

# Kent's Looked-after Children and Care Leavers Strategy

2015 - 2016

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**Improving services and outcomes for looked after children and care leavers through good and effective corporate parenting**



# Contents

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# Opening statements

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Hello, my name is **Annabelle Taylor** and I am the Chair of Kent's children in care council; otherwise known as Our Children and Young People's Council (OCYPC.) It is my role to ensure the voices and opinions of children in care across Kent are heard. The role of the OCYPC is to challenge Kent Corporate Parents to improve the services provided to children in care and care leavers. I work closely with the Young People who I am able to build strong relationships with due to the benefits of being a care leaver myself. My aim is to improve the lives of children in care, offering them the chance to be heard and be listened to and give them the motivation to reach whatever they desire without any limitations.



*Annabelle Taylor - Chair of Our Children and Young People's Council*



Our strategy to deliver good and effective corporate parenting for children and young people in our care and care leavers provides a clear commitment across all agencies in Kent to safeguard and promote the welfare of this vulnerable group.

This strategy seeks to develop and continue our journey as Corporate Parents role in three ways:

1. By providing the means to bring together the contributions made by different parts of Kent County Council and partner agencies, each of which has a vital role in the delivery of corporate parenting for looked after children and care leavers.
2. By reflecting the importance of listening to children and young people, involving them in decision making, service design and development and understanding how the decisions that we make for them affect them personally.
3. Taking action to improve the life chances of children and young people who need to be in care, especially to fulfil their adult potential.

Our looked after children deserve the best start in life. I want them to be able to look back at their time in care as having been a positive experience, full of good memories of growing up, and opportunities to develop the skills and confidence they need to succeed in life.

*Paul Carter – Leader of Kent County Council*

As a corporate parent, I welcome the messages that the strategy sends out to everyone who is involved in promoting and safeguarding the welfare of looked after children and care leavers. In particular, the views of children and young people that are represented throughout the strategy demonstrate the importance we give to listening and involving them in decision making at both a personal and strategic level. This does not, however, take away the responsibility that I, other corporate parents and those delivering corporate parenting on our behalf have in doing everything possible to ensure that children and young people's experience of being looked after and leaving care is a positive one that makes a real difference in their lives.

*Peter Oakford – Cabinet Member for Specialist Children's Services*



As chair of Kent's Corporate Parenting Panel, I welcome the implementation of Kent's strategy for improving services and outcomes for looked after children and care leavers.

As a corporate parent, I am committed to ensuring that all looked after children and care leavers in our care are provided with services and support that they need in order to achieve the best possible start in life. I believe that this strategy points the way to how we can work together to deliver a level of corporate parenting that will make a real difference to the lives of children and young people as they grow up and achieve independence.

I am pleased that, in addition to the recognition of the role of elected members and staff in delivering corporate parenting, children and young people themselves have been able to contribute to the development of this strategy - so that it reflects what they believe makes a difference in their lives. We will continue to ensure that children and young people are fully engaged in the reviews of our progress in implementing the strategy. I look forward to seeing ongoing improvements in the services and support that Kent provides.

*Cllr Ann Allen – Chair of Kent's Corporate Parenting Panel*

# What is good and effective corporate parenting?

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**This strategy is about 'good and effective corporate parenting'. That means it's about us – the children and young people in and leaving Kent's care. It's about how we are looked after and how things can be made better for us – not just while we are in care but also afterwards. The strategy contains a lot of words we wouldn't use and some we might not understand. But that's OK because we have been asked what we think and we've had our say. What we've said is in the strategy for all to see. We really want this strategy to work, so that children and young peoples' experience of being in Kent's care is a positive one and builds solid foundations for our future.**

*Statement made by the Kent Children in Care Council*

# Priorities for 2015/16

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## **Taking the strategy forward**

Kent's Corporate Parenting Group will work in partnership with the Corporate Parenting Panel, with Kent's Our Children and Young People in Care Council, Kent Safeguarding Children Board, KCC's Skills and Employability Service and others to ensure the delivery of this strategy.

### **Priority 1: Improve outcomes for children in care through high quality social work practice**

- Complete care proceedings within statutory timescales leading to increased timely permanency for children
- Improve the quality of care planning and assessments, reducing drift and delay leading to increased timely and effective decision making and permanent placements for children
- Increase Independent Reviewing Officers impact on outcomes through increased capacity to make contact with children, highlight their views and challenge and quality assure practice.
- Improve the consistency of social work support for children in care
- Sharpen focus on children who have multiple placements moves to improve stability and permanency

### **Priority 2: Improve outcomes for care leavers through high quality social work practice**

- Improve the quality of service to care leavers through robust Pathway Plans and stronger partnership working
- Improve numbers of care leavers in EET
- Improve numbers of care leavers in suitable accommodation
- Improve quality of management oversight, supervision and support
- Strengthen transition arrangements to adulthood

### **Priority 3: Improve outcomes for children in care and care leavers through health and education**

- Improve the achievement of children in care at Key Stage 2 and GCSE attainment
- Increase numbers of children in care and care leavers undertaking higher and further education
- Increase apprenticeships and work experience opportunities across Kent County Council, partners and the private sector for care leavers
- Improve numbers of children in care receiving a health assessment within 20 days of becoming looked after
- Ensure all care leavers have access to full health history when leaving care
- Improve attendance, and reduce fixed term and permanent exclusions

#### **Priority 4: Increase placement choice, stability and support**

- Implement revised Sufficiency Strategy to increase placement choices
- Improve quality of accommodation and support for older young people in care and care leavers
- Recruit foster carers for older young people, those with challenging behaviour, sibling groups and children with disabilities
- Revise and develop support offers to foster carers including access to Children and Adolescent Mental Health Services (CAMHS), improving children's emotional well-being
- Improve support to care leavers moving to independence to maintain tenancies

#### **Priority 5: Increase children and young people's impact on service design and delivery**

- Develop and implement a refreshed Participation Strategy and delivery plan.
- Increase children and young people's meaningful participation and chairing of looked after reviews
- Make better use of learning from complaints
- Increase opportunities for and use of children's feedback from a greater cohort of children in care.
- Set up sustainable meaningful mechanisms for care leaver participation.

#### **Priority 6: Ensure children in care and care leavers are safeguarded**

- Implement actions to reduce and prevent Child Sexual Exploitation
- Implement actions to reduce and prevent children in care and care leavers from going missing
- Reduce instances of children in care entering the criminal justice system and prevent offending behaviour
- Reduce risks for children in care from gang activity

We measure our progress and success in achieving the outcomes outlined through our priorities in a number of ways. We examine our data and performance across a range of measures and indicators both internally and through partner scrutiny at Corporate Parenting Group and Kent's Safeguarding Children Board. We hold regular improvement meetings to track actions leading to improved outcomes across children's services including children in care and care leavers. We use external mechanisms to measure our success in specific areas for example the Family Justice Board and the LILAC assessment. We report annually on the work of the Independent Reviewing Officers. We use a Quality Assurance Framework including case file audits to elicit information about the quality of social work practice, and we use learning from national and local serious case reviews and internal reviews to consistently improve our services for children.



## **Refreshing the 2011-2014 strategy to 2016**

The Strategy consists of four priority areas impacting on the lives of Children in Care, which remain the focus for ongoing work:

- Working together and Learning
- Developing into successful and responsible adults
- Being emotionally, mentally and physically healthy
- Feeling safe and nurtured in a home setting

It is an 'umbrella' document which is the overarching strategy for our Children in Care and there are other specific strategies which go into other areas of work in more depth, such as the Sufficiency Strategy and the Care Leavers' Policy.

This document updates and refreshes our shared partnership Strategy for Children in Care in Kent to 2016.

It updates on the progress made and clarifies priorities to 2016 following Kent's Looked After Children inspection 2013, and significant improvements made to services for children in care and care leavers. It identifies the current picture about outcomes for children and young people in care and leaving care in Kent, and current priorities.

## **What it means to be 'in care'**

The reasons why children are taken into the care of KCC range from abuse and neglect, to unaccompanied asylum seeking children with no family or friends in this country, to babies relinquished for adoption.

There are 3 main routes by which children can be taken into care:

- Care orders made by the courts under section 31 of the Children Act 1989
- Voluntary accommodation arrangements under section 20 of the Children Act 1989
- Police protection or involvement with the youth justice system and since 2013 all young people who are remanded into custody within the Youth Justice system

The term Children Looked After has a specific legal meaning based on the Children Act 1989. A child is looked after by a local authority if he or she has been provided with accommodation for a continuous period of more than 24 hours, in the circumstances set out in sections 20 and 21 of the Children Act 1989, or is placed in the care of a local authority by virtue of an order made under part IV of the Act.

## **What it means to be a 'care leaver'**

A Care Leaver is a person who has been 'looked after' or 'in care' for at least 13 weeks since the age of 14, and who was in care on their 16th birthday.

A young person's status as a care leaver can be divided into the following:

Eligible Child - a young person who is 16 or 17 and who has been looked after by the local authority/Health and Social Care Trust for at least a period of 13 weeks since the age of 14, and who is still looked after.

Relevant Child - a young person who is 16 or 17 who has left care after their 16th birthday and before leaving care was an eligible child.

Former Relevant Child - a young person who is aged between 18 and 21 (or beyond if being helped with education or training) who, before turning 18 was either an eligible or a relevant child, or both.

The Children Act 1989 required local authorities to provide all eligible care leavers with both a personal adviser and ongoing financial assistance. In May 2013 the Government published further guidance for local authorities in regards to their arrangements for facilitating care leavers to “stay put” in their foster placements after they reach the age of 18 years where appropriate.

Many looked-after children and young people have experienced – and continue to experience – significant disadvantage and inequalities. Compared with children and young people in general, those who are in care have far higher levels of mental health difficulties, poorer educational outcomes and poorer emotional wellbeing. Looked-after children and young people are much more likely to be unemployed, be involved in crime and be identified as having a substance misuse problem. The Government Care Leaver Strategy 2013 seeks to address many of these issues.

## **What it means to be a Corporate Parent**

Kent County Council and its partners are committed to providing good and effective parenting to all the children and young people it looks after.

The responsibility of local authorities in improving outcomes and actively promoting the life chances of children they look after has become known as ‘corporate parenting’ in recognition that the task must be shared by the whole local authority and partner agencies. The role of the corporate parent is to act as the best possible parent for each child they look after and to advocate on his/her behalf to secure the best possible outcomes. The functions (including powers and duties) of local authorities in relation to children who are looked after by them are set out in the 1989 Children Act with various amendments and guidance issued subsequently the principles remain the same. Section 22(3) of the 1989 Act sets out the general duty of the local authority looking after a child to safeguard and promote the welfare of the child. This duty underpins all activity by the local authority in relation to looked after children.

Corporate parenting is our collective responsibility to this group of children and young people. This includes doing everything possible to ensure that their time in care is a happy experience and leaves them feeling cared about, as well as cared for. It is an opportunity for them to develop strong, supportive relationships that are sustained into their adult life. Being good and effective corporate parents also means having high expectations of ourselves, as well as being ambitious for our children to achieve and do their very best.

Achieving this goal requires the collective engagement of all parts of the local authority and its partners to work together to establish a firm foundation of improvements in the way that children and young people are supported to succeed. It also requires involving children and young people in the decisions being made about them, and understanding their needs from their point of view.

This strategy document sets out the key challenges and objectives that we will need to address in order to achieve this, and what we will do to make this happen.

Our strategy is contained under five headings, which reflect the key issues impacting on the lives of looked after children and care leavers:

- Working together
- Becoming effective lifelong learners
- Developing into successful and responsible adults
- Being emotionally, mentally and physically healthy
- Feeling safe and nurtured in a home setting.

## **Governance**

Kent's multi-agency Corporate Parenting Group, a multi-agency subgroup advises the County Council Corporate Parenting Panel. This group is chaired by the Director of Specialist Children's Services.

The role of the Corporate Parenting Panel is to lead on ensuring that the Corporate Parenting roles and responsibilities of the multi agency Partnership are being met. The Panel is chaired by County Councillor Ann Allen who is also Deputy Cabinet Member for Specialist Children's Services check this may have changed, chair of the Children's Social Care and Health Cabinet Committee and the Health overview and scrutiny committee.

Good corporate parents, just like all good parents need to understand and know what is happening to their children and young people. In Kent this means continuing our improvement journey in ensuring the information that all agencies collect about Children in Care and care leavers is used to best advantage and that we share information with each other appropriately. Performance scorecards for Children in Care are reported to the Corporate Parenting Group and Panel for scrutiny, oversight and future work planning to help ensure improved management of performance and outcomes delivered by services.

Appendix 1 shows the membership of both of these groups and the way they fit within both Kent County Council's internal and partnership governance structure.

