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December 2015

Corporate Parenting

Select Committee report

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Foreword

One of the most important duties that elected members accept when they take office is to assume the mantle of corporate parent.

The children and young people who have come into local authority care are some of the most vulnerable in our society; many have suffered significant levels of abuse and neglect prior to coming into care, and it is the collective responsibility of the whole council – members and officers alongside our partner agencies - to ensure that they receive the best possible support and protection.

All good parents want the very best for their children, and it is our statutory duty to ensure that every child we look after is able to flourish by being safe and happy, doing well at school, having good health and enjoying fulfilling relationships with their peers. As they grow towards adulthood, our young people should be equipped to lead independent lives and to make their way as young adults with good jobs, access to higher education and financial security.

Indeed, our primary aim is to ensure that our children achieve as well as those who do not require our intervention.

It is the responsibility of all members, not just the lead members for children's services, to work hard to ensure that our children receive the right support to enable them to reach their full potential.

The purpose of this report is to consider the quality of the involvement and oversight of Kent's corporate parents and to determine how we can make maximum impact in improving outcomes for children and young people in care. It also highlights a number of areas where we can improve our oversight as corporate parents and identifies some areas where further investigation is needed.

At Kent County Council (KCC), we take seriously our moral duty as well as our legal responsibilities to our children and we will continue to strive to improve our services so that our young people can experience happy and fulfilling lives.



Zita Wiltshire
Chair of the Corporate
Parenting Select
Committee

Kent: Key Facts



Children in care
on 31 March 2015



Children who started
to be looked after by
KCC on 31 March 2015



Children who ceased to
be looked after by KCC on
31 March 2015

- 69 %** the placement of our children in care population are in foster placements with our in-house services (69% of 1,870).
- 900** the number of registered foster carers in Kent in September 2015.
- 8 %** the proportion of Kent children in care who are disabled (September 2015; 8% of 2,206 or 173 children).
- 48 %** the proportion of disabled children in care living in foster care (September 2015; 48% of 173 children).
- 10.3 %** the proportion of children in residential care (August 2015; 10.3% of 1,948 or 200 children, including Unaccompanied Asylum Seeker Children (UASC)).
- 21 %** the proportion of KCC's children in care population that were adopted (year ending March 2015; 21% of 870 children, or 180 children)
- 81.3 %** the proportion of children in foster care placed within 20 miles from home (as at August 2015; 81.3% of 1,378 children or 1,121 children).
- 74.2 %** the proportion of children in care in the same placement for 2+ years as at August 2015 (74.2% of 561, or 416 children).
- 43 %** the extent of the attainment gap between children in care (whose results are eligible to be counted) and their non-cared for Kent peers in achieving 5 grade A*-C GCSEs including English and Mathematics (provisional figures)
- 75 %** of Kent residential homes for children and young people were rated as good or outstanding by Ofsted in 2014/15.
- 82.9 %** the proportion of all Kent schools that were rated as good or outstanding by Ofsted on 2 October 2015.
- 0.6 %** the proportion Kent children in care that make up the under 18 Kent population.

Explanation of terms

Children in care (looked after children)	<p>The preferred term used by Kent County Council. However the term 'looked after' has a specific legal meaning based on the Children Act 1989 (section 22 (1) a, b) in this report. Children in care 'looked after children' means children aged under 18 who are subject to a care order under Section 31 of the 1989 Act (including an interim care order), or are accommodated under Section 20 of that Act.</p> <p>We also sometimes use the term 'children in care' to refer to children who are currently looked after by KCC, as well as care leavers.</p>
A child	Is defined as anyone under the age of 18 years. Where the context specifically relates to older children the term 'young person' is used.
Legal orders	All children subject to a Care Order (Section 31, Children Act 1989), Interim Care Order (Section 38, Children Act 1989) or Emergency Protection Order (Section 44, Children Act 1989) are looked after regardless of where they live, and the local authority will have acquired parental responsibility for that child.
Accommodated children	Children are looked after (accommodated) if they are in a placement that is either directly provided or arranged by the local authority. This could include registered foster carers, connected persons undergoing an assessment to become a KCC foster carer to a particular child, those who have been approved as a KCC foster carer. They will be in supported accommodation, independent accommodation or accommodation that is provided by an approved agency on behalf of the local authority (ie 'private and voluntary' residential or independent fostering agency). Children receiving accommodation under Section 20 of the Children Act 1989 must be in a placement for more than 24 hours before they are considered to be looked after.
Unaccompanied Asylum Seeking Children (UASC)	These are defined as being children in need (Section 17, Children Act 1989), and the local authority has a responsibility to provide them with suitable accommodation under Section 20 of the Children Act 1989.
Placement plan	A looked after child's care plan which sets out how the placement will contribute to meeting the child's needs.
A care plan	The plan for the future care of a looked after child prepared by a local authority under the 2010 Regulations. This includes, for example, the placement plan, the health plan and the personal education plan.
Connected persons	This can be a means a grandparent, brother, sister, uncle or aunt (whether full blood or half blood or by marriage or civil partnership), step-parent or friend of, or other person connected with a looked after child.

