive with young people saying they enjoyed the craft activities and in particular enjoyed the live video tour from Sacrewell Farm.
- 4.10 The Children in Charge youth club, which sits under the Children in Care Council, continues to meet virtually every fortnight during term time. Young people receive resource packs in the post with craft materials and games for the sessions. Thought Tree questions are a regular activity at youth club where young people have a chance to discuss their thoughts and feelings around different topics. Recent topics have included what the children want 2021 to look like with many of the children saying they're looking forward to an end to Covid-19 restrictions so they can meet up with friends and go shopping. Children also fed back that they enjoyed the art activities and would like to have more quizzes, which are being incorporated into future youth clubs and activities.
- 4.11 Children in Care and Care Leavers have been invited to participate in ASYE (Assessed and Supported Year in Employment) social worker recruitment interview panels in early March. Young people who have signed up attended a recruitment panel training workshop in February to agree a scoring system for the interviews and discuss the kind of questions they would like to ask applicants. Young people will be supported by the Participation Team during the virtual interviews.

## 5. CONSULTATION

5.1 *This report was completed in consultation with members of the Children in Care Council.*

## **6. ANTICIPATED OUTCOMES OR IMPACT**

6.1 *Improved engagement with Children in Care and Care Leavers.*

## **7. REASON FOR THE RECOMMENDATION**

7.1 N/A

## **8. ALTERNATIVE OPTIONS CONSIDERED**

8.1 *There are no changes required.*

## **9. IMPLICATIONS**

### **Financial Implications**

9.1 *There are no financial implications.*

### **Legal Implications**

9.2 *There are no legal implications, as the report is for information only.*

### **Equalities Implications**

9.3 *Participation is an essential service for children in care and care leavers and this report demonstrates the level of participation in various events and activities.*

### **9.4 Carbon Impact Assessment**

Children in Care Council meetings and activities are held remotely during COVID-19 lockdown restrictions. As none of the young people are currently travelling to meetings, the carbon impact is neutral.

## **10. BACKGROUND DOCUMENTS**

Used to prepare this report, in accordance with the Local Government (Access to Information) Act 1985.

10.1 N/A

## **11. APPENDICES**

11.1 N/A

<b>CORPORATE PARENTING COMMITTEE (FORMAL)</b>	AGENDA ITEM No. 6
<b>17 March 2021</b>	<b>PUBLIC REPORT</b>

Report of:	Wendi Ogle-Welbourn Executive Director People and Communities	
Cabinet Member(s) responsible:	Lynne Ayres Cabinet Member for Children’s Services, Education, Skills and the University	
Contact Officer(s):	Nicola Curley, Assistant Director Children’s Social Care Catherine York, Designated Nurse Children in Care	Tel:

**HEALTH ANNUAL REPORT 1<sup>ST</sup> APRIL 2020 – 31<sup>ST</sup> JANUARY 2021**

<b>R E C O M M E N D A T I O N S</b>	
<b>FROM: Assistant Director Children’s Social Care</b>	<b>Deadline date: N/A</b>
<p>It is recommended that the Corporate Parenting Committee:</p> <ol style="list-style-type: none"> <li>1. Notes the content of the report</li> <li>2. Raise any queries with the lead officers</li> </ol>	

**1. ORIGIN OF REPORT**

1.1 This report is submitted annually to a formal Corporate Parenting Committee

**2. PURPOSE AND REASON FOR REPORT**

2.1 The purpose of this report is to provide an overview of the Clinical Commissioning Group’s (CCG) activities to ensure robust monitoring and quality assurance systems are in place to meet the health needs of the Looked after Children population in Peterborough

2.2 This report is for the Corporate Parenting panel to consider under its terms of reference no: 2.4.3.6 (c) Promote the development of participation and ensure that the view of children and young people are regularly heard through the Corporate Parenting Committee to improve educational, health and social outcomes to raise aspiration and attainments

2.3 This links to priority 4 of the Children in Care Pledge and Care Leavers Charter. Health issues of Children and young people in care

**3. TIMESCALES**

Is this a Major Policy Item/Statutory Plan?	<b>NO</b>
---	-----------

## 4. BACKGROUND AND KEY ISSUES

### 4.1 The Impact of the COVID-19 pandemic on health provision

4.1.1 The COVID-19 pandemic has had an unprecedented impact on the provision of health services, including the physical and mental health care provided to Children in Care. Whilst much health service provision moved from face-to-face contact to virtual contact, many Services continued with their non urgent provision, and emergency treatment responses were maintained. Some services such as physiotherapy and speech and language therapy ceased for a short period of time at the commencement of the pandemic, but soon recommenced provision.

4.1.2 Our children and young people in care, including those with additional needs such as a physical disability, have continued to receive the physical and mental health care required, albeit in a different way for some services. The Designated Nurse and Doctor for Children in Care continue to work with commissioners and providers across social care and health to ensure the provision of the required health services, including assurances around the quality and timeliness of services.

4.1.3 The Children in Care Health Team provision continued to provide a full service by utilising a virtual platform (Attend Anywhere) for both Initial and Review Health Assessments; feedback received from carers and young people indicates that the experience of having a virtual assessment has been broadly welcomed, and the compliance rate to delivery of assessments is on the whole good. As Children in Care Teams across the country have utilised a virtual platform for health assessments, this is the same for our children and young people placed out of area. Support for social workers, young people, foster carers, or other agencies has continued throughout the pandemic and has not been compromised.

### 4.2 Joint Working

4.2.1 In response to the COVID-19 pandemic health and social care set up a weekly joint information sharing meeting, which provided a forum to ensure robust communication, develop joint strategies and responses to risk and situations, discuss specific cases and share information relevant to the health needs of children and young people. Membership of the meetings include colleagues from Peterborough City Council, Cambridgeshire City Council, both the Cambridgeshire and Peterborough Children in Care Teams and Cambridgeshire and Peterborough CCG. These meetings now continue fortnightly as the group value the improved collaboration and ways of working and the opportunities that this brings, and although day to day issues and operational challenges are discussed, there is also a focus on service development and longer-term plans.