## **Kent Safeguarding Children Board**

As part of its ongoing scrutiny and challenge role, (Working Together to Safeguard Children 2013) KSCB seeks re-assurance that all children in Kent, including Children in Care, are being appropriately safeguarded by all agencies. Multi-agency performance information is provided to evidence that all partner agencies fulfil their safeguarding obligations and work together in a coordinated manner to deliver joined up services.

## **What is good and effective corporate parenting?**

Corporate parenting recognises that public agencies are accountable for discharging parental responsibilities, and that good results depend on children/young people receiving the support that they need to fulfil their potential throughout life.

Good corporate parenting is about doing what any parent should do to promote the safety and welfare of their child; keeping children at the centre of everything that we do.

Effective corporate parenting involves working across agency boundaries. It requires everyone involved in the child/ young person's life working together (with minimal bureaucracy) to provide the quality of care necessary to achieve the best possible outcomes for the child/young person in all aspects of their lives, especially in relation to their education and health.

Corporate parents are represented by elected members of the local authority and senior officers, within Kent County Council, including all the directors and other senior managers within Kent County Council.

The National Children's Bureau (Hart and Williams, 2008) has distinguished three levels of corporate parents:

Level 3: Specialist responsibility - lead elected members for children/ Director of Children's Services

Level 2: Targeted responsibility - corporate parenting groups

Level 1: Universal responsibility - all elected members.

A good and effective corporate parent at any level should know:

- how many children are looked after by their authority
- the reasons why their children have become looked after
- the profile of their looked after children (gender, age, race, religion and disability)
- where their children and young people are looked after
- the number of placement and education moves they experience while being looked after
- how the health needs of their looked after children and care leavers are being met
- how information about looked after children and care leavers is shared between relevant services in the local authority and partner agencies

- whether the best possible care is being provided for their looked after children and care leavers. Would it be good enough for my child?
- whether the outcomes for their children have been improving year on year. Are we being ambitious enough for them?
- what is being done to improve any short-comings in performance and outcomes
- whether the schools and further education establishments know which children/young people are looked after, and who their carers and corporate parents are
- how many of their school-aged children are in receipt of a good education, and how many are absent from school (for whatever reason) for a significant amount of time during the school year
- how we celebrate the achievements of looked after children and care leavers
- the living arrangements that young people move to when they leave care, and if they need further support; whether in continuing education, employment or training, and
- consider the outcomes of looked after children and care leavers when making decisions in other aspects of their work for the council
- the extent to which children and young people are involved in their review meetings and decisions made about them, and also contributing their views in a way that influences the development and improvement of services and practice to looked after children and care leavers.

The delivery of corporate parenting refers to the functions undertaken by staff in the local authority, local district councils, health services, police schools and further and higher education colleges, and other partners working to promote the welfare and safety of children and young people looked after by them.

This means:

- The provision of suitable placements from a range of provision for children who cannot live with their birth families
- The provision of suitable accommodation and support options for young people aged 16 and over
- The opportunity for young people in foster care to remain with their carers after the age of 18 (Staying Put)
- The health needs of children and young people in care and leaving care appropriately assessed and supported, and young people given the opportunity to maximise their health through life skills development and healthy choices for example good sexual health.
- The education needs of children and young people in care and leaving care appropriately assessed and supported, to maximise future life chances through further education, training and employment
- The social needs of children and young people in care and leaving care identified and supported through opportunities to make peer relationships, undertake positive activities and contribute more widely to their communities
- The emotional needs of children and young people in care and leaving care assessed and supported to minimise the impact of adverse life experiences and enhance

opportunities to build future protective relationships for example contact with brothers and sisters.

## **The meaning of corporate parenting to children and young people**

The clarification of corporate parenting used in this strategy is helpful for professionals, who need to understand their role in the corporate parenting process. For looked after children and young people, the meaning of corporate parenting will become evident more through their experience than it will through adult explanation. It is from the daily interactions with carers, friends and family within the placement, the dedicated and regular time with their social workers and teachers, and the way that reviews are conducted that young people's understanding of corporate parenting is formed. The aim of this strategy is for all children and young people looked after and leaving care in Kent to feel cared for and supported to reach their full potential. It is, therefore, the people who deliver corporate parenting who have the most formative role to play. It is evident from the list above that there are many ways in which multi agency corporate parents play a role in meeting the needs of children and young people.

## **Our pledge to children and young people looked after by Kent Council**

KCC has made the following pledges to our Children and Young People in Care and Care Leavers and makes every effort to ensure its aspirations are made a reality.

### **A sense of belonging**

We will:

- find a placement for you that is as near as we can to your family and friends;
- Help you keep in contact with family and friends and, when this is not possible, give you a clear reason why;
- make sure we take into account your views and, if appropriate your parents' views of the type of carers that you would want when choosing your placement and short break/respite care;
- when we make decisions, take account of your age, background and beliefs, including your ethnic and cultural needs and any needs you may have because of a disability, especially communication needs;
- arrange for you to get your National Insurance number for your 16<sup>th</sup> birthday or as soon as possible after being entitled to have one;
- get you a passport by your 16<sup>th</sup> birthday if you are legally allowed to have one - sooner if you need one to go on holidays with your carers and take part in school activities.

### **Getting ready for being an adult**

We will:

- make sure that we ask you about important decisions we make in your life;
- if you have a disability, make sure that you have your own 'communication passport', if you need one, that tells others how you communicate and how they can communicate with you;
- make sure that the home we provide for you when you are going to leave care is safe and properly supported, and that temporary accommodation is a last resort and used for as little time as possible;

- up to your 21st birthday, help you with council tax and making sure you don't lose out on Housing Benefit as a result of taking part in education, training and low-paid employment;
- help you make the most of your chances for training, further education and employment;
- give you £1000 for every year you complete in higher education or up to a maximum of £3000 for the whole period of the course; and
- make sure that your move to adult services, if you need them, is as smooth as possible.

### **Championing your needs and interests**

We will:

- make sure that you are able to tell us your wishes, feelings and interests - taking into account any disabilities you have;
- listen to your wishes and feelings before making decisions that affect you and support you if you need help to do this;
- work with you and your family to make sure that plans for your care are up to date and meet your educational, health and care needs;
- make sure that you know how to complain and how to get in touch with the advocacy service which can give you support to help you make a complaint; and
- give you access to a solicitor (at our cost) if you want legal advice about your care order, or any other legal order affecting you - such as contact with certain people in your life.

### **An adult who is always there for you while you are in care**

We will:

- make sure that you have a named social worker or caseworker and an independent reviewing officer and know how you can contact them;
- make sure that you have at least one person in your life who you can expect to be around throughout your time in care; and
- make sure that you have a named nurse that you can contact if you have any questions about your health.

### **A good education**

We will:

- make sure that you have a place at a school that will help you to do your best;
- make sure that three- and four-year old children in care can go to early years education;
- work with your school and the 'designated' teacher to help you do your best (all schools should choose a teacher who is in charge of all of the school's services for those children in care who go to the school);
- give you chances and support to stay in education beyond 16, including help going to university and further education if you want to do this;
- help you catch up with schoolwork if you fall behind;
- expect your carers to take an active interest in your education and make good links with your school, including going to parent's evenings and other school events;

- provide a computer if you have been in care for six months or more and are aged 11 years or over and, if appropriate, access to the internet; and
- celebrate your achievements and success.

### **Good memories for the future**

We will:

- provide for you opportunities to take part in hobbies and interests (including sports, art and music); and
- help you build a photo album of important people in your life and places you have been to while in care.

## **Our Care Leavers' Pledge**

**As you are a Kent Care Leaver we specifically promise to:**

- If you are eligible, make sure you are able to get a passport, and arrange for your National Insurance number to be issued
- Help and support your progress in education, both in further education and at university
- Find you somewhere safe to live and provide the necessary support you need to live independently. Up until you are 21, help you with council tax and make sure you don't lose out on housing benefit if you are in education, training or low-paid employment
- If you are at University we will support you with a financial package that includes the government bursary
- If you have a disability, make sure that you have your own 'communication passport' that tells others how you communicate and how they can communicate with you
- If you need to move to Adult Services, make sure the move is as smooth as possible
- You can obtain a list of what you are entitled to from your social worker or Personal Advisor

Help us to celebrate your achievements by keeping in touch, and tell us when you need help, sooner, rather than later.

## **Voice of the children and young people**

### **Our Children and Young People in Care Council – OCYPC**

KCC's Virtual School Kent (VSK) supports the OCYPC. The OCYPC meets regularly, facilitated and supported by staff from the Virtual School and apprentices, some of whom are Kent care leavers.

The Our Children and Young People in Care Council met 4 times during the 2013/14 academic year and have been attended by the Lead Member and the Director for Specialist Children's Services.

Work is underway with the social care teams in the districts to develop the OCYPC further and 'Taster days' were run in 2014 to encourage more children in care to sign up to being on the council in order that it fully reflects the cohort of children in care in Kent.



### **Participation activity days**

Virtual School Kent have organised 13 participation activity days from September 2013 to July 2014 during the October, February, and Summer school holidays for Kent Children in Care (CiC). 297 CiC attended at least one activity day with 55 children attending two or more activities. The age range of young people attending has been aged between 3 – 17 years.

The participation days have been organised and run with the assistance of VSK's Apprentice Participation Worker Team and have covered a wide range of activities including sports, outdoor pursuits, music & dance and arts & crafts. Six participation activity days were held during the Summer 2014 school holidays with 128 young people attending. In order to reach as many young people as possible, the days took place at various locations around the county – Folkestone, Maidstone, Margate, Rochester, Sheerness and West Farleigh.

Evaluations have been completed by the children after each event and their views have been sought with regard to the type of days they would like run in the future. These views have been taken into consideration in planning future events and the horse riding and canoeing events have been sought after.

### **Wider Participation**

VSK Officers and the apprentices have supported young people completing surveys during the last year, including the Your Voice Matters survey and feedback for the LILAC assessment.

VSK continues to work on improving the communication channels with children in care. A quarterly newsletter has been established, created by the VSK apprentices on behalf of the OCYPC. The VSK apprentices have also engaged the OCYPC and other children in care through focus groups and participation activity days to work on developing a young person friendly version of the Kent Pledge, a coming in to care pack and a leaving care charter.

There is continual development of the Kent Cares Town website with new articles, pictures, events being added on a regular basis.

The apprentices are also involved in the following work streams:

- Staff Recruitment – sitting on interview panels for Senior and Middle Managers within KCC
- 1:1 support work with children and young people in care (supported 37 young people in last academic year)
- Supporting children with the completion of their e-PEP questions
- Supporting focus groups arranged by other parts of the Council to ensure the voices of children in care are heard.

### **A Sample of What Kent's Children in Care Council said:**

- It's difficult to feel secure when you are moved from place to place

- Listen to what we say about staying put and moving on
- It can be difficult to adjust to a new placement when it is so different from the one before
- My room's untidy, I'm late down for breakfast, and I don't say much. What's the problem? I'm a teenager - Get over it!
- Social workers don't have caseloads. They have individual young people who need support.
- We need people who are going to be there for us long term.
- I am a member of the OCYPC because I am able to express my views on different circumstances in a young person's life. I am able to show my emotions well and show that I can help people if needed.
- I am part of OCYPC because it makes children know that being in care is not that bad and that the future gets better. I enjoy going to the meetings, going to activity days.
- I am a member of the OCYPC because I believe that the views of children in care are the vital key to a happier life in care. In addition to going to the OCYPC meetings I enjoy acting and swimming. I have two sisters and I am certain that by continuing to participate I am making both their life and mine a lot better and happier.
- I am a member of the OCYPC because I like to help other people with their problems and make 'being in care' not that bad.

### **'Never Stop Listening' DVD**

An updated 'Care to Listen' DVD was made in 2014, following the original made in 2008/9. It captures the views of a range of children in care and care leavers about their experiences of being in care and includes some care leavers who were filmed in the original DVD. The film was shown to all KCC elected Members after the 17 July 2014 County Council meeting and is being shared with officers within KCC and with partner agencies to ensure these views are heard and appropriate actions are being taken to improve young people's experiences.

It has been extremely well received by all those who have seen it and provides a powerful way of hearing the voice of children and young people in care and their reflections of being in care as they progress through adulthood.

Part of our strategy for ensuring that children and young people experience a positive sense of corporate parenting is through our efforts to reduce bureaucracy getting in the way of the decisions taken about them.

In order to prevent this from happening we will:

- look at how we can delegate much of the decision making for looked after children to their carers, supported by social workers, teachers and other professionals involved in the child/young person's life
- explore how we deliver and commission services to looked after children and care leavers that minimise bureaucracy and strengthen relationships between the child and key professionals in their lives
- ensure the recommendations outlined in the Munro Review of Child Protection (DfE, May 2011) should be applied to safeguarding looked after children and care leavers.

### **Independent Reviewing Officers Service**

Independent Reviewing Officers are responsible for scrutinising care plans for children in care. This involves championing the voice of the child, developing a positive relationship with the child, overseeing progress as described and agreed in the care plan across multi agency partners and challenging drift, delay or poor outcomes. Independent Reviewing Officers provide independent oversight of the quality of services being provided to children in care.

