

Southampton's Children
and Young People's

Corporate Parenting Annual Report 2020/21

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to children and their families



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Children
& Learning
Making a difference



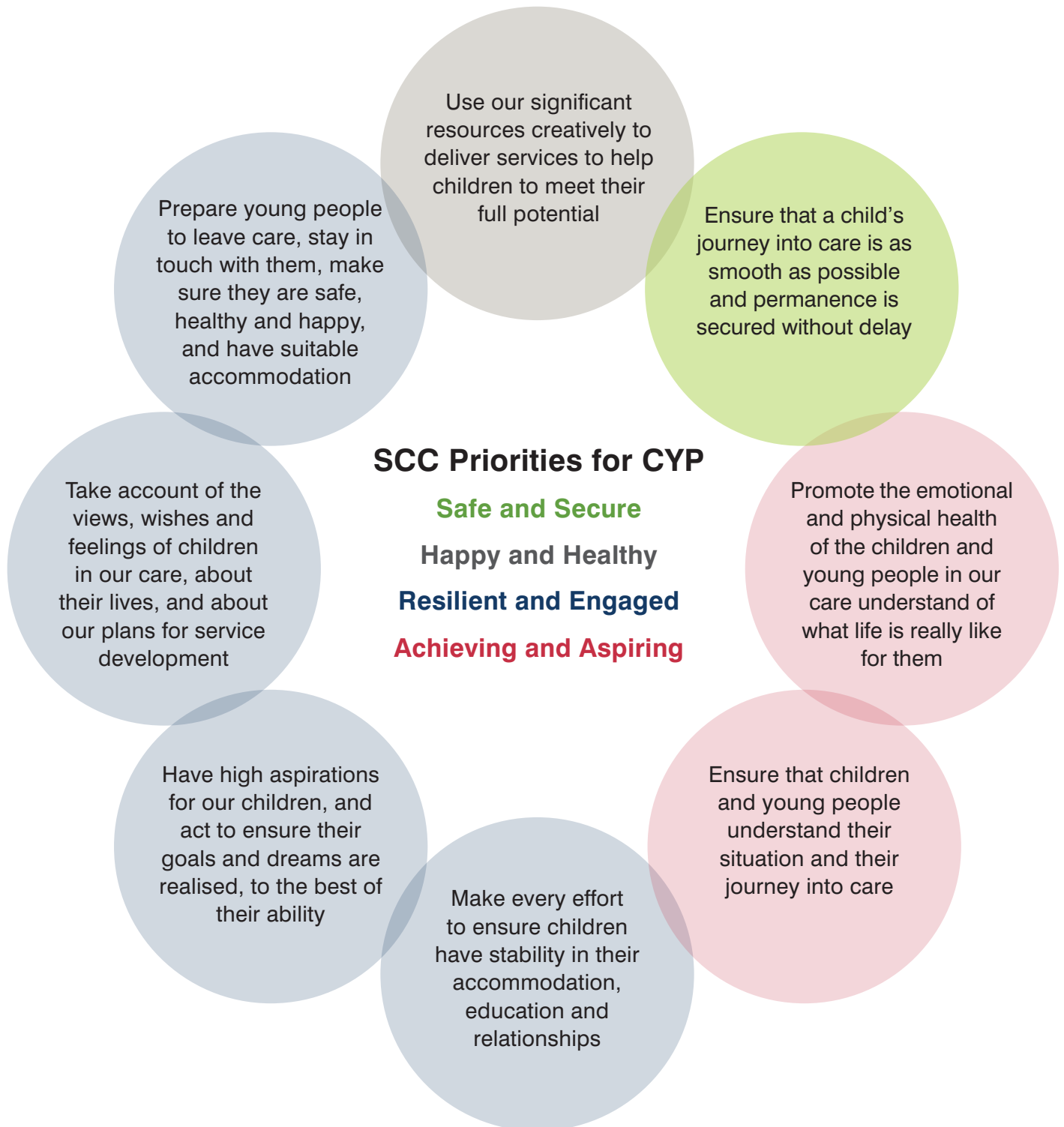
SOUTHAMPTON
CITY COUNCIL



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.

Corporate Parenting Annual Report 2020/21



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What corporate parenting means to us

The concept of corporate parenting was formalised in the Children and Social Work Act 2017 to and accompanying Applying Corporate Parenting Principles to Looked After Children and Care Leavers statutory guidance in February 2018. It enshrines other legal responsibilities set out in the Children Act 1989, Children Act 2004, Leaving Care Act 2000, and Care Planning Regulations to how local authorities and multi-agency partners must work together to help safeguard and promote the wellbeing of children and young people in care and those leaving our care.

In essence, it is how the entire council and our partner agencies see themselves as the parents to the most vulnerable children and young people in Southampton to ensure they have a better and safer experience in our care and help them to aspire, achieve, and succeed later as adults in our community.

Elected members in Southampton carry out our corporate parenting duty through:

- i. Regular meetings between the Cabinet Member for Education and Children's Social Care and the Executive Director for Children's Learning and Wellbeing Service
- ii. Scrutiny of regular reports at the Corporate Parenting Committee
- iii. Representation from the Southampton Voices Unite (previously known as the Young People in Care Council) at relevant meetings
- iv. The Children and Families Scrutiny Panel, led by elected members, robustly examining the work and performance of services and outcomes for children and young people in the city with a focus on children in care and care leavers.

This report outlines how well we have delivered on our eight corporate parenting principles that Southampton City Council has adopted as part of the 'Looked After Children and Care Leavers Service Delivery Plans' from 2018-21 and outlines our plans for continual improvement.

We invite challenge and scrutiny as well as to share and celebrate our successes, much as a family would do regarding their own children and young people they care for.



Setting the scene

This has been a unique and challenging year, dominated by the global Covid-19 pandemic, which has affected lives hugely and caused us as a workforce to have to 'dig deep' and be creative in our thinking about the way we have delivered our support to help keep children and young people safe and well cared for.

On 8 March 2021, the Adoption and Children (Coronavirus) (Amendment) Regulations 2021 were made and came into force on 30 March 2021. In light of the ongoing COVID-19 pandemic, the expiry date for the easing of regulatory requirements has been extended from 31 March 2021 to 30 September 2021, in relation to social work visits, adoption assessments, the frequency of Ofsted inspections and registered person visits to residential family centres.

It is also well established that for the past decade we have underperformed in relation to getting our service delivery beyond a requires improvement standing with Ofsted to at least good or better.

We also had the challenge to contend with the "culture of fear" report that impacted on workplace morale and working conditions.

The appointment of our new Executive Director has meant change in leadership and direction of travel for the service. His brief is to transform our service delivery, in order to improve outcomes for the children and families we work with. The proposals for how we will take that transformation forward are contained in a "Destination 22" document which you will also find referenced within this report.

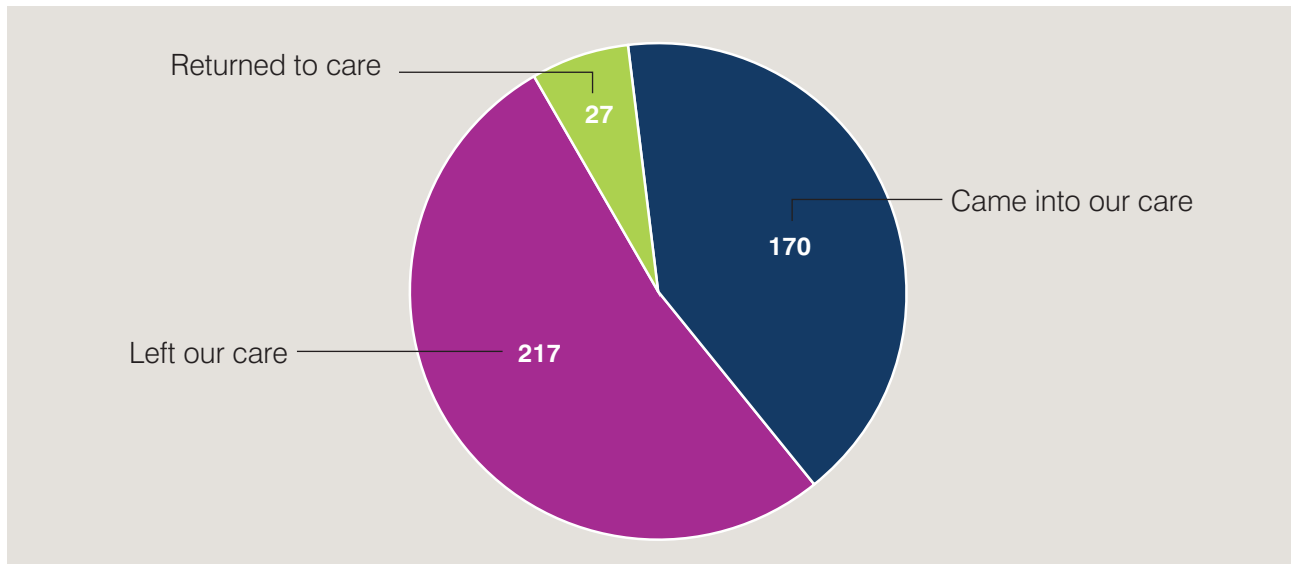
At the time of writing this report, the first stage of consultation in respect of the proposals for how we achieve this service transformation is underway. We are on a change improvement journey which will last throughout this year and into the next, our intended 'destination' being to deliver quality child-centred services to our children and families, where possible, from locality bases.



