#### **Public Document Pack**

### **Children and Families Scrutiny Panel**

## Thursday, 22nd July, 2021 at 5.30 pm PLEASE NOTE TIME OF MEETING

Council Chamber - Civic Centre

This meeting is open to the public

#### **Members**

Councillor Guthrie (Chair)
Councillor Bell
Councillor Laurent
Councillor Mitchell
Councillor Paffey

#### **Appointed Members**

Nicola Brown, Primary Parent Governor Catherine Hobbs, Roman Catholic Church Francis Otieno, Primary Parent Governor Claire Rogers, Secondary Parent Governor Rob Sanders, Church of England

#### **Contacts**

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#### **PUBLIC INFORMATION**

#### **CHILDREN AND FAMILIES SCRUTINY PANEL**

Role of this Scrutiny Panel: To undertake the scrutiny of Children and Families Services in the City, including the Multi Agency Safeguarding Hub (MASH), Early Help, Specialist & Core Service, looked after children, education and early years and youth offending services, unless they are forward plan items. In such circumstances members of the Children and Families Scrutiny Panel will be invited to the relevant Overview and Scrutiny Management Committee meeting where they are discussed.

#### Terms Of Reference:-

Scrutiny of Children and Families Services in the City to include:

- Monitoring the implementation and challenging the progress of the Council's action plan to address
  the recommendations made by Ofsted following their inspection of Children's Services in
  Southampton and review of Southampton Local Safeguarding Children Board (LSCB) in July 2014.
- Regular scrutiny of the performance of multi-agency arrangements for the provision of early help and services to children and their families.
- Scrutiny of early years and education including the implementation of the Vision for Learning 2014 2024.
- Scrutiny of the development and implementation of the Youth Justice Strategy developed by the Youth Offending Board.
- Referring issues to the Chair of the LSCB and the Corporate Parenting Committee.

#### **Public Representations**

At the discretion of the Chair, members of the public may address the meeting on any report included on the agenda in which they have a relevant interest. Any member of the public wishing to address the meeting should advise the Democratic Support Officer (DSO) whose contact details are on the front sheet of the agenda.

**Access** – access is available for the disabled. Please contact the Democratic Support Officer who will help to make any necessary arrangements.

**Mobile Telephones:**- Please switch your mobile telephones to silent whilst in the meeting

**Use of Social Media:-** The Council supports the video or audio recording of meetings open to the public, for either live or subsequent broadcast. However, if, in the Chair's opinion, a person filming or recording a meeting or taking photographs is interrupting proceedings or causing a disturbance, under the Council's Standing Orders the person can be ordered to stop their activity, or to leave the meeting. By entering the meeting room you are consenting to being recorded and to the use of those images and recordings for broadcasting and or/training purposes. The meeting may be recorded by the press or members of the public. Any person or organisation filming, recording or broadcasting any meeting of the Council is responsible for any claims or other liability resulting from them doing so.

#### **Business to be Discussed**

Only those items listed on the attached agenda may be considered at this meeting.

**QUORUM** The minimum number of appointed Members required to be in attendance to hold the meeting is 3.

#### **Rules of Procedure**

Council's website.

The meeting is governed by the Council Procedure Rules and the Overview and Scrutiny Procedure Rules as set out in Part 4 of the Constitution.

Details of the Council's Guidance on the recording of meetings is available on the

**Smoking policy** – the Council operates a nosmoking policy in all civic buildings.

**Fire Procedure** – in the event of a fire or other emergency a continuous alarm will sound and you will be advised by Council officers what action to take

## Southampton: Corporate Plan 2020-2025 sets out the four key outcomes:

- Communities, culture & homes Celebrating the diversity of cultures
  within Southampton; enhancing our
  cultural and historical offer and using
  these to help transform our
  communities.
- Green City Providing a sustainable, clean, healthy and safe environment for everyone. Nurturing green spaces and embracing our waterfront.
- Place shaping Delivering a city for future generations. Using data, insight and vision to meet the current and future needs of the city.
- Wellbeing Start well, live well, age well, die well; working with other partners and other services to make sure that customers get the right help at the right time.

#### **Dates of Meetings: Municipal Year**

2021	2022
17 June	27 January
22 July	31 March
30 September	
25 November	

#### **DISCLOSURE OF INTERESTS**

Members are required to disclose, in accordance with the Members' Code of Conduct, **both** the existence **and** nature of any "Disclosable Pecuniary Interest" or "Other Interest" they may have in relation to matters for consideration on this Agenda.

#### **DISCLOSABLE PECUNIARY INTERESTS**

A Member must regard himself or herself as having a Disclosable Pecuniary Interest in any matter that they or their spouse, partner, a person they are living with as husband or wife, or a person with whom they are living as if they were a civil partner in relation to:

- (i) Any employment, office, trade, profession or vocation carried on for profit or gain.
- (ii) Sponsorship:

Any payment or provision of any other financial benefit (other than from Southampton City Council) made or provided within the relevant period in respect of any expense incurred by you in carrying out duties as a member, or towards your election expenses. This includes any payment or financial benefit from a trade union within the meaning of the Trade Union and Labour Relations (Consolidation) Act 1992.

- (iii) Any contract which is made between you / your spouse etc (or a body in which the you / your spouse etc has a beneficial interest) and Southampton City Council under which goods or services are to be provided or works are to be executed, and which has not been fully discharged.
- (iv) Any beneficial interest in land which is within the area of Southampton.
- (v) Any license (held alone or jointly with others) to occupy land in the area of Southampton for a month or longer.

- (vi) Any tenancy where (to your knowledge) the landlord is Southampton City Council and the tenant is a body in which you / your spouse etc has a beneficial interests.
- (vii) Any beneficial interest in securities of a body where that body (to your knowledge) has a place of business or land in the area of Southampton, and either:
  - a) the total nominal value of the securities exceeds £25,000 or one hundredth of the total issued share capital of that body, or
  - b) if the share capital of that body is of more than one class, the total nominal value of the shares of any one class in which you / your spouse etc has a beneficial interest that exceeds one hundredth of the total issued share capital of that class.

#### Other Interests

A Member must regard himself or herself as having an 'Other Interest' in any membership of, or occupation of a position of general control or management in:

Any body to which they have been appointed or nominated by Southampton City Council

Any public authority or body exercising functions of a public nature

Any body directed to charitable purposes

Any body whose principal purpose includes the influence of public opinion or policy

#### **Principles of Decision Making**

All decisions of the Council will be made in accordance with the following principles:-

- proportionality (i.e. the action must be proportionate to the desired outcome);
- due consultation and the taking of professional advice from officers;
- respect for human rights;
- a presumption in favour of openness, accountability and transparency;
- · setting out what options have been considered;
- · setting out reasons for the decision; and
- clarity of aims and desired outcomes.

In exercising discretion, the decision maker must:

- understand the law that regulates the decision making power and gives effect to it. The decision-maker must direct itself properly in law;
- take into account all relevant matters (those matters which the law requires the authority as a matter of legal obligation to take into account);
- leave out of account irrelevant considerations;
- act for a proper purpose, exercising its powers for the public good;
- not reach a decision which no authority acting reasonably could reach, (also known as the "rationality" or "taking leave of your senses" principle);
- comply with the rule that local government finance is to be conducted on an annual basis. Save to the extent authorised by Parliament, 'live now, pay later' and forward funding are unlawful; and
- act with procedural propriety in accordance with the rules of fairness.

#### **AGENDA**

#### 1 APOLOGIES AND CHANGES IN PANEL MEMBERSHIP (IF ANY)

To note any changes in membership of the Panel made in accordance with Council Procedure Rule 4.3.

#### 2 DISCLOSURE OF PERSONAL AND PECUNIARY INTERESTS

In accordance with the Localism Act 2011, and the Council's Code of Conduct, Members to disclose any personal or pecuniary interests in any matter included on the agenda for this meeting.

#### 3 <u>DECLARATIONS OF SCRUTINY INTEREST</u>

Members are invited to declare any prior participation in any decision taken by a Committee, Sub-Committee, or Panel of the Council on the agenda and being scrutinised at this meeting.

#### 4 DECLARATION OF PARTY POLITICAL WHIP

Members are invited to declare the application of any party political whip on any matter on the agenda and being scrutinised at this meeting.

#### 5 STATEMENT FROM THE CHAIR

## 6 THE SUFFICIENCY OF ACCOMMODATION FOR LOOKED AFTER CHILDREN (Pages 1 - 28)

Report of the Executive Director for Children and Learning informing the Panel on the approach the Council is taking to fulfil its duty to secure sufficient accommodation within the authority's area which meets the needs of children that the Council is looking after.

## 7 REVIEW OF THRESHOLDS IN SOUTHAMPTON – THE PATHWAYS DOCUMENT (Pages 29 - 58)

Report of the Executive Director for Children and Learning requesting that the Panel note the progress made in reviewing local thresholds and the next steps in embedding the Pathways document.

## **8** CAREDIRECTOR IMPLEMENTATION FOR CHILDREN AND LEARNING (Pages 59 - 62)

Report of the Executive Director for Children and Learning updating the Panel on the forthcoming implementation of CareDirector.

#### 9 CHILDREN AND LEARNING - PERFORMANCE (Pages 63 - 86)

Report of the Service Director - Legal and Business Operations, recommending that the Panel consider and challenge the performance of Children and Learning Services in Southampton.

#### **10** MONITORING SCRUTINY RECOMMENDATIONS (Pages 87 - 96)

Report of the Service Director - Legal and Business Operations, enabling the Panel to monitor and track progress on recommendations made at previous meetings.

Wednesday, 14 July 2021

Service Director – Legal and Business Operations

DECISION-MAKER:	CHILDREN AND FAMILIES SCRUTINY PANEL
SUBJECT:	THE SUFFICIENCY OF ACCOMMODATION FOR LOOKED AFTER CHILDREN
DATE OF DECISION:	22 JULY 2021
REPORT OF:	EXECUTIVE DIRECTOR CHILDREN AND LEARNING

CONTACT DETAILS				
<b>Executive Director</b>	Title	Children and Learning		
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	E-mail:	robert.henderson@southampton.gov.uk		
Author:	Title	Service Manager, Permanence		
	Name:	Martin Smith	Tel:	023 8083 4736
	E-mail:	: Martin.smith2@southampton.gov.uk		

#### STATEMENT OF CONFIDENTIALITY

N/A

#### **BRIEF SUMMARY**

To brief the Panel on how the council is fulfilling its duty to secure sufficient accommodation within the authority's area which meets the needs of children that the council is looking after.

#### **RECOMMENDATIONS:**

- (i) That the Panel note the current position and next steps to secure sufficient accommodation within the authority's area which meets the needs of children that the council is looking after.
- (ii) That the Panel is provided with an annual update on the sufficiency of accommodation in order to scrutinise the impact of the council's Placement Commissioning Sufficiency Statement and Strategy 2020-2025.

#### REASONS FOR REPORT RECOMMENDATIONS

1. Southampton City Council has corporate parenting responsibility for looked after children in its care and care leavers. There is a legal duty placed upon the council to secure sufficient accommodation within the authority's area which meets the needs of children that the council are looking after.

#### **ALTERNATIVE OPTIONS CONSIDERED AND REJECTED**

2. None

#### **DETAIL (Including consultation carried out)**

3. The document attached as Appendix 1 outlines the current position and next steps to secure sufficient accommodation within the authority's area which

- meets the needs of children that the council are looking after. Demand for and supply of suitable accommodation options for children in our care is outlined within the national and local context. The impact of the council's Placement Commissioning Sufficiency Statement and Strategy 2020- 2025 is reviewed, including evaluation from the recent Ofsted focused visit.
- 4. The sufficiency of local placements for our children in care remains a challenge in the context of a stable cohort of looked after children and a national and local shortage of suitable placements to meet the varied and complex needs of the children we care for.
- 5. Next steps to secure sufficient accommodation, include:
  - Deliver on our fostering recruitment strategy 2020-2023.
  - Enhance our fostering provision through the step-across scheme, parent and child offer and emergency provision.
  - Deliver on the provision of two in-house Children's homes by the end of March 2022.
  - Managing and developing local independent placement provision though re-tending of the commissioning framework and active engagement with providers based in the city.
- 6. In addition, attached as Appendix 2, is a detailed response to the recommendations made at a previous meeting of the Panel with regards to the recruitment of in-house foster carers.

#### **RESOURCE IMPLICATIONS**

#### Capital/Revenue

7. None at this stage

#### Property/Other

8. None at this stage

#### LEGAL IMPLICATIONS

#### Statutory power to undertake proposals in the report:

9. S.111 Local Government Act 1972

#### Other Legal Implications:

10. None

#### **RISK MANAGEMENT IMPLICATIONS**

11. Steps being taken to manage the risks associated with placement sufficiency are outlined in Appendix 1.

#### POLICY FRAMEWORK IMPLICATIONS

12. The Placement Commissioning Sufficiency Statement and Strategy 2020-2025 contributes to achieving the outcomes desired for children in Southampton.

The Corporate Plan 2020 sets out the following regarding the wellbeing of children in the city:

"Working with partners to deliver the ambitions set out in the five-year Health and Wellbeing Strategy, this area looks at wellbeing across the city, with a focus on adults and children's social care, education and public health. We work closely with partners to help safeguard vulnerable people across the city. We are focused on delivering strong customer experience across the Adults and Children & Families services. We want Southampton to be a city that is recognised for its proactive approach to preventing problems and intervening early, as well being a 'Child Friendly City' where children and young people have great opportunities and an aspiration to achieve. We want our residents to have the information and support they need to lead safe, active, healthy lives and to be able to live independently for longer."

KEY	DECISION?	No			
WARDS/COMMUNITIES AFFECTED:		AFFECTED:	All		
	SUPPORTING DOCUMENTATION				
Appendices					
1.	Highlight report: Sufficiency of accommodation for children in care				
2.	Highlight report: Response to recommendations made by the Panel at previous meetings relating to placement options				

#### **Documents in Members' Rooms**

1.	1. None			
Equality Impact Assessment				
Do the implications/subject of the report require an Equality and Safety Impact Assessment (ESIA) to be carried out?			No	
Data	Data Protection Impact Assessment			
	Do the implications/subject of the report require a Data Protection Impact Assessment (DPIA) to be carried out?			No
Other Background Documents Other Background documents available for inspection at:				
	Title of Background Paper(s)  Relevant Paragraph of the Access to Information Procedure Rules / Schedule 12A allowing document to be Exempt/Confidential (if applicable)			/ nent to
1.	None			





Children and Families Scrutiny Panel
Sufficiency of accommodation for children in care
Martin Smith - Service Manager, Permanence



## What is the Sufficiency Duty?

There is a legal duty of 'sufficiency' that requires local authorities to ensure that, through direct provision or commissioned services, a range of placements sufficient to meet the needs of all children in care are available locally or that there is a °plan in place to move towards that position. The range of accommodation within the scope of the sufficiency duty includes adoption, foster care, children's homes and supportive accommodation.

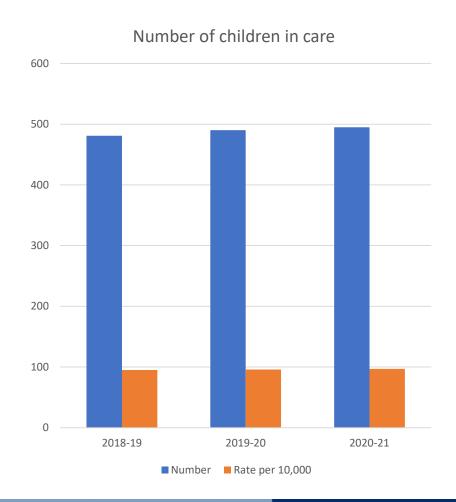
Statutory guidance requires local authorities to take steps that secure, so far as reasonably practicable, sufficient accommodation within the authority's area which meets the needs of children that the local authority are looking after, and whose circumstances are such that it would be consistent with their welfare for them to be provided with accommodation that is in the local authority's area ('the sufficiency duty').

DfE (2010); Statutory guidance on securing sufficient accommodation for looked after children

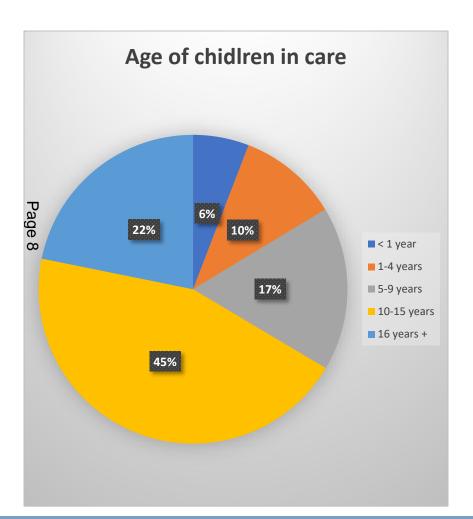


As of 30 June 2021, there were 498 children and young people in our care.

The cohort of our children in care and the rate per 10,000 has seen a slight increase year on year from 2018.







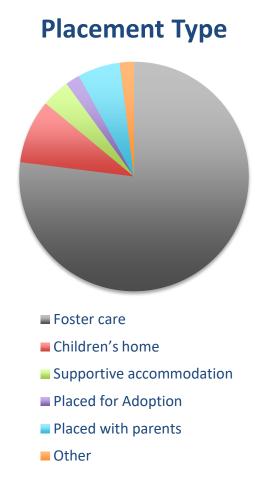
The proportion of children by each age group and gender has remained relatively unchanged over the years.

The 10-16 age group accounts for two thirds of the children in our care and males accounting for 60% of the children in our care.



Most of the children in our care, 77%, are placed with foster carers.

This is consistent with the national data for 2019-2002 with 72% of children in care placed with foster carers





The children we care for are likely to present with complex needs and behaviours given their experience of adversity and trauma that would have precipitated their becoming gooked after.

In recent years, awareness of contextual safeguarding has highlighted the care and safeguarding needs of older children and young people at risk of sexual and criminal exploitation in our communities.

Their continues to be a demand for placements providing safe secure accommodation and skilled care supported by multi-disciplinary interventions.



## The national picture

- Most fostering places are approved by local authority fostering services. Local authorities reported 59% of all approved places, with 41% in Independent Fostering Agencies (IFAs).
- Over the last 6 years, the general trend is a slow increase in numbers of fostering places. There are an estimated 89,200 fostering places in England as at 31 March 2020, a small increase in approved places from 88,370 as at 31 March 2019.
   However, during 2019-2020 the net capacity increased in IFAs, but
  - However, during 2019-2020 the net capacity increased in IFAs, but decreased in local authorities.
  - The number of children's homes in England rose during 2019 to 2020.
     There was a 7% increase in the number of homes and a 1% increase in the number of places.