### **Leading Improvements for Looked After Children (LILAC) Assessment**

KCC commissioned an independent assessment which took place in 2014. The LILAC assessment has been developed by National VOICE as a way of involving young people with experience of the care system to carry out an assessment of how well services delivered by the local authority are enabling children in care and care leavers to participate; both at an individual level, and in the development of policies and services that support them. The assessment focussed on shared values, style of leadership, structures, staff, recruitment and selection, care planning and review, complaints and advocacy. Kent County Council was judged by care-experienced young people to have fully achieved four of the seven LILAC standards. This means we still have more to do to get where we want to be as Corporate Parents.

### **Representation, Rights and Advocacy Service**

The Young Lives Foundation has been awarded a three year contract for the Representation Rights and Advocacy Service, to provide the following county wide services from 1st April 2015. YLF is a Kent organisation based in Maidstone [www.ylf.org.uk](http://www.ylf.org.uk)

- Advocacy for Children:
  - In Care
  - Care Leavers aged 16 – 24
  - Children in need
  - Children subject to a child protection plan
- Independent Visitors for Children in Care aged 8 – 18 years.

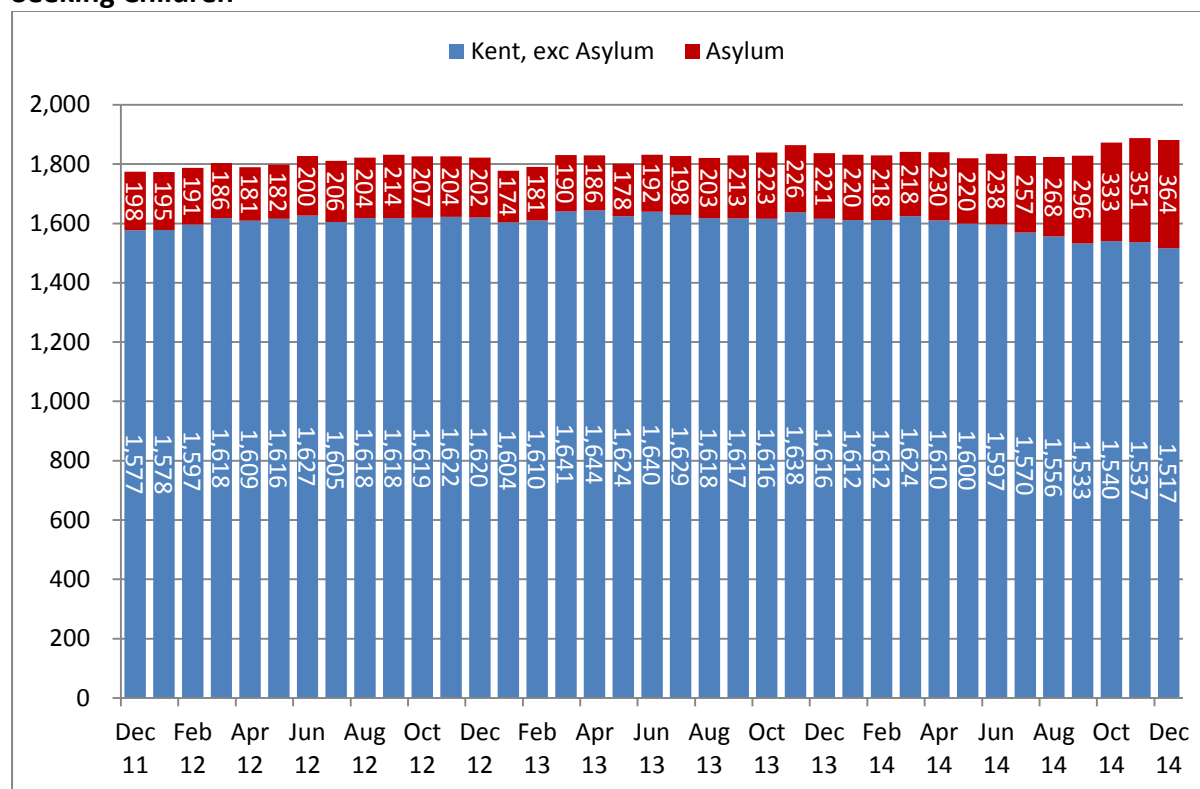
- Independent Person for Stage 2 complaints under the Children Act 1989.
- Appropriate Adults Service for young people aged 10 - 17 years and vulnerable adults detained at Police Custody Suites, who require support.
- Accompanying Adults Service for the purpose of age assessment interviews for unaccompanied asylum seeking children.

During 2015 a Participation Structure including the recruitment of a Participation Officer and two workers will be developed. This will include a revised Participation Strategy to:

- generate greater reach amongst children in care
- making stronger use of available feedback through child in care reviews and our commissioned partners
- enabling more participation and feedback channels from care leavers
- extending the current apprenticeship scheme
- implementing recommendations from the LILAC assessment.

# A profile of Kent's looked-after children

## Number of Children in the care of Kent County Council, including Unaccompanied Asylum Seeking Children



The number of Kent children in care at year end (March 31<sup>st</sup>) has until recently been stable since 2012 (see Table LAA1 below) INSERT LAA 1. This has given Kent a rate of 56 children looked after per 10 000 population since 2012 although the overall looked after population has increased by approximately 35 children in that time. It is likely that our overall LAC numbers and rate per 10 000 will increase by end March 2015 reflecting the increase in UASC shown above.

### Children looked after by Local Authority years ending 31 March 2010 to 2014

	numbers and rates per 10,000 children aged under 18 years - source SSDA 903									
	numbers					rates				
	2010	2011	2012	2013	2014	2010	2011	2012	2013	2014
England	64470	65500	67070	68060	68840	57	58	59	60	60
<b>Kent</b>	<b>1480</b>	<b>1695</b>	<b>1800</b>	<b>1830</b>	<b>1835</b>	<b>46</b>	<b>53</b>	<b>56</b>	<b>56</b>	<b>56</b>
Essex	1465	1585	1480	1255	1135	50	54	50	42	38
Lancashire	1285	1295	1325	1475	1590	52	53	54	61	65
Worcestershire	580	590	600	640	640	50	51	52	56	56

In 2011 and 2012 Kent had 190 UASC young people and this rose to 220 in 2014. . However in the table above it can be seen that our numbers of UASC children have significantly increased since that time, especially towards the end of 2014, and Kent is likely to end the year to March 2015 with approximately 365 UASC in care, putting UASC at just under 20% of the overall care population. This has coincided with a downward trend for looked after children (non-UASC) since April 2014 which is likely to be the result of timelier care proceedings and increased focus on early help intervention.

The second half of 2014 saw a significant increase in the number of arrivals of unaccompanied asylum seeking children (UASC) requiring the assistance of the Council. A total of 315 new referrals were received in 2014 from the Immigration and Border agency, with 162 of these arriving in the last four months of the year. This compares to a total of 93 new entrants during 2013, an increase of 242%.

The predominance of young males in the presenting UASC cohort continues, with 97% of new entrants being male. Older young people are also becoming more frequent. Of the 162 arrivals in the last 4 months of 2014, 94 new entrants stated they were 16 or 17 years old and further 40 stated they were 15 years old. The impact of such a large cohort of young people being at the older age range is significant because they become care leavers quickly, after which time funding is greatly reduced.

The volatility in certain parts of the world has greatly contributed to the rise in the numbers of individuals seeking asylum in the UK. Unrest in the Middle East has significantly contributed to the rise in numbers, with 36 young people originating from Syria alone. Young people continue to arrive from Afghanistan, Iraq and Iran as well as Albania and Egypt. However, the largest and newest cohort of young people comes from sub-Saharan Africa with more than 50 Eritrean young people becoming accommodated by the Council during 2014.

The council continues to negotiate with central government requesting additional financial support for this unpredictable demand that affects Kent disproportionately due to its geography.

## Legal status

### LAA2 Children looked after at 31 March by percentage of legal status - Year ending 31 March 2014

source SSDA 903	Number	Percentages			
		Interim Care Orders	Full care orders	Placement order granted	Accommodation under S20
England	68840	12	46	13	28
<b>Kent</b>	<b>1835</b>	<b>7</b>	<b>39</b>	<b>16</b>	<b>34</b>
Essex	1135	6	51	12	30
Lancashire	1590	19	50	14	17
Worcestershire	640	7	43	14	36

Table LAA2 shows that at year end 2014 (March 31<sup>st</sup>) in Kent 39% of children in care were subject to Full Care Orders, 37% were accommodated under Section 20 and 16% had a Placement Order granted. This fits with the care population profile of high numbers of adolescents entering care under Section 20 including UASC young people. It is of note that Kent's profile of children in care and the orders they are subject to does vary from the England profile set out in Table LAA2 above. This may be explained in part by high numbers of UASC within Kent's care population. This strategy identifies the need to scrutinise the use of Section 20 in the year ahead to ensure that purposeful plans are made for children in care resulting in permanency outside the care system, or long term care arrangements that give children and young people stability and emotional security.

## Placement Types

**LAA3 - Children looked after at 31 March by percentage in placement - Year ending 31 March 2014**

source SSDA 903	Number	Percentages								
	All children looked after 31st March 2014	Foster placements	Placed for adoption	Placement with parents	other placement in the community	secure units children's homes and hostels	other residential settings	residential schools	missing absent for more than 24 hrs from agreed placement	other placement
England	68840	75	5	5	3	9	2	1	-	-
<b>Kent</b>	<b>1835</b>	<b>77</b>	<b>6</b>	<b>1</b>	<b>6</b>	<b>6</b>	<b>1</b>	<b>1</b>	<b>1</b>	<b>0</b>
Essex	1135	75	6	1	7	8	x	1	x	0
Lancashire	1590	71	5	11	2	6	4	x	0	x
Worcestershire	640	71	6	5	5	12	x	x	x	0

Table LAA 3 demonstrates that at year end 2014 77% of our looked after children were in foster placements, with 6% placed for adoption and 7% placed in residential / secure children's homes. This reflects Kent's aims to ensure the vast majority of children coming into care are looked after within a family setting close to home wherever possible. Over 70% of children in care in Kent are placed within 20 miles of home, with a further 10% placed over 20 miles from home but within the county. The available Kent fostering placements are concentrated in East Kent and the fostering recruitment strategy for 2015 is focused on developing increasing numbers of placements in the West and North of the county, especially for older children, sibling groups and children with disabilities. Over 60% of children in care were in Kent in house foster placements at year end 2014. Kent's Sufficiency Strategy outlines the aim to reduce use of IFAs and increase further use of in house fostering provision especially for older children, linked to the current recruitment activity for carers.

## Placement Stability

The quality and suitability of our accommodation offer for children in care is evidenced by data relating to placement stability. In particular, 3 or more placement moves in a year, the same placement for the last 2 years and placed within 20 miles of home.

KCC has made good progress:

- 8.2% of children in care have had 3 or more moves in the last 12 months to September 2014. This is within the KCC target of 9%
- 72.7% of children in care have been in the same placement for the last 2 years, which exceeds the authority target of 70%

## The age and gender of Kent Children in Care

Table LAA 5 demonstrates that 64% of Kent's population of children in care are aged 10 and above. This reflects the profile of UASC described above, but may also reflect improved adoption work with under 5 year olds where children are in care for shorter periods of time prior to being adopted. Renewed focus will be applied to ensure the right children are taken into care at the right time, and further work embedding early help and change work with children at risk of entering care will impact on Kent's care population in the year ahead.

### LAA 5 - Children looked after at 31 March by percentage age and gender - Year ending 31 March 2014

source SSDA 903	Number	Percentages						
	All children looked after 31/3/2014	Gender		Age at 31st March 2014 in years				
		Male	Females	Under 1	1 - 4	5 - 9	10 - 15	16 plus
<b>Kent</b>	<b>1835</b>	<b>61</b>	<b>39</b>	<b>4</b>	<b>13</b>	<b>19</b>	<b>36</b>	<b>28</b>

This analysis is supported by Table LAC 4 which shows that out of 835 care entrants in 2013-14, the reason given for entering care for 32% of children was family dysfunction, with another 14% described as 'family in acute stress'. However, as the proportion of UASC continues to grow Kent's age profile of children in care may continue to show more teenagers, especially 16 and 17 year olds, than our comparator authorities. The Children in Care Strategy to ensure the right children enter care at the right time includes developing expertise in when and how to undertake age assessments for UASC young people, to ensure services are appropriately targeted to vulnerable young people under 18 arriving in Kent.

## Care entry

It is known that care outcomes for children are generally poorer the older the age upon care entry, and creative ways of engaging with families at an earlier stage to prevent family breakdown or dysfunction are part of Kent's strategy going forward. This includes rolling out the Signs of Safety approach in 2015, increasing use of Early Help targeted services, family group conferences, and more targeted edge of care work to increase the robustness of Kent's response to challenging teenagers.