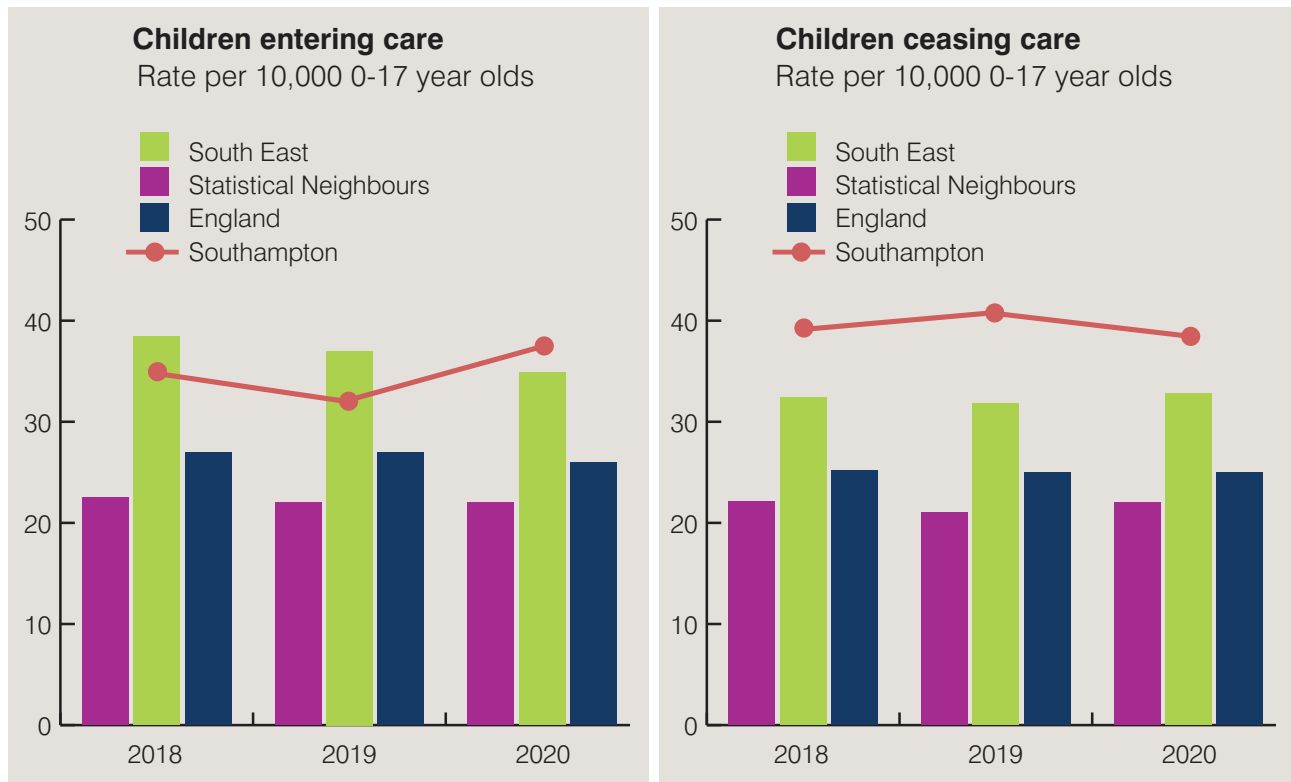
The children, young people, and care leavers we are corporate parents of

For the financial year of **2020-21 we cared for 495 children and young people**. This is a slight increase on the previous year where we cared for 490 children and young people.

Over this time, some children and young people came into our care for periods of time and then left our care to go back to live with their families or with other families we connected them with. Some left and returned to our care again during the year. Others left our care and moved on into adulthood and independence. These are shown in the following graph:

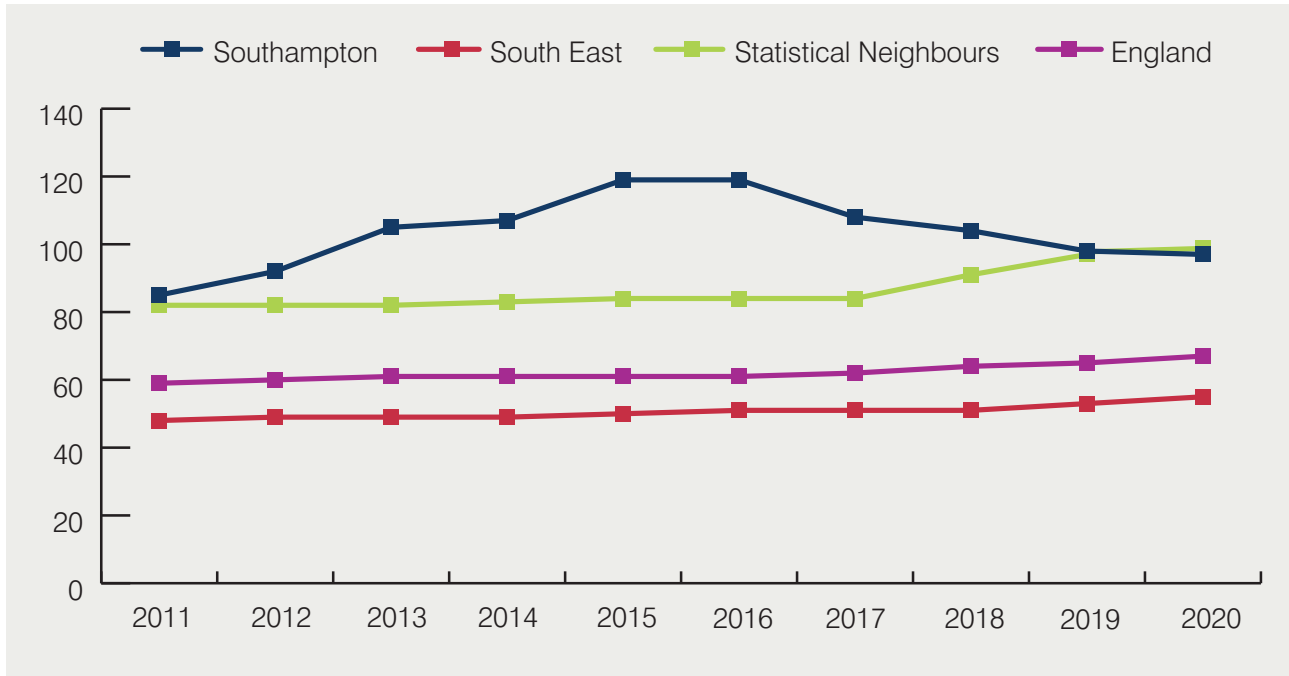


Over the past three years the number of children and young people entering and leaving our care compared to those of our statistical neighbours, across England, and the south east region is as follows:



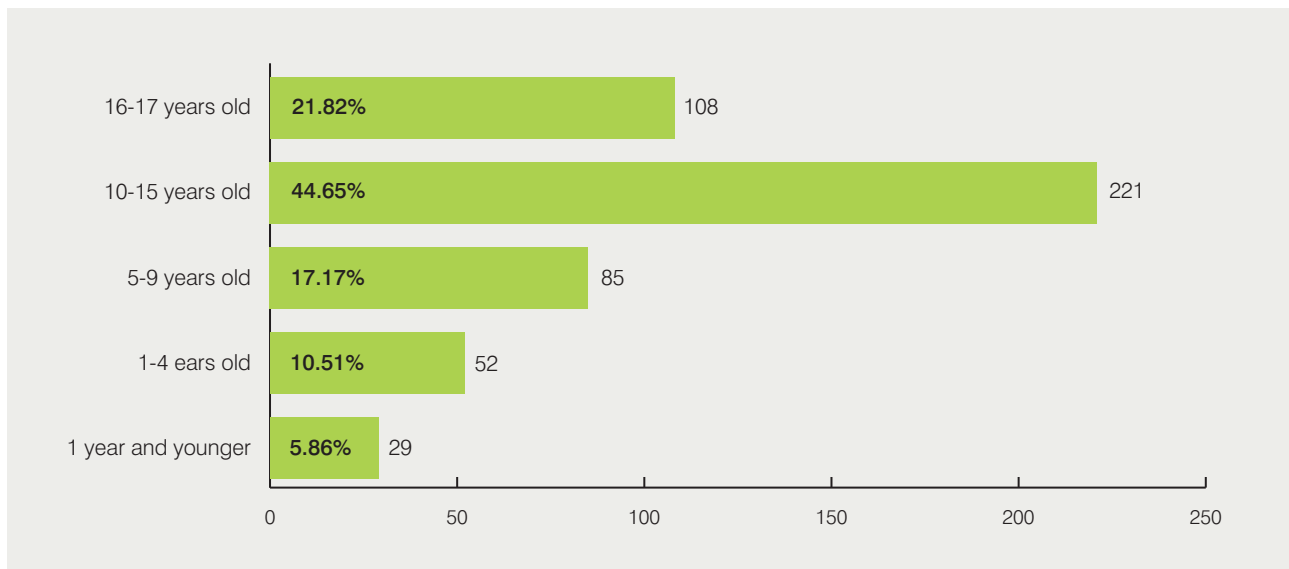
The graph below shows Southampton's rates of children and young people in our care from 2011-2020, compared to those of our statistical neighbours, across England, and the south east region.