### 4.3 Compliance with statutory targets for health assessments

CAMBRIDGESHIRE & PETERBOROUGH FOUNDATION TRUST		Apr-20	May-20	Jun-20	Jul-20	Aug-20	Sep-20	Oct-20	Nov-20	Dec-20	Jan-21
No. Children Entered Care	No. Placed in area	12	3	4	14	12	18	9	9	13	8
	No. Placed out of area	2	1	0	2	2	2	0	1	1	3
IHA Completed with 20 days	No. In area completed within 20 days	10	3	4	14	5	17	7	7	4	5
	% in area completed within 20 days	83%	100%	100%	100%	42%	94%	78%	78%	31%	63%
	No. OOA completed within 20 days	0	1	0	2	0	0	0	0	0	0
	% OOA completed within 20 days	0%	100%	0%	100%	0%	0%	0%	0%	0%	0%
% All IHA completed in 20 days		71%	100%	100%	100%	36%	85%	78%	70%	29%	45%
Annual Health Review Assessments	No. In area Annual Review Assessments required	22	20	31	30	21	17	15	18	26	28
	No. OOA Annual Review Assessments required	5	11	3	6	7	11	10	4	10	12
	No. In area completed within 15 days	13	18	29	30	21	15	12	15	25	26
	% in area completed within 15 days	59%	90%	94%	100%	100%	88%	80%	83%	96%	93%
	No. OOA area completed within 15 days	4	4	1	2	1	3	2	0	3	0
	% OOA completed within 15 days	80%	36%	33%	33%	14%	27%	20%	0%	30%	0%
	% All AHR completed within 15 days		63%	71%	88%	89%	79%	64%	56%	68%	78%

#### 4.4 Initial Health Assessments (IHA)

4.4.1 The Initial Health Assessments are undertaken by one of the Community Paediatricians in line with the statutory guidance. The Children in Care Health Team work collaboratively in their endeavours to ensure they achieve a high-performance rate for the number of Initial Health Assessments completed within the 20-working day target. During the period of this report, Initial Health Assessments have been undertaken as a virtual assessment as per national guidance due to the COVID-19 pandemic, with children being seen face to face at a follow-up appointment if this need is identified by the paediatrician; this review could be by the paediatrician or by onward referral to another required service such as their GP.

4.4.2 Reasons for not reaching the 95% target some months are identified through exception reporting and are detailed below:

- Children and young people placed out of area, where we request the assessment is undertaken by another health provider. In these cases, we have no influence over the timescales in which the assessment is completed.
- There are some instances where a child or young person does not attend the first appointment made for them, thus causing a delay by the time they attend the second appointment.
- Occasionally, a young person may decline having an Initial Health Assessment, so the team liaise and work with the foster carer/residential carer, social worker and young person to understand why they are declining, and to encourage but not pressurise them to participate by ensuring they are aware of the benefits of the health assessment, the process and outcomes along with the options for completion. To ensure that this process is robust, and the young person's decision and views are recorded, a Consent to Health Assessment Pathway has been developed for use across health and social care and is due to be launched in April 2021. Undertaking health assessments using a virtual platform has had a positive effect, encouraging some young to have their health assessment.
- Very occasionally there may be a delay with a referral from social care to health or difficulty in obtaining consent, but due to the excellent partnership working these occurrences are quickly managed and resolved.

4.4.3 The performance in August and December was particularly low, the exception reporting for these months identified the following:

August:       2 booked to be seen 21 working days.  
                  3 booked to be seen 23 working days.  
                  2 requested of an out of area provider.

December: 1 seen one day late due to no NHS number available.  
                  1 late due to DNA because of Wi-Fi issue with carer.  
                  1 late due to being in hospital.  
                  1 late as first attempt at the appointment was with wrong interpreter.  
                  1 requested of an out of area provider.

#### 4.5 Review Health Assessments (RHA):

4.5.1 Review Health Assessments are undertaken by one of the specialist nurses in the Children in Care Health Team, with children aged 0-4 years receiving a health assessment 6 monthly, and those aged 5-17 years receiving a health assessment annually. During the period of this report, Review Health Assessments have been undertaken as a virtual assessment as per national guidance due to the COVID-19 pandemic, with the understanding that children and young people will be seen face to face as a follow-up appointment with the nurse, or by onward referral to another required service such as their GP.

4.5.2

Reasons for not reaching the 95% target some months are identified through exception reporting and are detailed below:

- Children and young people placed out of area, where we request the assessment is undertaken by another health provider. In these cases, we have no influence over the timescales in which the assessment is completed.
- Non-attendance at appointment may be because the young person is hard to engage with or that the carers are unable to attend the first appointment given to them, although this is less frequent due to assessments being undertaken using a virtual platform.
- Occasionally, a young person may decline having an Review Health Assessment or may just be more difficult to engage with, so the team liaise and work with the foster carer/residential carer, social worker and young person to understand why they are declining, and to encourage but not pressurise them to participate by ensuring they are aware of the benefits of the health assessment, the process and outcomes along with the options for completion; this may be through the completion of a health questionnaire by the young person or the nurse completing the assessment with the young person's social worker or foster carer. To ensure that this process is robust, and the young person's decision and views are recorded, a Consent to Health Assessment Pathway has been developed for use across health and social care and is due to be launched in April 2021. As already identified, undertaking health assessments using a virtual platform has had a positive effect, encouraging some young to have their health assessment.

#### **4.6 Audits of Initial and Review Health Assessments**

4.6.1 The Designated professionals are undertaking an audit of both Initial and Review Health Assessments during March 2021 as part of their role in gaining assurance of quality and effectiveness of the assessments. The audit has not taken place in time for inclusion in this report as the Designated Nurse post was vacant for 8 months until the end of November, resulting in delays in certain functions.

4.6.2 The planned audit will include review of 10 Initial Health Assessments and 30 Review Health Assessments. It will include assessments for children and young people placed in and out of Peterborough and will include a selection across the age range. The results and report of the audit will be available by 23<sup>rd</sup> April 2021.

#### **4.7 Strength and Difficulties Questionnaires (SDQ)**

4.7.1 The Strength and Difficulties Questionnaire, commonly known as the SDQ, is a short behavioural screening questionnaire. It has 5 sections that cover details of emotional difficulties, conduct problems, hyperactivity/inattention, peer relationship problems and pro-social behaviour. There are three versions of the SDQ: the parent/carer, the teacher, and the self-report scale (completed by 11-16 year olds), which provide the potential for triangulation of information about a child across the different versions. These questionnaires are used alongside health assessments to assess emotional health and wellbeing. Scoring categories are: Low need (0-13), Some need (14-16) and High need (17-40).

4.7.2 The health team in Peterborough undertake the SDQ process on behalf of Social Care. Pre COVID-19, the Questionnaires were given out at health assessments as this was found to provide a higher percentage of returns and provide a score reflective of the child's / young person's well-being at the time of the health assessment and therefore supporting the holistic assessment. Since the pandemic and commencement of virtual health assessments, the questionnaire is emailed to the carer around 2 weeks prior to the assessment with a request for the carer to complete the questionnaire and return to the health team before the health assessment; this process is the same for children/young people placed in and out of Peterborough. This change in process has resulted in fewer SDQs being available at the Review Health Assessment appointment, and an overall return rate of only 46% as demonstrated in the table below.

4.7.3 The lower SDQ return rate was discussed at the joint health and social care meeting, and it was agreed that the health team would notify social care within the Health Action Plan that the SDQ is outstanding, and that the Social Worker would follow this up with the carer and once completed, send the SDQ to the health team for scoring and recording. The score will then be used to inform ongoing assessment and planning of the child/young person.



