

CORPORATE PARENTING BOARD

A meeting of the Corporate Parenting Board was held on 13 December 2007.

PRESENT: Councillors B Thompson (Chair), Brunton (Vice Chair), Kerr, P Rodgers, P Thompson

OFFICIALS: S Kershaw, S Robinson, S Little, T Moody, C Nugent, J Wilson,

ALSO IN ATTENDANCE BY INVITATION: L Carling, M McDermott, T Tolmie

****APOLOGIES FOR ABSENCE** were submitted by Councillor McPartland

****DECLARATIONS OF INTEREST**

No Declarations of Interest were made at this point of the meeting.

****MINUTES**

The minutes of the Corporate Parenting Board held on 8 November 2007 were submitted and approved as a correct record subject to the addition of D Johnson to the list of those in attendance.

CARE MATTERS: TIME FOR CHANGE PRESENTATION ON A HOME WITH PEOPLE WHO CARE

The Children's Participation Officer presented a report detailing the key proposals taken from the Government White Paper, Care Matters: Time for Change, and the Children and Young Persons' Bill which was going through Parliament.

It was noted that all children in care should have kind, understanding and committed carers, whether foster carers or residential staff and research had shown that 'stickability' on the part of adults was key to the successful continuation of relationships.

The key proposals were: -

- ensuring a strong focus on stability;
- improving foster carer support and training;
- improving commissioning of placements;
- enforcing national minimum standards for care providers;
- piloting social pedagogy in residential care;
- ensuring that children in long-term health or education placements got the best possible support;
- improving practice in responding to children who went missing from care;
- ensuring a better placement experience for children and making regulations to achieve this.

Successive movements of placements and school could lead to a sense of rejection, loss of confidence and loss of capacity to trust. Stability and continuity in care helped to redress discontinuity and loss prior to coming into care. Care Matters identified the following options for permanence, any of which might provide stability for a child, according to individual need:

- return home;
- live with family or friends;
- special guardianship;
- long-term foster care;
- residential care;
- adoption.

Middlesbrough's performance in relation to stability had been rated as 'good' by external assessments.

Foster Carers were expected to meet very high standards of parenting, particularly in relation to helping children to become more confident and competent. However, carers' stress and the need to respond to difficult behaviour accounted for a high proportion of placement breakdowns and instability for children.

Proposals in relation to providing support for foster carers included the development, by the Children's Workforce Development Council, of national standards for their training and support. The National Minimum Standards that foster carers were expected to meet had been revised and Ofsted inspections provided a quality framework for assessments.

It was noted that the rollout 'Fostering Changes' programme of skills-based training on positive parenting techniques had been missed, but was rescheduled for January.

Other proposals included weekly foster carer meetings and weekly parent reports to anticipate and prevent disruption, which were being piloted nationally. In addition, local authorities would be required to publish their foster carer payments and policy structure.

One way of improving residential care was the implementation of Social Pedagogy, a system of theory, training and practice to support the overall development of the child. The recent visit from Youth Workers from Poland was deemed to be informative. The practice would be piloted nationally to evaluate its effectiveness. It was proposed that Ofsted would have the power to issue notices of failure and the power to restrict admissions to residential care.

The proposed legislation would include a statutory duty being placed on local authorities to secure a sufficient and diverse provision of quality placements in the local authority area. The Children's Workforce Development Council would develop occupational standards for commissioning staff. Standard national contracts would be developed and guidance would be provided on managing the market to improve placement choice. Middlesbrough already participated in a regional Commissioning Unit, which aimed to develop placement choice on a regional basis.

Research had identified that when children and young people in care were taken to out of area placements they were likely to feel more isolated and may not be visited as regularly. Some children might be threatened with a move once they had settled into a placement, which continued to destabilise their environment.

The government intended to strengthen the statutory framework to ensure that children are not placed out of the area unless it would clearly be in the child's best interests. Clarification would be provided of the responsibilities of the placing and host authorities. New requirements would also be introduced in relation to placing children with disabilities in long-term residential educational or health settings. Guidance on children missing from placement would be strengthened. In addition, to ensure a better placement experience, the government intended to:-

- strengthen regulations in relation to social worker visits;
- ensure contact outside of regular visits;
- introduce a requirement to visit 'accommodated' young people if taken into custody.

The Children and Young Persons' Bill would change the following key children's legislation: -

- Children Act 1989;
- Care Standards Act 2000;
- Adoption and Children Act 2002;
- Children Act 2004;
- Education and Inspections Act 2006.

It was noted that children would be moved as near to their existing school as possible and young people would not be moved in years 10 and 11. The Chair emphasised the need to remind individuals about the education grants and bursaries that are available.

RECOMMENDED that the Executive be advised to note the information regarding Care Matters: Time For Change.