Local authority foster carer and IFAs	<p>A term used to describe a person approved as a foster parent by a local authority or an independent fostering service.</p> <p>An IFA is an Independent Fostering Agency. They are bodies which can provide local authorities with 'external' foster carers ie foster carers who do not work for the authority.</p>
A carer	The person with whom the child is living in foster care or a registered children's home.
A parent	A person who is the parent of the child, or a person who is not the child's parent but who has parental responsibility for the child or a person in whose favour a residence order was made.
Distant placement	A placement outside the area of the responsible authority and not within the area of any adjoining local authority
Vacancy rate	The number of placements available within in-house fostering.
CAMHS	Child and Adolescent Mental Health Services.
LILAC	Leading Improvements for Looked After Children. LILAC is a standard awarded by A National Voice, an organisation run by and for young people in care. The LILAC assessment is conducted to evaluate how well organisations are involving and listening to the views of children in care. It consists of a set of seven individual quality standards, which together provide a mechanism for standardising and gauging the effectiveness of care services across the county. Kent has been subject to a number of LILAC assessments over recent years.
Solo placements	A placement for a child or young person who may have specific or complex needs which requires higher than usual levels of support, monitoring and supervision. This precludes the placement of any other child or young person within the home.

Chapter 1

Introduction

Through this report we are reaffirming our longstanding commitment to continue to discharge our corporate parenting responsibilities to all our children in care. To be able to carry on doing this well, we will listen to the voices of the children in our care, take what they have to say seriously, and respond through working with our local partners in order to ensure that the care journey for children and young people is as stable and enriching as possible.

We want our children in care to have similar opportunities as their peers who are not in the care of the local authority. We hope that our children in care remain inspired and seize the chance to fulfil their potential. In this respect, KCC members and officers share important and complementary 'corporate parenting' responsibilities that are variously set out in over 200 statutory duties, regulations and statutory guidance that govern education and children's social care functions of local authorities.

The launch of the Corporate Parenting Select Committee (the Committee) reflects our acknowledgment that it is time we restated our corporate parent responsibilities. This Committee will enable any necessary changes to be highlighted and for improvements to the experiences and outcomes for our children in care to be implemented successfully.

Our Committee was established under the rules which apply to Select Committees that are set out in Appendix 4 Part 4 of The Constitution of Kent County Council. The principal focus of the Committee is to examine the vital role that all elected members, as political corporate parents, should play in championing the rights and in appropriately engaging with our children in care. We will continue to make sure that the systems and processes that are put in place positively contribute to the wellbeing of our children and young people in care. Furthermore, we will do what is necessary for our children in care so that they continue to make progress with education and social development. This review was launched following the county council's policy commitment and outcomes described in the KCC

Strategic Statement and Commissioning Framework. The whole-council approach and the move to re-examine our commissioning authority offer us a good opportunity in re-examining our political corporate parenting responsibilities in an evolving policy landscape. We remain resolute that our children in care should always be at the centre of service provision, whomever the provider.

Our children in care, like all other children, need positive adult encouragement, to be cared for and supported to learn, achieve and grow into independent adults. It is our statutory duty as corporate parents to ensure that they are nurtured and benefit from the emotional and practical support that all good parents wish to give to their children for their development and best start in life.