National Statistics (2020) Main Findings: children's social care in England National Statistics (2020) Fostering in England 2019 to 2020: main findings



## The national picture

Most children in care are placed within 20 miles of home; 73%.

Placements inside council boundaries accounted for 58% of all placements.

GOV.UK (2020) Children looked after in England including adoptions

The independent review of children's social care has highlighted that there are not enough homes in the right places with the right support.

The independent Review of Children's Social Care (2021); Case for Change.



## **Our Sufficiency Strategy**

Southampton City Council currently commissions/provides a wide range of options as part of ensuring that it can access the full range of provision needed to meet the varying needs of the local children and young people in its care.

The Placement Commissioning Sufficiency Statement and Strategy 2020- 2025 was presented to Cabinet in March 2020.



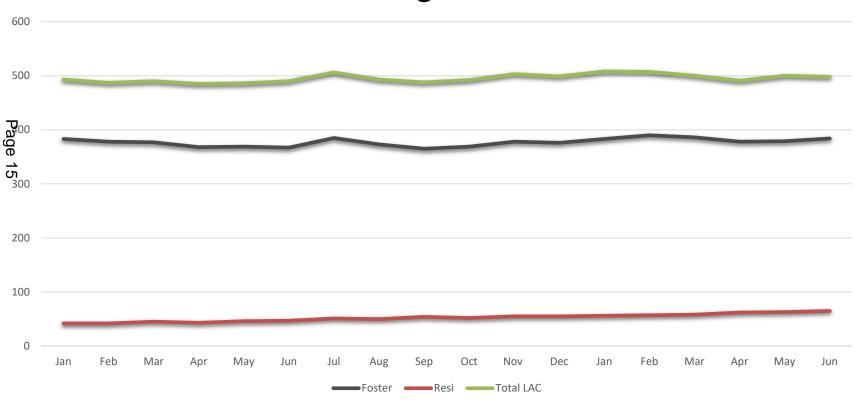
## **Our Sufficiency Strategy**

Placement Type	Commissioning arrangement	Key strategy
Foster care Page 14	<ul> <li>In house provision by SCC.</li> <li>South Central Commissioning Framework</li> <li>Spot purchases</li> </ul>	<ul> <li>Fostering Recruitment         Strategy 2020-2023</li> <li>Specialist foster care         scheme to step children         across from residential to         foster care</li> <li>Re-procurement of the         contract for IFAs</li> </ul>
Children's homes	<ul><li>South Central Commissioning Framework</li><li>Spot purchases</li></ul>	<ul> <li>Provision of up to 3 in house children's homes</li> </ul>
Supported accommodation	<ul><li>South Central Commissioning Framework</li><li>Spot purchases</li></ul>	<ul> <li>Re-procurement of the contract for IFAs</li> </ul>
Adoption	<ul> <li>Partnership arrangement via the regional adoption agency;</li> <li>Adopt South.</li> </ul>	



## How are we doing?

### Our use of fostering and residential care





- The use of foster care has fluctuated, mirroring fluctuations in the looked after cohort.
- There was a noted peak in July 2020 in the number of children in our care. Our in-house provision had the responsiveness and capacity to meet this demand.
- At this point 62% of our foster placements were with in house carers. Page 16 Research undertaken by The South East Sector Led Improvement Programme (SESLIP) identified that the average use of IFA across the SE region was 50-60%.
  - From September 2020 onwards, there is an upward trend in our looked after population this is matched by an upward trend in our use of external provision; IFAs and children's homes. This is indicative of our in house provision having reached capacity. Anecdotally, independent fostering agencies are reporting similar capacity issues.





## How are we doing?

- The use of children's homes and semi-independent accommodation has seen a steady increase since the start of the pandemic.
- Exceptionally, at the end of May 2021 three children were placed in unregistered children's homes.
- In terms of location, as of 30/6/21 35% of placements were within the city boundaries. This is below the national average of 55% (as of 31/3/20).
  - The geography of the city does impact on the availability of local placements, being a small waterfront city.
- However, 73% were within 20 miles of the city boundaries which is consistent with the national average.



## **Progress on key strategies**

#### **Fostering**

- This year 189 fostering enquiries were received, a slight decrease from the previous year.
- The pandemic had a significant impact on our recruitment activities.
- 14 mainstream foster carers were recruited this year, an increase from 10 the previous year.
  - However, recruitment is not keeping pace with retention.
  - The net loss for this year was 6 mainstream households. A slight improvement from last year.
  - Specialist fostering scheme is actively recruiting staff and carers.



#### **Local Children's Home Project**

- The property acquisition phase of the project commenced in March 2021.
- The current strategy is being review following a period of testing the open property market.

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## What did Ofsted say?

Most children who come into care are placed in suitable settings. A lack of sufficient local placements means that some matching, particularly for vulnerable adolescents, is resource-led rather than child-led, resulting in some children living in settings a long distance from Southampton.

The sufficiency of placements to meet the diverse needs of children in care remains a significant challenge

Inspection; Nov 2019



Work to increase the range and choice of placements for children in care is continuing but has not yet provided a sufficient variety of local options. This results in some children not being well matched to foster carers or residential placements that meet their needs on a sustained footing. A significant number of children are placed outside the local authority. Many children, however, do live in stable, caring foster families, and their carers reported that they had been well supported by their fostering social workers during the pandemic.

Focused visit: May 2021



The sufficiency of local placements for our children in care remains a challenge in the context of a stable cohort of looked after children and a national and local shortage of suitable placements to meet the varied and complex needs of the children we care for.



## **Next steps**



 Deliver on our fostering recruitment strategy 2020-2023; return to face-to-face recruitment events, maintain our social media presence, foster carer ambassador scheme.

• 'Fostering Friendly' project – become an accredited employer and work with others to achieve this.

 Enhance our fostering provision; step-across scheme, parent and child offer and emergency provision.

- Deliver on the provision of two in house children's homes by the end March 2022.
- Manage and develop local independent placement provision though re-tending of the commissioning framework and active engagement with providers based in the city.

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Children and Families Scrutiny Panel
Response to recommendations made by the Panel
Martin Smith - Service Manager, Permanence



## **Recommendations from the Panel**

At the October 2020 meeting, when considering the issue of the recruitment of in-house foster carers, the following recommendations were made by the Children and Families Scrutiny Panel:

- 1) That consideration be given to providing full time funding for the proposed specialist foster carers.
- proposed specialist foster carers.

  That examples of the feedback provided by enquirers who did not progress to become foster carers is circulated to the Panel.

The Panel agreed that the appropriate time to discuss the issues raised by the above recommendations was during a wider conversation on placement sufficiency.



# Providing full time funding for the proposed specialist foster carers.

#### **Context**

- Under current employment law foster carers do not qualify as either employees or workers.
- The role of foster carer is governed by statute and regulations.
- They are not salaried, but statute allows for an allowance to be offered to cover the costs of caring for a child.
- There is no requirement for fee payments to be made to foster carers to recognise their time, skills and experience.



## Providing full time funding for the proposed specialist foster carers.

- The council offers an allowance that is above the national minimum standard and competitive with neighbouring local authorities.
- A skills-based scheme is in place that offers an additional fee on top of the allowance. Page 26
  - Those foster carers recruited to our specialist fostering schemes receive the highest fee level.
  - Our current specialist schemes include the parent-child scheme and the 'step-across' scheme.
  - Both schemes offer a retainer between placements, subject to various conditions.
  - Demand is such that there is unlikely to be a significant break between placements for our specialist carers.

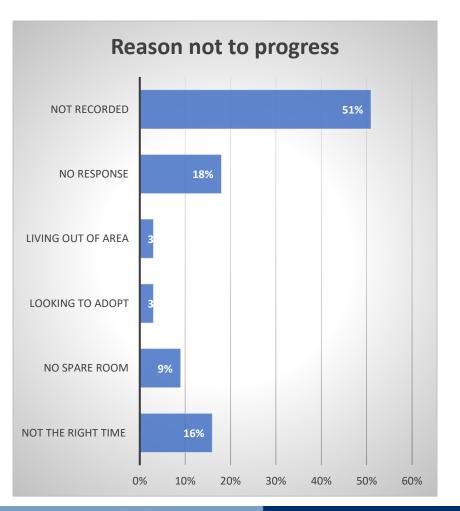


## Feedback provided by enquirers who did not progress to become foster carers

This year 189 fostering enquiries were received a slight decrease from the previous year.

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'Not the right time' and no spare room were the main reasons that enquiries did not progress.





## Feedback provided by enquirers who did not progress to become foster carers

Change in employment

Poor health

Relationship difficulties

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Moving house

Children are going up to school

Working full time

Worried about impact on own children



DECISION-MAKER:	CHILDREN AND FAMILIES SCRUTINY PANEL
SUBJECT:	REVIEW OF THRESHOLDS IN SOUTHAMPTON – THE PATHWAYS DOCUMENT
DATE OF DECISION:	22 JULY 2021
REPORT OF:	EXECUTIVE DIRECTOR CHILDREN AND LEARNING

CONTACT DETAILS				
<b>Executive Director</b>	Title	Children and Learning		
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	E-mail:	robert.henderson@southampton.gov.uk		
Author:	Title	Quality Assurance Unit Manager		
	Name:	Stuart Webb	Tel:	023 8083 4102
	E-mail:	stuart.webb@southampton.gov.uk		

#### STATEMENT OF CONFIDENTIALITY

N/A

#### **BRIEF SUMMARY**

Currently Southampton safeguarding partners work to a Continuum of Need when identifying the type of support children need. The Continuum of Need has not been reviewed for some time, despite changes in practice, policy and legislation and was not developed with partnership contributions. This paper outlines the activity that has been taken to develop the new Pathways document, attached as Appendix 1.

#### **RECOMMENDATIONS:**

(i) That the Panel note the progress made in reviewing local thresholds and the next steps in embedding the attached Pathways document.
 (ii) That the Panel is provided with a report on progress and impact as part of the 2022/23 work schedule.

#### REASONS FOR REPORT RECOMMENDATIONS

- 1. A threshold document is important:
  - To provide a pathway for children and families to promote the best outcomes for positive change
  - To ensure a Restorative approach is utilised when working with families
  - To ensure that the right service, for the right child at the right time is provided
  - Partnership ownership of the Referral pathway promotes working together across the city for the best outcomes for children and their families rather than silo working
  - Statutory Services are then more able to prioritise working with the children most at risk and in need of protection and intervention

#### **ALTERNATIVE OPTIONS CONSIDERED AND REJECTED**

2. None

#### **DETAIL** (Including consultation carried out)

- The Continuum of Need was initiated in 2016 without partnership collaboration. There are a number of reasons why a review was required:
  - The Continuum of Need has not been reviewed since that date
  - There is an absence of focus on children with disabilities and special educational needs
  - There have been numerous developments in professional understanding and practice including: Contextual Safeguarding, Harmful Practices, Prevent, Modern Day Slavery, Educational Neglect and others; which are not referenced in the Continuum of Need
  - Partners have repeatedly fed back that they find the Continuum of Need difficult to use
  - Ofsted have found that partners do not understand thresholds and that this has led to high numbers of contacts into the Multi Agency Safeguarding Hub (MASH); impacting on the capacity to focus on children most at risk and in need of protection and complex needs
  - A child's journey needs to focus on the best outcomes for them with their family in most cases and it is essential that this is right at the beginning to avoid focus on process and ultimately to ensure the appropriate interventions are provided
  - The right service for the right child at the right time will ensure that early support and intervention is provided to prevent escalation into statutory services and to reduce the unnecessary accommodation of some children.
- 4. The Pathways document has been developed through the following process:
  - A review was undertaken of the data analysis of disproportionate numbers of children open to statutory services compared to statistical neighbours informed by the Ofsted findings
  - Partners consistently fed back confusion over the Continuum of Need, which was supported by the Ofsted findings of a lack of understanding of thresholds by partners
  - Research was undertaken of other local authority threshold documents
  - Experts from the areas of SEND, children with disabilities, health, Police, Education, CAMHS, Probation, Early Help, CGL, IDVA, No Limits. Health, and YOS were consulted for their views
  - The use of links to informative documents was found to be valued by partners from other policy documents
  - Regular consultation and feedback during MASH strategic meetings informed the development of the document
  - Development of one referral form to a single Children's Resource Service for advice, Early Help and statutory services.

- 5. The next steps are:
  - Communications to be provided to all partners and Children and Learning staff
  - Training to be provided to all through the Southampton Safeguarding Children Partnership (SSCP)
  - Website to be updated and clear pathways to be documented
  - Development of Children's Resource Service with an Information and Advice Hub for partners, young people and families to contact for consultation, support and guidance, to work alongside the MASH for consideration of statutory guidance
  - Destination 22 programme to ensure services are based around the needs of the children in the city based in their communities, with cohesive partnership working to promote the best outcomes for all children.
- 6. The draft Pathways Plan is Attached as Appendix 1. The Panel are requested to note the progress made in reviewing local thresholds and the next steps in embedding the document.

# **RESOURCE IMPLICATIONS**

# Capital/Revenue

7. None at this stage

# **Property/Other**

8. None at this stage

# **LEGAL IMPLICATIONS**

# Statutory power to undertake proposals in the report:

9. S.111 Local Government Act 1972

# Other Legal Implications:

10. None

#### **RISK MANAGEMENT IMPLICATIONS**

11. The draft Pathways Plan, attached as Appendix 1, has been developed to reduce the risks outlined in this report.

# POLICY FRAMEWORK IMPLICATIONS

12. The threshold review and the Pathways document contributes to achieving the outcomes desired for children in Southampton.

The Corporate Plan 2020 sets out the following regarding the wellbeing of children in the city:

"Working with partners to deliver the ambitions set out in the five-year Health and Wellbeing Strategy, this area looks at wellbeing across the city, with a focus on adults and children's social care, education and public health. We work closely with partners to help safeguard vulnerable people across the city. We are focused on delivering strong customer experience across the Adults

and Children & Families services. We want Southampton to be a city that is recognised for its proactive approach to prevention and intervention early, as well as being a 'Child Friendly City' where children and young people have great opportunities and an aspiration to achieve. We want our residents to have the information and support they need to lead safe, active, healthy lives and to be able to live independently for longer."

KEY	DECISION?	No				
WAF	RDS/COMMUNITIES	AFFECTED:	All			
SUPPORTING			<u>DOCUMENTATION</u>			
Арр	Appendices					
1.	Draft Pathways document					

# **Documents in Members' Rooms**

1.	None					
Equ	Equality Impact Assessment					
Do the implications/subject of the report require an Equality and Safety Impact Assessment (ESIA) to be carried out?			No			
Data	Data Protection Impact Assessment					
l l	Do the implications/subject of the report require a Data Protection Impact Assessment (DPIA) to be carried out?					
	Other Background Documents Other Background documents available for inspection at:					
Title	e of Background Paper(s)	Informat Schedul	t Paragraph of the common to t	Rules / document to		
1.	None					

# Southampton's Pathways Document

Providing Advice Support and Intervention to meet Need - Right Help, Right Child, Right Time

# **Our Vision:**

'We want all children and young people in Southampton to get a good start in life, live safely, be healthy and happy and go on to have successful opportunities in adulthood'

# We Will:

- Put the child at the centre of all our decision making
- Promote a relationship-based approach with children, young people, families and partners
- Work as early as possible with children, young people, families and partners before issues escalate
- Work alongside families and communities
- Listening and building on their strengths doing it with them and not to them
- Promote a culture of strong support and challenge

#### Introduction

This document has been designed to ensure that children's needs are responded to at an appropriate level and in a timely way. This guidance should be seen as overarching guidance for the children and young people's workforce in Southampton and be used as a guide for all agencies, professionals and volunteers to consider how to best meet the additional needs and vulnerabilities of individual children and the actions required to meet those needs.

Partnership working is essential to ensuring positive outcomes for children and to reduce the need for more intensive interventions at a later stage.

The document sets out the Pathways which all practitioners must follow in identifying, raising and responding to concerns about children when coming into contact with them, or receiving information about them.

This framework follows the 'windscreen model' which illustrates when services begin from universal services through early help to statutory intervention.

The aim is that, as far as possible, children's needs should be met within universal provision, but where additional needs are identified support should be introduced at the earliest opportunity with parental (and/or child where age appropriate) consent, thus alleviating problems that have started to emerge, prevent problems from escalating and help to improve outcomes.

In some circumstances a child's and family's/ carers needs and levels of concern may not be met through coordinated early help and consequently there may be a need to provide more intensive or specialist support led by children's social care. The term 'step-up' is often used to describe this process.

The term 'step down' is used to describe children and their families/carers moving from a high level of intervention, including statutory intervention, to a lower level of coordinated support. This is important in ensuring that issues do not re-escalate.

This document is a guide for practitioners and managers who should always use their professional judgement and take into account the age of the child, context of the situation and any protective and resilience factors.

There are four levels that take into account the different stages of need and types of intervention which are available to children and their families. Children can move across the levels at different times in their lives, or at different times during agencies' contact with them. Support might be provided on a single agency basis or a multi-agency basis.

The service response is directed at reducing risk and vulnerability and meeting needs at the appropriate level of intervention. Access to effective early help and prevention services is essential to achieving this.

# <u>Level 2 – Early</u> <u>Help/Universal Plus</u>

Children whose needs cannot be solely met through universal services and require additional support. Early Help Assessment is needed and a

#### Level 3 – Intensive Early Help Targeted

Increasing level of complex and/or multiple unmet needs where co-ordinate support is required to prevent concerns escalating. A multi-agency team around the family will identify a lead professional and develop with the family a robust plan to prevent escalation of concerns. Early Help Assessment needed with consideration of Family Group Conference.

# Level 1 – Universal

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Children make good overall progress through appropriate universal services. No additional or unmet need or there are needs which can/has been met by universal services.

# If Unsure - Consult

Universal Services are available to families at any stage and that successful partnership working is facilitated by working together with families with transparent communication.

All Partners working with children, young people and their families will offer support as soon as we are aware of any additional needs. We will always seek to work together to provide support for children, young people and their families at the lowest level possible in accordance with their needs.

We collectively agree to work with children and families to prevent their needs escalating to a higher level and we will actively seek not to refer to services at a higher level unless and until we have done everything possible to meet their needs at the current level.

# <u>Level 4 – Specialist/Acute</u>

Children who have or are likely to experienced significant harm or have significant welfare concerns requiring specialist and high-level interventions involving social workers and statutory processes.

# Children's Resource Service - Advice and Guidance Hub

Professionals contacting the service will be provided telephone information, advice and guidance on thresholds, making a referral, other support services in the community, and/or organising a professionals meeting.

Parents/ carers contacting the CRS for support and advice will also be provided with telephone information, advice and guidance on other support services in the community and accessing Early Help Services.