Children in care - Rate per 10,000 0-17 year olds

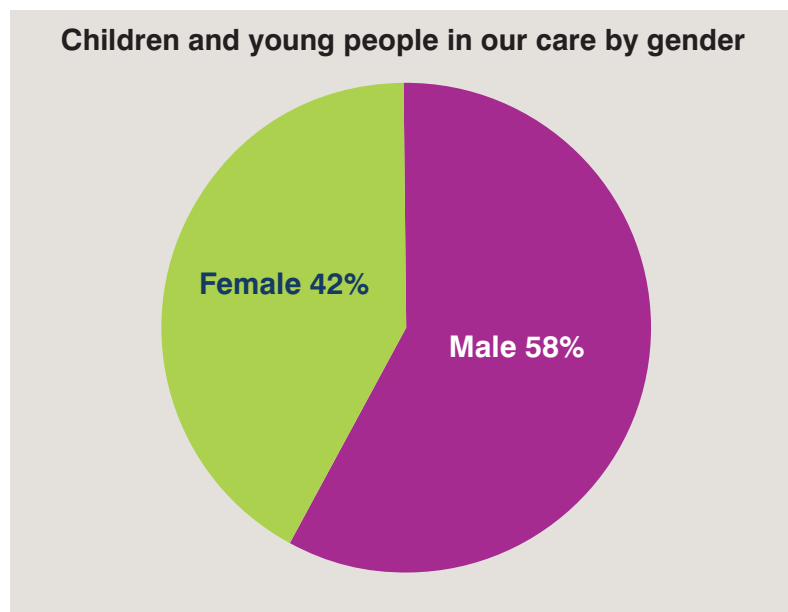


The graph below shows the age ranges of the children and young people we have cared for over the past year, which has remained relatively unchanged:

Children and young people in our care by age

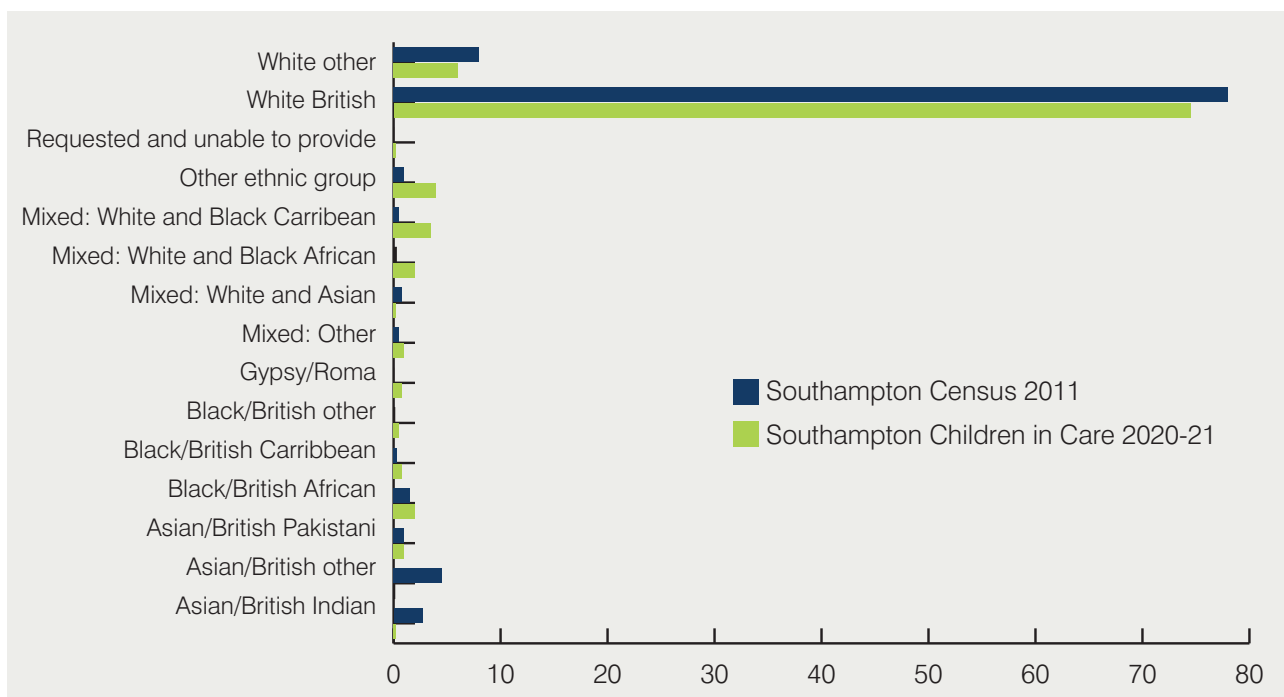


The percentage of children and young people in our care by gender remains relatively unchanged for the past four years. The following graph shows the proportion of children and young people in our care by gender. This is done by their gender identity at birth and not by how they may identify now or those who identify as non-binary.



Comparing the ethnicity of children and young people in our care to the overall ethnic makeup of the Southampton community in the 2011 census, this shows proportionately we have slightly fewer children in our care from white British and other communities and significantly fewer from Asian/British Other and Indian communities. It also shows we are caring for significantly higher proportion of children and young people from mixed white/black Caribbean and African Gypsy/Roma, and those from other ethnic communities. It should be noted that this is based on a comparison of children and young people under 18 years of age with the overall makeup of the Southampton community by all ages, not specifically young people and children. The following graph shows a breakdown of the children and young people in our care by their ethnicity.

Percentage of children and young people in our care by ethnicity



Keeping Children and Young People Safe and Secure

Smooth Transition into Care

Help me understand my journey into care

When children and young people come into our care it can be a daunting and confusing experience for them. It is important that they are prepared as best as possible, which is often made difficult by the difficult circumstances within their own family leading to them coming into our care. It is important their social worker introduce them to their new carer, visit them again within a week to see how they are doing, and have clear plans in place for what their immediate and likely future plans will be.

Children will also be allocated an independent reviewing officer (IRO) who is responsible for obtaining their wishes and feelings and providing oversight, quality assurance, and scrutiny of the local authority's care plan for that child. They will hold a looked after child review meeting with the first review within 18 working days of the child coming into our care. These meetings will involve the child or young person to the greatest extent, their parents, carers, and other professionals, such as teachers and healthcare workers, who are collectively responsible for providing care for the child, ensuring their needs are being met whilst in our care, and being clear about what their future care arrangements will look like and how they can best support this. Following the meeting the IRO will write a personal letter to the child to explain what was discussed at their review meeting and what has been agreed in a way they can best understand.

The IRO is responsible for reviewing the care plan to ensure the child is in our care for the right reasons, there is clarity about whether they can return home to their family and by when, or whether they need to be cared for by someone else and what support and time is needed to explore all these options. They will also meet with the child or young person, support them to attend their review, and most importantly ensure it is child focused and that the child's wishes and feelings are shared and taken into account when we are acting in their best interest.

Where the IRO is not satisfied that care plans for a child or young person are proceeding as they should, they will challenge this; first informally with the social worker and, their line manager and if necessary, escalate this to more senior managers in order to seek an appropriate resolution. The IRO will also support the child or young person getting an independent advocate with NYAS who can also support the child with making sure their views, wishes, and feelings are shared, heard, and acted upon. During this past year 98 referrals were made for advocacy.

During this period the IRO service has convened 1289 looked after reviews for our children with 91.5% taking place within timescale. Of these, IROs raised 111 alerts, which is their means of challenging where they believe the child's care plan is not robust enough or being implemented in a timely way.

One concern emerging from feedback to the IRO from children and young people is that 87.5% of them have said by their second review they still do not know what the plans are for their present and future. This despite 58% saying they feel listened to. Only 42% said they feel involved in making their care plan.

Changes in social worker, worker sickness, and service changes make it difficult to bring about stability for children. To help address these areas of further improvement, the Destination 22 strategy aims to restructure the service to help provide better support and stability in the service. The Lead IRO worked with the Workforce Development Team on training to social workers on child focused care planning and emphasising the voice of the child and their involvement in their care planning.

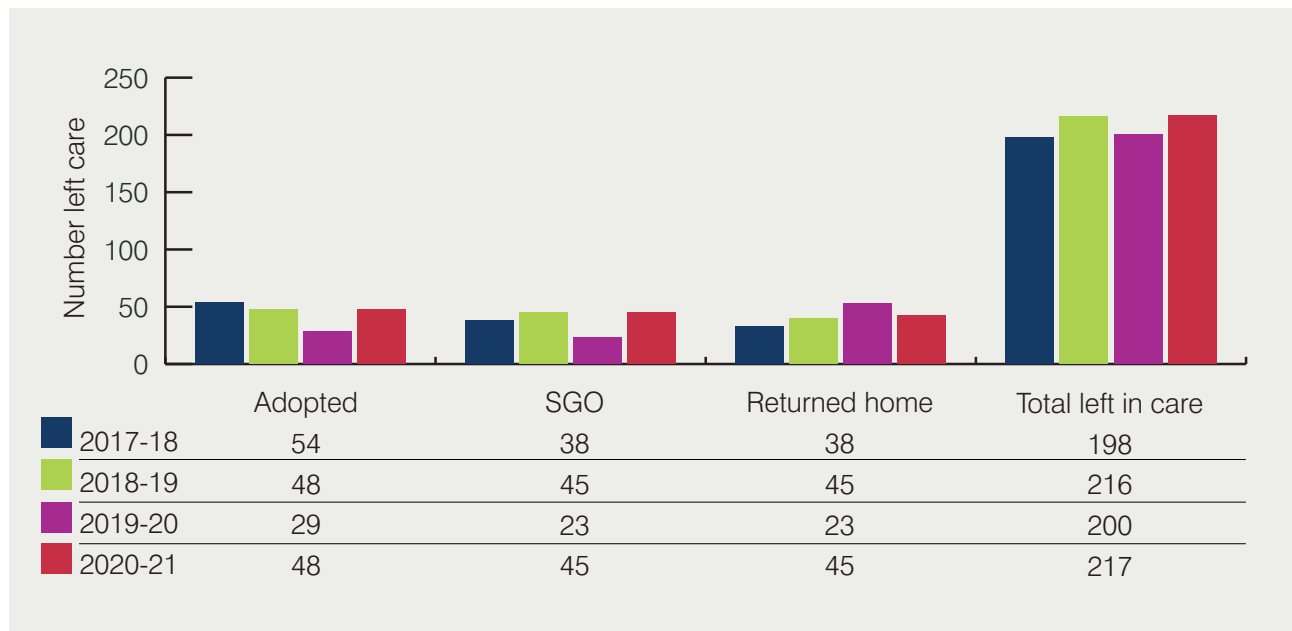
Further training to the workforce on the narrative and systemic models of social work practice is being developed with the aim to help social workers and managers understand how trauma affects children and the importance of helping them understand their history and why they are in our care has to their overall recovery.