#### LAC4 – Reasons in percentages for Care Entry for Children who started to be looked after during the year ending 31 March

Source SSDA903	Number children who started to be looked after during the year ending 31 March 2014	Percentages							
		Abuse or neglect	Child's disability	Parents illness or disability	Family in acute stress	Family dysfunction	Socially unacceptable behaviour	Low Income	Absent parenting
England	30430	55	2	3	10	19	4		6
<b>Kent</b>	<b>835</b>	<b>26</b>	<b>3</b>	<b>3</b>	<b>14</b>	<b>32</b>	<b>3</b>	<b>x</b>	<b>19</b>
Essex	375	73	3	x	7	9	x	0	6
Lancashire	655	74	x	x	7	13	2	0	3
Worcestershire	270	54	4	x	7	30	x	0	2

#### Ethnic background of our looked after children

Over 80% of children in care in Kent are of White British ethnicity. At the 2011 census the proportion of White British in the whole Kent population was 93.7% whilst the 15 and under population is 90.6%. Therefore BME children may be over-represented in our care population although this is largely as a result of our unaccompanied asylum seeking population. One of Kent's priorities in implementing its Sufficiency Strategy is to ensure greater placement choice and closer matching across a range of needs including ethnicity and religion.

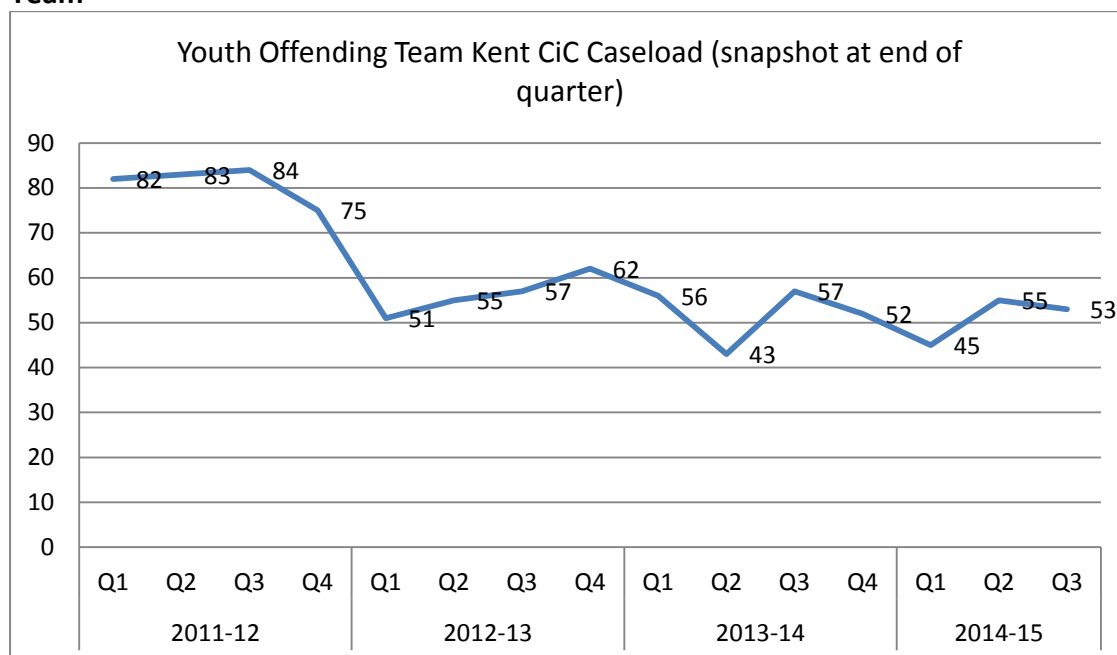
#### LAA8 Children looked after at 31 March by ethnic origin percentage - Year ending 31 March 2014

source SSDA 903	Number	Percentages					
		White	Mixed	Asian or Asian British	Black or Black British	Other ethnic groups	Other
England	68840	78	9	4	7	2	1
<b>Kent</b>	<b>1835</b>	<b>84</b>	<b>4</b>	<b>x</b>	<b>3</b>	<b>9</b>	<b>x</b>
Essex	1135	87	6	1	3	2	1
Lancashire	1590	90	5	4	x	1	x
Worcestershire	640	91	6	x	x	2	0

## Children in Care and Offending

Chart YOT1 demonstrates that the number of young people in care who are offending has significantly reduced from 2012 and is currently approximately 3% of Kent's overall care population. This downward trend is expected to be maintained through implementation of preventive work targeted at young people in care.

### YOT1 Number of Children in Care who are being worked with by the Youth Offending Team



## Children in Care with Disabilities

There was an increase in the number of Kent children in care with a disability (from 92 in 2011/12 to 141 in 2013/14). The increase was particularly in the behaviour and learning disabilities categories. In 2013/14, 70 Kent children in care had a learning disability.

There were 141 children in care with a disability record (March 2014). 43% (61 children) had a legal status of being accommodated under Section 20 of the Children's Act. 18% (25 children) were placed outside Kent.

Our short breaks programme offers respite to parents of children and young people across the whole range of disabilities including to children living with foster families and others supported by Specialist Children's Services. Short breaks include overnight residential breaks, evening and weekend activities, whole family fun days and we also provide a direct payments scheme to more than 700 families so they can purchase their own respite. Short breaks play an important role in strengthening family resilience, keeping families together and reducing the need for children to be taken into care.

Special schools and some health services support the management of behaviour in a holistic way; aligning the responses of the school, parents and short breaks settings.

Kent's new Emotional Wellbeing Strategy for children and young people will ensure improved support for children and young people and for their parents and we anticipate this will help to drive down the number of children with learning disabilities and behaviour issues who need to come into care.

### **Where we are now (January 2015)**

Kent's last Ofsted Inspection of Looked After Children Services in July 2013 found that significant achievements had been made to improve outcomes and Kent was rated 'Adequate' overall. The following strengths were identified:

- The commissioning arrangements with Coram adoption service which is now working in partnership with the council to develop and deliver a newly integrated adoption function. This has led to demonstrable improvements in the council's own adoption service.
- Significant achievements made to improve outcomes for children and young people. For example, the reorganisation of services for looked after children into four locality teams and better collaborative working arrangements with key partner agencies are evident in the progress being made by the council.
- The development of the Virtual School Kent (VSK) has clearly had an impact on reducing fixed term or permanent exclusions and improving attendance, achievement and attainment. This is evidenced in the educational progress children and young people are now making.
- Significant work has been undertaken in the council to increase stability for looked after children. Placement Panels consider whether placement moves are in the best interests of children. A more proactive approach to prevent placement breakdown has been established through the placement stability core groups, which work to resolve issues at an early stage.
- Foster carers report that they receive good support. Most children and young people who responded to the Ofsted survey stated that the care they received was either good or very good. Children and young people spoken to during the inspection were very positive about their foster carers describing them as 'caring and supportive'.
- Looked after children; who were spoken to as part of this inspection, stated that they are given help with how to manage their money and are taught basic skills in cooking, cleaning and other vital life skills.
- Achieving placement stability and permanence for children and young people shows some encouraging signs of improving.

The following areas for development were identified:

- Improve supervision and case management oversight by front line managers, supported by effective decision making processes
- Complete care proceedings within statutory timescales
- Ensure that children do not experience significant delay and drift in determining their long term outcomes.
- Improve the quality of care planning and assessments.

- Increase recruitment of foster carers with the right skills and in sufficient numbers to support placement choice
- Reduce the number of custodial remands for looked after children
- Improve services to care leavers including effective involvement and support from personal advisors.
- Improve access to CAMHS
- Improve placement choice. Both the number and type of foster placements are not distributed geographically in relation to current identified need. This represents a significant challenge for the council in meeting its sufficiency duty.
- Improve the quality of Pathway plans with measurable outcomes with clear steps for how young people will achieve their goals. Increase ownership of these plans by young people.
- Improve the quality of support for care leavers.
- Improve commissioning arrangements to ensure that they meet the range of needs of young people and involve young people in the selection and commissioning of these services including increasing available suitable accommodation for care leavers.
- Develop a Staying Put policy and ensure strategic leadership is in place.
- Develop a systematic approach to children's participation in influencing policy and practice and the impact of children's views on service development.
- Reduce offending by looked after children. They are over-represented in the custodial rates in the county. Develop scrutiny of the profile of these children and young people and strategies to monitor and address this situation.
- Improve organisational learning from complaints including those from children and young people.
- Minimise use of bed and breakfast accommodation for 16+ and care leavers and ensure risk assessments are in place for using this type of accommodation. The council's sufficiency strategy recognises the need to eliminate the use of bed and breakfast accommodation.
- Increase children and young people's participation in their reviews.
- Reduce caseloads for Independent Reviewing Officers.

The OfSTED report can be found at:

[http://reports.ofsted.gov.uk/sites/default/files/documents/local\\_authority\\_reports/kent/053\\_Inspection%20of%20local%20authority%20services%20for%20looked%20after%20children%20as%20pdf.pdf](http://reports.ofsted.gov.uk/sites/default/files/documents/local_authority_reports/kent/053_Inspection%20of%20local%20authority%20services%20for%20looked%20after%20children%20as%20pdf.pdf)

## Progress

Significant progress has been made against Ofsted recommendations and set against the objectives of Kent's Children in Care Strategy 2011-2014.

This includes:

- Implementation of specialist Social Work teams for Children in Care
- Integrated Care Leavers Service structure in place with strengthened management oversight
- Staying Put Policy and strategic leadership in place

- Improving permanence through major improvements to our Adoption rates: year on year increase in overall numbers adopted from 70 in 2011-12 to 146 in 2013-14.
- Improving the number of Children in Care who have regular health and dental checks
- Increasing the number of Children in Care who live near their home wherever this is possible and safe for them
- Significant reduction in duration of care proceedings to below England average.
- Dedicated Access to Resources Team utilising frameworks to get best quality foster placements
- Virtual School Kent increasing the participation and achievement of children in care, and reducing exclusion
- KentCaresTown website, resource for children becoming looked after and care leavers
- No use of bed and breakfast accommodation for children in care and emergency only use for care leavers
- Increase in the number of Independent Reviewing Officers to reduce caseloads in line with DfE guideline
- Increased child participation in looked after reviews including some children chairing their own
- Reduced offending by children in care
- Virtual School extension to oversee the education of young people age 16 to 18

## **Key issues and challenges we need to tackle**

The data profile and analysis above informs the following priorities for the year ahead in Kent's work with children in care and care leavers:

- Reducing the number of children and young people who need to become looked after through improving our Early Help Service.
- Stabilising the social work workforce through recruiting sufficiently skilled and experienced permanent staff
- Improving the quality of robust care planning and Pathway Plans; reducing drift and delay.
- Making children and their families views integral to decision making
- Ensuring that, wherever possible, children and young people are enabled to return home to live with their parents, extended family or achieve permanency through adoption and Special Guardianship Orders
- Ensuring our new Care Leavers service delivers excellent support to our Care leavers
- Recruiting and retaining foster carers with the right skills, in sufficient numbers and in the right areas of the county.
- Ensuring timely and effective support for the emotional and mental health needs of our Children in Care
- Ensuring children and young people participate and contribute to service design and delivery through implementation of a Participation Strategy.
- Ensure good quality accommodation and support for care leavers.
- Improve outcomes for care leavers in education, employment and training, ensuring they receive ongoing support from the Care Leaving service.

## **Looked after children placed in Kent by other authorities**

In addition to children and young people looked after by Kent County Council more than 1200 children are placed in Kent by other local authorities largely because Kent has relatively inexpensive housing stock compared to the rest of the London and South East region.

Kent Safeguarding Children Board recognise that the number of Children in Care placed in Kent by other local authorities is extremely high. Work is ongoing to ensure that those children are safeguarded and placing authorities are made fully aware of the challenges associated with very high numbers of out of authority placements being made in Kent. This is especially relevant to ensure children who go missing and may have additional risk factors including Child Sexual Exploitation (CSE) and Gang related activity are fully protected.

Kent County Council and its partners have levels of responsibility to meet the needs of these children and young people, and will work together to ensure that we continue to:

- Work with the corporate parents (the placing local authorities) of these children and young people to ensure effective communication about where children and young people are living in Kent.
  - Inform placing authorities know the areas of Kent which have high numbers of looked after children (such as Thanet) and the additional challenges that further placements in these areas would bring as set out in the Out of Authority Placement of Looked After Children: Supplement to the Children Act 1989, Volume 2: care planning, placement and case review guidance July 2014.
  - Be proactive in encouraging placing authorities to identify ways in which more children and young people can be enabled to remain living closer to their families, friends and local communities.
  - Lobby the Government to ensure that the sufficiency duty requiring local authorities to commission sufficient placements in their own area is being implemented.
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# Our strategic objectives

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## 1. Working together and Learning

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Much work has been done to improve the way children and young people in Kent are looked after when they come into the care of the Local Authority.