#### 4.7.4 **SDQ Completion Rate and Average Score 1<sup>st</sup> April 2020 – 31<sup>st</sup> January 2021**

Number of SDQs sent to carers and young people	Number of SDQs returned by carers and young people	Average score of SDQs completed by carers	Average score of SDQs completed by young people
342	157	14	13
100%	46%		

#### 4.7.5 **SDQ Pathway**

In order to ensure that a robust process that works across partner organisations is in place, a sub-group of the Joint Health and Social Care Group has been formed to develop an SDQ Pathway. To date, several meetings have taken place with social care, health and education colleagues, and an IRO Manager has been invited to attend the next meeting. Once completed, this will be shared with social care colleagues alongside the provision of brief training and/or guidance.

#### 4.8 **Care Leavers**

4.8.1 In preparation for a young person to leave care, at their final health assessment (before they turn 18 years), the nurse will talk to the young person in detail about their health needs and support to make any necessary arrangements for future requirements. The young person will be signposted to appropriate services around their sexual health, physical and emotional well-being, and to the Local Offer for care leavers available on the Peterborough City Council website.

4.8.2 As part of this health assessment, the young person's health information is collated into a wallet sized Health Passport for them to hold. Additionally, this is sent to the GP and Social Worker so that it is available for the young person to access in the future if preferred, or if they require a replacement. Having this information electronically is appreciated by the young people and works well in the current virtual way of working.

#### 4.9 **Unaccompanied Asylum-Seeking Children (UASC)**

4.9.1 The East of England Strategic Migration Partnership has identified the following as the main health issues experienced by UASC:

- Mental Health
- Sleep disturbances impacting on mental health
- Trauma
- Lack of uncertainty around status
- Skin related issues
- Tuberculosis (TB)
- Injuries arising on their departure and throughout their journey
- Organ harvesting

4.9.2 All unaccompanied minors in Peterborough are registered with a GP when they arrive. A comprehensive Initial Health Assessment of physical, mental health, and emotional wellbeing is undertaken by a paediatrician with an interpreter present. For most of these young people there is little background health information available, so this health assessment is vital in identifying individual health needs and risks, and referring them to appropriate services such as psychology, counselling or Child and Adolescent Mental Health Services (CAMHS). Young people will have travelled via a variety of routes, through different countries and may have been exposed to a variety of health risks. Young people are offered blood borne virus screening and catch-up immunisations as per the NHS schedule.

- 4.9.3 Since September 2020, the Refugee Council has been commissioned to provide a Well Being and Work for Refugee Integration service which can be utilised by UASC. This essential service includes a well-being therapy service, but this is not a replacement for mental health services.
- 4.10 **Blood borne virus screening Unaccompanied Asylum-Seeking Children (UASC) :**
- 4.10.1 New into care Unaccompanied Asylum-Seeking Children and Young People are referred for appropriate screening following their Initial Health Assessment. Sexual health screening including Hepatitis and HIV is conducted by Sexual Health Services. Additionally, a full blood count for each young person is conducted, which will not only highlight any blood abnormalities such as anaemia but will indicate where a young person may have contracted a parasitic infection. Screening for Tuberculosis is conducted by the TB Service. Consent is obtained by the services and young people will be asked to return for a further appointment if results are positive.
- 4.10.2 The Blood Borne Virus Screening Pathway was approved in March 2019 and has continued to function well throughout the COVID-19 pandemic. An audit of the pathway and the service received by the young people is planned to be undertaken in May 2021, and the Designated Doctor has prepared the audit pro-forma in readiness.
- 4.11 **Dental Services**
- 4.11.1 At the start of the COVID-19 pandemic and first lockdown, dental service provision was extensively affected. As dental care is an aerosol generating procedure, dental practices closed for a period of time, limiting dental care to urgent treatment only. As practices re-opened, their capacity was reduced, thus leading to further and ongoing delays for routine care and dental health checks.
- 4.11.2 Concerns were raised by both health and social care colleagues at the Joint Social Care and Health meetings about foster carers being unable to register children with a dentist since the start of the pandemic; it was also recognised, that there were difficulties with being able to register children with a dentist prior to the pandemic. This matter was escalated with NHS England dental colleagues via email communications followed by several meetings. Although there are still some delays in dental practices returning to their pre COVID-19 levels of service, this is gradually improving.
- 4.11.3 To support the needs of vulnerable children and young people, St. Mary's Dental Practice in Ely is working with NHS England and will provide a service to any vulnerable child or young person, regardless of where they live, for routine checks, and non-urgent and urgent dental care; this information has been shared with both health and social care colleagues.
- 4.12 **Recovery Plan for 2021-2022**
- 4.12.1 As we emerge from the third lockdown, we will develop a recovery plan for the Children in Care Health Service in line with national guidance, whilst at the same time responding to local need, developments, and the positive practice and learning that has emerged during the last year. The Designated Nurse has requested further details of the Children in Care Health Team's response to the pandemic using an audit proforma, around delivery of the service including the use and effectiveness of virtual assessments, the challenges such as IT connectivity and equipment and the outcomes so that this information can inform the way forward. Using the learning from the last year, it is expected that the use of some virtual health assessments will continue for those young people who are more difficult to engage with, but with a gradual return to face to face health assessments in line with Government and NHS England COVID-19 guidance on changes to service delivery. The Designated Doctor and Nurse will work closely with the Children in Care Health Team to determine the recovery plan and pathway, ensuring that service delivery continues to be of a high standard and that the timeliness of assessments continues to improve.
- 4.12.2 Provision and delivery of health services across the system will continue to be in line with NHS England guidance whilst the pandemic continues, and later as we enter recovery. Our children and young people, including those with physical disabilities, will continue to receive the physical and mental health care they require either face to face or by virtual arrangements depending on the service.

5. **CONSULTATION**  
N/A
6. **ANTICIPATED OUTCOMES OR IMPACT**
- 6.1 To improve health and well-being for Looked after Children by ensuring adequate assessment of health and addressing areas where there may be a lack of provision.
7. **REASON FOR THE RECOMMENDATION**
- 7.1 Corporate Parenting Committee have requested a health update at all formal committees.
8. **ALTERNATIVE OPTIONS CONSIDERED**
- 8.1 N/A
9. **IMPLICATIONS**
- Financial Implications**
- 9.1 N/A
- Legal Implications**
- 9.2 N/A
- Equalities Implications**
- 9.3 N/A
- Carbon Impact Assessment**
- This report is about health services for all Children in Care and Care Leavers.
10. **BACKGROUND DOCUMENTS**  
Used to prepare this report, in accordance with the Local Government (Access to Information) Act 1985
- 10.1 None
11. **APPENDICES**
- 11.1 None

This page is intentionally left blank

<b>CORPORATE PARENTING COMMITTEE</b>	<b>AGENDA ITEM No. 7</b>
<b>17 MARCH 2021</b>	<b>PUBLIC REPORT</b>

Report of:	Wendi Ogle-Welbourn Executive Director People and Communities	
Cabinet Member(s) responsible:	Lynne Ayres Cabinet Member for Children’s Services, Education, Skills and the University	
Contact Officer(s):	Alison Bennett Assistant Director for Safeguarding, Quality Assurance and Support Services	Tel. 01480 377685

## REPORT ON THE FINAL STRUCTURE FOR CLINICAL OFFER FOR CIC

<b>RECOMMENDATIONS</b>	
<b>FROM:</b> <i>Nicola Curley, Assistant Director Children’s Services</i>	<b>Deadline date:</b> <i>N/A</i>
<p>It is recommended that the Corporate Parenting Committee:</p> <ol style="list-style-type: none"> <li>1. Notes the content of the report.</li> <li>2. Raise any queries they have with the lead officer.</li> </ol>	

### 1. ORIGIN OF REPORT

- 1.1 This report is to be submitted to the Corporate Parenting Committee.