Members of the Select Committee

The Select Committee consisted of nine members of Kent County Council: five members representing the Conservative Party, two members representing the UK Independence Party, one member representing the Labour Party and one member representing the Liberal Democrats Party.



Mr Robert Brookbank
Conservative
Swanley



Ms Jane Cribbon
Labour
Gravesham
East



Mr George Koowaree
Liberal
Democrat
Ashford East



Mr Bob Neaves
UKIP
Folkestone
South



Mr Michael Northey
Conservative
Canterbury
South East



Mr Richard Parry
Conservative
Sevenoaks
West



Mrs Paulina Stockell
Conservative
Maidstone
Rural West



Mrs Jenny Whittle
Conservative
Maidstone
Rural East



**Mrs Zita Wiltshire,
Chair**
UKIP
Broadstairs
and Sir Moses
Montefiore

Terms of Reference and scope of the review

The Select Committee formally agreed its terms of reference at its meeting on 3 February 2015.

Terms of Reference

- to consider the definition of 'corporate parent' and the variety of roles and duties associated
- with it; develop the role and voice of Members as corporate parents, including outlining what Members need to know, what they need to do and how their input can make a positive difference to the lives of young people in care
- to engage with, amongst others, children and young people in care to better understand what works well for them and what KCC can do to improve the fulfilment of its corporate parenting responsibilities. This will include evidence regarding how the voice of the child is informing/shaping member focus and service provision
- to investigate best practice across the country and abroad of how elected representatives within local government engage with and support children in care
- to examine the extent to which the monitoring mechanisms available to KCC members are effective in ensuring the safety and wellbeing of children in care
- for the Corporate Parenting Select Committee to make recommendations after having gathered evidence and information throughout the review

Scope of the review

The complexity of this topic and the tight timeframe for the review require a clear and focused approach. The key themes and aspects that are covered by the review are detailed below:

- 1. To consider the definition of 'corporate Parent' and the variety of roles and duties associated with it.**
 - a. To explore the definition of being a corporate parent and the legal implications associated with it.
 - b. To examine the roles and responsibilities that KCC members and officers hold as corporate parents.
- 2. To engage with, amongst others, children and young people in care to better understand what works well for them and what KCC can do to improve the fulfilment of its corporate parenting responsibilities.**
 - a. To engage with, and listen to, children and young people in care in Kent to better understand what works well for them and what KCC, and in particular KCC members, can do to improve the fulfilment of their corporate parenting responsibilities.
 - b. To explore, in particular, corporate parenting responsibilities with regards to the educational outcomes of children and young people in care in Kent.
 - c. To gather evidence from KCC members and officers, and representatives of relevant external organisations, to inform the review.

3. To investigate best practice across the country and abroad of how elected representatives within local government engage with and support children in care.

- a. To explore best practice examples, both across the country and abroad, of how local authorities and their elected representatives engage with and support children in care.
- b. To consider how this best practice can be replicated to improve corporate parenting in Kent.

4. To examine the extent to which the monitoring mechanisms available to KCC members are effective in ensuring the safety and wellbeing of children in care.

- a. To examine the extent to which the monitoring mechanisms available to KCC members are effective in ensuring the safety and wellbeing of children in care.
- b. To identify further mechanisms, if necessary, to improve the effectiveness of this monitoring.

5. For the Corporate Parenting Select Committee to make recommendations after having gathered evidence and information throughout the review.

How the review was conducted

Desk-top literature review

The initial deliberation of the Select Committee was informed by a desktop literature review carried out by a research officer. The Committee subsequently considered a draft terms of reference that was agreed subject to minor amendments.

Following the first stage of information gathering, the Committee revised its Terms of Reference to focus on the role of members in corporate parenting. This stage was supported by strategy, policy and assurance officers.

Evidence-gathering hearings

A substantial amount of the Select Committee's time was dedicated to all the evidence hearings, where internal and external witnesses were invited to give evidence. The full details of all the evidence heard at the public meetings can be accessed via the following link:

<https://democracy.kent.gov.uk/ieListMeetings.aspx?CId=850&Year=0>

In addition, written evidence was submitted by identified interested organisations, a list of which can be accessed via the link above.