The 2013 OfSTED report found “better collaborative working arrangements with key partner agencies are evident in the progress being made” and particularly praised the Virtual School Kent (VSK) which “has clearly had an impact on reducing fixed term or permanent exclusions and improving attendance, achievement and attainment. This is evidenced in the educational progress children and young people are now making”.

### **Integrated Children in Care and Care Leaver Service**

In December 2014 the Service for Unaccompanied Asylum Seeking Children (UASC) and the Catch 22 16+ Service became integrated into the existing Children in Care Service across Kent. Each of the five area children in care services gained an additional team of workers, and the children and young people concerned were allocated to these new teams in accordance with their placement addresses.

Prior to this Catch 22 and the Asylum Service delivered two separate Care Leavers Services to Kent resident care leavers and asylum seeking young people.

The service delivery for all Kent’s over 16 year old children in care and those who are unaccompanied asylum seeking children are now within one management structure to ensure that all children in care in Kent receive the same quality of service in accordance with their needs. This strengthens management accountability and service quality.

The reconfiguration of the service has brought rigour and attention to the quality of the work with this group of children and young people. The Service now offers a ‘children first’ approach to care planning which will result in higher quality Pathway Plans and consistency of support for all care leavers.

The service now focuses on the enablement of young people as they move towards adulthood, including better oversight of access to educational opportunities. The role of Virtual School Kent has been extended to cover this older age group. The integration of the service has also enabled the Independent Reviewing Officer Service to gain full oversight of all children in care as one cohort.

### **Early Help and Preventive Services**

Early Help services have been reconfigured to ensure that they are integrated and target those children, young people and families who most need our help and are at risk of entry

to care to ensure that clear outcomes are achieved including enabling children and young people to continue living with their birth families. Improvements to the service have included:

- development of a new process to identify and plan for those who need additional help
- unifying several KCC services which support children and young people, from Children's Centres, the Troubled Families Programme and youth provision into one service under a single Director of Early Help and Preventive Services.

### **Kent Troubled Families Programme**

The Programme team is now part of Early Help and works with families with multiple problems to help turn their lives around and to help children in these families have the chance of a better life.

Kent's programme has been successful in turning around 1,707 families so far and from January 2015 is starting the extended 5 year programme with a target of turning around 8,960 families. Our approach is embedded in the model of whole family support in Early Help. The themes in the extended programme are widening and include:

- Parents and children involved in crime or anti-social behaviour.
- Children who have not been attending school regularly.
- Children who need help: children of all ages, who need help, are identified as in need or are subject to a Child Protection Plan.
- Adults out of work or at risk of financial exclusion or young people at risk of worklessness.
- Families affected by domestic violence and abuse.
- Parents and children with a range of health problems.

We anticipate there will be a significant impact on the numbers of children and young people needing specialist interventions and needing to come into care.

### **Children in Care and Offending**

Kent Early Help Services are currently developing a shared protocol to improve joint working between all agencies and local authorities across the region to reduce the unnecessary criminalisation of Children in Care. This will consider whether criminal prosecution is always appropriate, looking at the underlying causes of behaviours, repairing harm and reflecting the needs of the victim through restorative approaches, and other efforts to reduce their offending.

### **Becoming effective life-long learners**

A good education is essential in order to be successful and healthy throughout life. We want our children to do well in school and in any further and higher education that they choose to undertake. Most importantly, we want them to achieve their very best in everything that they do. We also want to ignite in them a passion for learning that remains with them as they move into adulthood and independence, so that they are able to respond and adapt effectively to the challenges that they will face in the future.



Many of our Children in Care have had disruption in their education and often need extra help to achieve.

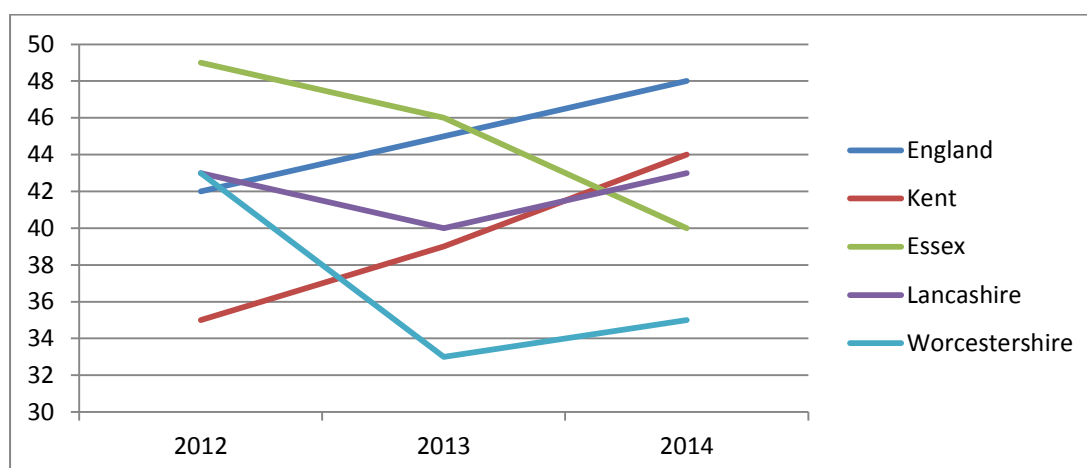
## Virtual School Kent (VSK)

We are delighted with the success of the Virtual School Kent and the progress it has underpinned in the educational and other achievements of our Children in Care.

### Key Stage 1 - Eligibility and performance of children who have been looked after for at least 12 months

	%age with UPN	No. eligible to sit tests	%age who achieved at least Level 2 in the following:		
			Reading	Writing	Maths
England	90-99	1750	71	61	72
Kent	100	45	70	56	70
Essex	100	25	78	74	74
Lancashire	100	45	67	56	73
Worcestershire	100	25	62	58	65

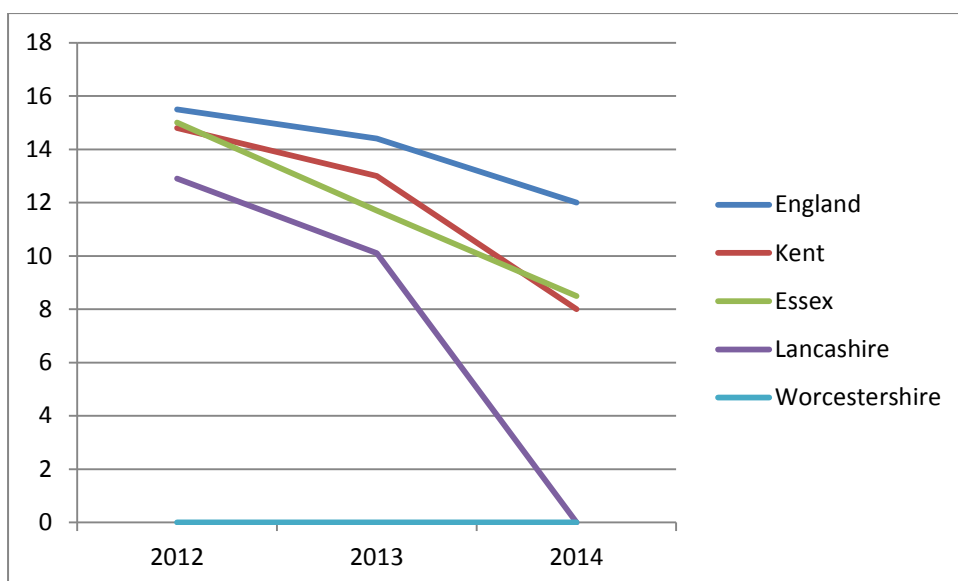
### Key Stage 2 Performance of children who have been looked after for at least 12 months 2012-14 in reading, writing and maths



Our children have shown improvement in all 3 test results over the last 3 years. Since the development of Virtual School Kent in 2010 the percentage of eligible children in care achieving Level 4+ in English has improved by 32%, level 4+ Maths has improved by 29% and those achieving both has improved by 18%. This is a very encouraging trend which we will continue to focus on in 2015.

### Key Stage 4 eligibility and performance of children who have been looked after continuously for at least 12 months 2013-2014

#### GCSEs : Percentage achieving 5+ GCSEs A\*-C including Maths and English



Due to the significant changes in 2013/14 to assessment and examination processes there will be no national comparison data until the Statistical First Release (SFR) which will be published in 2015. These changes include:

- early GCSE entries dis-incentivised
- English GCSE final examination weighting has been increased to 60%
- shift to end of course examination approach.

2013-14 academic year saw nearly a 20% increase in the number of eligible children, this means that each young person has a smaller impact on the overall percentage achieved.

Kent showed a downturn on last year's performance which is in line with the Kent all learners downturn of 4%, however it is important to note that the changes outlined above impact vulnerable learners who may have had gaps in their learning. Based on last year's Key Stage 4 results Kent was one of only three counties nationally that showed an improvement in all three tests:

- 5+ GCSEs A\*-C or equivalent
- 5+ GCSEs A\*-C or equivalent including English & Maths
- GCSEs A\*-C in English & Maths

#### Five year Year 11 GCSE Trend Breakdown

	2009-10	2010-11	2011-12	2012-13	2013-14
NI101	4.6%	10.3%	13.1%	14.5%	10.3% ↓4.2% pts
<b>Special Educational Needs</b>					
Total SEN	56%	52%	67%	72%	↑29%
SA	10%	6%	13%	11%	↑10%
SA+	12%	18%	31%	23%	↑92%
SSEN	33%	28%	23%	38%	↑15%
<b>Unaccompanied Asylum Seeking Children (UASC)</b>					
National Average	3%				
South East Average	5%				
London	8%				
Kent	10% (↑233% on National Average)				

## School attendance and exclusions

### Five year Attendance And Exclusion Trend Breakdown

Academic Year	'09/10	'10/11	'11/12	'12/13	'13/14
Performance Assessment Framework CF/C24 25+days Absence * Indicator changed to Persistent Absence (PA) from 2011/12	16.3%	12%	*10.5%	*9.5%	*9.5%
% Permanent Exclusion (PEx)	1%	0.9%	0.54%	0.39%	0.39%

2013-14 was another positive year for our young people in terms of attendance and permanent exclusions levels. These two indicators which are in line with national averages for Children in Care have remained stable over the past two years. It is important to note however that since the development of the Virtual School persistent absenteeism has reduced by 42% and Permanent Exclusion has reduced by 61%.

Kent's children in care who are persistent absentees from school has reduced from 10% in 2006 to just over 4% in 2013, which is below the average across our comparator authorities and the England average, both of which are 5 %. Our children in care are therefore supported to attend school and VSK will continue to ensure that this positive trend continues. Good attendance at school is one of the most important factors in future academic achievements.

## 2. Developing into successful and responsible adults

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### Care Leavers

In October 2013 the Government issued its "Care Leaver Strategy" with a clear aspiration that care leavers ***"should expect the same level of care and support that other young people get from their parent"***. The strategy sets out the Government's commitment to remove some of the practical barriers that care leavers face as they progress to adulthood. They want to see ***"holistic and quality support provided in all mainstream and specialist services by: local authorities; Jobcentre plus; housing; health bodies; the justice system; and, educational institutions.....services that are integrated, simplified and that treat care leavers with dignity and respect."***

The Government's Strategy seeks to improve the educational attainment of care leavers and strengthens duties on local authorities to support Children in Care to remain in education and provide support to care leavers aged 21-24 who wish to return to education or training. They also made their expectation that the Department of Work and Pensions (DWP) and Job Centre Plus (JCP) offer more support and greater flexibility of

their offer to care leavers, including access to funding to help them access work, work experience and apprenticeships. DWP will track the support care leavers receive and how effective it is and expect to see a resultant reduction in the number of care leavers who are NEET. It also introduces bursaries of £1,200 to attend FE courses and £2000 to attend university. They have also made it easier for care leavers to claim benefits so they do not experience delays when they leave care. Care Leavers can also claim Income Support and Housing Benefit if returning to full time, non-advanced, education to make up for missed qualifications. The Leaving Care Grant has been renamed Setting Up Home Allowance and DfE will amend statutory guidance to encourage all local authorities to pay at least £2000 to each Care Leaver. **Kent offers all care leavers who attend university £3000 and assesses each young person's needs and may provide extra support with travel costs and similar items.**

The National Institute for Care Excellence (NICE) updates its quality standard for the "Health and wellbeing of looked-after children and young people" in April 2013 which sets out for health and social care the priority areas for quality improvement. We are awaiting new guidance on how the newly reformed health system should work with local authorities to improve support for care leavers. The Care Quality Commission has changed the way it inspects local health service arrangements which includes care leavers.

There have also been changes to the way care leavers are treated within the Criminal Justice System, a greater recognition that Children in Care and care leavers can be victims of crime as well as perpetrators and that their circumstances are considered in the way they are treated within the Criminal Justice System and when they leave it.