### 2. PURPOSE AND REASON FOR REPORT

- 2.1 The purpose of this report is to update members of the progress in the mobilisation of the clinical team and the offer available to children in care in Peterborough, following the service being brought in house.
- 2.2 This report is for Corporate Parenting Committee to consider under its Terms of Reference No. 2.4.4.3 Ensure that the needs of looked after children and care leavers are addressed through key plans, policies and strategies throughout the Council overseeing interagency working arrangements.
- 2.3 This reports to the Children in Care Pledge by focussing on respect and health and wellbeing for children in care and care leavers.

### 3. TIMESCALES

Is this a Major Policy Item/Statutory Plan?	<b>NO</b>	If yes, date for Cabinet meeting	
---	-----------	----------------------------------	--

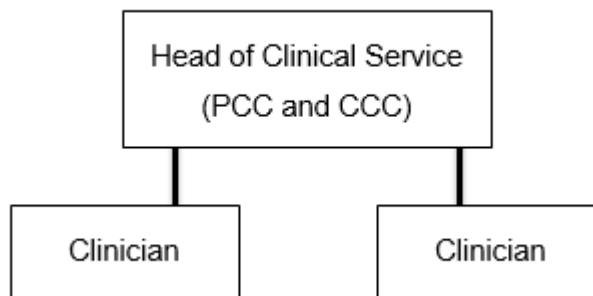
### 4. BACKGROUND AND KEY ISSUES

- 4.1 **Background**

- 4.1.1 Committee members will be aware that previously the clinical support offered to children in care within Peterborough was delivered by CPFT, and consisted of two clinical posts. These posts have been vacant for a considerable period. The need to review the way that clinical support to children in care in Cambridgeshire provided Peterborough with a good opportunity to review the clinical offer to our children in care.
- 4.1.2 Careful consideration was given to the question of whether to renew the contract with CPFT to deliver these services on behalf of the local authority. The eventual decision was taken to develop an in-house service. The main reason was the view that in these particularly challenging and changing times, the Local Authority wanted to retain the flexibility of being able to adapt the service should we need to.
- 4.1.3 The changes being proposed in Cambridgeshire required a formal consultation to take place. This was not necessary in Peterborough since the posts concerned were vacant, but we needed to await the outcome in Cambridgeshire as we were proposing some sharing of resources across the two councils.
- 4.1.4 During this period, clinical services for individual children and young people in care in Peterborough were commissioned on an individual basis. While this approach could not replicate what can be offered by a permanently staffed service, it did mean that more urgent needs for individual children in care could continue to be met.
- 4.1.5 The consultation in Cambridgeshire ended on 14 January 2021, with a formal response published by the Directorate. The local authority is now in a position to take forward a revised clinical service and offer in both authorities.
- 4.2 **Revised Clinical Offer**
- 4.2.1 Since the consultation ended, the team has been working to develop an operating framework congruent with current evidence-based practice, governance, and recruitment of interim clinical staff to the vacant posts.
- 4.2.2 The primary function for the clinical team is to enhance relational social work practice, our carers' therapeutic abilities, and to improve outcomes for children who are in care.
- 4.2.3 Foster carers, including some of our most experienced carers, can struggle with managing challenging behaviour on a daily basis; it can be exhausting. One of the key aims of the revised clinical offer is therefore to increase the support that we can provide to our carers.
- 4.2.4 Our revised clinical offer will include an improved training offer to foster carers focusing on supporting children in their care who have attachment disorders and who are exhibiting challenging behaviour.
- 4.2.5 In addition, the clinical team will contribute expertise at all levels of the wider service structure, to ensure that adults and professionals with the most influence in a child's life, are informed by evidence-based models relevant to the emotional health and wellbeing of children who are in care.
- 4.2.6 They will also contribute to the assessment of children's emotional health and wellbeing to inform care planning. This involvement may also include supporting decisions about contact with birth family, placement suitability, safety planning, reunification planning, sibling assessments and SDQs.
- 4.2.7 The revised clinical service will also build on existing relationships with other mental/emotional health and wellbeing services to ensure that more complex needs of children and young people are met.
- 4.2.8 Children and young people will continue to be signposted to appropriate services as needed.

4.2.9 The overall aim of the revised service is to improve placement stability and so reduce the need for out of county placements, minimising unnecessary disruptions and improving the child's care and family experience.

#### 4.3 **Staffing**



4.3.1 The vacant Clinician posts are due to be advertised by the first week of March 2021.

#### 4.4 **Inclusion Criteria**

4.4.1 The service is open to any child in care or on the edge of care, the latter will more likely be adolescents. The following criteria will be applied, however, there will always be some flexibility:

- a) Any child or young person who is or has experience of care, is at risk of placement breakdown, family placement breakdown or multiple placement breakdowns.
- b) Carers of children experiencing care to develop and support their therapeutic parenting skills and maintain placement stability.
- c) Consultation to Social work teams and the network around the child where they are experiencing challenges supporting the child and carers.

#### 4.5 **Exclusion Criteria**

4.5.1 Any child with a moderate to severe mental health need that meets the threshold for secondary mental health services.

4.5.2 Any child with mild to profound autism, learning disabilities or behaviour that challenges.

4.5.3 In such cases the Clinical Team will review needs with the network to refer the child or young person to the appropriate mental health service.

#### 4.6 **Delivery**

4.6.1 The Clinical Team will employ a developmental trauma informed framework to deliver support to the network and child.

4.6.2 Developmental trauma is an umbrella concept for a spectrum of specific difficulties, resulting from the impact on the brain development, due to early trauma. This complex spectrum of difficulties means that parenting and educating a child with developmental trauma is commonly challenging and fraught.

4.6.3 It is a complex, fluid spectrum which the child can move along as life and family stressors and protective factors change. Quite often the child will have secondary difficulties that require intervention as Care experienced children are commonly anxious, sad, show ADHD, disordered eating, self-harm and autistic traits. (This list is not exhaustive.)

4.6.4 This spectrum of difficulties tends to ripple into the systems surrounding the child or young person. This is characterised by high levels of distress and emotional dysregulation in the child and network supporting the child.