Site visits

The Select Committee also made a number of site visits as part of their extended evidence-gathering. These opportunities were used to meet and explore issues with children and young people in care and a cross section of frontline social workers. The details of these sites visits can be found in Appendix A of this report.

Structure of the report

The main body of the report begins with a chapter that provides an overview of the legal and policy context. This outlines the obligations placed on local authorities charged with delivering education and children's social care for our children and young people.

This is followed by a chapter that discusses the political and officer corporate parent roles and responsibilities of members and officers, including the responsibilities of other agencies.

The remaining chapters cover some of the key topics and issues that have the most significant impact on the health, wellbeing and education of the children in our care. Each of the subsequent chapters highlights the key points and high-level responsibilities that members, as political corporate parents, should consider and a brief account of the Kent picture. After that, three important questions are addressed. These are:

- what are we trying to achieve?
- what are we doing at present?
- what more could be done?

The final section of each chapter puts forward recommendations and questions that we may wish to ask as part of our assurance role as political corporate parents in ensuring that children in our care continue to be well looked after.

Key Findings and Recommendations

This review highlights some of the key topics and issues that have the most significant impact on the health, wellbeing and education of the children within our care.

This examination provides KCC with assurance that real progress is being made throughout our frontline services, as well as in relation to key performance areas across social care and education, to support our children and young people in care. We consider there are areas where we have made significant improvements (in relation to our Virtual School Kent and adoption, for example). However, there are other areas (Other Local Authority looked after children placed within Kent and CAMHS) that require further improvements to ensure we are making a real difference and doing as much as we can to enhance the life chances of our children and young people.

The following section gives an account of our key findings and recommendations against each of the main areas outlined in the terms of reference for the review.

Corporate Parenting Roles and Duties

Corporate parent: roles and responsibilities

Corporate parenting is a shared responsibility between politicians and officers:

Although the Select Committee review focuses mostly on Member roles and responsibilities as corporate parents, the national legal and policy frameworks place joint responsibility on both politicians and officers to safeguard and support the children within their care. In high level terms, the role of elected members is to take a strategic overview and to set the organisation's direction in relation to promoting the wellbeing of children and young people. They also have a role in challenging services where there is emerging evidence of worsening performance. It is also to seek assurances where necessary that KCC is actively managing critical matters with the aim of further improving outcomes for children and young people. In order to do this effectively, the core member role must be delivered at a strategic level rather than being drawn into the detailed day-to-day operational management of children's services. We believe that a comprehensive corporate parenting guide (handbook) should be developed to reinforce these joint responsibilities and to crystallise the distinctive role which all members need to play in providing for our children.

Recommendation 1

KCC should adopt a simply-worded and practical corporate parenting guide (handbook) for all members that clearly sets out what we need to know, including information about the fundamental areas crucial to running an effective children's service in fulfilment of our corporate parenting responsibilities. The handbook must include contact details of key officers within each division.

Information about children in care

Wide-ranging performance management framework, systems and processes:

We are of the view that KCC has wide-ranging performance management frameworks, systems and processes in place for monitoring how well all children's services are doing. However, our review has highlighted that in spite of the myriad of performance dashboards that exist, all members as political corporate parents do not have access to accurate and meaningful information ie data that has been analysed and interpreted and which is readily available on a regular basis.

Recommendation 2

KCC should make available information about the fundamental areas of children's services such as education and health outcomes, placement stability and support for care leavers for all members on a regular schedule starting from March 2016.

Training for Members

Appropriate and timely training for all members that is focused on our corporate parent roles and responsibilities:

We reached the conclusion that although training sessions for members have been organised in the past, there is a compelling need for the current training to be reviewed and replaced with a new, regular training programme which should be compulsory for all members to attend. This should take account of the necessity for refresher sessions and the needs of new members to understand the particular responsibilities placed on them as corporate parents.

Recommendation 3

KCC should introduce a refreshed training programme for all KCC members as part of their induction after every county council election or upon their appointment. In the event of significant changes to corporate parenting, KCC members should be updated through additional training. All members are strongly advised to take advantage of this training offer. Consideration should be given to the best option for overseeing and reporting on training attendance.