Kent County Council know from our experience supporting young people through the process of leaving care that many do go on to achieve success in their lives, and they value continuing support during early adulthood from their corporate parents.

It is widely accepted that without good and effective corporate parenting during their transition into adulthood and independence, care leavers are vulnerable to becoming needy, disenfranchised and alienated adults; increasing their likelihood of mental health problems in adult life, going to prison, unemployment, and being homeless.

We have recently integrated our Care Leavers Service and will be monitoring and managing progress to ensure the care leaving experience for our young people improves. New Senior Personal Adviser posts have been created providing an enhanced service to care leavers with more complex needs and supervision and professional guidance to the Personal Advisers supporting the majority of Care Leavers.

The Care Leavers Service will focus on enablement and assisting care leavers to gain the life skills and opportunities to enhance their chances as adults. The management of the service under one management structure will assist in bringing clarity to the Local Authority's duties under Child Care legislation and Immigration legislation.

Key benefits of these changes addressing areas for development identified by Ofsted in

2013 include:

- All Kent's Care Leavers, regardless of how they became Children in Care receive the same quality and standard of service, dependent on their need.
- Increased opportunity to improve standards and practice in line with the wider Specialist Children's Services improvements.
- Opportunity to realise efficiencies across a number of teams and design a service that meets the needs and demands of the cohort rather than the service itself.
- Young people move successfully to independent living.

## **Staying Put Policy**

The requirement for local authorities to support and monitor arrangements whereby young people remain with their former foster carers beyond their eighteenth birthday is set out in Section 23CZA of the Children Act 1989, which is a section added to the Act by the Children and Families Act 2014. 'Staying Put' arrangements enable young people to remain with their former foster carers in order to help ensure that they are adequately prepared for adulthood, can experience a transition similar to their peers, avoid social exclusion and be less likely to experience a subsequent housing and tenancy breakdown.

KCC has produced a 'Staying Put' policy to support this ambition

[http://kentchildcare.proceduresonline.com/pdfs/leaving\\_care\\_policy.pdf](http://kentchildcare.proceduresonline.com/pdfs/leaving_care_policy.pdf)

## **Care Leavers in Education, Employment or Training**

At end March 2014 Kent had 1030 care leavers. 3% of these were in higher education. 11% in other education and 9 % were in employment or training. Our total number in EET therefore was 23 %, well below England average of 34%. However the percentage of 19, 20 and 21 year olds where Kent was not able to ascertain status was 56%. This is an indicator of data quality and the challenge Kent faces maintaining contact with care leavers. The service has come back into Kent's children's services structure and more robust application of data quality and attention to maintaining contact with care leavers will enable greater accuracy and improved figures in the future. However it remains a priority for the newly formed Care Leavers service to ensure young people are accessing employment, training and education to give them the best possible opportunities into adulthood.

Virtual School Kent have taken on responsibility for educational participation and achievement for 16 to 18 year olds, which was previously delivered by Connexions. This change will continue to develop greater use of apprenticeships, and access to further and higher education for this group of young people. This will improve our levels of young people in this age range engaged in Education, Employment and Training and significantly improve the prospects of young people as they become young adults.

Kent County Council is very committed to supporting apprenticeships for children in care and care leavers through its Assisted Apprenticeship Scheme which provides ring fenced funding and support to vulnerable groups. In February 2015 there were 35 children in care and care leavers undertaking apprenticeships in Kent. Care leaver apprentices are employed within Virtual School Kent to support the Participation & Engagement of children in care and care leavers with the development and functioning of Kent's Children in Care Council (OCYPC), organising and facilitating participation activities and they act as a representative voice of the child in care and care leavers in a variety of forums.

### 3. Being emotionally, mentally and physically healthy

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Helping looked after children to acquire good physical, mental and emotional health is a fundamental component of positive health and wellbeing and an essential pre-condition to successful learning, happiness, and success in life. Looked after children and care leavers are more likely to experience poor physical and mental health. Many looked after children come into care with chronic physical and mental health problems that have not been spotted due to neglect.

There is a risk that the experience of being looked after can exacerbate these difficulties if they are not dealt with promptly, and services and support to address them are delayed. Being looked after can also generate other stresses in the child and young person's life that create new health problems for them, especially in relation to emotional and mental health, which can get in the way of them achieving their best.

The National Institute for Health and Clinical Excellence (October, 2010) outlines the following principles and values for promoting the quality of life for looked after children:

- Put the voices of children, young people and their families at the heart of service design and delivery
- Deliver services that are tailored to the individual and diverse needs of children and young people by ensuring effective joint commissioning and integrated professional working
- Develop services that address health and wellbeing and promote high quality care
- Encourage warm and caring relationships between child and carer that nurture attachment and create a sense of belonging so that the child or young person feels safe, valued and protected
- Help children and young people to develop a strong sense of personal identity and maintain the cultural and religious beliefs they choose
- Ensure young people are prepared for and supported in their transition to adulthood
- Support the child or young person to participate in the wider network of peer, school and community activities to help build resilience and a sense of belonging
- Ensure children and young people have a stable experience of education that encourages high aspiration and supports them in achieving their potential.

#### **Health Needs Assessment for Children in Care**

A Health Needs Assessment for Children in Care was produced by Public Health in October 2014. This document and its recommendations inform this strategy.

The recommendations arising from the health Children in Care Needs Assessment are as follows:

## Recommendations

- Involve looked after children as much as feasible in decisions about their own care
- Improve the Pathway Plans for care leavers
- Improve the emotional and mental health support for children in care, particularly care leavers
- Develop a service to support proactively the health and wellbeing of care leavers
- Review the need for mental health training of care leaver service staff
- Organise systematic screening for infectious diseases for UASC (e.g. tuberculosis and blood-borne viruses)
- Implement the guidance for the vaccination of children with unknown immunisation status and organise vaccinations as appropriate (consider using accelerated Hepatitis B vaccination schedule)
- Develop links with private care providers in Kent to looked after children
- Improve coding of the Children in Care nursing team activity (update codes and develop coding guidance)
- Model capacity of looked after children team to deliver health assessments (initial and review) and benchmark against other local authorities (e.g. Medway)
- Improve health assessment uptake among 16+ LAC and UASCs (e.g. avoid appointments during school time, accessible locations, review need for face to face appointments, frequency and duration, consider using phone and questionnaires, organise health days, offer vouchers as incentives). There is also a need to improve follow up of health action plans (developed as part of a health assessment)
- Develop a more proactive involvement of Children in Care health team to support the health needs of children under their care (e.g. health histories for care leavers, support other professionals involved with Children in Care, follow up of A&E attendances and hospital discharges, improve follow up of health action plans)
- Develop better communication (information gathering) with social workers and carers in preparation for a health assessment
- Develop confidentiality policy about health assessments (be explicit with Children in Care about what and with whom will be shared)
- Ensure that Children in Care are not disadvantaged when they have to move placements while on health care waiting lists
- Prioritise Children in Care in local action plans being developed as part of the implementation of the Kent teenage pregnancy strategy
- Explore the implications emotional wellbeing needs of children scoring a high SDQ
- Ensure that CAHMS deliver what they are contracted to do around Children in Care needs
- Improve the collection of information on mental health outcomes and collect information about CAMHS for disabled looked after children

- Improve data about the health needs of children in care (including USAC and OLA). This should include ADHD, self-harm, Speech and language difficulties, bedwetting, Smoking, drug misuse, alcohol, sexual health, obesity, physical activity, A&E attendances, injuries, hospital admissions, GP registration and Teenage pregnancy. Data linkage (ie social care and health data) also needs to be developed.

## Health

The physical health of children taken into care can often be less than good. They may not have had regular dental care and sometimes their health needs may not have been addressed for significant periods. Therefore dental, health and emotional well-being checks are a statutory requirement and an important way to help them to access health services and put some long standing issues right.

### Three year Dental and Health Trend Breakdown

	Dental checks			Health Assessments		
	2012 %age of children who had their teeth checked by a dentist	2013 %age of children who had their teeth checked by a dentist	2014 %age of children who had their teeth checked by a dentist	2012 %age of children who had their annual health assessment	2013 %age of children who had their annual health assessment	2014 %age of children who had their annual health assessment
ENGLAND	82.36	82.03		86.28	87.29	
<b>Kent</b>	<b>79.57</b>	<b>84.03</b>	<b>96.6 + 15%</b>	<b>76.17</b>	<b>83.61</b>	<b>88.1 +5%</b>

The Care Quality Commission (CQC) undertook a review of health services for Children Looked After and Safeguarding in Kent (West Kent, Swale and DGS) in May 2014 and found there were both excellent practice and some areas needing improvement. Initial health assessments (IHA) undertaken in West Kent were commended for being innovative and providing social care with an understanding of 'generic future risk' whilst there is a need to ensure better services for children in care aged over 12 in Swale district. CQC also wanted to see improvements made in quality assurance and performance reporting to the Clinical Commissioning Groups.

The review made 9 recommendations for improving the care provided to looked after children. All recommendations involve the CCGs and a number of providers. Kent County Council is required to work with health on the following recommendations:

1. Children and young people who are looked after benefit from quality, timely and comprehensive initial and review health assessments by suitably qualified and experienced health professionals, subject to effective quality assurance and robust performance management and reporting arrangements, including young people placed out of area and unaccompanied asylum seeking children.
2. To review the effectiveness of the arrangements regarding designated doctors and nurses, lead health professionals and specialist nurses for children looked after, and



take action to ensure that there is adequate arrangements and sufficient capacity to undertake the requirements of the roles as set out in national guidance “Promoting the health and Well-Being of looked after children”

3. That care leavers are properly equipped with health histories, age appropriate information and contact details should they need to reengage with the looked-after children’s health team.
4. There are robust arrangements in place across services to promote comprehensive assessment of the emotional and mental wellbeing of children looked after, to share relevant information and to promote timely and effective access to support services

Although excellent progress has been made in ensuring Children in Care have regular health and dental checks we want to see this trend continue to improve especially in improving the numbers of children in care who receive Initial Health Assessments within 20 days of becoming looked after.

A full action plan has been agreed with the CQC. This will be carried forward during 2015.

### **Looked After Children’s Health Team**

A team of specialist community doctors and nurses, funded by the NHS work to improve the outcomes of our looked after children. These health professionals undertake the statutory health assessments and support the children, young people and their carers with health related issues. They work with the social workers to access health care needed by our children. This service also works to support the adoption process providing adoption health assessments and advice to both the agency decision maker and prospective adopters.

### **Emotional and Mental Health**

There is significant national as well as local concern about services for all children and young people with emotional and mental health needs. As many children and young people in care have had very adverse experiences in their lives, often from a very early age, they are particularly vulnerable.

All CiC have to have a Strengths and Difficulties Questionnaire (SDQ) completed by their foster carer, this is a screening tool which helps to assess their emotional and behavioural health. The tables below show that in 2013 59% of Kent CiC had an SDQ result submitted whilst in 2014 we saw a 17% increase of completed SDQs to 74% of all those who were eligible. The results show that whilst average scores are not a serious cause for concern, 45% in 2013 and 41% in 2014 assessments were a cause for concern. Although the trend is improving, the percentage is higher than many of our statistical neighbours and indicates the need for better Early Help emotional and mental health services and better CAMHS services for CiC and other children and young people known to Specialist Children’s Services. Addressing this is a priority for 2015.

## Emotional and behavioural health of CiC looked after for 12 months or more

**2013**

	No of CiC for at least 12 months aged 5-16	% CiC for whom score submitted	Average score per child	Percentage Banded SDQ score		
				Normal	Borderline	Concern
England	33830	71	71	50	12	37
<b>Kent</b>	<b>830</b>	<b>59</b>	<b>51</b>	<b>43</b>	<b>12</b>	<b>45</b>
Essex	745	65	65	48	12	40
Lancashire	695	82	82	50	12	37
Worcestershire	290	51	51	44	15	41

An SDQ score of 14 is considered normal, 14-16 is borderline cause for concern and 17 or over is a cause for concern

**2014**

	No of CiC for at least 12 months aged 5-16	% CiC for whom score submitted	Average score per child	Percentage Banded SDQ score		
				Normal	Borderline	Concern
England	34770	68	13.9	50	13	37
<b>Kent</b>	<b>925</b>	<b>76</b>	<b>14.6</b>	<b>47</b>	<b>12</b>	<b>41</b>
Essex	650	66	13.9	49	14	36
Lancashire	760	65	13	53	14	33
Worcestershire	340	26	15.2	45	13	42

## Virtual School Kent

Staff work in schools delivering one to one and small group support to raise attainment and build the wider skills of children and young people. They also work with teachers and support staff in schools to build specialist knowledge and capacity.

VSK also provide Youth Mental Health First Aid training for schools staff not mental health trained, to help them respond initially and ensure they help children and young people get the prevention, intervention, referral and self-help they need. Virtual School Kent were awarded second place in the Youth category for training staff in social services, schools, colleges and other professionals to recognise and respond to mental health issues among our children in care.