Establishing permanence as soon as possible

For some children and young people, permanence is achieved by remaining in our care where it is deemed to be in their best interest. For many others, permanence is achieved by being adopted by a new family, by another closely connected person obtaining a Special Guardianship Order (SGO), or by returning home to their parents when it is safe enough to do so.

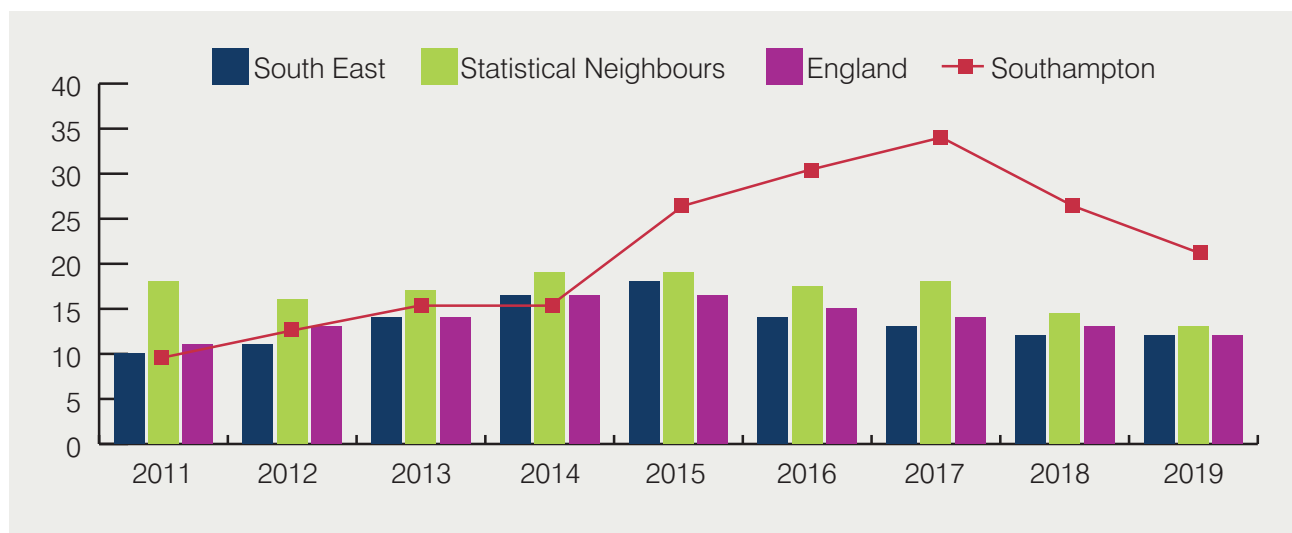
The following table shows how permanence was achieved for children and young people who have left our care.

How permanence is achieved for children leaving our care



The following table shows a further breakdown of how many children we have found adoptive families for compared to our regional neighbours, statistical neighbours, and across the country:

Percentage of children adopted, of all children in care

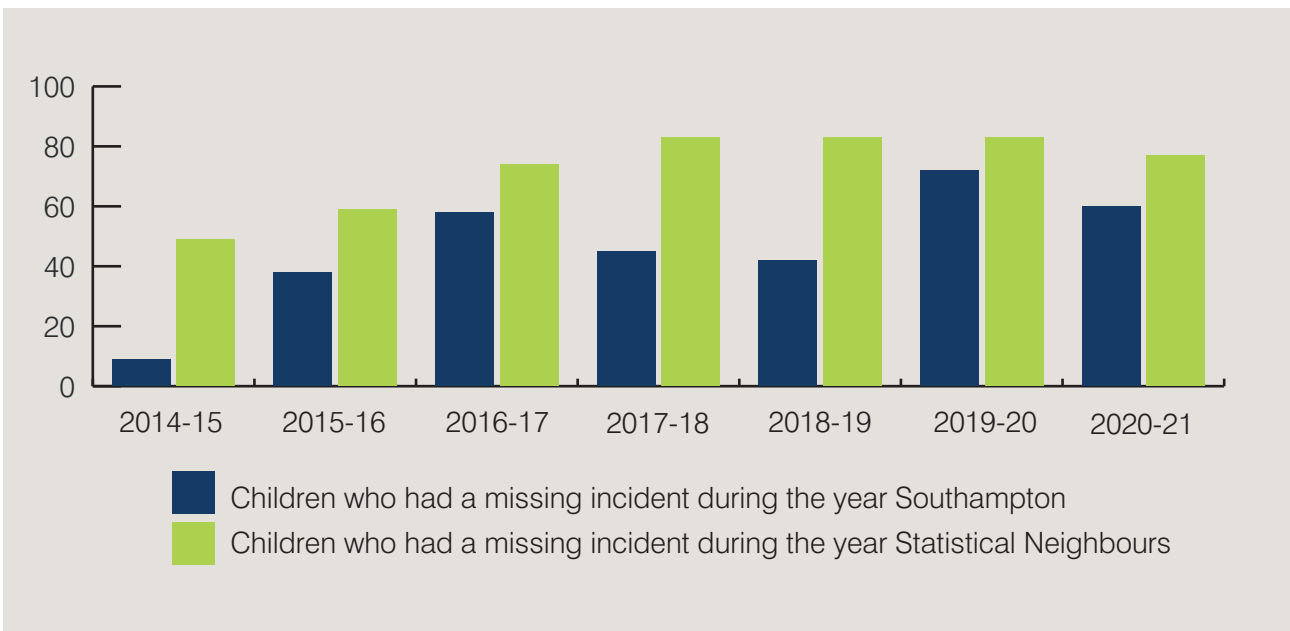


Stable accommodation and maintaining relationships

Children and young people who go missing from our care

Our data shows that during 2020-21, 60 children and young people went missing during this reporting year. This is a reduction on the previous year, which is promising, however it is still showing an upward trend over previous years when compared to overall numbers of children and young people in our care during those same reporting years. We do know that some individual children and young people have many missing episodes during the year, whilst others have none or very few.

Number of CLA missing 2014/15 - 2020/21



The Missing Exploited Trafficked (MET) Hub co-ordinates the work with children and young people who are missing from our care with other multi-agency professionals to explore how we can reduce the incidences and risk factors for why they go missing. The MET Hub shares information, coordinates how to best work together to help keep our children and young people safer, and find ways to disrupt or take legal action against those who seek to abuse and exploit them. This includes the challenges posed by and coordination necessary to tackle county lines gangs and networks, which requires us to work across various local authorities and respective police services.

One way that helps us get a better understanding from children and young people in our care as to why they go missing is by offering each of them a return home interview (RHI) by an independent person from the National Youth Advocacy Service (NYAS), which we commission. We currently have a 100% success rate of offering this support to them and on average 85% take up this offer. This was an area of strength identified in our most recent Ofsted focused visit.

An area Ofsted also commended was the effective analysis of push and pull factors for missing children and young people. This is strengthened by Southampton providing a service of specialist MET workers completing the majority of return home interviews. This sets us apart from other local authorities in the region and contributes to us continuing to achieve significantly higher success rates for RHI's, ensuring children and their parent or carers experiences of missing episodes are analysed to inform further support, learning, and safety planning.

Capacity within the MET Hub continues to limit the level of oversight of children and young people in care at lower risk when they go missing. However, most of these children and their families have direct input from our early help or social care services. MET Workers tend to work with around a third of medium risk children and young people and offer consultation to any multi-agency professional working with any child at risk or vulnerable to exploitation.

The impact of the COVID-19 pandemic resulted in significantly reduced contact between children and professionals and a drastically reduced availability of positive activities. In some instances, risk was seen to have reduced for children and young people who were staying at home more, for others we saw risks increase due to spending more time out of home where there was reduced community oversight due to the restrictions. Overall, we saw a reduction in number of children identified as high risk over the course of lockdown.

Most visits have now resumed with Covid safety measures, which has been positive for meaningful engagement with children and young people. We have noted some are struggling to resume their education provision and there is a need for education providers to think creatively about how these children are better supported.

Some of our greatest achievements over the past year have been the MET Hub delivered to our two primary commissioned supported accommodation providers for young people (YMCA and Two Saints) on missing and exploitation issues to promote their confidence in identifying and responding to these issues. We've seen both organisations increase their level of intelligence sharing since this training and some very positive partnership working for individual young people. We have expanded this joint up working with Hampshire County Council to other unregulated placement providers of young people. We have expanded our information sharing with the University Hospital Trust to help identify exploitation risks for children and young people who present to their services.

Most notably, our MET Hub was awarded a Commander's Certificate of Congratulations by Hampshire Police in June 2021 for their "determination and dedication in working with police colleagues to protect our most vulnerable children in Southampton".