Children in care from other local authorities living in the Kent area

Other Local Authority looked-after children are particularly vulnerable and the high number in Kent puts additional pressure on KCC and partner agency resources:

We heard from a number of key witnesses that the additional and wider impact of other local authority looked after children living in Kent is longstanding and of extreme concern. We understand that the revised Care Planning, Placement and Case Review (Regulations 2010) that came into force in January 2014 has strengthened requirements on local authority 'distant' placement decisions (notification of placement). We also understand that the revised Children's Homes Regulations 2015 has placed additional requirements on children's homes, though we are aware that Ofsted does not report on this on a routine basis. We believe more needs to be done to hold other local authorities to account in relation to their corporate parenting responsibilities to appropriately safeguard children within their care who are living out of area.

Recommendation 4

KCC should write to the Children's Minister to ask that a review of compliance to the new Regulations 2010 and the sufficiency duty should be carried out to ensure that responsible authorities are held to account in maintaining the welfare of children in their care.

Corporate governance structure

We are aware that we currently have a number of statutory and non-statutory groups, each with oversight roles in relation to children in care and children subject to protection measures. These include the Corporate the Corporate Parenting Panel, the Kent Corporate Parenting Group and the Children's Health and Wellbeing Board. With increasing pressure on resources and the need take a proportionate approach to avoid any unnecessary drain on members' and officers' resources, the Select Committee believes that it is necessary for KCC to streamline the corporate parenting governance arrangements.

Recommendation 5

KCC should adhere to the 'simplification' principle and merge the Corporate Parenting Panel with the Kent Corporate Parenting Group to strengthen the focus on corporate parenting for a more powerful and streamlined oversight.

This is to be backed by the development of a memorandum on governance between the new group and relevant existing groups to reduce any avoidable overlap and/or duplication.

Engagement of Children and Young People

Participation opportunities for members

Knowledge of local arrangements, together with promoting the wellbeing of children in our care, is paramount:

Apart from Cabinet and a few other members with some specific responsibilities for children's services, the evidence suggests that few members fully understand their corporate parenting responsibilities. More needs to be done to ensure that all members fully engage with their role as corporate parents. Members need to take practical steps to hear directly from the children in our care and their carers and to work with officers to assess how well we are undertaking the corporate parenting role. Members also need to understand how services can be further improved to ensure that our children and young people receive the best support to live happy and healthy lives both during their time with us and into adulthood.

Recommendation 6

All KCC members should commit to actively championing and engaging with divisional and countywide participation events (eg Virtual School Kent activities, Achievement Award ceremonies and organised foster carer events) to hear about the achievements of our children and young people as well as finding out about emerging issues that concern those in our care. It must always be made the responsibility of the relevant service managers to extend an invitation to all members to events and meetings and ensure that this automatically happens, and that relevant information is included in the Member Bulletin (or the Members' Calendar) to give all members adequate notice and opportunity to attend.

Coordination of participation across children's services (voice of the child)

Management and oversight of different participation activities and capturing the experiences of children in care and their carers:

Whilst we acknowledge that a good range of participation events take place at individual and service levels, our review has highlighted that there are issues with the effective coordination of a variety of participation and involvement activities across the whole of children's services. Also, we think steps should be taken to evidence how this feedback informs service delivery and redesign. Additionally, KCC must consistently provide feedback to children, young people and their carers about the difference that their contribution has made.

Recommendation 7

KCC should identify a lead participation officer to coordinate how the views of children, young people and their carers are taken into account at the service level and for such information to be made available to members annually.

Care leavers' readiness for independent living

Suitable housing and adequate support for care leavers in gaining the relevant skills for independent living:

We heard from witnesses that access to suitable housing for our care leaver population can be challenging. We also noted a survey of our children in care which reported that a quarter of them felt they were not adequately supported in gaining the relevant skills needed for independent living. Our conclusion is that access to suitable housing and preparing care leavers with the right life skills and training in order to transition successfully into adulthood needs to be urgently addressed.

Recommendation 8

KCC should continue to strengthen work with our district partners (through council leaders and Joint Kent Chief Executives) to prioritise the needs of care leavers in gaining access to social housing and support. This partnership work should consider district partners supporting corporate parenting responsibilities in relation to the accommodation needs of care leavers through mechanisms such as the Kent Housing Strategy and the Joint Housing Protocol.