#### 4.7 **Model**

4.7.1 The delivery model focusses on therapeutic approaches that are relational, that build strong relationships around the child, increase family regulation, parental sensitivity, attunement, and attachment security to their primary carers, as well as stronger relationships between siblings, and wider family network.

4.7.2 Due to the spectrum of need within Developmental trauma, and how the impacts ripple out into the systems surrounding the child, there is no one approach which will be sufficient to meet the complexity of need.

4.7.3 Early trauma can have a significant impact upon the development of the nervous system, which can then have lasting effects on sensory processing and attachments across the lifespan. Sensory integration helps the child or young person by exposing them to sensory stimulation in a structured, repetitive way. The theory behind it is that over time, the brain will adapt and allow the child to process and react to sensations more efficiently.

4.7.4 Therefore, the model of care will be multi-modal, to meet this complexity of need.

#### 4.8 **Conclusion**

4.8.1 We are confident that the revised clinical offer to foster carers, children and young people within Peterborough will contribute to stability of placements and support the emotional and wellbeing of children. Our next steps are to advertise the current vacant posts as well as those currently covered by interim clinicians and to share our operating procedures/framework with the wider service and to begin to embed the new operating model.

### 5. **CONSULTATION**

5.1 Staff have been consulted throughout this process.

### 6. **ANTICIPATED OUTCOMES OR IMPACT**

6.1 To contribute to the stability of placements for children in care and support the emotional and wellbeing of children and young people.

### 7. **REASON FOR THE RECOMMENDATION**

7.1 *N/A*

### 8. **ALTERNATIVE OPTIONS CONSIDERED**

8.1 None

### 9. **IMPLICATIONS**

#### **Financial Implications**

9.1 Posts are budgeted for as part of the current establishment.

#### **Legal Implications**

9.2 There are no legal implications as the report is for information only.

#### **Equalities Implications**



- 9.3 To ensure Children in Care and Care Leavers are afforded the same opportunities.
- 9.4 None
- 9.5 This report is about a service being implemented for Children in Care and Care Leavers.

**Carbon Impact Assessment**

Meetings are held remotely during Covid-19 lockdown restrictions. As no meetings are being held face-to-face the carbon impact is neutral.

**10. BACKGROUND DOCUMENTS**

Used to prepare this report, in accordance with the Local Government (Access to Information) Act 1985

- 10.1 None

**11. APPENDICES**

- 11.1 None

This page is intentionally left blank

<b>CORPORATE PARENTING COMMITTEE</b>	<b>AGENDA ITEM No. 8</b>
<b>17 MARCH 2021</b>	<b>PUBLIC REPORT</b>

Report of: Wendi Ogle-Welbourn	Wendi Ogle-Welbourn Executive Director People and Communities	
Cabinet Member(s) responsible: Lynne Ayres	Lynne Ayres Cabinet Member for Children's Services, Education, Skills and the University	
Contact Officer(s):	Fiona Van Den Hout Head of Service Fostering and Supervised Contact	Tel. 01223 518739

## **REPORT TO CONFIRM NEW REGIONAL ADOPTION AGENCY AND FOSTERING STRUCTURES**

<b>RECOMMENDATIONS</b>	
<b>FROM:</b> Nicola Curley, Assistant Director Children's Services	<b>Deadline date:</b> N/A
It is recommended that Corporate Parenting Committee:	
1. Note the detail of the report and raise any questions with Lead Officers	

### **1. ORIGIN OF REPORT**

1.1 This report has been requested by the Corporate Parenting Committee.

### **2. PURPOSE AND REASON FOR REPORT**

2.1 The purpose of this report is to provide Committee Members with an update on the new arrangements for delivering adoption and fostering services for Peterborough and Cambridgeshire Councils.

2.2 This report is for Corporate Parenting Committee to consider under its Terms of Reference No. 4.4.3.3 Ensure that the needs of looked after children and care leavers are addressed through key plans, policies and strategies throughout the Council overseeing interagency working arrangements.

2.3 This reports to the Children in Care Pledge by focussing on respect for children in care and care leavers.

### **3. TIMESCALES**

Is this a Major Policy Item/Statutory Plan?	<b>NO</b>	If yes, date for Cabinet meeting	N/A
---	-----------	----------------------------------	-----

### **4. BACKGROUND AND KEY ISSUES**

4.1 **Cambridgeshire and Peterborough Fostering Services**

4.1.1 The delivery model for fostering services in Cambridgeshire and Peterborough has changed with the launch of an exciting new Cambridgeshire and Peterborough Fostering Service on 1<sup>st</sup> December 2020. The new service enables us to combine some activity which opens up the possibility for us to do more, such as training for foster carers but also to improve quality of, and build resilience in, our fostering services all of which will benefit those who really matter – our children and young people.

4.1.2 The design of the new service offer brings together the experience from both previous services, and with our new shared strategic priorities, we have developed the most flexible and best possible service we can.

Our priorities for the Fostering Service are:

- Invest in our foster carers
- Improve our support and training offer
- Build better relationships and a more consistent partnership working ethos
- Ensure that there is a consistent focus on safeguarding
- Recruit more carers.

4.1.3 The changes to the previous separate services can be broadly defined into the two main points below:

- Some aspects of how we deliver fostering services were brought into teams operating across the two authorities. These teams are now located within the Recruitment and Assessment function of the service and the Quality Assurance function.
- The core roles and functions of our fostering services have remained separate, for example Cambridgeshire staff supervise Cambridgeshire foster carers, and Peterborough staff supervise Peterborough carers.

#### 4.2 **Recruitment and Assessment:**

4.2.1 This service area now acts as the shared 'front door' for all fostering enquiries for both Peterborough and Cambridgeshire and the assessment of prospective Foster Carers and Special Guardians.

4.2.2 This service area is also responsible for running innovative and effective multimedia marketing campaigns and all our generic communication with foster carers, pre and post approval. There are three Recruitment and Assessment Teams within this area and a Marketing and Recruitment function with recently introduced Recruitment Officers who support the service to maximise on all fostering enquiries and support prospective carers through to assessment.

#### 4.3 **Supervision and Support:**

4.3.1 This service area supports and supervises all approved foster carers for Peterborough and Cambridgeshire of all types (mainstream, link, connected carers and private fostering carers). Each carer is allocated a Fostering Social Worker who is responsible for ensuring the quality of care the foster carer provides to the children they look after and that the foster carer has access to all the necessary support to meet their responsibilities.

4.3.2 There are three teams within this area, two teams of Cambridgeshire Social Workers supporting Cambridgeshire's Foster Carers and one team of Peterborough Social Workers supporting Peterborough's Foster Carers.

4.3.3 We have successfully recruited to all our three dedicated Placement Officer posts attached to these teams whose main responsibility it is broker all in-house care arrangements to ensure children move to live with the right foster carer and that we maximise the use of our in-house resources. Placement Officers are also responsible for managing the relationship between the Foster Carer, the fostering and child's Social workers to ensure the best possible start to all fostering arrangements.