A single 'Request for a Service' form and contact number is available for all referrals and enquiries for unallocated cases into Children's Services and/or Early Help, strengthening the consent arrangements where it does not put a child/ young person at immediate risk of harm and reducing the need for follow up.

# Children's Resource Service - Multi-agency Safeguarding Hub (MASH)

# **MASH Referral and Decision-Making Process**

The goal of a MASH (Multi Agency Safeguarding Hub) is to improve safeguarding and promote the welfare of children and young people through the timely exchange of proportionate and accurate information following an enquiry by any professional or member of the public.

The MASH environment is unique in the way it enables multiple sources of information to be considered and shared in a secure and safe location. Each decision to request and share information with individual organisations needs to be considered in terms of whether it is necessary and proportionate.

The decision to request and share information should not be an assumed process; but rather a deliberate response to the issues and concerns raised. Information sharing in these circumstances is governed by a legal framework that helps to balance the right of the individual to privacy with the need to protect children and young people at risk or who may be in need of support.

The professional holding the information must always consider relevance and proportionality before releasing information to the MASH. All practitioners and managers who work with families and children and who need to make decisions about sharing personal and confidential information on a case-by-case basis should be guided by the relevant legislation.

Upon <u>referral</u>, needs will be identified, and the child or family will be referred or signposted to the relevant contact or information if required. This will either be to an appropriate resource, or for further information gathering with partner agencies within the team.

If the referrer is a professional involved with the family, they will be informed of the decision to progress through the multi-agency team within 24 hours.

Decisions and timescales depend on statutory need, child protection or early help. Vulnerable children are responded to by the most appropriate professional.

The range of concerns shared are prioritised using a RAG (red, amber, green) system.

#### Red

If contact has been made with concerns that a child is considered to be at immediate risk of harm, the police should be contacted on 999. The emergency will be dealt with by the police.

In such cases, once the concerns have been shared with the MASH team, they will be discussed as a priority with police and health colleagues within two hours. An informed decision will be made as to the multi-agency plan to safeguard the child.

If there are concerns that a child may be suffering or has suffered child abuse, but they are not at immediate risk of harm, the MASH team will gather information and hold a strategy discussion within six hours.

Consent from an adult with parental responsibility should be considered, however this can be dispensed with initially if by alerting them to the concerns may place the child at greater risk of harm.

#### **Amber**

If the issues shared are complex and there are concerns that a statutory child in need assessment is required, consent is required. This consent is needed from an adult with parental responsibility to share information from each agency to inform decision making. The assessment is to understand what life is like for the child and which services would support the family to improve the situation.

The team will make this decision within 24 hours.

#### Green

If the MASH managers have made the decision that the issues shared about a child do not meet the threshold for the multi-agency information gathering in the team, the referrer will be advised of which services need to be involved.

Outcomes following a referral

As described above, the following decisions can be made depending on the information gathered:

- A strategy discussion held with the police, health and children's services to determine if a S47 enquiry under the Children Act is required to protect the child from harm. This can be single agency to Children's Services or jointly with the police. This will be passed swiftly to the assessment team
- A S17 child in need assessment is recommended and transferred to the assessment team
- Information will be passed to the EH Services.
- If the concerns are unproven, universal services will continue their involvement with the child and their family

#### Contact details

If you have concerns about a child who is at risk of harm, please phone to discuss as soon as possible and follow up with a referral you can <u>make a referral online</u>. If you have any questions or wish to discuss your concerns with a member of the team first, please contact us at any time.

Telephone number for members of the public: 023 8083 2300

Telephone number for professionals: 023 8083 2300

Email address: MASH@southampton.gov.uk

# **Early Help and Prevention**

"Providing early help is more effective in promoting the welfare of children than reacting later. Early help means providing support as soon as a problem emerges, at any point in a child's life, from the foundation years through to the teenage years. Early help can also prevent further problems arising; for example, if it is provided as part of a support plan where a child has returned home to their family from care, or in families where there are emerging parental mental health issues or drug and alcohol misuse."

# **Working Together to Safeguard Children 2018**

The Early Help offer is Southampton is an integrated offer and includes the following professionals:

- Family Support Workers
- Social Workers
- Health Visitors
- School Nurses
- Education Welfare Officers
- Family Engagement Workers
- Youth Engagement Worker
- Play Workers
- Youth Offending Service
- Voluntary services
- Commissioned services (this is not an exhaustive list)

The Early Help offer in Southampton ensures there is a whole family approach from birth to 19 years with the child being the central focus. Early Help supports families from the earliest opportunity, to ensure children gain the best start in life.

An Early Help assessment will enable the lead professional and family to discuss what the areas of support the family would like. The assessment can be completed by anyone involved with the family.

**A Team Around the Family** (TAF) meeting offers the opportunity for the family and other people involved with the family to come together and discuss how support can be offered.

An Early Help Plan (EHP) is a way of coordinating the support offered to the family. This can be reviewed every 6 weeks to be able to see the progress made

**Family Group Conference** (FGC) enable the family as a whole to come together and identify ways of supporting the family to reach a positive outcome.

Level 2 / Universal Plus – This is where a family will have some unmet needs and will likely have one professional supporting them. An Early Help assessment will be completed to ensure there are no other support areas in the child's life. The outcome from this may be that a lead professional such as school or Health Visitor will support the family by creating a plan of support.

**Level 3** / Universal Partnership Plus – The children would benefit from a more targeted coordinated Early Help offer as it has been identified the family will have more complex needs. An Early Help assessment will be completed to ensure the support plan reflects the level of support

required. A team around the family meeting will be convened to ensure there is multi agency support in place for the family. An Early help plan will be completed to ensure the child and family's needs are supported. Thought will be given to a Family Group Conference to enable the family to create a longer-term support plan.

The Southampton Early Help offer supports with the following areas:

# **Employment and Progress to work**

Addresses unemployment, debt and meeting basic needs. We will work with the family to help them to develop skills and help move them into work and off of 'out of work' benefits. We will also help them access support to manage debt, and if necessary, help them access support to meet basic needs. We have two Employment Advisors seconded from the Department for Work and Pensions (DWP) to work with families who are looking for employment.

#### **Education and Attendance**

All children in the family need to be attending school regularly (defined by the DfE as at least 90% of all available sessions).

#### **Domestic Abuse**

We will work with the family, together with other specialist agencies, where domestic abuse is identified as an issue for the family. The Domestic Abuse Act 2021, formally recognises children affected by domestic abuse as victims in their own right.

Where risk remains a concern and if, following completion of a DASH risk assessment it is identified that the risk to the non-abusive parent and child(ren) is high, a referral **must** be sent to the MASH using the High-Risk Domestic Abuse (HRDA) referral form <u>High Risk Domestic Abuse Referral Form (southampton.gov.uk)</u>

This process is a collaboration of; Children's Social Care, IDVA, Police, SCC housing dept, Adults Social Care, Mental Health Service, and Substance Misuse. Relevant risk information is shared, (which includes the victims voice), safety plans and agency actions are agreed (which includes support / action for perpetrators) with the intention of securing safety.

Contact PIPPA (023 8079 1791) for help and support with DASH assessment / referrals to specialist services.

Guidance for High risk DA referral form: <a href="http://www.southampton.gov.uk/health-social-care/domestic-abuse/information-for-professionals/guidance-and-documents.aspx">http://www.southampton.gov.uk/health-social-care/domestic-abuse/information-for-professionals/guidance-and-documents.aspx</a>

# Crime and anti-social behaviour (ASB)

We will work with the family to reduce or eliminate crime and anti-social behaviour.

# Family health

We will work with families to ensure that everyone is registered with a GP, and that any clients with mental health, drugs or alcohol issues are accessing treatment and support. We will also ensure that pregnant teenagers and young mothers are accessing appropriate support.

# Support for Children with Disabilities and/or Complex Health Issues

Children with a disability and/or health issue should not be classified according to this but assessed according to the impact it has on their quality of life and that of their family. The majority of children in Southampton who require services will receive them through universal provision within their local community, and the same should be true for children with a disability and/or health need.

Only when it has been identified, via the Early Help Assessment that the impact of the child's disability or health issue on their life is too great to be addressed by universal provision, should a referral for a social work assessment be made to the MASH.

Children with minimal additional needs - These children can be supported by universal services. They may have one or two additional needs which can be met by one agency or by a referral to one other agency. Services available might include:

Health Visitors/School nurses;
 Schools/ Colleges and after school activities;
 Early Years Settings;
 Youth clubs;
 Voluntary Organisations;
 Benefits agencies;
 Housing agencies;
 Library and Information Services

Children with additional needs -

These children are likely to have a number of additional needs and are likely to require a lead professional, an early help assessment and coordinated support services of more than one agency.

Services available (as well as those above) might include:

- Speech and language
- Physiotherapy
- Occupational Therapy
- Paediatrician
- Childminding
- Targeted Level
- 1 Short Breaks

Children with multiple and/or complex needs -

These children require intensive help and support to meet their needs. The majority of children will have already been receiving support from a team around the child or have been stepped down following a S.17 social care assessment. The provision of targeted support and in some cases community and sessional support is essential for parents and carers to meet the significant needs of the disabled child / young person. Services available (as well as those above) might include:

- Direct payments and sessional support up to 500 hours per year
- ECHP planning and access to Targeted 2 Short Breaks
- Family support through Early Help and Prevention Team
- Transition planning Adult
- Services as appropriate

Children with complex, prolonged and critical needs -

These children require total or substantial support in relation to basis care functions, (e.g. the required level of parental care cannot be provided without the provision of substantial additional specialist services). There is a need for a statutory assessment by the Children's Services. Services available (as well as those above) might include:

- Direct payments in excess of 500 hours per year
- Overnight Short Breaks
- Residential Placements
- Foster Care/Family Link
- Transition planning into Adult Services

# **Indicators**

Level 1: Children and Young People with Universal Needs Children and young people at this level are achieving expected outcomes and families having all their needs met by universal services and are thriving.

# **Child's Developmental Needs:**

#### Health

Health needs are being met by universal services

- Appropriate weight and height/meeting developmental milestones
   including speech and language
- Emotional health and wellbeing needs are being met
- Pre-natal health needs are being met
- Up to date immunisations and developmental checks
- Adequate nutritious diet
- Regular dental checks
- Accessing optical care
- No misuse of substances
- Sexual activity/behaviour appropriate to age

# **Emotional and behavioural development**

- Positive early attachments
- Growing levels of competencies in practical and emotional skills feelings and actions demonstrate appropriate responses
- Sexual behaviour appropriate for age and developmental stage
- Confident in social situations
- Able to adapt to change
- Able to demonstrate empathy

### **Education and Learning**

- Achieving key stages and full potential
- Good attendance at nursery/school/college/ training
- Demonstrates a range of skills/interests
- No barriers to learning
- Access to play/books
- Enjoys participating in educational activities/ schools
- Sound home/school link
- Planned progression beyond statutory education
- Age appropriate communication

### Identity

- Demonstrates feelings of belonging and acceptance
- Positive sense of self and abilities
- Has an ability to express needs verbally and non-verbally

# **Family and Social Relationships**

- Stable and affectionate relationships with caregivers
- Appropriate relationships with siblings
- Positive relationship with peers

#### **Self-Care Skills**

Age appropriate independent living skills

# **Social presentation**

- Appropriate dress for different settings
- Good levels of self-care/personal hygiene
- Involved in leisure and other social activity

#### **Parents and Carers:**

#### Basic Care, safety and protection

- Child's physical needs are met (food, drink, clothing, medical and dental)
- Carers able to protect children from danger or harm

# **Guidance, boundaries & stimulation**

- Guidance and boundaries are given that develops appropriate model of value, behaviour and conscience.
- Carers support development through interaction and play to facilitate cognitive development

#### **Emotional Warmth**

- The child is shown warm regard, praise and encouragement
- The child has secure relationships which provide consistency of warmth over time
- There may be low level post-natal depression

# **Family and Environmental Factors:**

# **Family history and Functioning**

- Good supportive relationship within family/ carers (including with separated parents and in times of crisis)
- Good sense of 'family' outside of smaller family unit

# Housing, employment & finance

- Accommodation has basic amenities/ appropriate facilities
- Appropriate levels of hygiene/cleanliness are maintained
- Families affected by low income or unemployment

# Family's Social Integration

- The family have social and friendship networks
- Community Resources
- Appropriate access to universal and community resources
- Community is generally supportive
- Positive Activities are available

Level 2: Early Help Children and Young People with additional needs Children, young people and families/ carers who have additional unmet needs, who may need extra support to thrive

**Child's Developmental Needs:** 

#### Health

- Slow to reach developmental milestones
- Additional health needs
- Missing health checks/routine appointments/immunisations
- Persistent minor health problems
- Babies with low birth weight due to prematurity/ medical causes/ faltering growth/ poor feeding
- Pre-natal health needs
- Issues of poor bonding/attachment
- Minor concerns re healthy weight /diet/ dental health /hygiene/or clothing
- Disability requiring support services
- Concerns about developmental status i.e. speech and language problems
- Signs of deteriorating mental health of child including self-harm
- Starting to have sex (under 16 years)
- Not registered with a GP/dentist

#### **Education and Learning**

- Is regularly late for school/occasional truanting or significant nonattendance/parents condone absences
- Escalating behaviour leading to a risk of exclusion
- Experiences frequent moves between schools
- Not reaching educational potential or reaching expected levels of attainment
- Needs some additional support in school
- Identified language and communication difficulties
- Few opportunities for play/socialisation

#### **Emotional and behavioural development**

- Low level mental health or emotional issues requiring intervention
- Is withdrawn/unwilling to engage
- Development is compromised by parenting
- Some concern about substance misuse
- Involved in behaviour that is seen as anti-social
- Poor self-esteem

#### **Family and Social Relationships**

- Some support from family and friends
- Some difficulties sustaining relationships
- Undertaking some caring responsibilities
- Child of a teenage parent
- Low parental aspirations
- Aggressive behaviours in the home towards / from a sibling

#### **Self-Care Skills**

- Not always adequate self-care poor hygiene
- Slow to develop age appropriate self-care skills
- Overprotected/unable to develop independence

#### Identity

- Some insecurities around identity/low self-esteem
- Lack of positive role models
- May experience bullying around perceived difference/ bully others, including online
   Helping Kids Deal with Bullying & Cyberbullying | NSPCC
- Disability limits self-care
- A victim of crime
- Starting to come to the attention of the police due to lower level criminal activity

# **Social presentation**

- Can be over-friendly or withdrawn with strangers
- Personal hygiene starting to be a problem

#### Parents and Carers:

#### Basic Care, safety and protection

- Basic care not consistently provided e.g. non-treatment of minor health problems
- Parents struggle without support or adequate resources e.g. as a result of mental health/ learning disabilities.
- Professionals beginning to have some concerns about substance misuse (alcohol and drugs) by adults within the home
- Parent or carer may be experiencing parenting difficulties due to mental or physical health difficulties/post-natal depression
- Some exposure to dangerous situations in home/community
- Teenage parents /young, inexperienced parents
- Inappropriate expectations of child/young person for age/ability
- A&E attendance giving cause for concern including unexplained injury or delay in seeking medical attention

# **Guidance, boundaries & stimulation**

- May have a number of different carers
- Parent/carer offers inconsistent boundaries
- e.g. not providing good guidance about inappropriate relationships formed, such as via the internet.
- Can behave in an anti-social way
- Child/young person spends a lot of time alone
- Inconsistent responses to child by parent
- Parents struggle to have their own emotional needs met
- Lack of stimulation impacting on development

#### **Emotional Warmth**

- Inconsistent parenting but development not significantly impaired
- Post-natal depression affecting parenting ability
- Child / young person perceived to be a problem by parents or carers/experiencing criticism and a lack of warmth

# **Family and Environmental Factors:**

# **Family history and Functioning**

- Child or young person's relationship with family members/carers not always stable
- Parents have relationship difficulties which affect the child/acrimonious separation or divorce that impacts on child Home | Refuge National Domestic Abuse Helpline (nationaldahelpline.org.uk)
- Domestic abuse with separated parents with some support services in place
- Experienced loss of a significant adult/child

# Family's Social Integration

- Family may be new to area
- Some social exclusion problems
- Victimisation by others

# Housing, employment & finance

- Families affected by low income or unemployment
- Parents have limited formal education
- Adequate/poor housing
- Family seeking asylum or refugees

Level 3: Targeted Early Help Children, young people and families/ carers struggling to cope, presenting with significant concern and living in circumstances where the worries, concerns, behaviours or conflicts are frequent, are multiple and over an extended period or are continuous AND need a more targeted an coordinated approach

# **Child's Developmental Needs:**

#### Health

- Chronic/recurring health problems with missed appointments, routine and non-routine
- Delay in achieving physical and other developmental milestones, raising concerns
- Poor diet despite intervention/ dental decay/poor hygiene
- Child/young person has chronic health problems or high-level disability which with extra support may/may not be maintained in a mainstream setting
- Learning significantly affected by health problems
- Overweight/underweight/enuresis/encopresis/ faltering growth requiring support/ intervention
- Frequent/ Multiple GP's, out of hours, A&E attendance causing concern including accidental injury, unexplained injury or delay in seeking medical attention

### **Education and Learning**

- Child/young person not in education, in conjunction with concerns for child's safety
- Chronic non-attendance/truanting/authorised absences/fixed term exclusions/punctuality issues
- Identified learning needs and may have an Education Health and Care Plan (EHCP)
- Not achieving key stage benchmarks
- No interests/skills displayed

# **Emotional and behavioural development**

- Difficulty coping with anger, frustration and upset
- Physical and emotional development raising significant concerns nolimitshelp.org.uk
- Significant attachment difficulties e.g. child adopted from care
- Early onset of sexual activity (13 –14)

# Identity

- Subject to discrimination
- Significantly low self-esteem
- Extremist views
- Gang membership
- Criminal exploitation and gangs | NSPCC

- Some concerns around mental health, including self-harm, eating disorders and suicidal thoughts which are having an ongoing impact on engagement in daily activities
- Hazardous substance misuse (including alcohol)
- Persistent bullying behaviour
- Inappropriate sexual behaviour including online and via social media
- Offending or regular anti-social behaviour
- Animal abuse the intentional harm of an animal including but not limited to wilful neglect, inflicting injury or pain or distress or malicious killing of animals

- Missing episodes with consideration to 3 in 90 days
- Increasing number of reports of involvement in criminal activity (CCE)
- Medium risk CERAF with concerns around CSE / CCE
- Concerns around possible contact with those involved in county lines activity

#### **Family and Social Relationships**

- Peers also involved in challenging behaviour and possible exploitation concerns
- Regularly needed to care for another family member
- Involved in conflicts with peers/siblings
- Adoptive family under severe stress