They did this through running a series of Youth Mental Health First Aid courses which led to them achieving the Mark of Excellence for Youth Mental Health First Aid.

VSK will continue their commitment to improving the emotional and mental health well-being of children and young people in care and this training is seen as a to achieving this.

## Children in care CAMH service

The Children in Care (CIC) mental health service is a dedicated service for children in care. The specialist team is part of the Kent & Medway Children & Young Peoples Service (ChYPS; formerly known as CAMHS). The service is for children and young people up to the age of 18.

This is a multi-disciplinary team, including: social workers, child & adolescent psychotherapists, systemic practitioners, family therapists and clinical psychologists.

The aim of the service is to promote placement stability by helping foster carers, children & young people and other professionals in the 'network' around the child, to understand and support the mental health issues that may be affecting the placement. The service can provide specialist consultation, therapeutic assessments and a range of interventions for children & young people.

A telephone duty/consultation service is available Monday to Friday, 9am—5pm for all professionals who work with a child in care for whom they have concerns about their emotional and mental health needs.

There are currently (Jan 2015) 437 Kent and Medway (64 Medway children) CIC receiving a mental health service. 45.8% are female, 54.2% are male.

Ages	% in service
0-3 years	0.9%
4 – 10 years	29.4%
11 – 15 years	43.8%
16 – 18 years	25.7%
18+	0.2%

Ethnic origin	% in service
White British	73.4%
White other	2.8%
Black African or Caribbean	0.9%
Gypsy/Traveller	0.2%
Asian, Asian British, Black British	0.4%
Mixed	4.4%
Not known, not stated	14.9%
Other ethnic group, inc Arab	3%

## Additional info

57% (snapshot Jan 2015) of children and young people were referred, assessed and started treatment within 10 weeks.

A CAMHS strategic assessment has been completed (February 2015) setting out the future direction for CAMHS commissioning.

## Emotional Wellbeing Strategy

A draft strategy has been developed with partners and children and young people to set the strategic direction for future delivery of emotional wellbeing services, including mental health. It is due to be approved and implemented in 2015.

## 4. Feeling safe and nurtured in a home setting

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Good and effective corporate parenting ensures children in care are safe. It means that children in care get what they need to grow into responsible adults with positive life chances, strong self-esteem and happy memories of childhood.

All children need to be kept safe from the risks they might face whilst growing up, which have become increasingly complex through modern technology, such as mobile phones and the internet. Many looked after children have missed out on parental guidance on personal safety before coming into care, which can leave them especially vulnerable.

Growing up in a stable, supportive and nurturing family, where children and young people feel secure, is one of the most important factors in helping them to achieve this. It increases their stability and security, their resilience to cope with adversity, and helps them to establish healthy relationships with other people.

We want all our looked after children and care leavers to feel safe and secure, and to experience as strong a sense of belonging as possible. We will ensure that all looked after children and care leavers have at least one adult they can turn to in times of need.

We aim to ensure that all children in care are enabled to live in a permanent home wherever possible through increased use of adoption, special guardianship orders and through living with family and friends. For children in care who cannot achieve permanency through the use of these arrangements we will seek long term 'forever' foster families or stable residential placements to enhance young people's experience of belonging. We are improving our partnership work with the court systems to ensure permanency is not delayed for individual children where they are not able to return to birth families. Kent has recently been designated an area for a new Family Drug and Alcohol Court which will contribute to our ability to secure the right future permanent homes for our children.

### Family Justice Reforms

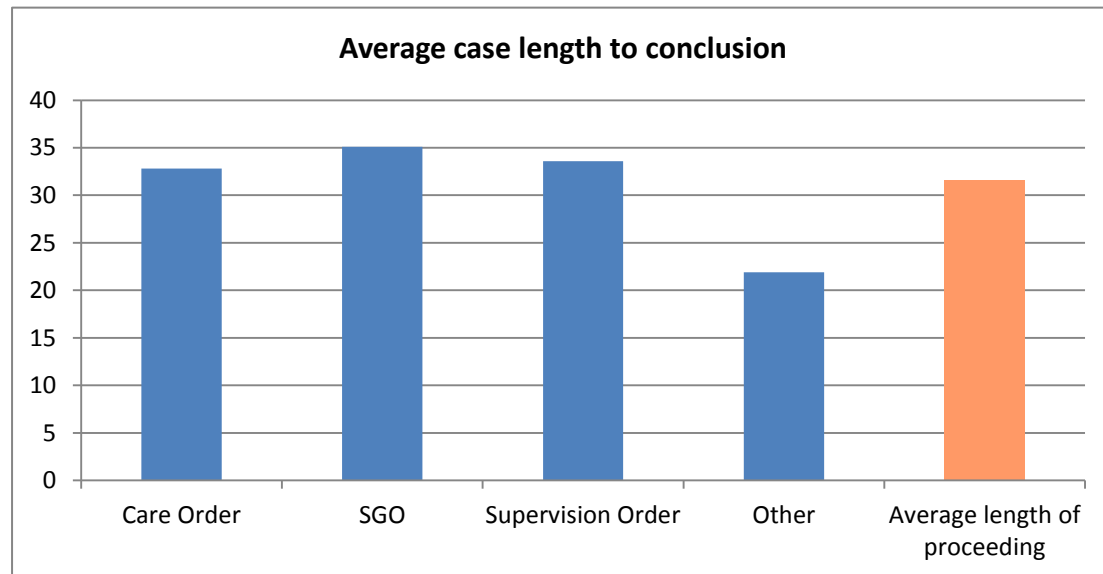
In 2013 Ofsted identified that Kent's care proceedings were taking too long, and there was delay and drift in securing permanent homes for children in care.

Kent's most recent data from July to December 2014 has demonstrated the following significant improvements:

- 95 cases concluded in this 6 month period
- Average completion time now (Feb 2015) 27.4 weeks
- 37% of all cases completed within 26 week timescale

Outcome by Order	Kent distribution	Total by order
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Care Order	36.52%	42
SGO	25.22%	29
Supervision Order	25.22%	29
No order	6.09%	7
Other	6.96%	8
<b>TOTAL</b>		<b>115</b>



Special Guardianship Orders represent the outcome that has taken the longest time to reach conclusion but is the outcome in the majority of cases put before the courts by Kent. Therefore further work will be done to explore whether this outcome could be arrived at for children and families outside of care proceedings, and at an earlier stage in the child's journey through increased use of Family Group Conferences. Kent continues to build on its improvements to get all care proceedings completed within 26 weeks in partnership with CafCass and the Judiciary. The most recent data points to Kent's performance for average duration to be above the England and Wales average, and continuing to improve.

### Placement Stability

The quality and suitability of our accommodation offer for children in care is evidenced by data relating to placement stability. In particular, 3 or more placement moves in a year, the same placement for the last 2 years and placed within 20 miles of home.

KCC has made good progress:

- 8.2% of children in care have had 3 or more moves in the last 12 months to September 2014. This is within the KCC target of 9%
- 72.7% of children in care have been in the same placement for the last 2 years, which exceeds the authority target of 70%

## Permanent families

We want as many Children in Care as possible to live safely and happily in permanent families. Coram and Kent County Council have a longstanding partnership transforming the delivery of adoption services for Kent's children. The improvement journey of the partnership has been fast and very successful to date. Between 1 April 2013 and 31 March 2014 145 children were adopted in Kent County Council, which is significantly higher (38.1%) than the number of children adopted in 2012/13 (105) and over double (107.1%) the number of adoptions achieved in 2011/12 (70). In addition to this, a summer 2014 follow up review found considerable strengths. We continue to consolidate this partnership and will set up an independent Kent Coram Adoption agency in 2015, increasing our post adoption support and continuing to provide children with adoptive homes in a timely and effective way.

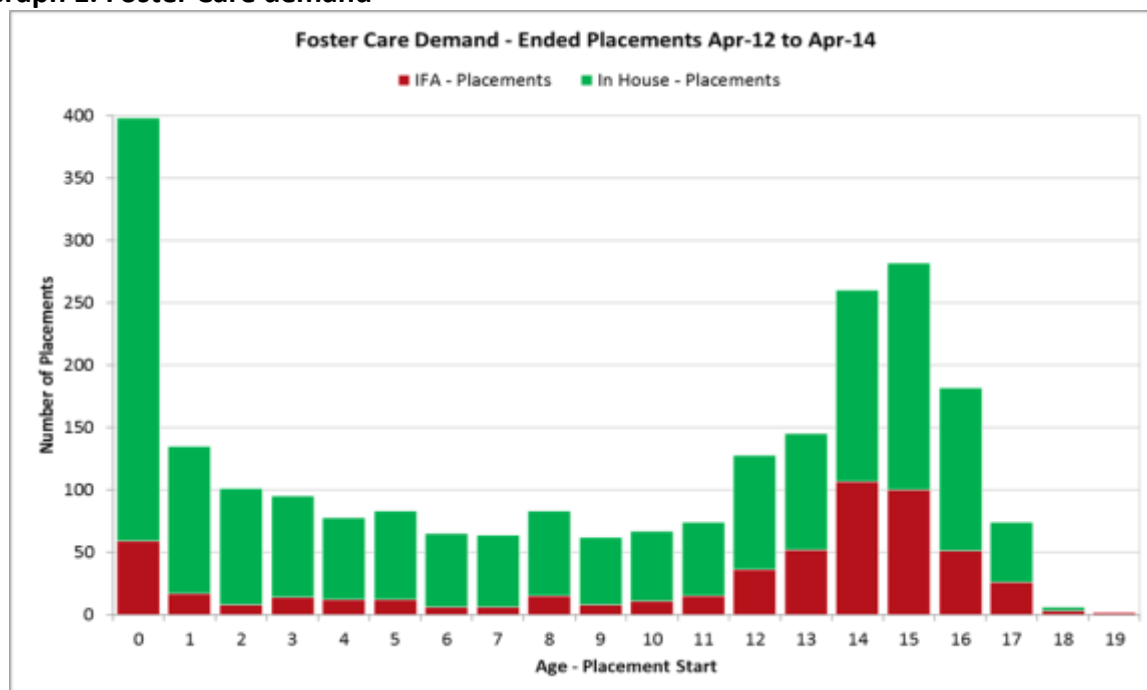
## Improving support to Kent Foster Carers

Our Foster Carers are an extremely valuable resource. Looking after children and young people who have faced very adverse life experiences can be challenging and difficult as well as very rewarding.

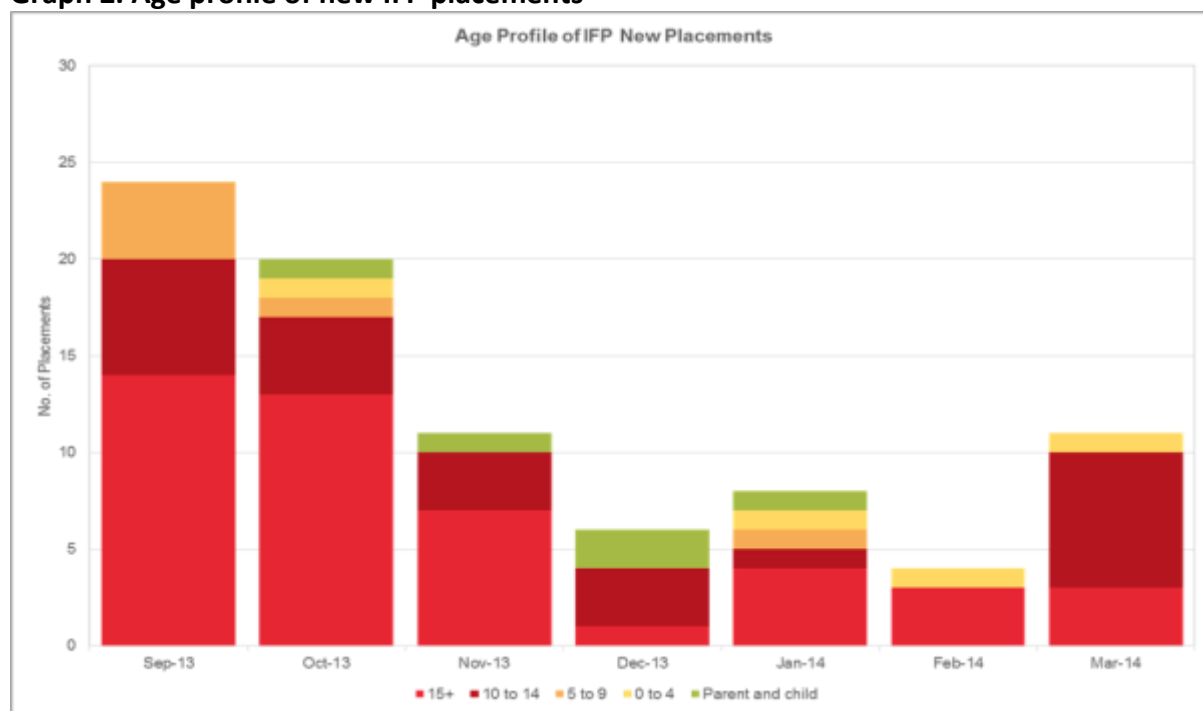
At end December 2014 Kent had a total of 884 fostering households with 1107 children in those placements. We have identified the need for greater support for Foster Carers to reduce the number of placement breakdowns and support Foster Carers to take children and young people they felt less confident about managing, such as teenagers and those with challenging behaviours.