#### 4.4 **Quality Assurance:**

- 4.4.1 This service area consists of one team and is responsible for the overall quality and standard of care provided to children. It is a new dedicated function in both authorities which will also be responsible for undertaking Foster Carer Annual Reviews and Standards of Care Investigations. This provides an independent mechanism and the opportunity for better reflective practice, support and challenge to both Foster Carers and Social Workers. Also within this area are the dedicated training roles who deliver training and preparation for prospective Foster Carers as well as carers who have been already approved.
- 4.4.2 We have also introduced and successfully recruited a dedicated Panel Advisor who is responsible for panel arrangements and Agency Decision Maker activity, ensuring the diversity of the Central List and how panels from each authority can support each other.
- 4.4.3 We have increased and successfully recruited to all vacant management posts across the service within two months of implementation. Each team is managed by a Team Manager, each service area by a Service Manager and a dedicated Head of Service working across both authorities has operational responsibility for the service. This increase in management oversight will help drive planned initiatives forward and improve practice and performance which ultimately will help us to realise our main aim: fostering services in both authorities being amongst the highest performing in the country.

#### 4.5 **Cambridgeshire and Peterborough Regional Adoption Agency**

- 4.5.1 The delivery model for adoption services in Cambridgeshire and Peterborough has also changed with the launch of the Cambridgeshire and Peterborough Regional Adoption Agency on 1<sup>st</sup> December 2020. The journey to implementation had been subject to some changes in direction but the Department for Education supported us to develop a Local Authority hosted Regional Adoption Agency. This model will maintain close links with children's services and fostering services in each authority and increase the potential pool of adopters so that we are in the best position to secure adoption for those children for whom adoption is in their best interests.

The aims of the service are to:

- 4.5.2
- Have a key role in the early permanency planning agenda within both Peterborough and in Cambridgeshire and be instrumental in the care planning for children who have a plan for adoption
  - Recruit adopters who can meet the needs of the children with adoption plans (specifically older children, sibling groups and children with additional vulnerabilities)
  - Offer high quality support to adopters, birth parents and carers and all parties involved with the child
  - Ensure a culture of continuous challenge, innovation and improvement
  - Provide an accessible service to all parties affected by adoption and special guardianship (adopters, adoptees, birth families, foster carers, guardians and children in their care)
  - Develop a coherent and robust 'Local Offer' that provides the right support, at the right time to Adopters and Special Guardians

- 4.5.3 In order to minimise disruption, the Regional Adoption Agency has been designed to align with Cambridgeshire's previous adoption structure (the host authority) which provided a structure which could be scaled up. The Regional Adoption Agency consists of four distinct teams dedicated to delivering key focussed activity.

#### 4.6 **Recruitment and Assessment:**

- 4.6.1 This service area recruits, assesses and supports prospective adopters to meet the needs of children waiting to be placed for adoption in each authority in line with their developed recruitment and marketing plan. In addition, the service undertakes annual reviews as required, assesses and support parents or partners and family relatives who wish to adopt a child on a non-agency basis and foster carers who are seeking to adopt the child in their care. As in Fostering, a Recruitment Offer will support this team.

#### **4.7 Family Finding:**

4.7.1 This part of the service takes lead responsibility for all aspects of the linking and matching of children with adopters. The service also provides support and advice to the children's Social Workers about the adoption process, coordinates other family finding activities and crucially increases the opportunities for children to be adopted who are older, have additional vulnerabilities or within sibling groups. Tracking children with a potential or actual adoption plan and reporting on adoption timescales against national and local indicators also takes place within this part of the service.

#### **4.8 Adoption and Special Guardianship Support:**

4.8.1 This service area undertakes assessments of Adopter and Special Guardian support needs or commissions these if required, undertaking applications to the Adoption Support Fund for children. Additional activity this area is also responsible for includes social events for children and young people, social/training events for adoptive parents, advice and signposting for adoptive families, independent support and advice to birth relatives, counselling and information to adopted adults post 18 years and independent support to birth parents including a letter box exchange service.

#### **4.9 Panel and Quality Assurance:**

4.9.1 This service area administers and supports Adoption Panels which recommend the approval of prospective adopters and matches between children and adopters. It also provides professional advice on best practice and regulations to the Agency Decision Makers within both Peterborough and Cambridgeshire. As in our fostering services, the Agency Advisor plays a key role in maintaining a high standard of practice and performance through the quality assurance of all services areas within the Regional Adoption Agency.

4.9.2 We have not yet successfully recruited to all management posts within the Regional Adoption Agency. The Delivery Lead is a crucial post that will drive through new innovations and help to shape how adoption services are delivered into the future. However, both Cambridgeshire and Peterborough's adoption services had been providing a Good' service so the foundations of an outstanding service are already in place and achievable.

4.9.3 Both the new fostering and adoption services are being led by a dedicated Assistant Director for Fostering, Adoption and Specialist Young People's Services providing leadership and focus to the newly developing services. I would like to take the opportunity to welcome Ricky Cooper who joined the Senior Leadership Team on 15<sup>th</sup> March 2021.

### **5. CONSULTATION**

5.1 Consultations with Cambridgeshire and Peterborough staff across both fostering and adoption services were launched on 29 September 2020 and ended on 28 October 2020.

5.2 A further consultation including both Fostering Services and the Regional Adoption Agency will be launched towards the end of March 2021.

### **6. ANTICIPATED OUTCOMES OR IMPACT**

6.1 It is anticipated that new models of service delivery across both fostering and adoption will have a positive impact on the recruitment and assessment of, and support to, foster carers and adopters which will improve the lived experience of children and young people in care.

### **7. REASON FOR THE RECOMMENDATION**

7.1 There are no recommendations made within this report

**8. ALTERNATIVE OPTIONS CONSIDERED**

8.1 None

**9. IMPLICATIONS**

**9.1 Financial Implications**

9.2 There are no financial implications.

**9.3 Legal Implications**

9.4 None

**9.5 Equalities Implications**

9.6 This report relates to the services provided for children in care and care leavers and ties into the Pledge and Charter that the local authority Respects the differing wants and needs for all.