#### **Self-Care Skills**

- Poor self-care for age hygiene
- Overly self-reliant for their age

### Social presentation

- Clothing regularly unwashed
- Hygiene problems
- Is provocative in behaviour/ appearance

# **Parents and Carers:**

# **Basic Care, safety and protection**

- Parent is struggling to provide adequate care
- Parental learning disability, parental substance misuse (including alcohol) or mental health impacting on parent's ability to meet the needs of the child
   CGL Southampton Drug and Alcohol Support Services

#### **Emotional Warmth**

- Child/young person often scapegoated
- Child/young person d is rarely comforted when distressed
- Receives inconsistent care

- Previously subject to child protection plan
- Teenage parent(s)
- Either or both previously looked after

#### **Guidance, boundaries & stimulation**

- Few age appropriate toys in the house
- Parent rarely referees disputes between siblings
- Inconsistent parenting impairing emotional or behavioural development

Has no other positive relationships

# **Family and Environmental Factors:**

#### **Family history and Functioning**

Evidence of domestic violence

<u>Southampton Women's Aid | CONTACT</u> (southamptonwomensaid.org.uk)

pippa@southampton.gov.uk www.hamptontrust.org.uk

- Acrimonious divorce/separation
- Family members have physical and mental health difficulties
- Parental involvement in crime
- Evidence of problematic substance misuse (including alcohol)
   CGL Southampton Drug and Alcohol Support Services
- Violence and aggression from child/young person to parent / carer

#### Housing, employment & finance

- Overcrowding, temporary accommodation, homelessness, including sofa-surfing, unemployment
- Poorly maintained bed/bedding
- Serious debts/poverty impacting on ability to care for child/young person

### Family's Social Integration

- Family socially excluded
- Escalating victimisation

### **Community resources**

 Parents /carers socially excluded with access problems to local facilities and targeted services Level 4: Protection A child or young person living in circumstances where there is a significant risk of abuse or neglect, where the young person themselves may pose a risk of serious harm to others or where there are complex needs in relation to disability

# **Child's Developmental Needs:**

#### Health

- Child/young person who is consistently failing to reach their developmental milestones and concerns exist about their parent's ability to care for them
- Growth falling 2 centile ranges or more, without an apparent health problem
- Learning affected by significant health problems
- Experiencing chronic ill health or diagnosed with a life-limiting illness
- 'Un-safe'/ inappropriate sexual behaviour/ risk of sexual exploitation
- Problematic substance misuse (drugs including Cannabis and alcohol)/ links to risk taking behaviour
   DASH (Drug Alcohol Support and Health)
- Failure to access medical attention for health chronic/ reoccurring health needs, including dental putting child/young person at risk of significant harm
- Concerns about diet/ hygiene/ clothing
- Conception to a child under 16 years old/ concerns about parenting capacity
- Disability requiring significant support services to be maintained in mainstream provision

#### **Education and Learning**

- Short-term exclusion, persistent truanting or poor school attendance
- Previous permanent exclusions
- Persistent 'Not in Education, Employment or Training (NEET)/ this could be as a result of compromised parenting
- Alienates self from school and peers through extremes of behaviour
- No, or acrimonious home/ school links
- Has an Education Health and Care Plan?

- Children with challenging behaviours likely to require physical restraint and exhibiting behaviours regularly harmful to self and others
- Children who require night time supervision and/or care such as intubation, medication
- The required level of parental care cannot be provided without the provision of substantial additional specialist services that may include overnight short-term breaks
- Child/young Person has experienced or is at risk of Female Genital Mutilation
  - Female Genital Mutilation Prevent & Protect | NSPCC |
- Chronic recurring health problem with missed appointments (routine and non-routine resulting in significant impact pm child's health)

# **Emotional and behavioural development**

- Alienates self from school and peers through extremes of behaviour
- Physical/emotional development raising significant concerns
- Complex mental health needs, with plans and behaviours that significantly impact upon safety and engagement with daily activities and there is failure to engage with services/ self-harming
- Difficulty coping with emotions/unable to display empathy unable to connect cause and effect of own actions
- Sexual activity (under 13)
- Offending/prosecution for offences
- Puts self or others in danger
- Concerns around mental health including escalating self-harm, eating disorder and suicidal ideation requiring Tier 4 CAMHS intervention.

# Identity

- Subject to persistent discrimination
- Is socially isolated and lacks appropriate role models
- Child/young person is unaccompanied and at risk of / has experienced trafficking
   What You Need to Know About Child Trafficking | NSPCC
- Child/young person missing from home for over 72 hours
- Missing episodes with consideration to 3 in 90 days
- Medium to High risk CERAF with concerns around CSE and CCE High risk should always result strategy discussion
- <u>Child Exploitation Southampton Safeguarding Children</u>
   Partnership (southamptonscp.org.uk)
- Child Sexual Exploitation & How to Keep Your Child Safe | NSPCC
- Child/Young person is at risk of radicalisation (PREVENT)
- Prevent (southampton.gov.uk)
- Concerns re exposure to or at risk of Modern-Day Slavery

# **Family and Social Relationships**

- Peers also involved in challenging behaviour
- Regularly needed to care for another family member
- Involved in conflicts with peers/siblings
- Gang membership
- Adoptive family under severe stress

#### **Self-Care Skills**

- Poor self-care for age hygiene
- Overly self-reliant for their age

#### **Social presentation**

- Clothing regularly unwashed
- Hygiene problems
- Is provocative in behaviour/appearance

#### **Parents and Carers:**

#### Basic Care, safety and protection

- Parent/carer is struggling, is unable to or refuses to provide adequate and consistent care
   Neglect is also Child Abuse: Know All About It | NSPCC
- Child or young person receives erratic or inconsistent care
- Physical including non-accidental injuries
- Bruising to nonmobile baby (link to protocol)
- Sexual abuse
- Identifying Child Physical Abuse & How to Prevent It | NSPCC
- Preventing Child Sexual Abuse & Keeping Children Safe | NSPCC
- Significant concern about prospective parenting ability, resulting in the need for a pre-birth assessment
- Parents learning disability, substance misuse (alcohol and drugs including cannabis) or mental health negatively impacts on parent's ability to meet the needs of the child <u>CGL Southampton Drug and Alcohol Support Services</u>

#### **Emotional Warmth**

- Child/young person has multiple carers but no significant relationship to any of them/ receives inconsistent care
- Child/young person receives little stimulation/ negligible interaction
- Child/young person is scapegoated
- Child/young person is rarely comforted when distressed/lack of empathy
- Child/young person is under significant pressure to achieve/aspire/experiencing high criticism

- Fabrication or induction of illness (likely to cause significant harm) to a child by a parent or carer
- Signs Fabricated or induced illness NHS (www.nhs.uk)
- Level of supervision does not provide sufficient protection for a child
- Failure to recognise the risks of frequent missing episodes lack of reporting to appropriate agencies
- Either or both parents/carers have previously been looked after and their parenting ability is compromised
- Private fostering/young carer
- Teenage pregnancy or inexperienced young parent or carer with additional concerns
- Parental capacity to manage risk in relation to complex mental health needs and self-harming behaviours
- Homelessness for young person

# Guidance, boundaries & stimulation

- Parents struggle to set boundaries/act as good role models
- Child or young person's behaviour out of control
- Child or young person is regularly beyond control of parent or carer
- Parenting impairing emotional or appropriate behavioural development of child / young person

# **Family and Environmental Factors:**

# **Family history and Functioning**

 Parents or carers are experiencing, on an on-going basis, one or more of the following

# Housing, employment & finance

- Physical accommodation places child in danger
- No fixed abode or homeless (including sofa surfing)

- problems significantly affecting their parenting: mental ill-health, substance dependency or domestic abuse/ potential honour-based violence/forced marriage
  - High Risk Domestic Abuse Referral Form (southampton.gov.uk)
    Independent Domestic Violence Advocacy Service
    Honour-based abuse (southampton.gov.uk)
- Parental involvement in crime
- Family characterised by conflict and serious chronic relationship problems
- Parents or carers persistently avoid contact/do not engage with childcare professionals
- Intra familial sexual abuse
- Significant violence perpetrated by child on parent / carer

- Chronic unemployment due to significant lack of basic skills or long-standing issues such as substance misuse/offending, etc.
- Extreme poverty/debt impacting on ability to care for child

# **Family's Social Integration**

Family chronically socially excluded

#### **Community resources**

 Poor quality services with long term difficulties with accessing target populations

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# Agenda Item 8

DECISION-MAKER:	CHILDREN AND FAMILIES SCRUITINY PANEL
SUBJECT:	CAREDIRECTOR IMPLEMENTATION FOR CHILDREN AND LEARNING
DATE OF DECISION:	22 JULY 2021
REPORT OF:	EXECUTIVE DIRECTOR – CHILDREN AND LEARNING

CONTACT DETAILS						
<b>Executive Director</b>	Title	Executive Director Wellbeing (Children and Learning)				
	Name:	Rob Henderson         Tel:         023 8083 4899				
	E-mail:	Rob.Henderson@southampton.gov.uk				
Author:	Title	Programme Manager				
	Name:	Alison Milton         Tel:         023 8083 2691				
	E-mail:	Alison.milton@southampton.gov.uk				

# STATEMENT OF CONFIDENTIALITY

None

# **BRIEF SUMMARY**

The Client Case Management (CCM) Programme concerns the procurement and implementation of a new social care IT system (CareDirector v6), for both Adult and Children's and Learning Services. CareDirector will be replacing Paris, the incumbent system, which has been in place since 2003. 18 years on from implementation, Paris has become difficult to use, make changes to and to extract data from.

Go live is targeted at October 2021. The programme sponsor is Rob Henderson Executive Director Wellbeing (Children & Learning).

The vision for the programme is to "transform the way we record, manage and use information to help us provide the best care for the people in our city who need it".

# **RECOMMENDATIONS:**

(i) That the Panel note the forthcoming implementation of CareDirector v6 and the progress made to date.

# **REASONS FOR REPORT RECOMMENDATIONS**

1. To enable scrutiny of the implementation of CareDirector.

# **ALTERNATIVE OPTIONS CONSIDERED AND REJECTED**

2. Not applicable. Item added to agenda at request of the Panel

#### **DETAIL (Including consultation carried out)**

The programme consists of workstreams (projects) to deliver the system design and build for Children's, Adults and Finance elements and is supported by workstreams dedicated to Testing, Business Change, Training, Migration, Reporting, Infrastructure, Configuration and Interfaces.

# 4. Programme Benefits include: Replacement of Paris with a modern, robust and user-friendly social care solution built to support services in meeting the needs of service Streamlining of processes across Adults, Children's and Learning and Integrated Commissioning Unit, increasing efficiency and productivity Core system integrations, including Business World and Health Ability to improve the way we manage suppliers and measure performance Significant data management improvements and cleanse of old/duplicate/redundant data. 5. Governance: The CCM Programme Board has delegated decision-making authority from Executive Management Board/Full Council (within tolerances). Robert Henderson, project sponsor (Senior Responsible Owner) has delegated authority to give a Go/No Go decision at the point of Go Live. 6. Progress: Processes across Adults and Children's and Finance have been documented and streamlined. A portal to enable access to the Paris historical record has been built and integrated to CareDirector. Eight data migrations have been executed, meaning client data, teams, providers and financial assessments have been successfully mapped and migrated from Paris to CareDirector. 20/21 Statutory returns are being run from the CareDirector reporting infrastructure. Development of Power BI capability gives social care teams self-serve capability that will transform our ability to view and analyse performance data. Go-live release (v6.2.1) has been received and installed. 7. Key milestones: User Acceptance Testing begins mid-July 2021. Training begins 6 September 2021. Go live scheduled for 31 October 2021. 8. Future phases: Phase 1 will deliver the new system with streamlined processes, significant improvements to reports and data, key integrations, workflow and workload management. Phase 2 is at the concept stage and will build on the foundation of Phase 1. Possible Children and Learning candidates for Phase 2

# **RESOURCE IMPLICATIONS**

# Capital/Revenue

finance functions to include children's payments.

include further changes to remain aligned with the transformation programme, improved group working, field work and expansion of the

9.	A budget update and request for sufficient funding to complete the project was provided to Full Council February 2021 (item 56, report 2.1 (a). The programme remains within its allocated capital and revenue budgets, which are delegated to the SRO to manage and for which he is accountable to Council.				
10.	Remaining capital budget is £1.28M and is expected to be spent as follows:				
	£402,933 Internal resources (permanent staff cross-charged to the				
	programme) • £493,503 Temporary resources				
	• £253,300 Supplier costs				
Propert	y/Other				
11.	None				
LEGAL	IMPLICATIONS				
Statuto	ry power to undertake proposals in the report:				
12.	The duty for local authorities to undertake health scrutiny is set out in				
	National Health Service Act 2006. The duty to undertake overview and scrutiny is set out in Part 1A Section 9 of the Local Government Act 2000				
Other L	egal Implications:				
13.	None				
RISK M	ANAGEMENT IMPLICATIONS				
14.	Risk management and governance process are in place. A full risk report including mitigation strategies is provided to the Programme Board monthly and strategies to manage key risks and issues are discussed and agreed.				
POLICY	FRAMEWORK IMPLICATIONS				
15.	This programme supports corporate wellbeing objectives by delivering a modern, robust, user-friendly social care solution and reporting infrastructure designed to support the council in meeting the needs of service users.				
KEY DE	CISION? No				
WARDS	S/COMMUNITIES AFFECTED: All				
	SUPPORTING DOCUMENTATION				
Append	lices				
1.	None				
Docum	ents In Members' Rooms				
1.	None				
Equalit	y Impact Assessment				
Do the i	Do the implications/subject of the report require an Equality and Yes				

Safety Impact Assessment (ESIA) to be carried out?

**Data Protection Impact Assessment** 

Do the implications/subject of the report require a Data Protection Impact Assessment (DPIA) to be carried out?			Protection Impact	Yes
Other Background Documents Other Background documents available for inspection at:				
Title of Background Paper(s)		Informati Schedul	t Paragraph of the tion Procedure Ro le 12A allowing de npt/Confidential (i	ules / ocument to
1.	None	1		

# Agenda Item 9

DECISION-MAKER:	CHILDREN AND FAMILIES SCRUTINY PANEL
SUBJECT:	CHILDREN AND LEARNING - PERFORMANCE
DATE OF DECISION:	22 JULY 2021
REPORT OF:	SERVICE DIRECTOR – LEGAL AND BUSINESS OPERATIONS

CONTACT DETAILS						
<b>Executive Director</b>	Title	Deputy Chief Executive				
	Name:	Mike Harris         Tel:         023 8083 2882				
	E-mail	Mike.harris@southampton.gov.uk				
Author:	Title	Scrutiny Manager				
	Name:	e: Mark Pirnie Tel: 023 8083 3886				
	E-mail	il Mark.pirnie@southampton.gov.uk				

#### STATEMENT OF CONFIDENTIALITY

None

#### **BRIEF SUMMARY**

Attached as Appendix 1 are the key datasets for Children's Services and Learning up to the end of June 2021. At the meeting the Cabinet Member and senior managers from Children's Services and Learning will be providing the Panel with an overview of performance across the division since May 2021.

# **RECOMMENDATIONS:**

(i) That the Panel consider and challenge the performance of Children's Services and Learning in Southampton.

#### REASONS FOR REPORT RECOMMENDATIONS

1. To enable effective scrutiny of Children's Services and Learning in Southampton.

# **ALTERNATIVE OPTIONS CONSIDERED AND REJECTED**

2. None.

# **DETAIL (Including consultation carried out)**

- 3. To enable the Panel to undertake their role effectively members will be provided with performance information on a monthly basis and an explanation of the measures.
- 4. Performance information up to 30 June 2021 is attached as Appendix 1. An explanation of the significant variations in performance will be provided at the meeting.
- 5. The Cabinet Member for Children's Social Care, and representatives from the Children's Services and Learning Senior Management Team, have been invited to attend the meeting to provide the performance overview.

# **RESOURCE IMPLICATIONS**

# Capital/Revenue/Property/Other

6. None directly as a result of this report.

# **LEGAL IMPLICATIONS**

# Statutory power to undertake proposals in the report:

7. The duty to undertake overview and scrutiny is set out in Part 1A Section 9 of the Local Government Act 2000.

# Other Legal Implications:

8. None

#### **RISK MANAGEMENT IMPLICATIONS**

9. None

# POLICY FRAMEWORK IMPLICATIONS

10. The Corporate Plan 2020 sets out the following regarding the wellbeing of children in the city: "Working with partners to deliver the ambitions set out in the five-year Health and Wellbeing Strategy, this area looks at wellbeing across the city, with a focus on adults and children's social care, education and public health. We work closely with partners to help safeguard vulnerable people across the city. We are focused on delivering strong customer experience across the Adults and Children & Families services. We want Southampton to be a city that is recognised for its proactive approach to preventing problems and intervening early, as well being a 'Child Friendly City' where children and young people have great opportunities and an aspiration to achieve. We want our residents to have the information and support they need to lead safe, active, healthy lives and to be able to live independently for longer."