'HOME FROM HOME' - ART N THAT DVD ON ACCOMMODATION ISSUES FOR CARE LEAVERS

A short documentary film was presented to the Board detailing the issues faced by young people leaving care when moving into independence and seeking accommodation. The film was produced by 'Art n That', which was a group of care leavers who initiated and participated in a series of arts-based activities.

It was reported that the DVD had been a long project from all aspects of pre to post production. Support had been given to the young people by a professional artist, an actor and a photographer/filmmaker, in addition to staff from the Children, Families & Learning Department.

The documentary asked the Local Authority, as a corporate parent, where it would like its children to live and presented young people's views and experiences, both positive and negative. The film included information on the particular issues that might affect care leavers' such as:

- Moving into independent living at an early age (age 17/18 compared with age 25 in the general population)
- Having little or no practical family support
- Loneliness, particularly at night
- Having no parental home to return to if things go wrong
- Physical and mental health problems
- Coping on your own

The film also identified the support available to assist young people, including services provided by the Leaving Care service and by some social housing providers. The film highlighted the need to develop more supported housing options for care leavers.

The Chair noted that the film was informative and that it portrayed a very strong message. In response to a question, it was explained that each young person leaving care was offered a nine-week 'Preparation for Independence' course in addition to the support provided by foster carers, residential care staff, personal advisers, social workers and floating support workers.

RECOMMENDED that the Executive be advised to note the information on 'Home From Home' Art n' That DVD.

FIVE RIVERS PROJECT – PRESENTATION ON EVERY CHILD MATTERS OUTCOMES

The presentation had been deferred from the previous meeting.

Five Rivers had used the Every Child Matters outcomes as a framework for their work and the presentation highlighted how this was achieved in practice. The Every Child Matters outcomes were: -

- Be Healthy;
- Stay Safe;
- Enjoy and Achieve;
- Make a Positive Contribution; and
- Achieve Economic Well Being.

Five Rivers measured their performance against the outcomes from the following sources: -

- young peoples' views;
- Every Child Matters documentation;
- statement of purpose for each home;
- Leaving Care Act;
- Children Act 2004;
- Five Rivers Policies and Procedures; and

- feedback from parents, professionals, regulation 33 reports and Ofsted inspections.

The presentation detailed activity under each outcome and included the views of children and young people on how well this had been achieved. Examples included promoting self-care and personal hygiene; helping young people to access health services; attending parents' evenings and supporting education; involving young people in decisions about the homes; and supporting the transition to adulthood.

Comments from the young people included:

- Staff listen to us
- They have given me lots of life skills
- They teach us right from wrong
- This is the first time I've felt settled in a home
- Help me with my homework
- They reward our achievements
- Make sure we do not put ourselves in danger
- Remove things I might hurt myself with
- Arrange exercise where we go walking, gym, football, swimming and bike rides

Five Rivers believed they had made positive steps in aiming to achieve within the current partnership. The service believed it would continue to grow and learn as it progressed via the partnership with Middlesbrough Council. The overall aim was to continue to provide an excellent service to the young people of Middlesbrough.

RECOMMENDED that the Executive be advised to note the information on Five Rivers implementation of the Every Child Matters Outcomes.

CARE MATTERS AND THE HEALTH OF YOUNG PEOPLE LOOKED AFTER

The Designated Nurse for Children Looked After and the Fostering Team Manager presented a report to provide the Board with a brief summary of the new document Care Matters: Time for Change and its effects on the healthcare bodies and local authorities duties to Children Looked After. The report provided an update on the progress of Middlesbrough's children looked after with specific reference to the Government performance indicators linked to health.

The National Service Framework informed the actions of local authorities and health care bodies in addressing the health of children in care from the documents Children, Young People and Maternity Services DOH, 2004) and Promoting Health of Looked After Children (DOC, 2002). The latest Care Matters: Time for Change white paper published in June 2007 set out the steps that government will take with local delivery partners to improve outcomes for children and young people in care.

The key proposals within Care Matters were:

- Re-issuing the guidance on Promoting the Health of Looked After Children in 2008 on a statutory footing for both local authorities and health care bodies.
- Using the statutory guidance to strengthen protocols and agreements with the NHS bodies and update regulations as necessary
- Addressing the need for co-ordination within healthcare bodies to meet the needs of children in care.
- In doing so, the government will also update its content to set out expectations surrounding the health assessments of children in care and the subsequent health plan.

Although the roles of the Designated Doctor and Nurse are seen as 'working well', they are not designed to improve co-ordination of health services for individual children and young people in care, or to progress actions against the child's health care plan. This normally falls to the social worker. The government is to explore how best to improve co-ordination, including the potential benefits of a named health professional for each child.