Recommendation 9

Slight variation to Summary which reads:

KCC should review the independent living skills support arrangements for care leavers (including their training provision and who they should contact for support at whatever time).

Investigation of Best Practice

There are a number of activities and initiatives which take place in Kent that enable members to engage with and directly speak to children and young people in care. These include Virtual School Kent activities, awards events and other local events. Some examples from other areas which KCC could learn from include:

Elected Members visits

Ofsted's 'From a distance' report 2014 identified members in good authorities that paid attention to children living in local authority children's homes (through Regulation 33 visits) and those living in homes that were run independently. The report also mentioned that some members paid particular attention to children living out of area as part of carrying out their corporate parenting responsibilities.

Integrated corporate parenting approach

Ofsted cited Trafford Council in the Children's Social Care report in England 2015 as an authority that has been judged to be outstanding. The council has developed an integrated corporate parenting strategy which has enabled councillors to acquire a broad understanding of the children within their care by having the most salient information at their fingertips without being overwhelmed with data.

Innovative training for county and district councillors

In Staffordshire two innovative training events were recently held to raise awareness of the corporate parenting role. These brought together county and district councillors and senior officers, as well as a range of practitioners and professionals who interacted with the audience and gave participants an insight into the lives of looked-after children.

Monitoring Mechanisms

Fostering services

Overseeing quality fostering service provision is an essential part of corporate parenting:

We recognise the important part that the fostering service plays in ensuring that children in our care benefit from good physical and emotional health, good or excellent education and, for those that need it, a good preparation for independent living. However, in the course of our review we heard about several areas (training, lack of access to CAMHS therapeutic support for young people, support for carers, stability and/or breakdown of placements, types and location of fostering) of the fostering service which require further attention. This has led us to make the following recommendation:

Recommendation 10

KCC should conduct a review of the fostering service with the objective of improving the matching process and reducing the number of placement breakdowns. The review should take place six months after the county council has endorsed this Select Committee Report and report back to the Corporate Parenting Panel.

Emotional and mental wellbeing

We wish to ensure that our children and young people receive timely access to effective emotional and mental health support when they need it:

We are aware of the reasons why it is vital for good mental health services to be available to all children and young people when they need it. Nonetheless, we are deeply troubled by the negative impact that the lack of timely access to support can have on the cognitive development and educational outcomes of the most vulnerable young people. We are aware that the Kent Health and Wellbeing Board is overseeing the delivery plan which underpins the

Emotional Wellbeing Strategy. We also know that work is progressing on a new service specification prior to a re-tendering exercise. However, we feel that all members need to have oversight of the process. Therefore, we recommend that:

Recommendation 11

KCC and its commissioning partners produce regular progress reports to the Health Overview and Scrutiny Committee regarding the Child and Adolescent Mental Health services, including evidence of the impact in relation to children in care – particularly the support offered to care leavers, disabled children, UASC and adopted children. Updates are to include key performance information, including waiting times and any geographical variances in access to services.

Young people not in education, employment or training (NEET)

Prioritising children in care in the selection process for KCC apprenticeships:

Data indicates that children in care experience major barriers to their achievement and attain less well academically than their peers. Not being in education, employment or training between certain ages is a key predictor of later unemployment. Being NEET has an impact on later job security, physical and mental health, youth offending and homelessness. We note that a NEET strategy and action plan is in development to support closing this attainment gap. It is important that we have regular updates of the initiatives that are being put in place, or that are planned to be implemented, in order to address the high numbers of care leavers not in education, training or employment.

Recommendation 12

KCC should investigate what further measures can be adopted to address – as part of the NEET strategy development – the high numbers of care leavers not in education, training or employment and to improve the life skills ‘offer’ for post-18-year-olds. Measures should be defined and implemented to address any areas in need of improvement. A report on progress should be brought to the Corporate Parenting Panel by June 2016.

Apprenticeships and other employment opportunities

Promoting apprenticeships and other employment opportunities to all young people in care:

We found that young people in care value apprenticeships very highly and we believe that this vocational training offers an important pathway to acquiring valuable skills that can underpin long-term employment security for young people. We believe that the county council should go one step further with its private, public and VCS sector partners to explore how young people could gain greater access to apprenticeship schemes and other employment opportunities.