KEY DE	CISION?	No			
WARDS/COMMUNITIES AFFECTED:		FECTED:	None		
	SUPPORTING DOCUMENTATION				
Append	Appendices				
1.	Children and Families Monthly Dataset – June 2021				
2.	2. Glossary of terms				

#### **Documents In Members' Rooms**

Boodinonto in monisoro (Conic					
1.	None				
Equality	Equality Impact Assessment				
	Do the implications/subject of the report require an Equality and Safety No Impact Assessment (ESIA) to be carried out.				
Data Pr	Data Protection Impact Assessment				
	Do the implications/subject of the report require a Data Protection Impact No Assessment (DPIA) to be carried out.				
Other B	Other Background Documents				
Other Background documents available for inspection at:					
Title of	Title of Background Paper(s)  Relevant Paragraph of the Access to				

Page 64 Information Procedure Rules /

		e 12A allowing document to npt/Confidential (if applicable)
1.	None	



Jun-21 Monthly dataset Benchmarking 2019-20 % change Pref 12-mnth 12-mnth ENG Commentary (Jun-21): Outcome Indicator (what impact will monitoring these measures have from Mayfrom Jun-20 erre region on the experiences of our children) 21 The number of Contacts have increased again this month and There is an effective 'front door' with is 48% higher than June 2020. Covid Recovery has created a which anyone with a concern about higher demand on services with families struggling. There is a Number of contacts received a child can engage and receive need to look at Early Help services to ensure they are working ☐ (includes contacts that 1507 1464 1297 1886 1630 1801 2080 1 15% 1 1621 2080 Local Local appropriate advice, support and with the right families to prevent escalation and ensure that become referrals) action. partners are aware of where they can refer other than into Children's Social Care. Despite the significant increase in Contacts the number of new referrals of Children in Need has decreased and is lower Referrals for children in need of help Number of head (CiN) Number of new referrals of than statistical neighbours. This figure compared to the 271  $\Rightarrow$ 502 and support are accepted 351 244 460 334 442 339 -23% 356 460 368 353 number of Contacts highlights a need for families to have appropriately by the service. support at a lower level than statutory intervention. As above, the number the percentage of Contacts converting Children and families receive the in to referrals for Children in Need has decreased despite the help they need at the right time, and Percentage of all contacts that significant increase in Contacts. from the best possible resource - in  $\stackrel{\infty}{>}$  become new referrals of 23% 19% 19% 24% 20% 24% 1 -31% -32% 22% 26% Local Local Local line with the established continuum Children In Need (CiN) of need. The Number of new referrals of Children in Need rate per 10,000 0-17 years olds has seen a decrease of 23%. The Referrals for children in need of help decrease on demand for statutory services indicates that we Number of new referrals of and support are comparable with will be working with the right children, but need to ensure Ildren in Need (CiN) rate 69 48 90 87 -23%  $\Rightarrow$ 70 90 53 66 Local Local other local authorities like 🙀r 10,000 (0-17 year olds) that early help services are working with families who are Southampton. struggling to prevent them escalating into statutory services. 67 Percentage of referrals dealt Despite the significant increase in Contacts coming into MASH with by MASH where time in June 21, the performance against the Working Together 1 The safety of children is supported from referral received / working day decision making remains high and sits at 99%. by referrals being dealt with in a 99% 99% 98% 99% 98% 99%  $\Rightarrow$ **→** 98% 99% Local Local Local recorded to completion by timely manner. MASH was 24 hours / 1 working day or less arah Ward This month there has been a significant decrease in re referrals but is unclear why this is, as it is unclear why it The service is effective in helping increases at times. The number of re referrals does still need Number of referrals which are children and families address their consideration though and the service (PACT) is now keeping re-referrals within one year of issues, and where there is a re-32 8 10 28 17 38 -47% 1 18% 23 38 Local Local Local addtional records to monitor the re referrals (within the last 3 a closure assessment referral, the issues are understood. months) with the aim of identifying any patterns which can then be addressed to try and prevent re referrals. This figure is generally quite low and it is unclear as to the The service is effective in helping reasons, it would be helpful if a reason was noted at the time Percentage of referrals which children and families address their of referral and data collected for analysis. 1 are re-referrals within one issues, and where there is a re-9% 3% 4% 6% 5% 9% -33% 20% 27% 23% vear of a closure assessment referral, the issues are understood. Ó A more sophisticated data report will be part of the overall KPI suite. The MET manager provided a report for Scrutiny Panel in June 2021.

The number of 'step up' cases in June was below average was 4 recorded. Number of **new** referrals of The needs and safety of children at children aged 13+ where child **-75**% risk of child sexual exploitation are 2 2 2 1 3 1  $\Rightarrow$ 0% 15 Local Local Local sexual exploitation (CSE) was a responded to effectively. factor Number of children receiving Early Help services who are The needs and safety of children at stepped up for Children In **1** 300% risk of child sexual exploitation are 0 4 5 10 8 -50% 17 5 Local Local Local Need (CiN) assessment responded to effectively.

No Indicator	Reporter	Outcome  (what impact will monitoring these measures have on the experiences of our children)	Dec-20	Jan-21	Feb-21	Mar-21	Apr-21	May-21	Jun-21		% change from May- 21		change n Jun-20			12-mnth max.	SN	ENG	SE region	Commentary (Jun-21):
Number of Children In Need (CiN) at end of period (all open cases, <b>excluding</b> EHPs, EHAs, CPP and LAC)	Sarah Ward	Children in need of help and support receive a consistent and effective service.	1226	1162	1109	1218	1151	1217	1140	7	-6%	<b>*</b>	-13%	<b>▼</b>	1,223	1,348	Local	Local		This has decreased although still remains high. There continue to be staffing issues in Pact impacting on workflow however the team has two new assistant team managers who, following their induction, will focus on work flow and progressing CIN cases to closure or stepping down to Early Help.
Number of children open to the authority who have been missing at any point in the period (count of children)	Stuart Webb	The needs and safety of children who have been missing are responded to robustly.	53	49	69	75	64	77	86	1	12%	•	51%	•	70	86	Local	Local	Local	The MET team manager continues to report on a monthly basis and is reviewing the June data, which saw an increase in missing episodes.
Number of Single Assessments (SA) completed	Jacqui Schofield	Children receive a comprehensive assessment of their needs; with strengths and areas of risk identified to inform evidence-based planning.	410	305	304	288	293	321	327	7	<b>&gt;</b> 2%	<b>^</b>	23%		308	410	354	365	485	The number of single assessments completed during June 21 has increased again by a small margin of 2% compared to May 21.
Recentage of Single Assessments (SA) completed within 10 days	Jacqui Schofield	Assessments are completed in a timely manner, to ensure that children receive the help they need without unnecessry delay.	16%	10%	12%	15%	13%	13%	6%	7	-57%	>	-3%	•	11%	16%	11%	12%	13%	The percentage of single assessments completed within 10 days for June 21 has seen a decrease of 57%, and stands at 6% compared with 11% for statistical neighbours.
Percentage of Single Assessments (SA) completed within 11-25 days	Jacqui Schofield	Assessments are completed in a timely manner, to ensure that children receive the help they need without unnecessry delay.	31%	27%	35%	26%	43%	33%	30%	7	-9%	•	-32%	•	32%	43%	Local	Local	Local	The percentage of single asssessments completed within 11-25 days is 30%, a slight decrease on May 21. This is not necessarily significant.
Percentage of Single  September 1997  Percentage 1997  Pe	Jacqui Schofield	Assessments are completed in a timely manner, to ensure that children receive the help they need without unnecessary delay.	19%	18%	13%	28%	20%	19%	29%	1	∱ 51%	<b>^</b>	41%	•	20%	29%	Local	Local	Local	The percentage of single assessments completed within 26-35 days is 29% for June 21 compared to 19% for May 21. This is not necessarily significant.
Percentage of Single Assessments (SA) completed within 36-45 days	Jacqui Schofield	Assessments are completed in a timely manner, to ensure that children receive the help they need without unnecessary delay.	24%	28%	14%	14%	14%	22%	23%	7	<b>5</b> %	<b>^</b>	52%	•	22%	30%	Local	Local	Local	The percentage of single assessments completed within 36-45 days is 23% for June 21, compared to 22% for May 21. This is not necessarily significant.
Rercentage of Single Assessments (SA) completed over 45 days	Jacqui Schofield	Assessments are completed in a timely manner, to ensure that children receive the help they need without unnecessary delay.	11%	16%	26%	16%	10%	14%	13%	7	-4%	<b>+</b>	-13%	•	15%	26%	15%	16%	15%	There is a slight decrease of single assessments completed over 45 days for June 21 compared to May 21. This figure is lower than statistical neighbours, South East Region and England. The figure representsd all single assessments completed throughout Children's Services.
Number of Single Assessments (SA) completed in 45 working days	Jacqui Schofield	Assessments are completed in a timely manner, to ensure that children receive the help they need without unnecessary delay.	366	255	226	241	263	285	284	7	→ 0%	<b>^</b>	26%	•	264	366				The number of single assessments completed within 45 working days is 284 for June 21 which is comparable with May 21.
Percentage of Single Assessments (SA) completed in 45 working days	Jacqui Schofield	Assessments are completed in a timely manner, to ensure that children receive the help they need without unnecessary delay.	89%	84%	74%	84%	90%	86%	87%	-	<b>)</b> 1%	<b>→</b>	2%	•	85%	93%				There is a slight increase in the number of single assessments completed within 45 days, higher than the 12 month average. The data is drawn from all single assessments completed throughout Children's Services.
Number of Section 47 (S47) enquiries started	Jacqui Schofield	Where there are concerns about a child's safety, there is a robust assessment of risk.	149	91	91	174	117	158	93	1	-41%	•	-33%		124	174	119	110	155	The number of section 47 enquiries started has seen a significant decrease for June 21 and is 41% lower than May 21 and is lower than Statistical Neighbours, South East Region and England.

Ref.	Indicator	Reporter	Outcome (what impact will monitoring these measures have	Dec-20	Jan-21	Feb-21	Mar-21	Apr-21	May-21	ın-21	% chan	_	% change om Jun-20		12-mnth	12-mnth max.	SN	ENG	SE region	Commentary (Jun-21):
		~	on the experiences of our children)	ă	e G	Ā	Š	₹	Ž	7	21	, , , , , , , , , , , , , , , , , , ,	0111341120	d DoT	arg	max.			1051011	
CP1-NI	Rate of Section 47 (S47) enquiries started per 10,000 children aged 0-17	Jacqui Schofield	Safeguarding investigations undertaken by the service are at a level that is comparable with other local authorities like Southampton.	29	18	18	34	23	31	18	<b>↓</b> -42	%	-33%		24	34	19	14	15	The rate of section 47 enquiries per 10,000 children 0-17 for June 21 is significantly lower than May 21 and is lower than Statitical Neighbours, South East Region and England. We are currently working closely with the Police looking at thresholds for section 47 enquiries with further work planned with other partners to ensure we work with the right children at the right level and are not risk averse.
CP6B	Number of children with a Child Protection Plan (CPP) at the end of the month, excluding temporary registrations	Stuart Webb	Child Protection Plans are in place for children where it has been assessed that multi-agency intervention is required to keep them safe.	399	400	358	313	337	355	381	<b>→</b> 79	6	-6%		380	426	350	339	427	Increasing trend in the number and rate of CPP since March 2021, which appears to be stabilising (CPP numbers as of 1/7/21 are 379). Main contributing factors are: ICPC activity over the past 3 - 4 months and reduction in deregistration. Audit activity is underway regarding ICPC, to establish if safe alternative courses of action could have been taken and this will be used to inform service and partnership practice discussions. Postponed conferences are now being flagged at team and social worker level with senior management.
CP6B-NI	Rate of children with Child Protection Plan (CPP) per 10,000 (0-17 year olds) at end of period	Stuart Webb	The number of children who require Child Protection Plans is at a level that is comparable with other local authorities like Southampton.	78	79	70	62	66	70	75	→ 79	6 -3	→ -6%		75	84	53	43	41	Increasing trend in the number and rate of CPP since March 2021, which appears to be stabilising (CPP numbers as of 1/7/21 are 379). Main contributing factors are: ICPC activity over the past 3 - 4 months and reduction in deregistration. Audit activity is underway regarding ICPC, to establish if safe alternative courses of action could have been taken and this will be used to inform service and partnership practice discussions. Postponed conferences are now being flagged at team and social worker level with senior management.
CP2	Momber of children subject to Initial Child Protection Conferences (ICPCs), excluding transfer-Ins and temporary registrations	Stuart Webb	Where it has been assessed that multi-agency intervention is required to keep a child safe, the case is progressed to Initial Child Protection Conference.	48	56	20	38	45	49	58	<b>↑</b> 18	% 1	61%		44	72	43	42	53	Number and rate of ICPC has increased over the past four months, on the back of the easement of winter lockdown restrictions and this has impacted upon the number and rate of CPP overall. Audit activity is underway regarding ICPC, to establish if safe alternative courses of action could have been taken and this will be used to inform service and partnership practice discussions.
CP2-NI	Rate per 10,000 Initial Child Protection Conferences (ICPCs)	Stuart Webb	The rate of Initial Child Protection Conferences is at a level that is comparable with other local authorities like Southampton.	10	11	4	8	9	10	11	<b>↑</b> 16	% 1	61%		9	14	7	5	5	Number and rate of ICPC has increased over the past four months, on the back of the easement of winter lockdown restrictions and this has impacted upon the number and rate of CPP overall. Audit activity is underway regarding ICPC, to establish if safe alternative courses of action could have been taken and this will be used to inform service and partnership practice discussions.
\ \frac{4}{\sigma}	Number of Initial Child Protection Conferences (ICPCs) resulting in a Child Protection Plan (CPP) (based on count of children)	Stuart Webb	Decisions made at Child Protection Conferences will result in appropriate, evidence-based plans for children that respond to, and meet their level of risk and need.	42	53	18	31	40	45	54	<b>↑</b> 20	% 1	54%		39	58				The % conversion from ICPC to plan is in line with the SN average and higher than regional and national averages. However, we know from the recent Ofsted focused visit that Ofsted are of the view that Southampton's sec.47 activity is too high and our data shows that the average rate per 10,000 sec.47 is notably higher in Southampton. This suggests that although there is nothing remarkable in respect of ICPC decision making, there are potential opportunities to intervene with some families in a different way.

Ref.	Indicator	Owner	Outcome  (what impact will monitoring these measures have on the experiences of our children)	Dec-20	Jan-21	Feb-21	Mar-21	Apr-21	May-21	Jun-21	fron	hange n May- 21	% change from Jun-20	0 erre d		12-mnth max.	SN	ENG	SE region	Commentary (Jun-21):
CP4	Percentage of Initial Child Protection Conferences (ICPCs) resulting in a Child Protection Plan (CPP) (based on count of children)	Stuart Webb	Decisions made at Child Protection Conferences will result in appropriate, evidence-based plans for children that respond to, and meet their level of risk and need.	88%	95%	90%	82%	89%	92%	93%	<b>→</b>	1%	<b>→</b> -4%	<u>DoT</u>	88%	95%	90%	87%	86%	The % conversion from ICPC to plan is in line with the SN average and higher than regional and national averages. However, we know from the recent Ofsted focused visit that Ofsted are of the view that Southampton's sec.47 activity is too high and our data shows that the average rate per 10,000 sec.47 is notably higher in Southampton. This suggests that although there is nothing remarkable in respect of ICPC decision making, there are potential opportunities to intervene with some families in a different way.
CP2b	Number of transfer-ins	Stuart Webb	Children moving into Southampton receive a good standard of service and protection.	3	1	0	1	1	1	0	4	-100%	- n/a		2	7	Local	Local		There were no transfers in this month. In all cases, the service manager checks that local processes were complied with.
CP2b %	Percentage of transfer-ins where child became subject to a CP Plan during period	Stuart Webb	Children moving into Southampton receive a good standard of service and protection.	100%	100%	-	0%	100%	100%	100%	<b>→</b>	0%	- n/a		76%	100%	Local	Local		There were no transfers in this month. In all cases, the service manager checks that local processes were complied with.
CP3-QL (val)	Number of children subject to Initial Child Protection Conferences (ICPCs) which were held within timescales (excludes transfer-ins)	Stuart Webb	Child Protection planning is timely, ensuring that the risks to children are discussed and responded to expediently.	13	40	14	23	20	42	36	4	-14%	<b>→</b> 6%	<b>A</b>	27	50	34	33		ICPC timeliness remains variable, susceptible to demand pressures across the safeguarding teams.
CP3-QL	Percentage of Initial Child Potection Conferences (PCPCs) held within timescales (Seed on count of children)	Stuart Webb	Child Protection planning is timely, ensuring that the risks to children are discussed and responded to expediently.	27%	71%	70%	61%	44%	86%	62%	4	-28%	<b>↓</b> -34%	<b>A</b>	61%	86%	81%	78%		ICPC timeliness remains variable, susceptible to demand pressures across the safeguarding teams.
8	Percentage of children subject to a Child Protection Plan seen in the last 15 working days.	Sarah Ward	The service is in regular contact with children subject to Child Protection planning to ensure that there is ongoing assessment of risk and opportunities to intervene effectively.	87%	88%	89%	88%	100%	83%	88%	<b>&gt;</b>	6%	<b>↑</b> 17%	<b>A</b>	85%	100%	Local	Local	Local	There has been a slight increase in this however caseloads remain high in Pact and this impacts on recording being completed in a timely way. Visits remain a focus in Pact and managers are working with social workers to ensure all children are seen in a timely way and according to need, and recorded.
	Number of new Child Protection Plans (CPP) where child had previously been subject of a CPP at any time (repeat)	Stuart Webb	The service is effective in managing the risks experienced by children and within families and where there is rereferral the issues are understood.	11	19	0	5	7	6	14	1	133%	<b>1</b> 80%	•	9	19	9	8	11	% broadly aligns with SN average. In the past month, 14 children from 10 families were made subject to a repeat CPP. For the majority, the previous plan was >3 years ago. One family of three were stepped down from planning in July 2021. The CP advisor has been asked to review and feedback on decision making in this case.
CP5-QL	Percentage of new Child Protection Plans (CPP) where child had previously been subject of a CPP at any time (repeat)	Stuart Webb	The service is effective in managing the risks experienced by children and within families and where there is rereferral the issues are understood.	24%	36%	0%	16%	17%	13%	26%	1	103%	<b>1</b> 90%	•	22%	41%	24%	22%	23%	% broadly aligns with SN average. In the past month, 14 children from 10 families were made subject to a repeat CPP. for the majority, the previous plan was >3 years ago. One family of three were stepped down from planning in July 2021. The CP advisor has been asked to review and feedback on decision making in this case.
6	Number of children subject to Review Child Protection Conferences (RCPCs) in the month	Stuart Webb	Where children are subject to Child Protection planning, their cases are reviewed regularly to identify progress and any barriers.	70	115	95	173	45	65	72	^	11%	<b>↓</b> -47%	•	94	173	Local	Local		Increasing trend, but numbers of RCPCs remain lower than 12m average and this impacts upon the number of deregistrations. Postponed conferences are now being flagged at team and social worker level with senior management.