**9.7 Carbon Impact Assessment**

This is not a policy/decision; it is a report for committee

**10. BACKGROUND DOCUMENTS**

Used to prepare this report, in accordance with the Local Government (Access to Information) Act 1985

10.1 None

**11. APPENDICES**

11.1 None

This page is intentionally left blank



<b>CORPORATE PARENTING COMMITTEE</b>	<b>AGENDA ITEM No. 9</b>
<b>17 MARCH 2021</b>	<b>PUBLIC REPORT</b>

Report of:	Wendi Ogle-Welbourn Executive Director People and Communities	
Cabinet Member(s) responsible:	Lynne Ayres Cabinet Member for Children's Services, Education, Skills and the University	
Contact Officer(s):	Myra O'Farrell Head of Service Corporate Parenting	Tel: 864391

## PERFORMANCE DATA FOR CHILDREN IN CARE AND CARE LEAVERS JANUARY 2021

<b>RECOMMENDATIONS</b>	
<b>FROM:</b> Nicola Curley Assistant Director Children's Services	<b>Deadline date:</b> N/A
<p>It is recommended that members of Corporate Parenting Committee:</p> <ol style="list-style-type: none"> <li>1. Note the content of the report, and</li> <li>2. Raise any questions with the lead officer</li> </ol>	

### 1. ORIGIN OF REPORT

- 1.1 This report is submitted to Corporate Parenting Committee to each formal and formal committee as part of the standing work programme item in relation to performance.

### 2. PURPOSE AND REASON FOR REPORT

- 2.1 The purpose of this report is to update the Corporate Parenting Committee in respect of the numbers of children and young people being looked after by the Council as of 31 January 2021 by providing a breakdown of the types of placements in which they are living. The report also provides information about the age, gender and ethnicity of those children and young people.
- 2.2 This report is for Corporate Parenting Committee to consider under its Terms of Reference No. 2.4.4.6 To monitor the quality of care delivered by the City Council and review the performance of outcomes for children and young people in care.
- 2.5 This reports to the Children in Care Pledge by focussing on the placements for children in care and care leavers.

### 3. TIMESCALES

Is this a Major Policy Item/Statutory Plan?	<b>NO</b>	If yes, date for Cabinet meeting	
---	-----------	----------------------------------	--

### 4. BACKGROUND AND KEY ISSUES

- 3 As of 31 January 2021 there were 368 in the care of the local authority; of these:

138 children were placed with foster carers who work for Peterborough City Council (in house).

133 children were in foster care and placed with independent fostering agencies (IFAs) outside of the city boundaries. The agency works with the Local Authority on a contractual basis to provide foster placements.

19 post 16 years olds were living on their own (independent living) but still classed as CLA with an allocated Social Worker. Independent living assists the young person with the transition to leaving care. These young people are supported by our Leaving Care Service.

28 children were placed with family or friends' carers (connected person). These carers are formally assessed in the same way that our other in-house carers are assessed and are presented to the Fostering Panel for approval in the way. They are paid the same level of allowances as other in-house foster carers.

2 children were living with their parents but are still considered 'looked after' because they are subject to a full care order so the Council still shares parental responsibility with the birth parent. Placements with parents are often made pending a plan for reunification with the parent and in some cases will result in an application for care orders to be revoked.

7 children were placed for adoption.

38 children and young people (without disabilities) were placed in residential educational care that provides intensive support in a residential setting. These placements are most usually made when it is clear that foster care is not sufficient to meet the child or young person's needs. Residential care is nearly always accessed by adolescents and only rarely used for younger children in very special circumstances.

There were 3 children (with disabilities) placed in specialist residential care.

## **5. CONSULTATION**

5.1 N/A

## **6. ANTICIPATED OUTCOMES OR IMPACT**

6.1 This is an accurate report of the current accommodation placements for children in care and care leavers.

## **7. REASON FOR THE RECOMMENDATION**

7.1 The data included in this report is from the monthly performance report which includes live data.

## **8. ALTERNATIVE OPTIONS CONSIDERED**

8.1 N/A

## **9. IMPLICATIONS**

### **Financial Implications**

9.1 There are no financial implications, this report is for information only.

### **Legal Implications**

9.2 There are no legal implications as the report is for information only.

## **Equalities Implications**

9.3 The current recruitment campaign for foster carers is focussed on increasing placements for specific groups linked to ethnicity, gender and age of the current cohort of children in care.

## **9.4 Carbon Emissions Implications**

This is not a policy/decision; it is a data report for committee

## **9.5 Other Implications**

This report relates to all children in care.

## **10. BACKGROUND DOCUMENTS**

Used to prepare this report, in accordance with the Local Government (Access to Information) Act 1985

10.1 Monthly Performance Report

## **11. APPENDICES**

11.1 Appendix 1 – January 2021

This page is intentionally left blank

## HEADLINE FIGURES

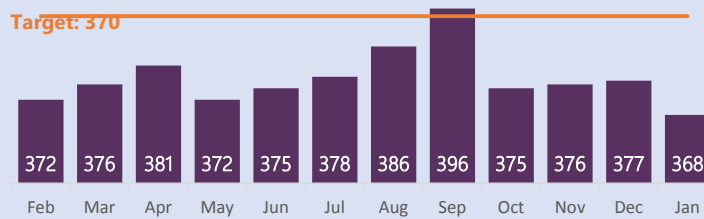
Number of children in care on the last day of January

# 368



Target: 370

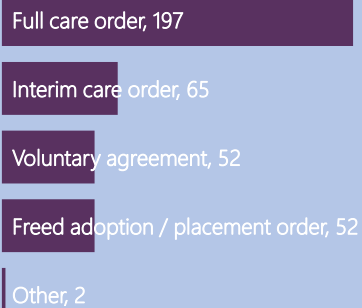
Target: below 390



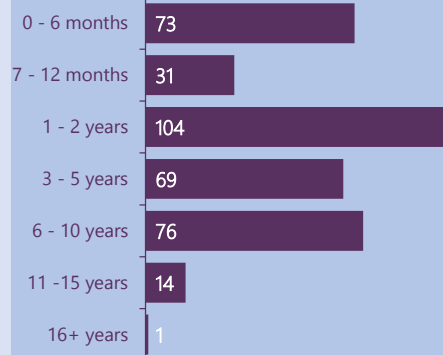
## Staffing

	Establishment	Average Caseload	Change	Performance
Family Safeguarding Qualified social workers	34	17	-	-
Children in Care Qualified social workers	14	20	-	-
Leaving Care Personal Advisors	8	22	-	-

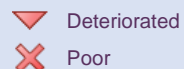
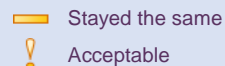
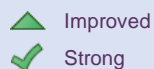
## Legal status of children in care



## Length of time children have been in care



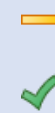
Key: Change since previous month  
Performance against target



## SERVICE STANDARDS

% of child in care reviews which were held on time (year to date, and during each month)

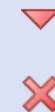
# 100%



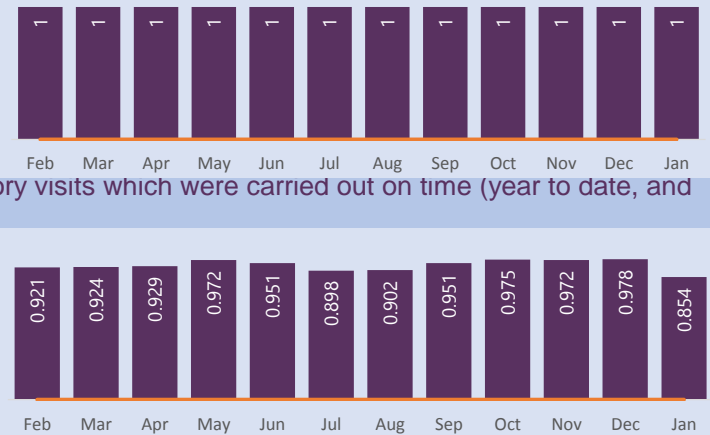
Target: above 97%

% of child in care statutory visits which were carried out on time (year to date, and during each month)