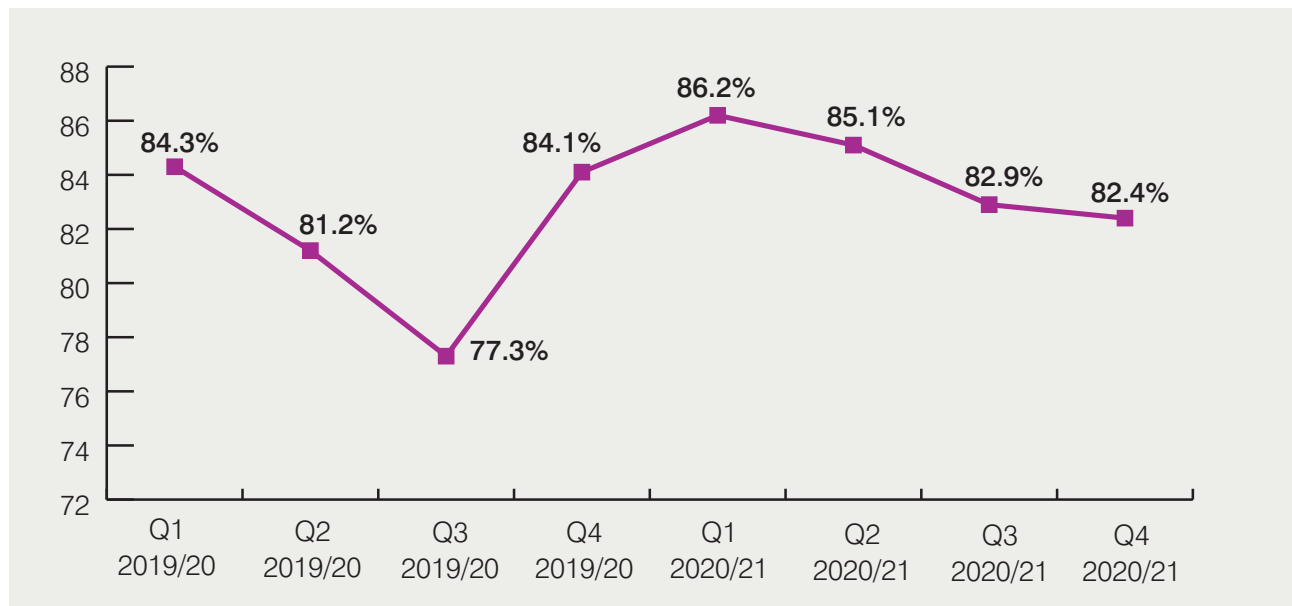
There are future plans within Destination 22 to develop a Young People's Service which offers a more targeted response to issues primarily affecting young people, notably contextual safeguarding issues. Early proposals include locality teams offering support at both early help and social care, with a strong focus on minimising changes and numbers of professionals working with young people and increasing joint working with police partners.



Suitability of Accommodation for Care Leavers

Our data for 2020-21 shows that at year end the percentage of our care leavers who are in touch with the service and in suitable accommodation remains quite strong.

The following graph shows the percentages of care leavers who were in touch and in suitable accommodation each quarter. The slightly lower levels of contact in the second half of the past year have affected the numbers in suitable accommodation. Due to Covid 19, we have not always had face-to-face contact with them in their accommodation and thus we cannot evaluate its suitability for them.



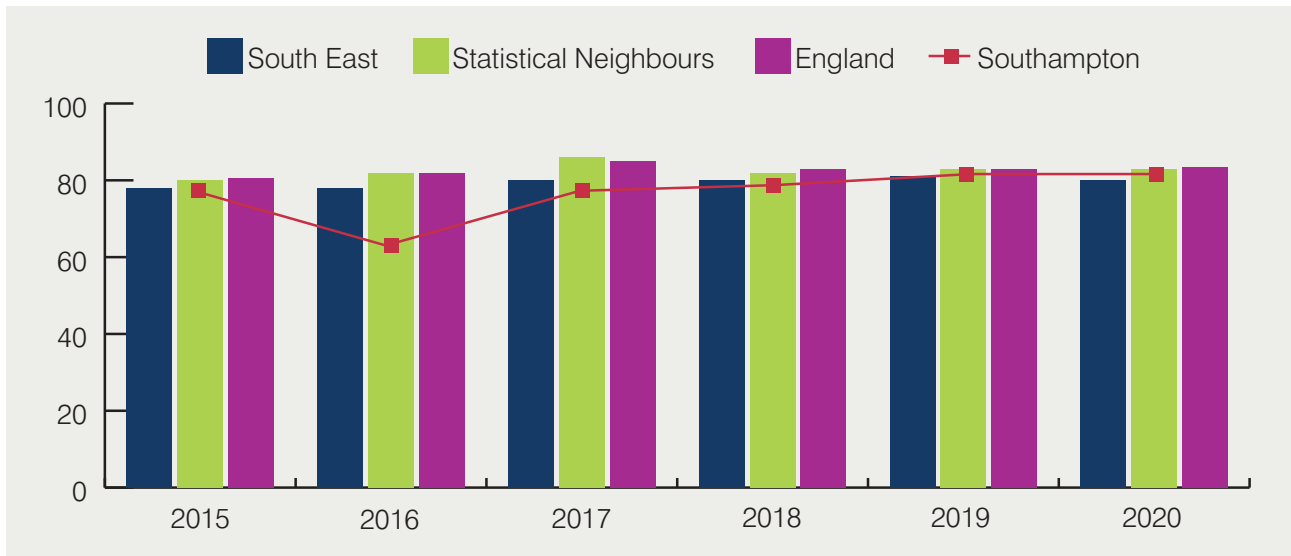
The weekly multi-agency housing panel, chaired by the Homelessness Manager, has continued where is a consistent contribution from the supported housing providers. Destination 22 proposals including consideration of extending the membership of the panel, such as adding a representative from the emotional and mental health services. In a recent survey of the views of young people in our contracted supported housing, almost two thirds told us they felt the staff in housing services were not equipped to help them with these issues. This will be a significant consideration when re-tender for our supported housing providers, which is due for implementation by June 2022.

Placing a care leaver in bed and breakfast accommodation is always a last resort, when absolutely all other options have been considered and found to not be viable. On the rare occasion that it is deemed necessary, their personal advisor would complete a risk assessment to be signed off by the Deputy Director. The period of unsuitable accommodation is kept to the absolute minimum. The young person's needs would then be presented to the subsequent housing panel for consideration.

The pathways team are very aware that care leavers should not be placed in bed and breakfast, but other services who work with the same young people (e.g. Adult services) have done so on a very few occasions. This is an area for improvement.

The following graph shows a comparison of care leavers in suitable accommodation in our region, with our statistical neighbours, and across the country. (Note: these submissions may vary from internal data, due to checks and data cleansing activities prior to and during the statutory annual data collections.)

Care experienced adults in suitable accommodation (%)



There remains an agreement with the Local Authority Housing Dept that up to 10 of our care leavers each year, who are specifically assessed to ensure they meet set age and tenancy readiness criteria, can be supported to achieve their own permanent tenancies in local authority housing. This housing is much sought after and young people who have achieved their own tenancies through this route have to date successfully retained them thereafter.

Ofsted found there was a need for more robust senior management oversight of children and young people in care placed in unregistered settings. This related to a small but nonetheless significant cohort of our children who had been placed in unregistered settings due to challenges in identifying registered settings for them. There was also a cohort of our children whose arrangements were not regulated in a timely manner. There was insufficient rigour and oversight in our contact with some of these children and going forward a panel is currently being set up where children in unregistered settings will be presented so that their circumstances have head of service oversight and monitoring.

Happy and Healthy

Promote the physical, mental, and emotional wellbeing

The NHS Hampshire, Southampton and Isle of Wight Clinical Commissioning Group (CCG) and Solent NHS Trust have provided an update on their efforts to provide for the health and wellbeing of children and young people in our care. Over the past year they have achieved the following:

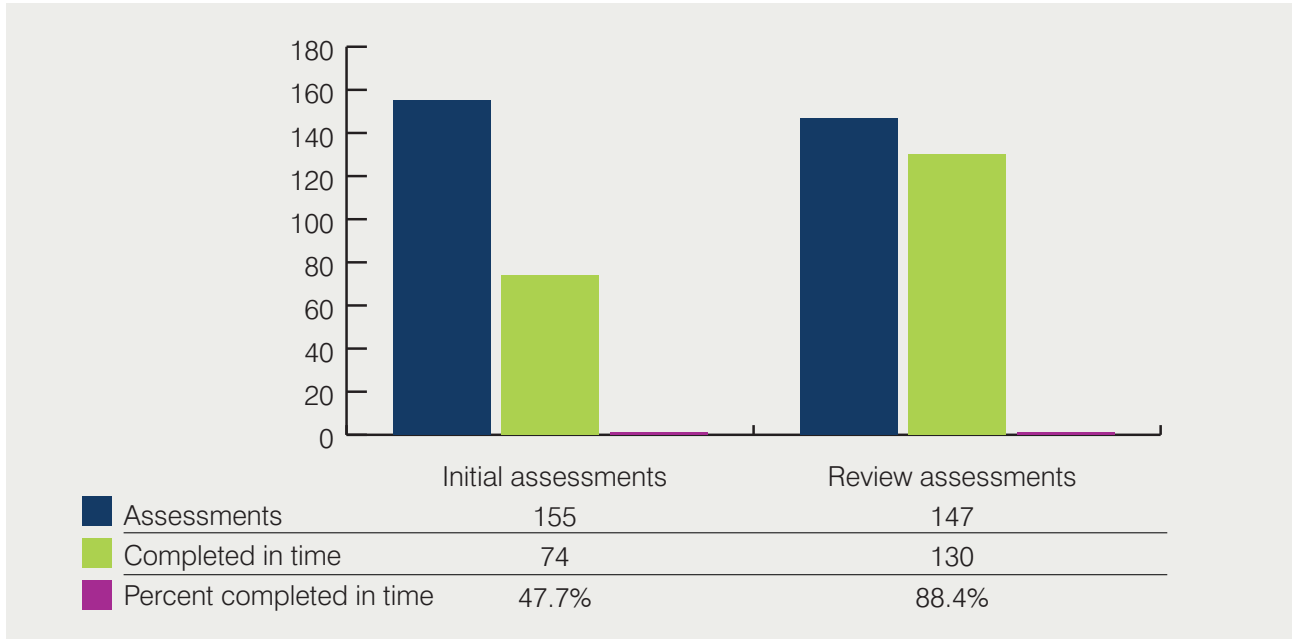
- Health assessments for children and young people in care have been prioritised by Solent NHS Trust Looked After Children's Health Team throughout the Covid-19 pandemic and new ways of working have been utilised, including weekly triage meetings to ascertain which assessments must be completed face to face and virtually
- Online strengths and difficulties questionnaires (SDQs) have been completed maintaining contact with and oversight of children placed out of area and improving multi-agency involvement to help promote the emotional and mental wellbeing of children and young people in care
- Working with community dental teams to improve dental care services for children and young people coming into care during Covid-19 who have acute dental needs
- Community paediatric medical services are working with the child protection medical services to pilot a new electronic system that identifies children and young people who are in care or supported through a child protection plan
- Continuing to encourage foster carer medical examinations to take place by the named GP for safeguarding where it is not possible to have this by their local GP practice during Covid-19
- Undertaking auditing work with local authority partners and CAMHS to explore the access, quality, needs, and areas of improvement relating to the emotional health and wellbeing of children and young people in care
- The named doctor for safeguarding has attended a national workshop for Unaccompanied Asylum Seeking Children with a view to improve health service provision for them
- A decliner pathway with Solent NHS Trust has been approved which clarifies how health providers will seek the consent of those with parental responsibility to provide health assessments and treatment in the best interest of a child where they decline to give their own consent

When any child comes into our care, they must have an initial health assessment within 20 working days. Thereafter, children under five will have a further review every six months and those older will have this annually.