Ref.	Indicator	Owner	Outcome  (what impact will monitoring these measures have on the experiences of our children)	Dec-20	Jan-21	Feb-21	Mar-21	Apr-21	May-21	Jun-21		6 change om May- 21	% char from Jui	n-20 ei	rre d		12-mnth max.	SN	ENG	SE region	Commentary (Jun-21):
CP7	Number of ceasing Child Protection Plans (CPP), excluding temporary registrations	Stuart Webb	Where it is assessed that risks to a child have reduced there is a review of risk and the case is stepped down effectively.	37	54	61	74	19	28	27	<b>→</b>	-4%	<b>4</b> -44	1%	<u>00T</u>	42	74				Increasing trend, but numbers of RCPCs remain lower than 12m average and this impacts upon the number of deregistrations. Postponed conferences are now being flagged at team and social worker level with senior management.
Ų	Number of Looked after Children at end of period	Mary Hardy  Mary Hardy	Where it is assessed that there is no safe alternative, the local authority will take children into its care for their welfare and protection.	499	508	507	495	490	499	497	<b>&gt;</b>	0%	<b>→</b> 2	%	•	498	512	496	527	550	Little change in the number of children in our care, with 499 in May and 497 at the end of June - that puts us on a par with statisitcal neighbours and siginificantly lower than national and regional comparators.
LAC1-NI	Looked after Children rate per 10,000	Mary Hardy  Mary Hardy	The level of children in care is at a level that is comparable with other local authorities like Southampton.	98	100	100	97	96	98	98	<b>→</b>	0%	<b>→</b> 2	%	•	98	101	89	67	53	As we would expect with just 2 children less in our care this month, the rate per 10,000 population has not changed and remains at 98 per 10,000 population.
l Q	Number of new Looked after Children (episodes)	Mary Hardy  Mary Hardy	Where children meet the threshold and there are no alternatives, they will be safe and have their welfare needs addressed through accommodation by the local authority.	11	23	13	6	8	15	15	<b>→</b>	0%	<b>↑</b> 50	1%	•	15	29	47	44	46	As was the case in May, 15 children came in to our care in June - 15 being our monthly average intake for the past year. By comparison in June last year 10 children came in to our care, what the trend will be going forward is difficult to predict as we potentially reach a point where the last of the lockdown restrictions will lift and "normal" life resumes.
IAC	Number of ceasing Looked after Children (episodes) ບຸ	Mary Hardy	Children will leave care in a planned way with clear networks of support around them.	12	14	21	17	15	6	13	<b>1</b>	117%	<b>1</b> 44	.%	•	15	24	16	16	19	Compared to 6 in May, 13 children have left our care in June. This is much closer to our monthly average of 15 for the past year and closer to our benchmarking comparators, but again it is difficult to know what this will look like going forward as we settle again to "normal" life.
LAC6 (val)	Number of adoptions (E11, E12)	Martin Smith	Children who are being adopted will receive timely and effective support.	4	1	10	1	3	1	2	<b>^</b>	100%	→ 0	%	•	3	10				As noted previously, the court is sitting one session every other month to hear adoption applications. Hence the patern emerging on a monthly basis. We were expecting an increase this month to coincide with the hearing this month. However, 5 applications remain to be heard.
(%)	Percentage of adoptions (E11, E12)	Martin Smith	Children who are being adopted will receive timely and effective support.	33%	7%	48%	6%	20%	7%	15%	<b>^</b>	131%	<b>J</b> -3:	1%		17%	48%				15% of children leaving care this month was as a result of adoption orders being granted.
LAC12 (val)	Number of Special Guardianship Orders (SGOs) (E43, E44)	Martin Smith	Children subject to Special Guardianship Orders will receive timely and effective support.	1	5	1	4	3	0	2	-	n/a	<b>1</b> 0	0%		3	6	Local	Local		As noted previously, the court is sitting one session every other month to hear SGO applications which are independent of care proceedings. This month figure is consistent with the 12 month average.
212	Percentage of Special Guardianship Orders (SGOs) (E43, E44)	Martin Smith  Martin Smith	Children subject to Special Guardianship Orders will receive timely and effective support.	8%	36%	5%	24%	20%	0%	15%	-	n/a	<b>↑</b> 38	3%		17%	36%	1%	1%	1%	15% of children leaving care this month was as a result of orders being granted.
C7-(2	Percentage of Looked after Children visited within timescales	Mary Hardy  Mary Hardy	The service is in regular contact with Looked after Children to ensure that there is ongoing assessment of risk and opportunites to intervene effectively.	85%	84%	90%	88%	69%	80%	80%	<b>→</b>	0%	<b>→</b> 3	%	•	79%	90%	Local	Local		Performance for this indicator has unfortunately not increased again this month as we had hoped but has been maintained at 80%. This is a priority area for improvement for us and so is subject to close monitoring and scrutiny and will remain so till we see a significant improvement in compliance with our statutory duties in this area.
010	Percentage of Looked after Children with an authorised CLA plan	Mary Hardy  Mary Hardy	Children have good quality care plans, to which they have contributed, and which meet their needs.	97%	96%	94%	96%	96%	96%	94.8% Page 5 of 7	<b>→</b>	-1%	<b>→</b> -1	%	•	96%	98%	Local	Local	Local	A 1% drop in performance by end of June for completion and authorisation of children's care plans. Whilst a small %, we would not want this to drop any further as the care plan is the means by which we deliver services to our children and as such they are absolutely key documents.

Indicator & G	Reporter	Outcome  (what impact will monitoring these measures have on the experiences of our children)	Dec-20	Jan-21	Feb-21	Mar-21	Apr-21	May-21	Jun-21	% chang from Ma 21		change m Jun-20			12-mnth max.	SN	ENG	SE region	Commentary (Jun-21):
Number of Looked after Children with an authorised CLA Plan	Mary Hardy	Children have good quality care plans, to which they have contributed, and which meet their needs.	482	489	477	477	470	478	471	<b>→</b> -19	6 →	1%	<b>A</b>	478	489	Local	Local	Local	As above. At end of June 471 of the 497 children in our care have an authorised plan so we will ask data colleagues to identify the 26 that do not yet so we can prioritise those for remedial action.
Number of current Unaccompanied Asylum Seeking Children (UASC) looked after at end of period	Mary Hardy	Unaccompanied Asylum Seeking Children are identified and supported by the local authority.	18	21	21	20	20	18	18	→ 0%	<b>^</b>	50%		16	21	25	21	35	A further month of 18 asylum seeking minors being in our care in June. Whilst that month on month total is unchanged, the detail below shows that 2 came new in to our care in June so 2 must also have turned 18 in the month and in so doing became care leavers, hence the total remains the same overall.
Number of <b>new</b> unaccompanied Asylum Seeking Children (UASC)	Mary Hardy	Unaccompanied Asylum Seeking Children are identified and supported by the local authority.	2	3	1	1	1	0	2	- n/a	a -	n/a		1	3	Local	Local	Local	See commentary above.
Number of Looked after Children aged 16+ or open Care Leavers with an authorised Pathway Plan	Mary Hardy	Care Leavers have a good quality Pathway Plans, to which they have contributed, and which meets their needs.	179	177	179	188	187	187	192	<b>→</b> 3%	•	12%	•	180	192	Local	Local		An improvement in Pathway Plan performance throughout June as numbers completed went up by 5 from 187 in May to 192, meaning that 96% of our care leavers at the end of the month had an authorised Pathway Plan. The additional PA capacity has allowed us to allocate a PA to a number of our older young people who had been waiting to have one, as they hold the expertise in this area of work.
Percentage of Looked after Children aged 16+ or open Care Leavers with an authorised Pathway Plan	Mary Hardy	Care Leavers have a good quality Pathway Plans, to which they have contributed, and which meets their needs.	97%	97%	97%	96%	94%	94%	96%	<b>→</b> 2%	<b>-&gt;</b>	0%	•	96%	98%	Local	Local	Local	As above.
Percentage of Care Leavers in contact and in suitable accommodation	Mary Hardy	Care Leavers are in accommodation that is safe and secure.	83%	82%	84%	82%	85%	85%	8571%	↑ 9965	5% <b>↑</b>	9840%	•	792%	8571%	85%	94%	91%	A slight increase in performance for this indicator in June to 85.7%, which rounded up to the nearest whole number at 86% is the equivalent highest for the past year. Our new Personal Advisers have spent much of their first month in post in induction activity and as they both come from young people's housing backgrounds in previous employment it's anticipated that they will further impact positively on this indicator.
Number of Looked after Children (LAC) placed with IFAs at end of period	Martin Smith	Our Looked after Children will benefit from high quality fostering provision, with our own carers wherever possible.	150	156	160	156	151	154	158	<b>&gt;</b> 3%	•	14%	•	150	160	Local	Local	Local	There is an upward trend in our looked after population this is matched by an upward trend in our use of external provision; IFAs . This is indicative of our in house provision having reached capacity.
의 Percentage of IFA placements (of all looked after children)	Martin Smith	Our Looked after Children will benefit from high quality fostering provision, with our own carers wherever possible.	30%	31%	32%	32%	31%	31%	32%	<b>→</b> 3%	•	12%	•	30%	32%	Local	Local	Local	There is little change from last month, but remains the highest it has been as our in house provision being at high capacity.
Number of <b>in-house</b> foster carers at the end of period	Martin Smith	Our Looked after Children will benefit from high quality fostering provision, with our own carers wherever possible.	153	152	153	155	156	155	155	→ 0%	<b>→</b>	-5%	•	157	165	Local	Local	Local	Our cohort of foster carers level out. We have not had any new approvals this month, but we have also not had any losses. The recruitment strategy for 2020-23 is in place and is being implemented with pace. However, we have seen a drop in enquires and thus conversions to approval as we come out of the pandemic. Our number of foster carers is project to decrease over the coming months.

Ref.	Indicator law o	Reporter	Outcome (what impact will monitoring these measures have on the experiences of our children)	Dec-20	Jan-21	Feb-21	Mar-21	Apr-21	May-21	Jun-21	% change from May- 21	% change from Jun-20			12-mnth max.	SN	ENG	SE region	Commentary (Jun-21):
HI3	umber of Early Help ssessment (EHA) started in ne month	Sean Holehouse	Children and families benefit from an early help offer that is rooted in a good understanding of their needs.	112	117	125	190	199	138	173	→ -6%	♠ 80%		142	199	Local	Local	Local	The number of EHS's started reflects the referral demand which remains high and above the rolling monthly average
ir It	diliber of Larry Help	Sean Holehouse	Assessments are completed for adult family members where a need for support is identified.	221	223	352	381	416			- n/a	<b>J</b> -100%		296	416	Local	Local	Local	No data since April to comment
EH1p	umber of Early Help Plans EHPs) opened in the month includes EHPs completed, and hose still open at end of eriod)	Sean Holehouse	Children and families benefit from early help plans that meet their presenting needs.	208	197	376	315	433	317	319	- n/a	<b>↑</b> 37%		304	433	Local	Local		The rate of EHP's remains higher than the rolling monthly average. Locality teams capacity plan regularly reviewed to support allocation and avoid waiting lists.
14b	umber of Early Help ssessment (EHA) completed, KCLUDING adults aged 21+	Sean Holehouse	Assessments are completed for a children where a need for early help upport is identified	159	164	231	255	267	208	220	- n/a	<b>1</b> 5%		202	267	-	-	-	See above
CIN5 CIN5	umber of all Children in eed (CiN) (including Child rotection (CP) / Looked after hildren (LAC) / Care Leavers	Stuart Webb	Children and families receive support safely, at the right threshold and in a timely manner; supported by the interface between Early Help and Social Care.	2247	2193	2101	2159	2119	2206	2158	- n/a	→ -8%		2227	2367	Local	Local	Local	Management review of CIN cases in pact is being scoped to take place in July and August in order to respond to drift and delay in case work. Destination 22 service redesign, incorporating revision of Early Help offer, is on target.
	rcentage of 16-17 year olds  EET or whose activity is not own	Debbie Blythe	Young people benefit from an effective work to engage them in education, training and employment.								- n/a	- n/a	•	-	0	-	-	-	
XOX to	umber of first time entrants of the Youth Justice System er 100,000 10-17 year olds in eriod	Debbie Blythe	Young people are appropriately diverted from entry into the criminal justice systemt through the local diversion / prevention offer.								- n/a	- n/a	•	-	0	417	327	256	
FM011		Sean Holehouse	Families benefit from a robust local Troubled Families offer. (Families Matter)	23							- n/a	- n/a	•	30	39	-	-	-	Worked with 229 families in quarter 1.
	ayment per result (PBR)  aims attached per quarter	Sean Holehouse	Family engagement in the Families Matter programme translates into PBR, for further investment into the programme.								- n/a	- n/a	•	51	51	-	-		80 families successfully worked with and claimed in quarter 1. PbR trajectory on track to meet 100% of national 389 target for 21/22.

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# Agenda Item 9

# Appendix 2

# **CHILDREN AND FAMILIES GLOSSARY**

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#### Abuse

Abuse is the act of violation of an individual's human or civil rights. Any or all types of abuse may be perpetrated as the result of deliberate intent, negligence or ignorance. Different types of abuse include: Physical abuse, Neglect/acts of omission, Financial/material abuse, Psychological abuse, Sexual abuse, Institutional abuse, Discriminatory abuse, or any combination of these.

#### Advocacy

Advocacy helps to safeguard children and young people, and protect them from harm and neglect. It is about speaking up for children and young people and ensuring their views and wishes are heard and acted upon by decision-makers. LAs have a duty under The Children Act to ensure that advocacy services are provided for children, young people and care leavers making or intending to make a complaint. It should also cover representations which are not complaints. Independent Reviewing Officers (IRO) should also provide a child/young person with information about advocacy services and offer help in obtaining an advocate.

# Agency Decision Maker

The Agency Decision Maker (ADM) is the person within a fostering service and an adoption agency who makes decisions on the basis of recommendations made by the Fostering Panel (in relation to a fostering service) and the Adoption Panel (in relation to an adoption agency). The Agency Decision Maker will take account of the Panel's recommendation before proceeding to make a decision. The Agency Decision Maker can choose to make a different decision.

The National Minimum Standards for Fostering 2011 provide that the Agency Decision Maker for a fostering service should be a senior person within the fostering service, who is a social worker with at least 3 years post-qualifying experience in childcare social work and has knowledge of childcare law and practice (Standard 23).

The National Minimum Standards for Adoption 2011 provide that the Agency Decision Maker for an adoption agency should be a senior person within the adoption agency, who is a social worker with at least 3 years post-qualifying experience in childcare social work and has knowledge of permanency planning for children, adoption and childcare law and practice. Where the adoption agency provides an inter country adoption service, the Agency Decision Maker should also have specialist knowledge of this area of law and practice. When determining the disclosure of Protected Information about adults, the Agency Decision Maker should also understand the legislation surrounding access to and disclosure of information and the impact of reunion on all parties (Standard 23).

#### Assessment

Assessments are undertaken to determine the needs of individual children; what services to provide and action to take. They may be carried out:

- To gather important information about a child and family;
- To analyse their needs and/or the nature and level of any risk and harm being suffered by the child;
- To decide whether the child is a Child in Need (Section 17) and/or is suffering or likely to suffer Significant Harm (Section 47); and
- To provide support to address those needs to improve the child's outcomes to make them safe.

With effect from 15 April 2013, Working Together 2013 removes the requirement for separate **Initial Assessments** and **Core Assessments**. One Assessment – often called Single Assessment - may be undertaken instead.

#### **CAFCASS**

**Children and Family Court Advisory and Support Service** (CAFCASS) is the Government agency responsible for Reporting Officers, Children's Guardians and other Court officers appointed by the Court in Court Proceedings involving children. Also appoints an officer to witness when a parent wishes to consent to a child's placement for adoption.

#### Care Order

A Care Order can be made in Care Proceedings brought under section 31 of the Children Act if the Threshold Criteria are met. The Order grants Parental Responsibility for the child to the local authority specified in the Order, to be shared with the parents.

A **Care Order** lasts until the child is 18 unless discharged earlier. An **Adoption Order** automatically discharges the Care Order. A **Placement Order** automatically suspends the Care Order, but it will be reinstated if the Placement Order is subsequently revoked.

All children who are the subject of a Care Order come within the definition of Looked After and have to have a Care Plan. When making a Care Order, the Court must be satisfied that the Care Plan is suitable.

# Categories of Abuse or Neglect

Where a decision is made that a child requires a Child Protection Plan, the category of abuse or neglect must be specified by the Child Protection Conference Chair.

#### Child in Need and Child in Need Plan

Under Section 17 (10) of the Children Act 1989, a child is a Child in Need (CiN) if:

- He/she is unlikely to achieve or maintain, or have the opportunity of achieving or maintaining, a
  reasonable standard of health or development without the provision for him/her of services by a
  local authority;
- His/her health or development is likely to be significantly impaired, or further impaired, without the provision for him/her of such services; or
- He/she is disabled.

A **Child in Need Plan** should be drawn up for children who are not Looked After but are identified as Children in Need who requiring services to meet their needs. It should be completed following an Assessment where services are identified as necessary.

Under the Integrated Children's System, if a Child is subject to a Child Protection Plan, it is recorded as part of the Child in Need Plan.

The Child in Need Plan may also be used with children receiving short break care in conjunction with Part One of the Care Plan.

#### Child Protection

The following definition is taken from Working Together to Safeguard Children 2010, paragraph 1.23.:

Child protection is a part of Safeguarding and Promoting the Welfare of Children. This refers to the activity that is undertaken to protect specific children who are suffering, or are likely to suffer, Significant Harm.

#### Child Protection Conference

Child Protection Conferences (Initial – ICPC and review – RCPC) are convened where children are considered to be at risk of Significant Harm.

#### Children's Centres

The government is establishing a network of children's centres, providing good quality childcare integrated with early learning, family support, health services, and support for parents wanting to return to work or training.

# Child Sexual Exploitation

Child sexual exploitation (CSE) is a form of child sexual abuse. It occurs where an individual or group takes advantage of an imbalance of power to coerce, manipulate or deceive a child or young person under the age of 18 into sexual activity (a) in exchange for something the victim needs or wants, and/or (b) for the financial advantage or increased status of the perpetrator or facilitator. The victim may have been sexually exploited even if the sexual activity appears consensual. Child sexual exploitation does not always involve physical contact; it can also occur through the use of technology.

# Corporate Parenting

In broad terms, as the corporate parent of looked after children, a local authority has a legal and moral duty to provide the kind of loyal support that any good parent would provide for their own children.

#### Criteria for Child Protection Plans

Where a decision is made that a child requires a Child Protection Plan, the Conference Chair must ensure that the criteria for the decision are met, i.e. that the child is at continuing risk of Significant Harm.

#### Director of Children's Services (DCS)

Every top tier local authority in England must appoint a Director of Children's Services under section 18 of the Children Act 2004. Directors are responsible for discharging local authority functions that relate to children in respect of education, social services and children leaving care. They are also responsible for discharging functions delegated to the local authority by any NHS body that relate to children, as well as some new functions conferred on authorities by the Act, such as the duty to safeguard and protect children, the Children and Young People's Plan, and the duty to co-operate to promote well-being.

# Designated Teacher

Schools should all appoint a Designated Teacher. This person's role is to co-ordinate policies, procedures and roles in relation to Child Protection and in relation to Looked After Children.

#### Discretionary Leave to Remain

This is a limited permission granted to an Asylum Seeker, to stay in the UK for 3 years - it can then be extended or permission can then be sought to settle permanently.

#### Duty of Care

In relation to workers in the social care sector, their duty of care is defined by the Social Care Institute for Excellence (SCIE) as a legal obligation to:

Always act in the best interest of individuals and others;

- Not act or fail to act in a way that results in harm;
- Act within your competence and not take on anything you do not believe you can safely do.

#### Early Help

Early help means providing support as soon as a problem emerges, at any point in a child's life, from the foundation years through to the teenage years.

Effective early help relies upon local agencies working together to:

- Identify children and families who would benefit from early help;
- Undertake an assessment of the need for early help;
- Provide targeted early help services to address the assessed needs of a child and their family which focuses on activity to significantly improve the outcomes for the child.