In order to improve strategic planning processes within the framework of the Children's Trust, the Joint Strategic Needs Assessment (JSNA) will be made statutory. The JSNA will be carried out by Councils and Primary Care Trusts (PCTs) and will strengthen their ability to identify the needs of vulnerable groups, including children in care and those at risk of being taken into care. The JSNA will also provide a basis for the selection of targets within the 'Local Area Agreement' and underpin the delivery of improved commissioning for health and well being.

There are three statutory statistical returns relating to children looked after and the outcome indicators in Middlesbrough for the 12-month period ending 30th September 2006 were as follows:

Percentage of children looked after that had dental health checks (national average in England was 85.1%)	92%
Percentage of children looked after that had up to date immunisations (national average in England was 79.5%)	95%
Percentage of children looked after that had annual health assessments (national average in England was 84%)	92%

It was reported that in 2007 yearly training was provided in partnership with all agencies involved with children looked after. This included training for Health Visitors, School Nurses, Residential Care staff, Foster Carers and Social Workers.

It was noted that to encourage further uptake of the health assessments especially by the older child in care, a consultation was performed in April 2007 with a group of looked after young people. Further consultation was planned with young people to review how appropriate the health assessment process is for CLA and how to improve it. The health assessment documentation is at present under review and leaflets have been up dated.

Areas of priority had been identified, some of which were locally determined and some of which affected the service nationally. Key areas included:

- Concerns raised nationally regarding the slow pace of the delivery of health information from one area to another, when a child moved between local authorities
- Registering with a dentist continued to be more difficult to manage, especially if the child moved out of the area
- Poor uptake of referrals identified by misuse services which was a nation wide concern that had been identified and was to be addressed by the production of further guidance and standards

In discussion, it was explained that if a child goes into hospital, birth families were notified unless impossible because the parent's whereabouts were unknown. In an emergency situation, key decisions would be made by the department. It was clarified that parents were invited to take part in the health assessment process.

It was reported that numbers of teenage pregnancies among children looked after were comparable to the statistics for Middlesbrough as a whole.

In response to a query, it was explained that private fostering arrangements did not fall within services for looked after children. Publicity about the need to register private fostering arrangements with the department was periodically distributed to schools and advertised in the local press. There was a policy and procedure in place and assessments were carried out by locality social work teams.

RECOMMENDED that the Executive be advised to note the information on Care Matters and the Health of Young People Looked After

FAMILY PLACEMENT PANEL ACTIVITY

The Fostering Team Manager presented a report that provided the Board with an overview of the activity of Middlesbrough's Family Placement Panel during the period 1 April to 30 September 2007.

Every local authority that provided a fostering service and/or acts as an adoption agency was required to establish a panel consisting of social work practitioners experienced in adoption and family placement matters, elected Members and independent persons. The Adoption Agencies Regulations 2005 and the Fostering Services Regulations 2002 prescribed the composition of the panel.

The role of the Family Placement Panel was to consider: -

- applications from prospective adopters;
- plans for children to be placed for adoption;
- proposals to place a specific child or children for adoption by particular prospective adopters;
- reviews of the approval of prospective adopters;
- applications from prospected foster carers;
- reviews of the approval of foster carers;
- plans for children to be placed in long-term foster care;
- proposals to place a specific child or children in a long-term foster placement with particular foster carers;
- termination of the approval of foster carers; and
- applications for approval as supported lodgings.

The Family Placement Panel met on 13 occasions during the period from 1 April to 30 September 2007 and considered a total of 72 items. The matters considered by the panel were often complex and at times meetings could be lengthy and demanding. Panel members received the papers in advance of each meeting and needed to read them thoroughly prior to the meeting in order to participate effectively in the discussion.

It was noted that 4 foster carers were de-registered during that period. Three of those came about because the foster carers resigned following the end of a long-term placement and the fourth had been inactive for some time and had not responded to attempts to contact them.

It was reported that the number of new foster carers approved during the previous 18 months had been low and that work on the payments structure was being undertaken.

In discussion it was identified that one of the benefits of a joint adoption and fostering panel was the capacity to take a long-term view of situations. It was pointed out that the membership of the panel was well balanced other than in relation to gender balance.

The Chair emphasised the value of the panel meetings and the positive feedback received from foster carers who attend.

The Vice-Chair referred to the approval of supported lodgings providers and need to compare placements with the numbers of young people living independently. It was explained that the majority of supported lodgings providers had been drawn from amongst existing foster carers and that grant funding had been acquired to provide additional training for foster carers on transitions to independence, from April 2008. In response to a question, it was explained that long-term foster carers do voluntarily provide ongoing support to care leavers who were placed with them and who had moved into independence.

RECOMMENDED that the Executive be advised to note the information relating to the Family Placement Panel Activity.