The following table shows how many of these assessments have been completed and within timescale:

Health assessments of children in our care 2020/21



The Covid-19 pandemic has caused unprecedented challenges for the NHS and partner agencies. Despite this, Solent NHS Trust has prioritised health services for children and young people in care. Face to face assessments and care have continued wherever possible, but challenges remained for children and young people placed in other local authority areas. In some areas NHS services have been reassigned to frontline services adding to the challenge.

Many children and young people enter our care without having complete immunisation histories. This is identified at their initial health assessment and these are followed up and provided where necessary. Our target of 90% of children and young people in care having immunisations done is reached, which is higher than our statistical neighbours.

At every health assessment dental care is always discussed and where children and young people in care need a referral for a local dentist this information will be provided to them. Covid-19 has posed particular challenges as most dentists are only providing urgent dental care and assessments. The private dental sector has resumed assessments and treatment, however the costs are often prohibitive. This has been raised with the corporate parenting

board and the Chair has agreed to write central government to raise this issue.

Sexual health is discussed where appropriate in health assessments and referrals to additional services are made where required. The looked after health team have all received sexual exploitation training to help risk assessments in line with Barnardo's "Spotting the Signs" tool. Where risk factors are identified these are discussed with the young person before a referral is made to their social worker and the sexual health outreach team.

For unaccompanied asylum-seeking children (UASC) there have been additional challenges due to the higher numbers coming into Southampton's care. This is because of accepting more from neighbouring authorities who have reached capacity. Solent NHS Trust have developed a specialist pack and revised operating procedures to help improve our health provision for these children and young people. This has resulted in improvements in identifying their age, physical health, immunisation status (currently 83% up from 69%), and BCG scars (currently 83% up from 50%). Further improvements have been identified going forward in blood infection screenings, recording BMI and infectious diseases, consent, drug use, emotional support, and PTSD symptoms and referrals.

Resilient and Engaged

Listen to our views, wishes, and feelings

What life is like for me

Participation and Engagement of Children, Young People and Care Leavers

This year we have recruited an experienced participation worker to support our work in increasing our participation activities with children and young people in our care and care leavers. The rebranded Children in Care Council and Care Leavers' Forum have become Southampton Voices Unite and Southampton Voices Senior.

We have also engaged two of our care leavers in apprenticeships specifically around participation, and they have been involved in many projects already. This has been successful in not only getting their experienced voices into aspects of service development, but also in involving them in engaging other young people in participation activity.

We launched Shelina's Cookout – where our very own local MasterChef Shelina Permalloo offered virtual cookery classes for our young people. These have been very well attended, with children, carers and social workers cooking along with Shelina on Zoom. The finished results were fantastic!

There are a range of other participation activities taking place or in planning including a Saturday launch of a workshop to develop the corporate parenting strategy with our children and young people led by participation workers and head of service. Participation of our children in this is critical as it is their strategy.

There are a range of other participation strategies planned, to include activities in the summer holiday, supper clubs for care leavers, work with local universities on an embryonic plan for a fashion club, and the exciting 'Love our Children' week in September 2021, which will celebrate our children and care leavers.

We are also engaging our children and care leavers in the delivery of training to staff and recruitment activity so that they have a genuine voice in the work we do and in our selection of new staff.

Some of the things our children and young people have told us:

- We want fewer changes in social worker and a greater say in who we get for a better match
- We want our time with our social worker to be fun and purposeful, taking us out so we have private time to talk
- We want quicker responses when we ask for decisions about our lives
- We want more consistency about our pocket money and future savings
- We want to know what support we are entitled to when we leave your care
- We want you to celebrate our successes and achievements, not just talk about the problems

These are fair comments and ones we are working hard to address as part of our Destination 22 journey. We aim to create greater workforce stability through our service restructure to provide more consistent social work support, as well as recruitment and retention. Training to social workers provided through the Workforce Development Team and our practice model we aim to help social workers understand the importance of spending quality time with our children and young people and celebrate when they do well balancing this when we have to also talk about difficulties. We are also working on a revised savings policy where we can ensure consistent savings are put away for our children's future when they leave our care as well as their pocket money. We are also working to revise our leaving care support and care leavers guide so they are clear about what support they are entitled to and how they can access this with our help.

Access to Advocacy and Independent Visiting

We commissioned the National Youth Advocacy Service (NYAS) to provide advocacy and independent visiting services to children and young people in our care. Through their needs based and person-centered approach, NYAS helps support and enable them to express their views on what they would like to see happen and to have someone else keep in touch with them on how life is like for them.

Despite the challenges of COVID-19 and several national lockdowns, the advocacy and independent visitor services continued to be delivered consistently and to a high standard throughout the year. Face-to-face working was initially suspended in line with national guidance, but NYAS was able to provide children and young people with virtual advocacy and independent visitor services until lockdown restrictions were eased. From August 2020, when NYAS entered the second phase of its recovery plan, a blended, needs-based approach of face-to-face and virtual service delivery was implemented, with all in-person delivery thoroughly risk assessed. Due consideration was given to children and young people who have special educational needs or who for other reasons would struggle to engage with virtual service delivery.

Despite the challenges posed by the suspension of face-to-face working, NYAS was able to continue the safer recruitment and training of volunteer independent visitors as well as the matching process via virtual means. From the end of March 2020 to April 2021, the number of independent visitors doubled from 11 to 22, with the majority based in the Southampton area.

Over the past year, 98 referrals to the advocacy service were made during the course of the year, in line with our target of 80-100 referrals.

This was an increase from 2019-2020, when 75 referrals were made for advocacy support. In response to the rise in need, NYAS reached out to children and young people who had had advocacy support before to offer them a 'Children's Rights Session' to help raise their awareness of their rights during lockdown and how to access independent support if needed. These were conducted over the telephone or via video call, where it was safe to do so, with advocates ensuring that young people felt able to talk freely. This helped provide another and more independent insight into how our children and young people were doing during a period of significant difficulty and isolation.

Mind of My Own

Mind of My Own is an app that children and young people can download and use to share their views and wishes on what life is like for them, what they would like to see happen, and any concerns or complaints they have with their social worker or independent reviewing officer. It was implemented in Southampton on 21/11/2018 following extensive training to all social workers working with our children and young people.

Initially this was quite successful with good engagement from children and young people sharing their views through this app, however usage over time has reduced significantly. Recent consultation by our participation workers has concluded that our children and young people largely do not find this app of use to them, preferring to send text messages or using such apps as WhatsApp to share their views and stay connected with their social worker. As a result we are currently reviewing whether to renew our contract for this service.

Achieving and Aspiring

Have high aspirations, goals, and dreams

Preparing me for leaving care, becoming an adult, keeping in touch, and have stable housing

Pathway Planning

The leaving care team currently undertakes a pathway needs assessment at age 15 years and 9 months for each of our children who will remain in our care and therefore become a care leaver. It is expected that all our children have a complete and robust pathway plan in place by the age of 16 years and 3 months setting out the future life plan for the young person as they approach and move into adulthood, such as where they plan to live, what their education and training goals are, what jobs and careers they would like to have, and how to support their health, safety, and wellbeing. We are also working on implementing a further needs assessment at age 20 years and 9 months to help our care leavers re-evaluate their life goals and decide whether they would still like to receive our support until they reach 25 years old.

A high percentage of pathway plans are completed in a timely way with 96% completed within timescale. The pathway plans are written to our young people in accessible language that responds to their individual goals and needs and each are quality assured by the manager of the personal advisor of the young person.

Ofsted found we needed to improve the means and frequency of our contact with some of our care leavers, and the fact that some of our young people had not had sufficient face to face support and oversight. This meant we were unable to be assured of their emotional health and ability to support them maintaining education, employment, and training. This is an area we are actively working hard to rectify with an expectation that face-to-face contact with our care leavers is the norm, unless they make clear their wish to not have this. Where this is the case, we want them to have the clear message we are always here for them as and when they are ready to meet with us.

Use resources to help achieve my potential in life

Savings for our Children's Futures

As good corporate parents we recognise the importance of helping support our children and young people learn the importance of savings and managing their money. We also know how important it is for us to save for their future so they can establish themselves as independent adults and have money to spend on things that can help them obtain the necessary things to achieve and succeed in life.

We have become aware that some carers of our children and young people have not been good at consistently putting savings away for them. This was first raised by their independent reviewing officers (IROs) and later discussed by senior managers to seek approval to resolve this. Approval was given to recruit a business administrator to track these savings, the general principle being that we will save at least £5 per week for each child who is in our care for longer than a year. This will be administered centrally within the council and added annually to their Junior Savings ISA accounts, which a young person can access when they turn 18 years old. We are working with our externally commissioned carers to ensure that savings can be taken at source for our children from fees paid to providers so that we can be confident that from next year we are managing this effectively at source. We are also developing a revised savings policy so ensure we have a consistent means of putting away savings and providing pocket money for our children and young people.