Local authorities, under section 10 of the Children Act 2004, have a responsibility to promote interagency cooperation to improve the welfare of children.

# **Every Child Matters**

Every Child Matters is the approach to the well-being of children and young people from birth to age 19, which is incorporated into the Children Act 2004. The aim is for every child, whatever their background or their circumstances, to have the support they need to:

- Be healthy;
- Stay safe;
- Enjoy and achieve;
- Make a positive contribution and;
- · Achieve economic well-being.

This means that the organisations involved with providing services to children are teaming up, sharing information and working together, to protect children and young people from harm and help them achieve what they want in life.

#### Health Assessment

Every Looked After Child (LAC or CLA) must have a Health Assessment soon after becoming Looked After, then at specified intervals, depending on the child's age.

#### Indefinite Leave to Remain (ILR)

When an Asylum Seeker is granted ILR, they have permission to settle in the UK permanently and can access mainstream services and benefits.

## Independent Reviewing Officer

If a Local Authority is looking after a child (whether or not the child is in their care), it must appoint an Independent Reviewing Officer (IRO) for that child's case.

From 1 April 2011, the role of the IRO is extended, and there are two separate aspects: chairing a child's Looked After Review, and monitoring a child's case on an ongoing basis. As part of the monitoring function, the IRO also has a duty to identify any areas of poor practice, including general concerns around service delivery (not just around individual children).

IROs must be qualified social workers and, whilst they can be employees of the local authority, they must not have line management responsibility for the child's case. Independent Reviewing Officers who chair Adoption Reviews must have relevant experience of adoption work.

#### Independent Domestic Violence Advisor

Independent Domestic Violence Advisers (IDVA) are specialist caseworkers who focus on working predominantly with high risk victims (usually but not exclusively with female victims). They generally are involved from the point of crisis and offer intensive short to medium term support. They work in partnership with statutory and voluntary agencies and mobilise multiple resources on behalf of victims by coordinating the response of a wide range of agencies, including those working with perpetrators or children. There may be differences about how the IDVA service is delivered in local areas.

#### Initial Child Protection Conference

An Initial Child Protection Conference (ICPC) is normally convened at the end of a Section 47 Enquiry when the child is assessed as either having suffered Significant Harm or to be at risk of suffering ongoing significant harm.

The Initial Child Protection Conference must be held within 15 working days of the Strategy Discussion, or the last strategy discussion if more than one has been held.

# Local Authority Designated Officer (LADO)

A designated officer (or sometimes a team of officers), who is involved in the management and oversight of allegations against people that work with children.

Their role is to give advice and guidance to employers and voluntary organisations; liaise with the Police and other agencies, and monitor the progress of cases to ensure that they are dealt with as quickly as possible consistent with a thorough and fair process. The Police should also identify an officer to fill a similar role.

# Local Safeguarding Children's Board (LSCB)

LSCBs have to be established by every local authority as detailed in Section 13 of The Children Act 2004. They are made up of representatives from a range of public agencies with a common interest and with duties and responsibilities to children in their area. LSCBs have a responsibility for ensuring effective inter-agency working together to safeguard and protect children in the area. The Boards have to ensure that clear local procedures are in place to inform and assist anyone interested or as part of their professional role where they have concerns about a child.

The functions of the LSCB are set out in chapter 3 of Working Together to Safeguard Children.

See http://southamptonlscb.co.uk/ for Southampton LSCB.

#### Looked After Child

A Looked After Child is a child who is accommodated by the local authority, a child who is the subject to an Interim Care Order, full Care Order or Emergency Protection Order; or a child who is remanded by a court into local authority accommodation or Youth Detention Accommodation.

In addition where a child is placed for Adoption or the local authority is authorised to place a child for adoption - either through the making of a Placement Order or the giving of Parental Consent to Adoptive Placement - the child is a Looked After child.

Looked After Children may be placed with family members, foster carers (including relatives and friends), in Children's Homes, in Secure Accommodation or with prospective adopters.

With effect from 3 December 2012, the Legal Aid, Sentencing and Punishment of Offenders Act 2012 amended the Local Authority Social Services Act 1970 to bring children who are remanded by a court to local authority accommodation or youth detention accommodation into the definition of a Looked After Child for the purposes of the Children Act 1989.

#### Neglect

Neglect is a form of Significant Harm which involves the persistent failure to meet a child's basic physical and/or psychological needs, likely to result in the serious impairment of the child's health or development. Neglect can occur during pregnancy, or once a child is born.

### Parental Consent to Adoptive Placement

Parental consent to a child's placement for adoption under section 19 of the Adoption and Children Act 2002 must be given before a child can be placed for adoption by an adoption agency, unless a Placement Order has been made or unless the child is a baby less than 6 weeks old and the parents have signed a written agreement with the local authority. Section 19 requires that the consent must be witnessed by a CAFCASS Officer. Where a baby of less than 6 weeks old is placed on the basis of a written agreement with the parents, steps must be taken to request CAFCASS to witness parental consent as soon as the child is 6 weeks old. At the same time as consent to an adoptive placement is given, a parent may also consent in advance to the child's adoption under section 20 of the Adoption and Children Act 2002 either with any approved prospective adopters or with specific adopters identified in the Consent Form.

When giving advanced consent to adoption, the parents can also state that they do not wish to be informed when an adoption application is made in relation to the child.

#### Parental Responsibility

Parental Responsibility means all the duties, powers, responsibilities and authority which a parent has by law in relation to a child. Parental Responsibility diminishes as the child acquires sufficient understanding to make his or her own decisions.

A child's mother always holds Parental Responsibility, as does the father if married to the mother.

Unmarried fathers who are registered on the child's birth certificate as the child's father on or after 1 December 2003 also automatically acquire Parental Responsibility. Otherwise, they can acquire Parental Responsibility through a formal agreement with the child's mother or through obtaining a Parental Responsibility Order under Section 4 of the Children Act 1989.

#### Pathway Plan

The Pathway Plan sets out the route to the future for young people leaving the Looked After service and will state how their needs will be met in their path to independence. The plan will continue to be implemented and reviewed after they leave the looked after service at least until they are 21; and up to 25 if in education.

#### Permanence Plan

Permanence for a Looked After child means achieving, within a timescale which meets the child's needs, a permanent outcome which provides security and stability to the child throughout his or her childhood. It is, therefore, the best preparation for adulthood.

Wherever possible, permanence will be achieved through a return to the parents' care or a placement within the wider family but where this cannot be achieved within a time-scale appropriate to the child's needs, plans may be made for a permanent alternative family placement, which may include Adoption or by way of a Special Guardianship Order.

By the time of the second Looked After Review, the Care Plan for each Looked After Child must contain a plan for achieving permanence for the child within a timescale that is realistic, achievable and meets the child's needs.

#### Personal Education Plan

All Looked After Children must have a Personal Education Plan (PEP) which summarises the child's developmental and educational needs, short term targets, long term plans and aspirations and which contains or refers to the child's record of achievement. The child's social worker is responsible for coordinating and compiling the PEP, which should be incorporated into the child's Care Plan.

# Person Posing a Risk to Children (PPRC)

This term replaced the term of 'Schedule One Offender', previously used to describe a person who had been convicted of an offence against a child listed in Schedule One of the Children and Young Persons Act 1933.

'Person Posing a Risk to Children' takes a wider view. Home Office Circular 16/2005 included a consolidated list of offences which agencies can use to identify those who may present a risk to children. The list includes both current and repealed offences, is for guidance only and is not exhaustive - subsequent legislation will also need to be taken into account when forming an assessment of whether a person poses a risk to children. The list of offences should operate as a trigger to further assessment/review to determine if an offender should be regarded as presenting a continued risk of harm to children. There will also be cases where individuals without a conviction or caution for one of these offences may pose a risk to children.

#### Placement at a Distance

Placement of a Looked After child outside the area of the responsible authority looking after the child and not within the area of any adjoining local authority.

This term was introduced with effect from 27 January 2014 by the Children's Homes and Looked after Children (Miscellaneous Amendments) (England) Regulations 2013.

#### Principal Social Worker - Children and Families

This role was borne out of Professor Munro's recommendations from the Munro Review of Child Protection (2011) to ensure that a senior manager in each local authority is directly involved in frontline services, advocate higher practice standards and develop organisational learning cultures, and to bridge the divide between management and the front line. It is typically held by a senior manager who also carries caseloads to ensure the authentic voice of practice is heard at decision-making tables.

#### **Private Fostering**

A privately fostered child is a child under 16 (or 18 if disabled) who is cared for by an adult who is not a parent or close relative where the child is to be cared for in that home for 28 days or more. Close relative is defined as "a grandparent, brother, sister, uncle or aunt (whether of the full blood or half blood or by marriage or civil partnership) or step-parent". A child who is Looked After by a local authority or placed in a children's home, hospital or school is excluded from the definition. In a private

fostering arrangement, the parent still holds Parental Responsibility and agrees the arrangement with the private foster carer.

A child in relation to whom the local authority receives notification from the prospective adopters that they intend to apply to the Court to adopt may have the status of a privately fostered child. The requirement to notify the local authority relates only to children who have not been placed for adoption by an adoption agency. On receiving the notification, the local authority for the area where the prospective adopters live becomes responsible for supervising the child's welfare pending the adoption and providing the Court with a report.

#### Public Law Outline

The Public Law Outline: Guide to Case Management in Public Law Proceedings came into force on the 6th April 2010. An updated Public Law Outline (PLO) came into effect on 22nd April 2014, alongside the statutory 26-week time-limit for completion of care and supervision proceedings under the Children and Families Act 2014.

The Public Law Outline sets out streamlined case management procedures for dealing with public law children's cases. The aim is to identify and focus on the key issues for the child, with the aim of making the best decisions for the child within the timetable set by the Court, and avoiding the need for unnecessary evidence or hearings.

#### Referral

The referring of concerns to local authority children's social care services, where the referrer believes or suspects that a child may be a Child in Need, including that he or she may be suffering, or is likely to suffer, Significant Harm. The referral should be made in accordance with the agreed LSCB procedures.

# Relevant Young People, Former Relevant, and Eligible

- Relevant Young People are those aged 16 or 17 who are no longer Looked After, having previously been in the category of Eligible Young People when Looked After. However, if after leaving the Looked After service, a young person returns home for a period of 6 months or more to be cared for by a parent and the return home has been formally agreed as successful, he or she will no longer be a Relevant Young Person. A young person is also Relevant if, having been looked after for three months or more, he or she is then detained after their 16th birthday either in hospital, remand centre, young offenders' institution or secure training centre. There is a duty to support relevant young people up to the age of 18, wherever they are living.
- Former Relevant Young People are aged 18 or above and have left care having been previously either Eligible, Relevant or both. There is a duty to consider the need to support these young people wherever they are living.
- Eligible Young People are young people aged 16 or 17 who have been Looked After for a period or periods totaling at least 13 weeks starting after their 14th birthday and ending at least one day after their 16th birthday, and are still Looked After. (This total does not include a series of short-term placements of up to four weeks where the child has returned to the parent.) There is a duty to support these young people up to the age of 18.

#### Review Child Protection Conference

Child Protection Review Conferences (RCPC) are convened in relation to children who are already subject to a Child Protection Plan. The purpose of the Review Conference is to review the safety, health and development of the child in view of the Child Protection Plan, to ensure that the child continues to

be adequately safeguarded and to consider whether the Child Protection Plan should continue or change or whether it can be discontinued.

#### Section 20

Under Section 20 of the Children Act 1989, children may be accommodated by the local authority if they have no parent or are lost or abandoned or where their parents are not able to provide them with suitable accommodation and agree to the child being accommodated. A child who is accommodated under Section 20 becomes a Looked After Child.

# Section 47 Enquiry

Under Section 47 of the Children Act 1989, if a child is taken into Police Protection, or is the subject of an Emergency Protection Order, or there are reasonable grounds to suspect that a child is suffering or is likely to suffer Significant Harm, a Section 47 Enquiry is initiated. This enables the local authority to decide whether they need to take any further action to safeguard and promote the child's welfare. This normally occurs after a Strategy Discussion.

Physical Abuse, Sexual Abuse, Emotional Abuse and Neglect are all categories of Significant Harm.

Section 47 Enquiries are usually conducted by a social worker, jointly with the Police, and must be completed within 15 days of a Strategy Discussion. Where concerns are substantiated and the child is judged to be at continued risk of Significant Harm, a Child Protection Conference should be convened.

#### Separated Children

Separated Children are children and young people aged under 18 who are outside their country of origin and separated from both parents, or their previous legal/customary primary caregiver. Some will be totally alone (unaccompanied), while others may be accompanied into the UK e.g. by an escort; or will present as staying with a person who may identify themselves as a stranger, a member of the family or a friend of the family.

# Special Guardianship Order

Special Guardianship Order (SGO) is an order set out in the Children Act 1989, available from 30 December 2005. Special Guardianship offers a further option for children needing permanent care outside their birth family. It can offer greater security without absolute severance from the birth family as in adoption.

Special Guardianship will also provide an alternative for achieving permanence in families where adoption, for cultural or religious reasons, is not an option. Special Guardians will have Parental Responsibility for the child. A Special Guardianship Order made in relation to a Looked After Child will replace the Care Order and the Local Authority will no longer have Parental Responsibility.

# Strategy Discussion

A Strategy Discussion is normally held following an Assessment which indicates that a child has suffered or is likely to suffer Significant Harm. The purpose of a Strategy Meeting is to determine whether there are grounds for a Section 47 Enquiry.

#### Statement of Special Education Needs (SEN)

From 1 September 2014, Statements of Special Educational Needs were replaced by Education, Health and Care Plans. (The legal test of when a child or young person requires an Education, Health and Care Plan remains the same as that for a Statement under the Education Act 1996).

## Staying Put

A Staying Put arrangement is where a Former Relevant child, after ceasing to be Looked After, remains in the former foster home where they were placed immediately before they ceased to be Looked After, beyond the age of 18. The young person's first Looked After Review following his or her 16th birthday should consider whether a Staying Put arrangement should be an option.

It is the duty of the local authority to monitor the Staying Put arrangement and provide advice, assistance and support to the Former Relevant child and the former foster parent with a view to maintaining the Staying Put arrangement (this must include financial support), until the child reaches the age of 21 (unless the local authority consider that the Staying Put arrangement is not consistent with the child's welfare).

# Unaccompanied Asylum Seeker

A child or young person under the age of 18 who has been forced or compelled to leave their home country as a result of major conflict resulting in social breakdown or to escape human rights abuse. They will have no adult in the UK exercising Parental Responsibility.

#### Virtual School Head

Section 99 of the Children and Families Act 2014 imposes upon local authorities a requirement to appoint an officer to promote the educational achievement of Looked After children - sometimes referred to as a 'Virtual School Head'.

# Working Together to Safeguard Children

Working Together to Safeguard Children is a Government publication which sets out detailed guidance about the role, function and composition of Local Safeguarding Children Boards (LSCBs), the roles and responsibilities of their member agencies in safeguarding children within their areas and the actions that should be taken where there are concerns that children have suffered or are at risk of suffering Significant Harm.

#### Young Offender Institution (YOI)

The Youth Justice Board (YJB) is responsible for the commissioning and purchasing of all secure accommodation for under 18-year-olds ('juveniles'), whether sentenced or on remand. Young offender institutions (YOIs) are run by the Prison Service (except where contracted out) and cater for 15-20 year-olds, but within YOIs the Youth Justice Board has purchased discrete accommodation for juveniles where the regimes are specially designed to meet their needs. Juvenile units in YOIs are for 15-17 year-old boys and 17-year-old girls.

#### Youth Offending Service or Team

Youth Offending Service or Team (YOS or YOT) is the service which brings together staff from Children's Social care, the Police, Probation, Education and Health Authorities to work together to keep young people aged 10 to 17 out of custody. They are monitored and co-ordinated nationally by the Youth Justice Board (YJB).

#### Sources

Tri.x live online glossary: <a href="http://trixresources.proceduresonline.com/">http://trixresources.proceduresonline.com/</a> - a free resource, available to all which provides up to date keyword definitions and details about national agencies and organisations.

Southampton Local Safeguarding Board http://southamptonlscb.co.uk/

# Agenda Item 10

DECISION-MAKER:	CHILDREN AND FAMILIES SCRUTINY PANEL
SUBJECT:	MONITORING SCRUTINY RECOMMENDATIONS
DATE OF DECISION:	22 JULY 2021
REPORT OF:	SERVICE DIRECTOR – LEGAL AND BUSINESS OPERATIONS

		CONTACT DETAILS		
<b>Executive Director</b>	Title	<b>Deputy Chief Executive</b>		
	Name:	Mike Harris	Tel:	023 8083 2882
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STAT	TEMENT OF CONFIDENTIALITY										
None	None										
BRIE	BRIEF SUMMARY										
	tem enables the Children and Families Scrutiny Panel to monitor and track ess on recommendations made at previous meetings.										
REC	OMMENDATIONS:										
	(i) That the Panel considers the responses to recommendations from previous meetings and provides feedback.										
REAS	SONS FOR REPORT RECOMMENDATIONS										
1.	To assist the Panel in assessing the impact and consequence of recommendations made at previous meetings.										
ALTE	ERNATIVE OPTIONS CONSIDERED AND REJECTED										
2.	None.										
DETA	AIL (Including consultation carried out)										
3.	Appendix 1 of the report sets out the recommendations made at previous meetings of the Children and Families Scrutiny Panel. It also contains summaries of any action taken in response to the recommendations.										
4.	The progress status for each recommendation is indicated and if the Children and Families Scrutiny Panel confirms acceptance of the items marked as completed they will be removed from the list. In cases where action on the recommendation is outstanding or the Panel does not accept the matter has been adequately completed, it will be kept on the list and reported back to the next meeting. It will remain on the list until such time as the Panel accepts the recommendation as completed. Rejected recommendations will only be removed from the list after being reported to the Children and Families Scrutiny Panel.										