As can be seen in graphs 11 and 12, the majority of IFA use is for adolescents. A focus for Kent's Sufficiency Strategy is to increase the capacity of our in-house service to meet the needs of adolescents and older children.

**Graph 1. Foster Care demand**



**Graph 2. Age profile of new IFP placements**



In collaboration with Medway Council KCC has in place an Independent Fostering Providers (IFP) framework which came into effect in June 2013 and is in place until July 2017 with a total of 33 IFP's. The framework seeks to work in partnership with IFP's to achieve high quality foster care that meets individual children and young people's needs and outcomes, at the right time, in the right location and at the best possible price.

Kent also operates Therapeutic Re-Parenting Placements for children who have had very disrupted attachment experiences. There are 13 placements currently for children to enable them to live in a family setting while intensive therapeutic work is undertaken so they can move onto long term foster families.

Kent will review its Foster Carers support services during 2015-16 to develop stronger support for carers through social work intervention, greater access to behaviour management support and strengthened support group mechanisms. This forms part of a revised charter for our Foster Carers.

## Child Sexual Exploitation (CSE)

Kent received a thematic inspection into Child Sexual Exploitation conducted by OfSTED in October 2014. The OfSTED report was published in November 2014 and can be found below. Kent is currently working with central government and other authorities developing further research into CSE and is taking the opportunity to develop its practice further through learning from others in this area.

<http://www.ofsted.gov.uk/sites/default/files/documents/surveys-and-good-practice/t/The%20sexual%20exploitation%20of%20children%20it%20couldn%E2%80%99t%20happen%20here,%20could%20it.pdf>

Kent Safeguarding Children Board lead a strategy and action plan to improve identification and protection of all children and young people at risk of CSE including children in care. Significant multi-agency work is being undertaken including training, toolkits and data collection to ensure that all staff are aware of CSE, and this knowledge is being used to identify at the earliest opportunity, cases of potential CSE. Quality assurance work, training for foster carers, support and interventions are in place to improve Kent's overall response to CSE. This remains a key priority for KSCB and this strategy.

### **Children who go Missing**

Children may run away *from* a problem, such as abuse or neglect at home, or *to* somewhere they want to be. They may have been coerced to run away by someone else. There are particular concerns about the links between children running away and the risks of sexual exploitation. Missing children may also be vulnerable to other forms of exploitation, to violent crime, gang exploitation, or to drug and alcohol misuse. Looked after children missing from their placements are particularly vulnerable.

In Kent between July and December 2014 the range of children in care reported missing was between 50 and 96 each month, with an average over that time period of 75 children in care reported missing each month. Just under half of all those children in care who went missing were missing for more than 48 hours, with over a third missing for more than 72 hours. Kent uses its Missing Children protocol and offers a return interview to all children and young people returning from a missing episode. This interview is carried out by the most appropriate worker who is a children's services professional and independent of the child or young person's home situation.

Kent Children in Care are interviewed by their allocated Social Worker, although a choice of professional is available where young people would prefer this to be someone other than their social worker.



## **Appendices**

### **1. Governance**

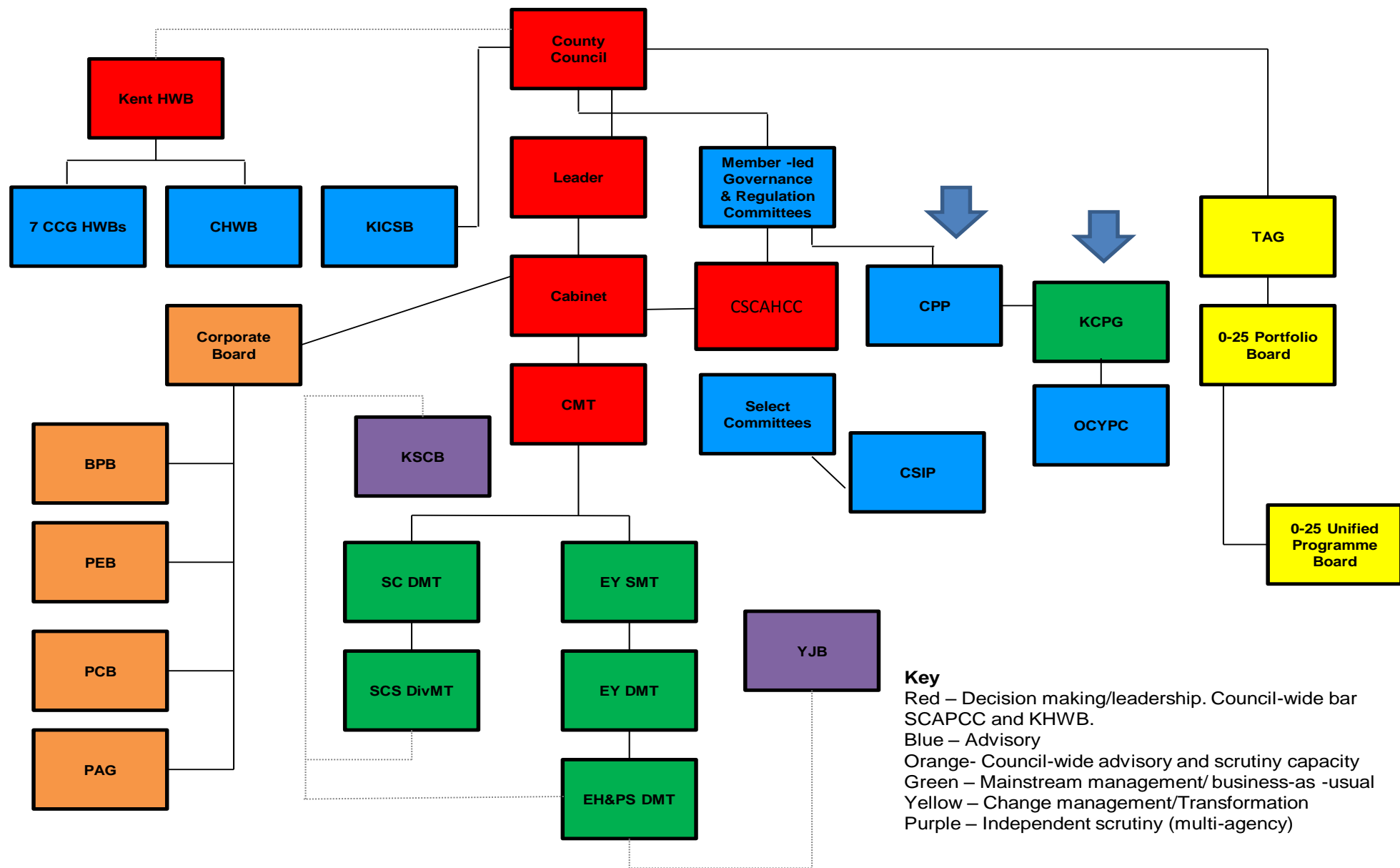
#### **KCC CORPORATE PARENTING GROUP**

Philip Segurola – CHAIR - Interim Director, Specialist Children's Services  
Ann Furminger – Service Delivery Director – CXK  
Sue Dunn – KCC Head of Skills and Employability  
Paul Brightwell – Service Manager for Children in Care Canterbury/Swale  
Sue Clifton – County Manager Care Leavers Service  
Janine Collins – Project Support Officer – Kent Troubled Families Programme  
Tony Doran – Headmaster Virtual School Kent  
Andrew Heather – Principal Education Psychologist  
Sarah Hindle – Assistant Principal Education Psychologist  
Ian Darbyshire – NHS  
Ian Davis – NHS  
Jane O'Rourke – Kent Community NHS Trust  
Jennie Riviere – NHS  
Kerrie Hickmott - East Kent College  
Nancy Sayer – NHS  
Anne Nerva – Service Manager for Children in Care Thanet  
Dr Noreen Ahmad-Bhatti – East Kent Hospitals University Trust  
Joanne Rabbitte – Service Manager Children in Care WK  
Rebecca Ransley – Service Manager Children in Care SK  
Maureen Robinson – Manager, Management Information Unit  
Yashi Shah – Manager Coram Adoption  
Sarah Skinner – Business Manager, Virtual School Kent  
Stephen Gray – CEO, Yong Lives Foundation  
Sarah Whittaker – Service Manager Children in Care NK  
Nick Wilkinson – Lead Manager, Youth Offending Service  
Sue Flynn - Head of Health Visiting and Family Nurse Partnership  
Martin Vye – KCC Elected Member for Canterbury

#### **KCC CORPORATE PARENTING PANEL (ELECTED MEMBERS OF KENT COUNTY COUNCIL)**

Ann Allen (Chairman)  
Robert Brookbank  
Teresa Carpenter  
Penny Cole  
Stuart Griffiths  
Geoff Lymer  
Carolyn Moody  
Bob Neaves  
Bella Taylor  
Roger Truelove  
Martin Vye  
Peter Oakford  
Zita Wiltshire

How the Corporate Parenting Group and Corporate Parenting Panel 'fit' into Kent's overall governance structure for children and young people



Acronym	Definition	Detail
BPB	Budget Programme Board	Oversees the delivery of a work programme to provide the substantial savings required
CCG	Clinical Commissioning Groups	
CHWB	Children's Health and Wellbeing Board	(Formerly the Children and Young People's Joint Commissioning Board), a Working Group of the Kent Health and Wellbeing Board that focuses on children's services.
CMT	Corporate Management Team	Meeting of all Corporate Directors across the Council
CSCAHCC	Children's Social Care and Health Cabinet Committee	Undertakes Member-led key decisions .Cabinet Committees provide an overview and scrutiny function. They examine the actions of Cabinet, and review matters of a regulatory nature. Cabinet Committees work to inform decision making processes.
CSIP	Children's Services Improvement Panel	Informal meeting for elected Members
DivMT	Divisional Management Team meeting	Term used in SC: Chaired by the Director of a division, a weekly meeting for Assistant Directors, Business Partners and Commissioning Head of Service to make decisions/ govern business-as-usual activity
DMT	Directorate Management Team meeting	In SC: Meeting for all Directors within a given Directorate In EY: Divisional management team meeting for EY Directors, Heads of Service, Business Partners and Area Education Officers
EHPS	Early Help and Preventative Services Division	Part of the Education and Young People's Directorate. Director: Florence Kroll
EY	Education and Young People's Directorate	Corporate Director: Patrick Leeson
KCPG	Kent Corporate Parenting Group	A multi-agency subgroup of the Corporate Parenting Panel. It provides a forum to empower, nurture and promote the life chances of Kent's CIC and Care leavers, working in partnership with the OCYPC.
KHWB	Kent Health and Wellbeing Board	Leads and advises on work to improve the health and wellbeing of the people of Kent through joined up commissioning across the NHS, social care, public health and other services.
KICSB	Kent Integrated Children's Services Board	Ensures that KCC is meeting the requirements of the Accountability Protocol for the Director of Children Services and Lead Member for Children's Services2 i.e. our statutory obligations.

KSCB	Kent Safeguarding Children Board	<a href="http://kscb.org.uk/">http://kscb.org.uk/</a>
OCYPC	Our Children and Young People's Council	<a href="http://kentcarestown.lea.kent.sch.uk/our-children-and-young-people-s-council">http://kentcarestown.lea.kent.sch.uk/our-children-and-young-people-s-council</a>
PAG	Performance Advisory Group	PAG reviews business cases for new bids to the capital programme (over £1m, gross cost) and makes recommendations to the Leader on schemes to be included at the Approval to Plan stage
PCB	Procurement Commissioning Board	The PCB reviews all procurement category strategies and plans, and provides appropriate challenge. The Board takes an overview of the corporate approach to procurement and commissioning strategy.
PEB	Performance Evaluation Board	PEB oversees performance against the authority's strategic priorities and core service delivery targets, as set out in the Annual Business Plans.
SC	Social Care Health and Wellbeing Directorate	Corporate Director: Andrew Ireland
SCS	Specialist Children's Services	Part of the Social Care and Public Health Directorate. Interim Director: Philip Segurola
SMT	Senior Management Team meeting	Education Division's DMT: Meeting for all Directors within a given Directorate
TAG	Transformation Advisory Group	TAG provides advice and support to the Cabinet Member for Transformation (Leader) in managing and overseeing KCC's transformation programme, as set out in 'Facing the Challenge'.
YJB	Kent Youth Justice Board	Works to oversee youth justice in Kent, to prevent offending and re-offending by children and young people, and to address the causes of offending behaviour in-line with our statutory obligations.

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