My education, training, and employment

Every local authority must have designated head teacher of a virtual school who has overall responsibility for promoting the educational achievement of children and young people in the care of the local authority. The following is a summary of the education achievement for children and young people in our care provided by the virtual head teacher, Maria Anderson.

Covid presented a particular challenge for our children and young people's education. The government was clear that vulnerable children should be in school, these children included children in care and those with an Education and Health Care Plan (EHCP); a special plan for those with additional learning and ability needs. This meant that some schools were operating at 50-100% capacity. The virtual school considered every request for onsite and offsite learning.

Within this there were additional challenges we had to face. Most of our children and young people did not like being labelled with the term "vulnerable". Some were apprehensive about attending school due to the risks of Covid and others had additional medical conditions, alongside their parents, carers, and siblings that had to be taken into consideration. Foster carers expectations around onsite learning and using digital technology for learning also had to be facilitated and supported.

The virtual school supported individual requests for the learning needs of children and young people in our care, engaged with online tutors, and provided additional learning resources for carers and schools alike. Some examples included a book gifting via letterbox, the Dolly Parton Imagination library and science, technology, engineering and maths (STEM)

activities developed by the University of Southampton, continued to support our children and young people's education.

When our children had to move home, this often required a school move which in turn resulted in additional delay due to remote working and trying to contact other local authorities and schools.

Personal education plans were adapted to reflect COVID-19 target setting and the recovery curriculum set by the government.

All education training was virtual, and we saw a vast uptake of engagement from schools especially out of area. This delivery model is being taken forward, alongside promotion of activities to promote good mental health and wellbeing and reconnecting with the community.

Virtual School Overview of the Academic Year 2019-2020

There is no report on the early years foundation stage and phonics for this period due to Covid. For the key stages of learning there is no externally validated data nor national figures due to Covid. The figures provided for this period have been taken from the grades of our children and young people in care based on grades provided by their schools in their personal education plans.

Key Stage 1	2017		2018		2019		2020	
	LA	Nat	LA	Nat	LA	Nat	LA	Nat
% Expected	LA	Nat	LA	Nat	LA	Nat	LA	Nat
KS1 Reading	40 ↓	51	57 ↑	51	47 ↓	52	44	N/A
KS1 Writing	40 ↓	39	52 ↑	42	47 ↓	43	25	N/A
KS1 Maths	35 ↓	46	52 ↑	49	53 ↑	49	40	N/A

Key Stage 2	2017		2018		2019		2020	
	LA	Nat	LA	Nat	LA	Nat	LA	Nat
% Expected	LA	Nat	LA	Nat	LA	Nat	LA	Nat
KS2: RWM	35 ↑	32	39 ↑	35	32 ↓	37	42	N/A

For 2020, pupils were awarded the higher outcome between center assessed grades or an algorithm that incorporated center assessed grades but considered school and pupil prior performance. As a result of this change in methodology, trend comparisons between years should be treated with caution.

Key Stage 4	2017		2018		2019		2020	
KS4: P8	LA	Nat	LA	Nat	LA	Nat	LA	Nat
	-1.40 ↑	-1.18	-1.39 ↑	-1.24	-1.32 ↑	-1.28	N/A	N/A

Key Stage 4	2017		2018		2019		2020	
KS4: A8	LA	Nat	LA	Nat	LA	Nat	LA	Nat
	15.5 ↓	19.3	16.8 ↑	18.8	21.0 ↑	19.1	18.6 ↓	(19.1)

	2017		2018		2019		2020	
Measure	LA	Nat	LA	Nat	LA	Nat	LA	Nat
% 9-5 English	8.0	16.0	5.6 ↓	16.0	16.7 ↑	16.0	12.2	N/A
% 9-4 English	12.0	27.0	13.9 ↑	26.0	33.3 ↑	27.0	24.4	N/A
% 9-5 Maths	4.0	11.0	2.8 ↓	12.0	10.0 ↑	11.0	9.8	N/A
% 9-4 Maths	12.0	23.0	16.7 ↑	24.0	20.0 ↑	24.0	17.1	N/A
% 9-4 (E&M)	4.0	17.0	5.6 ↑	17.0	16.7 ↑	18.0	12.2	N/A

Measure	Results	Additional Info
KS1 Attainment	15.7% on/above target	9.1% have an EHCP
KS2 Attainment	21.8% on/above target	41.9% have an EHCP
KS4 Attainment	22.7% on/above target	27.4% have an EHCP
Education Attendance (under 16s)	84.4% in school 98.2% in education	In education reflects lessons done virtually or at home
School Exclusions (under 16s)	10.5 days average	Reduction on previous year
Not in Employment, Education or Training (under 18s)	11.5%	Reduction on previous year

Education, health and care plans (EHCP) are for children and young people who have additional learning needs and require additional support to help them meet their full learning potential.

The virtual school head teacher has responsibility and accountability for making sure that there are effective arrangements in place for allocating pupil premium plus funding to benefit our children. The funding is £2300 per pupil, of which £800 is dedicated to the Virtual School service with the remainder paid termly, in arrears, to schools to support children and young people in care.

The grant must be managed by the virtual school and used to improve outcomes and “diminish the difference” as identified in the child’s personal education plan in consultation with the designated teacher for the school. How funding is to be spent is discussed during the child’s PEP meeting and

must be used efficiently and effectively. Due to the global pandemic discretion was given to schools to use their allocations more broadly and allocations were allowed to be carried over.

- A personal education plan tracker has been in place from September 2020 with oversight from the Virtual School Headteacher and Deputy Headteacher. This includes a weekly dip sample to grade the quality of these plans as well as scrutiny on how the pupil premium is being spent to advance the learning and education needs of children and young people in our care.
- Schools have been supported by the virtual school with COVID-19 education expectations target setting, and personal education plan top tips have already been shared with schools and social care colleagues to embed the importance of these plans for our children, how to creatively use the pupil premium, and how to welcome our children and young people back to school after lockdowns.
- Social care managers and independent reviewing officers are updated monthly with any concerns related to the quality of personal education plans and how the pupil premium is being used.
- Designated teachers are being contacted individually by the virtual school and head teachers know that pupil premium plus will be withheld if personal education plans are not complete or of not a high enough quality for our children.

Personal Education Plans (PEPs)

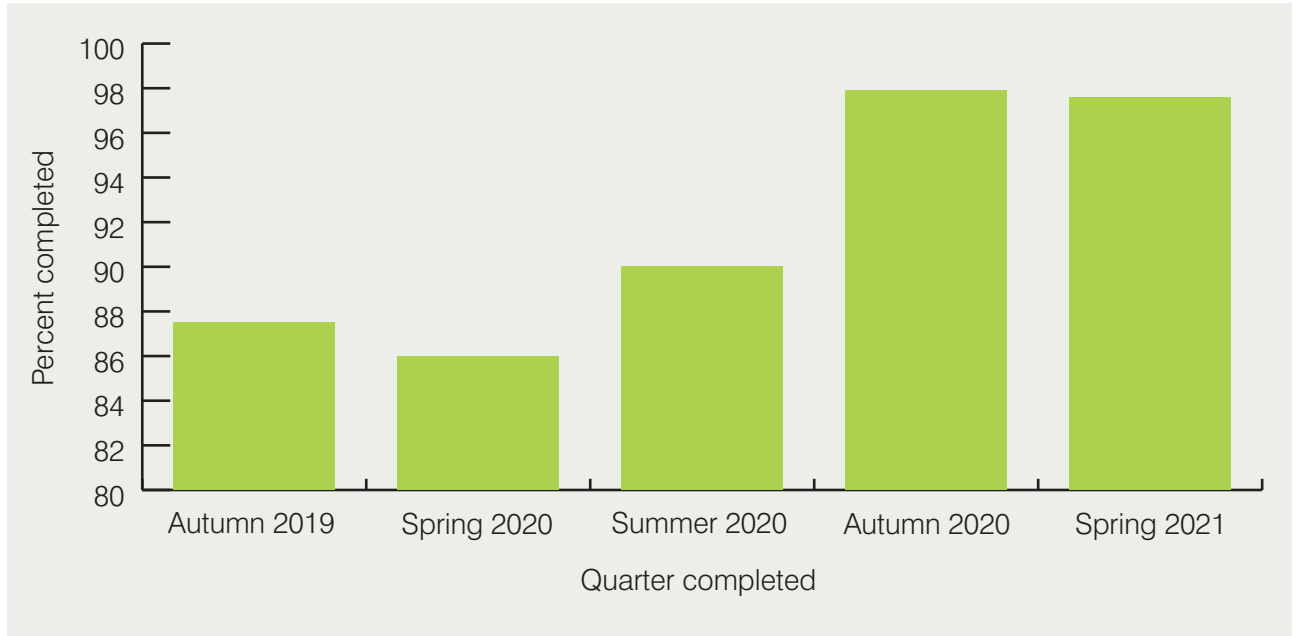
Personal education plans are mandatory and written three times a year, produced collaboratively between the child's social worker, school teachers, foster carers and the virtual school. PEPs are the core means by which all these professionals work together to develop a plan that reviews the child's education progress, identifies what their ongoing learning, mental and emotional wellbeing needs are, develops plans for how they will be supported in all aspects of their learning, and sets clear targets so we know when we are making a difference.

Electronic personal education plans were introduced in September 2017 and have been revised based on feedback from children, young people, and professionals. Full training on completing PEPs continues to be provided through the virtual school to carers and professionals. Any school requesting additional support will have a bespoke offer tailored to their needs. The virtual school also has a personal education plan tracker to ensure timely completion of PEPs and to regularly review and rate their quality.