RESOURCE IMPLICATIONS  Capital/Revenue/Property/Other												
Capital	/Revenue/Property/	<u>Other</u>										
5.	5. None											
LEGAL	LEGAL IMPLICATIONS											
Statuto	Statutory power to undertake proposals in the report:											
6.	6. The duty to undertake overview and scrutiny is set out in Part 1A Section 9 of the Local Government Act 2000.											
Other L	Other Legal Implications:											
7.	7. None											
RISK M	RISK MANAGEMENT IMPLICATIONS											
8.	None											
POLICY	Y FRAMEWORK IMP	PLICATIONS										
9.	None											
1/E)/ DI												
	ECISION?	No										
WARDS/COMMUNITIES AFFECTED: None												
SUPPORTING DOCUMENTATION												
Append	dices											
1.	Monitoring Scrutiny	Recommendat	ions – 22 J	uly 2021								
2.	Update on the impl	ementation of th	ne Priority A	action Improvement	t Plan							
Docum	ents In Members' R	looms										
1.	None											
Equalit	y Impact Assessme	ent										
	implications/subject o Assessment (ESIA) t		•	ality and Safety	No							
Data Pı	rotection Impact As	sessment										
	Do the implications/subject of the report require a Data Protection Impact Assessment (DPIA) to be carried out.											
Other E	Background Docum	ents										
Other E	Background docum	ents available	for inspect	ion at:								
Title of	Background Paper	(s)	Informa Schedu	nt Paragraph of th tion Procedure R le 12A allowing d npt/Confidential (	ules / ocument to							
1.	None											

# **Children and Families Scrutiny Panel**

Scrutiny Monitoring – 22 July 2021

Date	Title	Action proposed	Action Taken	Progress Status
01/10/20	Children's Services - Performance	That the planned threshold review is considered at a future meeting of the Panel.	On agenda for 22/07/21.	Complete
01/10/20	Recruitment of In-House Foster Carers	That consideration be given to providing full time funding for the proposed specialist foster carers.	Response included in Appendix 2 to the Placement Sufficiency agenda item.	Complete
		<ol> <li>That examples of the feedback provided by enquirers who did not progress to become foster carers is circulated to the Panel.</li> </ol>	Response included in Appendix 2 to the Placement Sufficiency agenda item.	Complete
17/06/21 D age 88	Children's Services - Performance	1) That the Executive Director provides the Panel with an overview of the key actions, developments and milestones that are fundamental to delivering the stated ambition to realign the focus of our services from assessment to intervention.	The recommendation is that the overview is shared with the Panel in September 2021, alongside the refreshed improvement plan.	Recommend presentation at Panel in September 2021.
17/06/21	Ofsted Focused Letter	That the Cabinet Member for Education lobbies the Government, on behalf of the Council, to give local authorities additional powers with regards to the oversight of elected home educated children.	The Cabinet Member has received a briefing from the Head of Education and Early Years on Elected Home Education.	Partially complete
		<ol> <li>That the Panel are provided with an update on the implementation of the Priority Action Improvement Plan in advance of the 22 July meeting of the Panel.</li> </ol>	Update attached as Appendix 2	Complete

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Responsible Officer	Action	Target date	Performance measurement	Key Partners	Review
Julian Watkins  – Head of Service	Urgently review all existing unregistered placements to provide assurance that 1. Initial checks on the quality and safety of the placement have been undertaken 2. The child and the placement are being visited regularly, face to face, with close oversight in place of frequency and quality of visiting 3. There is a clear plan in place for the child with contingency, considering success of ongoing placement search 4. The registration status of the placement is clear and has been verified by Ofsted	By 1 <sup>st</sup> June 2021	Appropriate approvals and robust senior management oversight will be evident on the child's file  There will be written evidence of registration status and contact with Ofsted, if required	Provider Ofsted	Completed. This work has been undertaken by the HoS. Moving forward, the new panel arrangements will ensure rigorous oversight is BAU, alongside monthly briefings to the Deputy Director and Executive Director.
Julian Watkins  – Head of Service	Urgently review all PWP and regulation 24 placements to ensure that approvals are in place for each child and properly recorded on Paris	By 28 May 2021	Performance information taken directly from Paris confirms that approvals are in place for all children	Data team	Completed. Head of Service reviewed cases in June 2021 and has ongoing oversight as nominated officer.
Martin Smith – Service Manager, Permanence	Act as named lead re unregistered placements in future – to maintain oversight and advise, update and seek guidance from Ofsted.  A check list will be developed covering the information Ofsted needs to know.	By 31 <sup>st</sup> July 2021	The service practice standard is that unregistered provision should not be used. However, in circumstances where there is no alternative:  • Senior managers will have detailed oversight of quality of placement, plan for child and placement search  • Ofsted will be sighted and updated  • Non-negotiable practice standards will apply, including notification to host authority and regular face to face visiting	Commissioning	Partially complete and within timeframe - The service manager has confirmed he will act as lead, with the Deputy Director being point of contact with Ofsted. The checklist will be explored by the service manager and deputy director.
Martin Smith	Confirmation of permissions / oversight process and checks with unregistered providers as Ofsted would do for registered placements	By 30 <sup>th</sup> August 2021	Quality and safety of placements will be assured (** this will be separate to social work intervention with the child)	Commissioning	Partially complete and within timeframe. This is now in our practice guidance, which will be signed off at the service managers meeting on 13 <sup>th</sup> July 2021.
Julian Watkins  – Head of Service	Introduce a new panel to ensure that unregistered placements are robustly overseen and tracked	By 30 <sup>th</sup> June 2021	Unregistered placements will be approved by a senior manager, and rigorously overseen and tracked. This will be evidenced on the child's file and reported on a monthly basis to senior managers by the Head of Service	Business Support	Completed. Initial assurance panel held 9 June. Terms of reference confirmed. Fortnightly 'exceptional arrangements panel' diarised from 16 July. Deputy Director is vice chair.
Julian Watkins  – Head of Service	Management approvals of unregistered placement will be recorded as case notes in Paris. This will include senior management oversight at head of service level as a minimum	By 30 <sup>th</sup> June 2021	Management oversight will be consistent, clear and evident on the child's file	Paris Team	A process has been agreed to support consistent HoS oversight, with administrative support.

Responsible Officer	Action	Target date	Performance measurement	Key Partners	Review
Jo Feeney – Performance Manager	Review performance and data reporting in respect of unregistered, PWP and reg.24 placements. Provide reports to relevant panel and to senior leadership team via learning and improvement panel and Improvement Board	By 30 <sup>th</sup> June 2021	Data will be accurate, up to date and shared in the right forums to allow proper scrutiny. The service will be better held to account in respect of timeliness of approvals through more detailed data reporting.	Data Team	Complete – the performance manager now provides regular reports to inform senior management oversight. Moving forward, this will support the panel activity.
Martin Smith – Service Manager, Permanence	Identify a lead member of staff to monitor placement information; updating changes where necessary	By 30 <sup>th</sup> June 2021	Placement information will be consistently accurate	Core social work teams / Children with Disabilities team	This is complete – the role of the Looked after Children placement officer has been strengthened. Going forward, we will ensure that every social worker is aware of post.
Jo Feeney – Performance Manager	Ensure that learning from inspection informs case management system development.	By 30 <sup>th</sup> June 2021	Unregistered and Unregulated placements recording in Care Director will be clear and support good practice.	Care Director Project Team	Complete - The performance manager is also the link person for Care Director implementation and is ensuring that the new system meets the service data requirements in these areas.
Martin Smith – Service Manager, Permanence	Practice briefing to staff regarding respect of unregistered, PWP and reg.24 placements  (Draft appended)  Draft Briefing for Staff.docx	By 16 <sup>th</sup> June 2021	Staff will begin to receive clear, up to date guidance regarding their responsibilities.	Communications team	Complete – Practice Development Team bulletin has been circulated.
Stuart Webb – Quality Assurance Unit Manager / Karen Biddle – Principal Social Worker	Mandatory briefings for relevant staff on minimum expectations and good practice in relation to reg 24, PWP and unregistered placements.	By 30 <sup>th</sup> August 2021	All relevant staff will attend or watch recording, and this will be part of induction for new staff including agency.	Communications team	Discussion / planning arranged with Principal Social Worker for 12 <sup>th</sup> July 2021.
Sarah Ward – Service Manager, PACT / Mary Hardy – Service Manager, Looked after Children & Care Leavers / Jacqui Schofield, Service Manager, MASH, EDT and Assessment / Stephanie Simpson – Team Manager, Children with Disabilities Team	Implement learning circles- so awareness regarding key themes and responsibilities continues and timeliness of risk assessment completion improves.	By 30 <sup>th</sup> August 2021	Staff will be able to confidently articulate their responsibilities. Individual and team practice will improve as a result of live case discussions in learning circles.	Operational teams	Partly complete – In, PACT, this work has begun and will continue to be discussed in team meetings on an ongoing basis to ensure all workers are clear and that any emerging patterns or concerns continue to be addressed. Clarification will be sort regarding the development in the other service areas.

Responsible Officer	Action	Target date	Performance measurement	Key Partners	Review
Sarah Ward – Service Manager, PACT	Engage with core stakeholders, specialist assessment teams and legal services to review cases where approvals have been delayed and to agree a response so that the risk of further delays is eliminated	By 31 <sup>st</sup> August 2021	Stakeholders will support core service decision making; with escalation to Deputy Director if appropriate.	Legal Services / SAT	This will be completed by 31st August 2021.
Julian Watkins, Head of Service / Jacqui Schofield, Service Manager, MASH, EDT and Assessment	Create Emergency Duty Team (EDT) policy / guidance.	By 31 <sup>st</sup> July 2021	Formal Emergency Duty processes and guidance.	Policy Framework Provider	Meeting arranged with HoS and Service Manager on 16 <sup>th</sup> July 2021. Intention is to update existing EDT guidance and circulate / brief the team.
Stuart Webb – Quality Assurance Unit Manager	All activity is covered off in the procurement of the new e-policy resource.	By 30 <sup>th</sup> August 2021	Requirements will be clearly outlined in revised Policy Framework	Procurement Team	Progress evident - Approval to procure Tri.x has now been granted. We are moving to signing the contract.
Elizabeth Robertson – Lead Independent Reviewing Officer	IRO challenge and scrutiny of placements  An IRO Case Discussions will be evident at the onset of any unregulated, unregistered and PWP placement. IRO Case Discussions will take place at agreed frequencies depending on the type of placement. Additionally, a Care Plan Review will be arranged to review the Care/Pathway Plan.	From 10 <sup>th</sup> May 2021	There will be evidence of IRO scrutiny and challenge. Concerns will be escalated appropriately. Impact of any IRO activity will be made clear.	IRO Service	IRO escalation analysis is being circulated to senior management team. In addition, the IROs are participating in the focused audit around levels of contact with looked after children in July 2021.
Stuart Webb – Quality Assurance Unit Manager	Case audit of VB; to understand use of unregistered placement; placement decision making and quality of practice	22 <sup>nd</sup> July 2021.	QA Unit review results to be shared with DD and HOS and discussed with placement and social work teams.	Practice Development Team	In train – audit has been allocated to an advanced practitioner in the Practice Development Team.
Julian Watkins  – Head of Service; Mary Hardy - Service Manager, Looked after Children and Care Leavers; Stuart Webb, Quality Assurance Unit Manager	Monitoring of direct visits to children and young people in care in their placements.	By 10 <sup>th</sup> June 2021 (Review position in Learning and Improvement Panel)	The service will be reassured that children have been seen face to face, continue to be seen and are safe and stable in placement.	Data Team	Complete – the service now has a good understanding of the levels of face to face contact through weekly reports. A clear management expectation has been given to staff regarding contact, which we said will be in line with DfE six weekly requirements. In addition, we have focused audit activity running for four weeks in July 2021 involving the team managers and IROs so that we can understand the quality of practice and contact with children.

Responsible Officer	Action	Target date	Performance measurement	Key Partners	Review
Stephanie	Ensure that there is a clear service understanding of quality of practice with and the experiences of	30 <sup>th</sup> September 2021	The quality assurance unit will work with the service area to scope and	Data Team	This is scheduled to take place in August 2021, after the audits. Plan embedded below.
Murray – Deputy	looked after children.	2021	deliver a thematic audit of practice		w in the second
Director;			against the Ofsted ILACS framework		
Julian Watkins			and local practice standards.		Looked after Children and Care Leaver audit
– Head of					and care Ecaver addit
Service; Stuart					
Webb, Quality					
Assurance					
Unit Manager Stuart Webb –	Ensure senior-level line of sight of improvement	From 10 <sup>th</sup> June	There will be regular reports to	Data Team	Quality assurance report will be presented to Improvement Board in September 2021. IRO
Quality	activity; progress against improvement plans and any		Learning and Improvement Panel,	IRO service	annual report scheduled for Corporate Parenting Committee in November 2021. Scrutiny
Assurance	ongoing practice issues	2021	Improvement Board and Corporate	into service	Panel focus on Quality Assurance in January 2022 (recommendation that there is a further
Unit Manager	9 6 6 F	Lead IRO report	Parenting Committee. These will		QA report to Improvement Board in December 2021, to inform scrutiny panel presentation
		November	include progress reports against the		and report to DfE)
		2021.	priority improvement plans,		
			alongside the annual Lead		
			Independent Reviewing Officer's		
			report.		

# Action Plan: Management oversight of services to care leavers

	Responsible Officer	Action	Target date	Performance measurement	Key Partners	Review
π	Julian Watkins	HOS and Service manager will routinely and	Initial position	The service will be reassured that	Data Team	Data is reported routinely to senior managers. Current position is that 21% of visits are not
-	– Head of	rigorously review the frequency of face to face visits	by 4 <sup>th</sup> June.	care leavers have been seen face to		in time. However, this is expected to improve with the new staff becoming operational as
	Service;	to care leavers	Summary	face, continue to be seen and are		part of D22 programme.
	Service, CSC;		position 10 June	safe and stable in their		
	Mary Hardy -		2021 (Review in	accommodation.		
	, , Service		Learning and			
	Manager,		Improvement	Where care leavers are not in regular		
	Looked after		Panel).	contact with the service, assertive		
	Children and			attempts are made to establish their		
	Care Leavers			welfare and circumstances.		
	Stuart Webb,					
	Quality					
	Assurance					
	Unit Manager.					
	Julian Watkins	Ensuring the right level of staffing in the care leavers	By 30 <sup>th</sup>	Three new personal advisors have	HR Recruitment	This is being factored into Destination 22 structural proposals that will be costed week
	– Head of	service.	September 2021	recently joined the service.		commencing 12 <sup>th</sup> July 2021, ahead of formal consultation proposed to begin at the end of
	Service;			Additional PA support is included		the month.
	Service, CSC;			within the Destination 22 project		
	Mary Hardy –			plan		
	Service					
	Manager,					
	Looked after					
	Children and					
	Care Leavers					

Responsible Officer	Action	Target date	Performance measurement	Key Partners	Review
Mary Hardy – Service Manager, Looked after Children and Care Leavers	Assertive attempts will be made to engage with care leavers not in contact with the service to review their circumstances	By 10 <sup>th</sup> June 2021 (Review position in Learning and Improvement Panel).	The service will be reassured that any care leavers not in contact have been encouraged to engage, to identify if the service can help them.	Data Team	We are currently in touch with 86% of 17 to 18-year olds and 96% of 19 – 21 year olds.  The service manager has updated that she will use our data to review down into individual PA levels of contact. Clear standards have been outlined with the team. Again, the recruitment of new personal advisors will assist in improving levels of contact.
Mary Hardy – Service Manager, Looked after Children and Care Leavers	Ensure that the emotional and mental health needs of care leavers are explored with their PAs.	By 30 <sup>th</sup> June 2021	All pathways plans will include consideration of emotional wellbeing and how this will be supported, if there is a need.	Designated Looked after Children Nurse	Regarding practice, clear expectations have been set with the team. Strategically, emotional and wellbeing support is included in the Destination 22 programme. A discussion has started with health regarding a single point of contact for Strengths and Difficulties Questionnaire referrals and the intention is to take this to the Multi Agency Children's Board (MACB). In Care Director, emotional and wellbeing support will be explicitly recorded in Pathways Plans.
Mary Hardy – Service Manager, Looked after Children and Care Leavers  Care experienced apprentices	Care leavers will be consulted to identify any barriers to accessing emotional and mental health support	By 29 <sup>th</sup> June 2021	Where any problems regarding service access are identified, these will be flagged with health colleagues to request support.	Corporate Parenting Committee	Complete - Levels of contact are identified as the biggest barrier to identifying emotional and mental health needs. The service manager updates that the clear practice standards and increased staff will assist. Personal advisors are being encouraged to increase telephone, text and social media contact; alongside face to face contact, which is eightweekly as a minimum.
Clodagh Freeston – Service Manager, Education Strategy, Planning and Improvement  Sajid Butt – Strategic Skills Manager	A young people progression and NEET prevention update will be presented to corporate parenting committee by the Service Manager, Education Strategy, Planning and Improvement  This forms part of the wider strategic education and skills plans held by the Service Manager, Education Strategy, Planning and Improvement and Strategic Skills Manager	By 30 <sup>th</sup> September 2021	Committee will be assured of education, training and employment activity as part of the service recovery planning from the pandemic.	Corporate Parenting Committee	There are NEET updates provided to the CPC as part of the standing agenda. This area would benefit from more detailed data analysis and the performance manager will support this.
Julian Watkins  – Head of Service; Service, CSC	Accommodation elements of the Destination 22 programme (homeless protocol; input into supported living re-procurement) will progress.	By 30 <sup>th</sup> September 2021	Evidence of progress against Destination 22 core workstreams	Integrated Commissioning Unit	Critical area for D22 accommodation workstream is the residential children's home element. This has been challenging due to the local property market. But there are now plans in place to progress this.

Responsible Officer	Action	Target date	Performance measurement	Key Partners	Review
Donna Chapman – Associate Director, ICU / Stuart Webb – Quality Assurance Unit Manager / Karen Biddle – Principal Social Worker	Transitions task and finish group to brief senior leaders in adults and children's services on improvement recommendations.	By 30 <sup>th</sup> August 2021	There will be senior management line of sight of activity to improve transitions arrangements and resource identified to address any barriers to effective transition	Adults Services	Meeting with DCS, DAS and Associate Director CCG took place in July 2021. Actions agreed include data analysis and a deep dive into outcomes for children who have transitioned and financial scoping. This will then inform the business case for the Transitional Lead possible who will drive the work forward. Initial discussions between the EDs that this would be jointly funded.
Stephanie Murray – Deputy Director; Julian Watkins – Head of Service; Stuart Webb, Quality Assurance Unit Manager	Ensure that there is a clear service understanding of quality of practice with and the experiences of care leavers.	30 <sup>th</sup> September 2021	The quality assurance unit will work with the service area to scope and deliver a thematic audit of practice against the Ofsted ILACS framework and local practice standards.	Data Team	Benchmarking exercise against ILACS framework scheduled for August 2021.
Stuart Webb – Quality Assurance Unit Manager	Ensure senior-level line of sight of improvement activity; progress against improvement plans and any ongoing practice issues.	From 10 <sup>th</sup> June 2021	There will be regular reports to Learning and Improvement Panel, Improvement Board and Corporate Parenting Committee.	Data Team IRO service	Quality assurance report will be presented to Improvement Board in September 2021.  Scrutiny Panel focus on Quality Assurance in January 2022 (recommendation that there is a further QA report to Improvement Board in December 2021, to inform scrutiny panel presentation and report to DfE)