# 85.4%



Target: above 98%

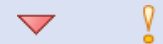


## PLACEMENTS

### Placement stability

# 9.5%

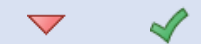
Target: below 5.5%



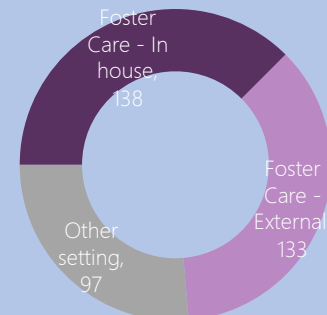
9.5% of children in Peterborough's care had 3 or more different placements in the last 12 months. Out of those children who have been in care for over 2.5 years, 70.2% have been in their current placement for two or more years.

# 70.2%

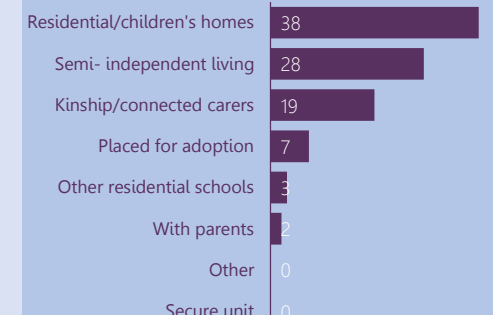
Target: above 69%



## Type of placement of children in care



## Other settings: breakdown

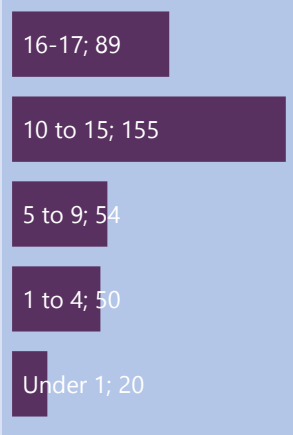


# Corporate Parenting Scorecard

January 2021

## EDUCATION

Children in care by age group



% of school-aged children in care who have a PEP in place

100.0%

Target: above 98%

A Personal Education Plan (PEP) was in place for 221 out of 221 school-aged children who were in care for at least a month by the end of January.

84.0%

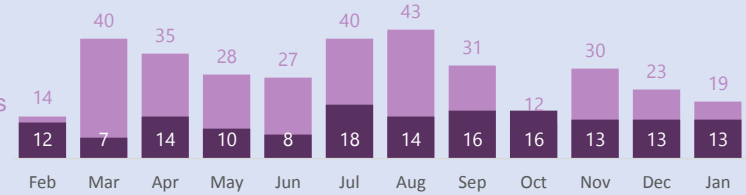
84.0% of Peterborough's children in care are taught in good or outstanding schools.

% of school-aged children in care in good or outstanding schools

Children in care who go missing (with number of episodes)

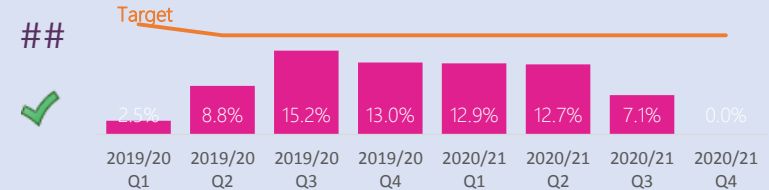
8 Children

19 Episodes



## ADOPTION

% of children leaving care who are adopted (Year to date and by quarter)



Target: above 18%

Timeliness of adoption process

Time to placement

383

Target: below 426

For children adopted during the past 12 months, an average of 383 days passed between the child entering care and them moving into their adoptive placement. An average of 177.22222222222222 days passed between their placement order being granted and approval of a match with their adopters.

Time to match

177

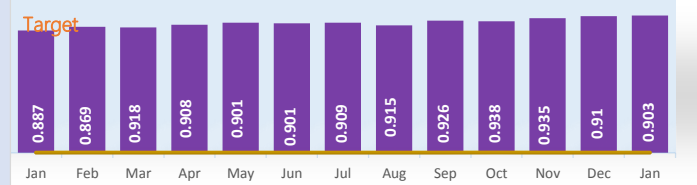
Target: below 120

## CARE LEAVERS

Care Leavers who have a pathway plan in place

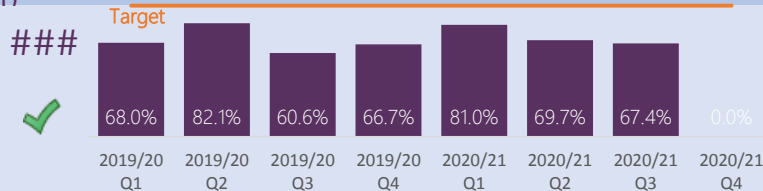
90.3%

Target: above 95%



## HEALTH - SERVICE STANDARDS

Children in care whose initial health assessment was completed on time (Year to date and by quarter)

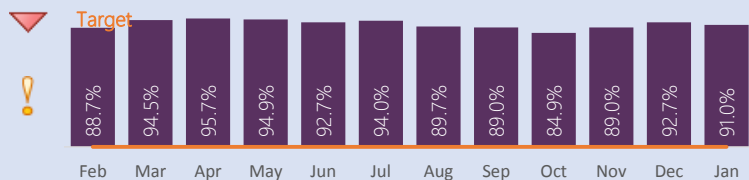


Target: above 95%

Children in care whose annual health assessment was completed on time

91.0%

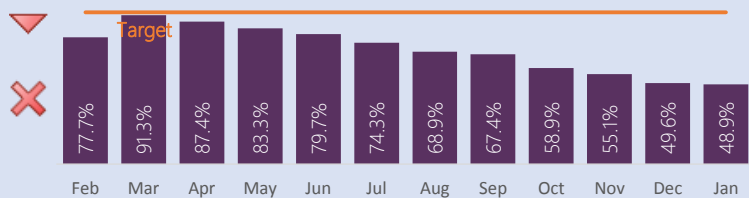
Target: above 93%



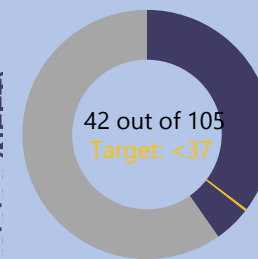
Children in care whose annual dental examination was completed on time

48.9%

Target: above 93%



19 to 21 year old care leavers who are not in employment, education or training



19 to 21 year old care leavers who live in unsuitable accommodation