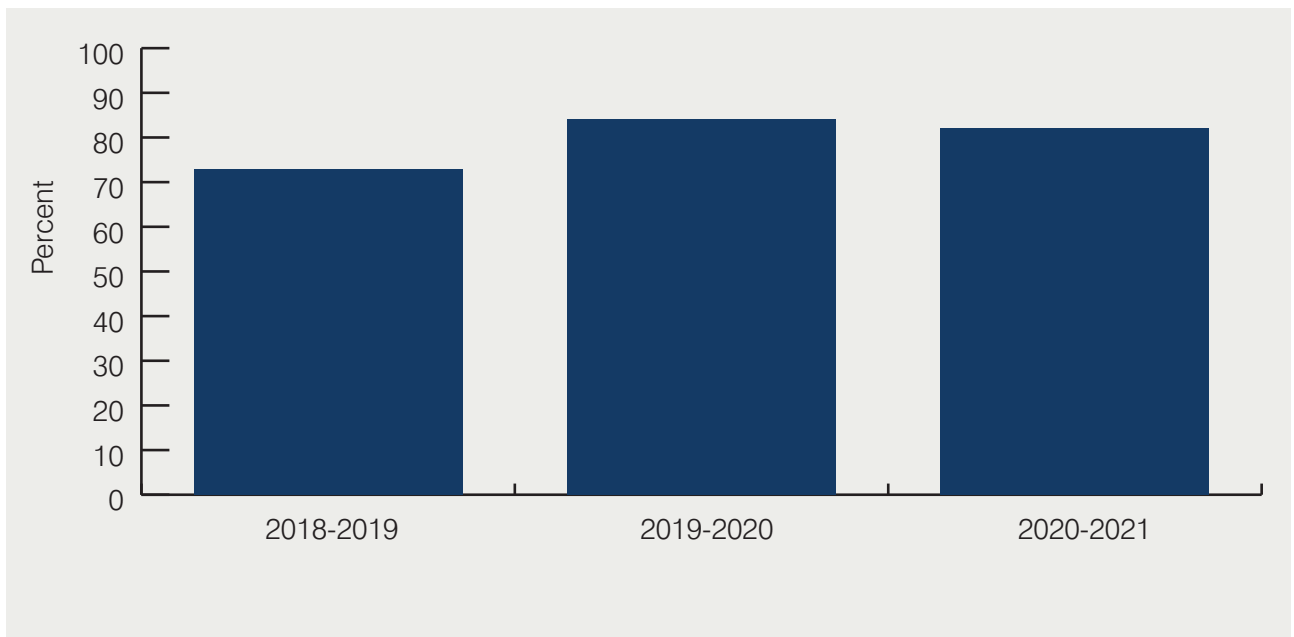
The following table shows how this has contributed to our improvement in completing personal education plans for our children and young people.

Personal education plans completed



The following table shows how personal education plans have been graded by the virtual school in terms of quality:

Personal education plans rated good or better



Education, employment, and training (EET) for care leavers

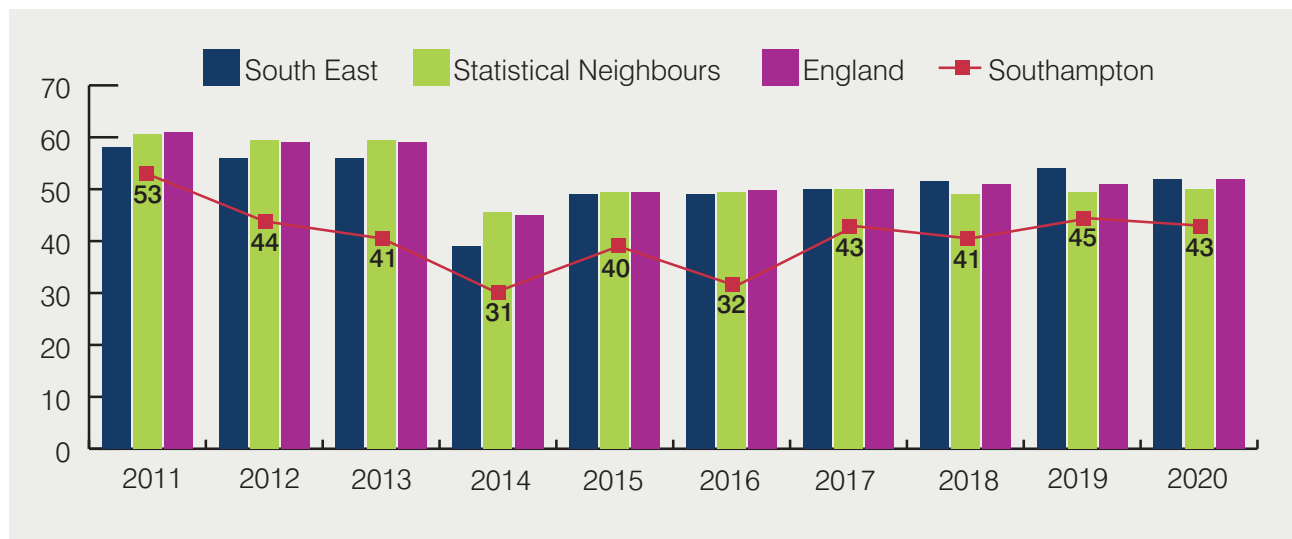
The latest published figures show that as at the end of the 2019-20 reporting year, 43% of our care leavers were in education, employment or training (EET). That is a slight decrease from 2018-19 when the value was 45%. Local data indicates a further decrease in 2020-21 which echoes the national picture as the pandemic has limited work opportunities for the 16-24 age group particularly as they are traditionally often employed in the service and retail industries, both of which have been hit hard by the pandemic with many staff either furloughed or out of work.

There is a significant number of our care leavers who are not in education, employment, or training (NEET) due to officially being too unwell to be available for work. The majority of this illness relates to their emotional/mental health, which appears to be a contributing factor to care leavers being NEET. The Destination 22 strategy seeks to address this with the proposed addition of emotional well being support workers in the pathway teams.

We have worked collaboratively with education colleagues to produce a not in education employment or training prevention plan, to refocus attention on preventing young people aged 14 and older from becoming NEET. This is a change of emphasis from the current arrangements which have been to try to support our young people who are already NEET back into meaningful education, employment or training opportunities.

Southampton's performance for EET is shown below, together with our regional and statistical neighbours and the country:

EET%



We are currently celebrating seven of our care leavers who have continued in higher education and six more who are due to commence higher education in the 2020/21 academic year.

We continue to underperform in our numbers of care leavers who are in employment, education, or training on a national, regional, and statistical neighbour level. This is an area of improvement also recognised in our most recent findings. As such, employment, training and education remains a key priority improvement area, and a range of focussed activities are in place to secure better outcomes and performance. These being:

- Improved monitoring and evaluation of personal education plans (PEPs) for our young people in year 10 and 11 transitioning towards independence to look at the timeliness and quality for preparing young people in care for independence.
- Continued to co-fund the placement of a dedicated member of the STEP Team (until the end of September 2021) to work directly with our children and care leavers. The scheme ceasing at the end of September 2021, sees the introduction of a NEET prevention worker to support young people and care leavers obtain and stay in employment, education, and/or training.
- Ensured that all “in house” Southampton City Council Apprenticeships are advertised early for one week within the Pathways Team, prior to being advertised elsewhere. In the coming year we are going to build on this with what we refer to as the Care Leaver Guarantee, which now has executive members sign off, and which we will develop to ensure that across the whole of the Council care leavers become a priority for apprenticeship opportunities that we offer.
- We have maintained the increase in number of personal advisors to ensure more targeted support to individual care leavers and to adapt to the increased workload from supporting care leavers up to the age of 25 years old.

Staffing in the Service

There has been some instability within the teams who work with our children and young people specifically, leading to the use of agency staff to fill social work long term sickness vacancies and provide additional capacity. There are also a number of longer term acting up arrangements which have been sustained for a significant period. There is a plan to ensure that there is a permanent leadership structure in place to provide greater stability. As part of the Destination 22 programme for change, the plan is to review the current way of working with care leavers (which involves a handover from the looked after to leaving care service at age 14) and a review of the staffing and management structure of the service to provide proper oversight, support, and best practice.

There are also plans to increase the capacity of personal advisors who support those young people and young adults leaving our care as we have greater numbers who are.

There are further plans to develop specialist emotional health workers in the service to support our young people with their emotional and mental wellbeing and employment, education, and training workers to help promote their future learning and career opportunities and goals.

Priorities for the Service in 2021/22

This report has summarised the progress made in a number of key areas as well as identifying where alternative approaches are being planned to enhance and improve our service delivery. The following are our target priorities:

- Improve children and young people's participation giving them a greater voice in all aspects of their care, pathway planning, and service delivery
- Planning to launch the 'Love our Children' week to raise the importance of corporate parenting across the council and the city
- Fully implement the priority actions as raised by the Ofsted focused visit
- Ensure that the physical and emotional health of all our children and young people is well assessed, understood, and properly supported
- Continue to reduce the numbers of children and young people in our care by providing timelier and better-quality support to them and their families to help prevent the need for them to come into our care, or help them return home as soon as it is safe enough to do so
- To help as many of our children and young people in our care who live outside Southampton, particularly those in residential care, to relocate back to the city, and ideally within a family, where it is in their best interests
- Having a clear savings policy and structure in place to ensure all our children and young people in care have enough money to put towards additional things they wish to purchase or to support them with independence as they leave our care
- Through additional staffing and support we aim to increase the number of our young adults leaving our care receive education, training, and employment opportunities
- Increase the opportunities across the council for our care leavers to obtain important work training experience by becoming an apprentice with us
- By improving our practice framework and training offer to our staff who support our children and young people so that they are informed about how to work in a restorative way, understanding the impact trauma and abuse has on our children