Recommendation 13

KCC and our partner agencies should explore the viability of developing opportunities for care leavers to have apprenticeship positions with KCC and/or partners, thus increasing the range and access to further education and employment opportunities for young people in care who are in the NEET position.

Promoting the physical, emotional and mental health of children in our care

Children in care are likely to need additional and ongoing support:

We know that as corporate parents we should act on any early signs of emerging health issues in order to prevent the onset of illness where possible, and to improve the lifetime health and wellbeing of children and young people in our care. Yet we currently lack up-to-date data on the rates and profiles of mental health problems in Kent's children and young people. We also don't have a strategic, detailed understanding of the health needs of the children and young people in our care.

Recommendation 14

KCC should ensure that work is undertaken to improve the information we collect regarding our children in care and care leavers and their health needs. The result of this work should be fully reflected in the revised Joint Strategic Needs Assessment and future commissioning arrangements.

Recruitment and retention of social workers and other care staff

Recruitment and retention of social workers and other staff with the right skills to support our children and young people in care is paramount:

KCC should continue to strive to ensure that social workers from across the UK view us as an 'employer of choice' with a competitive offer that attracts the right numbers of experienced and skilled qualified staff to do the challenging but rewarding job of working alongside Kent's children and young people.

Recommendation 15

Processes need to be established to ensure all members take an active role in getting to know our frontline staff and their concerns, informally as well as via formal consultation exercises. We should also ensure that feedback from our social workers is informing the development of activities and planning at all levels of the organisation. Protocols must be established to clarify this process.



Chapter 2

The Legal and Policy Framework

Overview of the national legal context

Local authorities are bound by primary legislation and other statutory instruments to fulfil their statutory duties effectively so that the needs of all children and young people and their carers are addressed. They do so by working closely with other local partners to improve the outcome and wellbeing of children and young people.¹

This chapter provides an overview of the legal and policy framework which governs the delivery of education and children's social services functions of local authorities. The framework has a particular emphasis on the role and responsibilities of political corporate parents.

Adoption is a form of permanent placement arranged under a defined judicial process.
As political corporate parents we have a shared responsibility with officers for the safety, development and wellbeing of our children and young people in the care.

The Children Act 1989 imposes a duty on local authorities to promote and safeguard the welfare of children in need in their area.² In doing so they must take action in a manner consistent with enabling all children to have the best possible outcomes.

Under section 17 of the Children Act 1989, local authorities have responsibility for deciding what services should be provided to a child in need. The duty does not require local authorities to be a provider of such services; instead they can arrange for these to be provided by others on their behalf.

Under section 20 of the Children Act 1989, local authorities are required to provide accommodation to any child in need within their area who appears to require accommodation as a result of the lack of suitable accommodation or care. Section 22 of the Children Act specifies the duty in respect of a looked after child for local authorities to promote and safeguard the welfare of the child who is provided with accommodation under section 20. One of the ways in which local authorities can satisfy the requirement to provide the necessary accommodation and maintenance is by placing the child with a foster carer.

Section 10 of the Children Act 1989 requires each local authority to make arrangements to promote cooperation between the local authority and the following named relevant partners: district councils, police, probation services, youth offending services, NHS England, Clinical Commissioning Groups, maintained and non-maintained schools, Further Education colleges, academies and free schools.

Section 11 of the same Act places duties on a range of organisations and individuals to make arrangements for ensuring that their functions, and any services that they contract out to others, are discharged with regard to the need to safeguard and promote the welfare of children.

Key legal and policy points
The Children Act 1989 and Children Act 2004 place a number of statutory duties on local authorities, including overarching responsibilities for safeguarding and promoting the welfare of all children and young people in their area.
The Children Act 2004 also places local partner agencies (including the police and health services) under a duty to ensure that they consider the need to safeguard and promote the welfare of children when carrying out their functions. A range of other agencies are also required to cooperate with local authorities to promote the wellbeing of children in the local authority area.
Officers working in named agencies with these duties are responsible for ensuring that they fulfil their roles and responsibilities in a manner consistent with the statutory duties placed on their employer.
The terms 'children in care' or 'looked after children' can apply to all children and young people who are the responsibility of local authorities. They cover children and young people subject to care orders, those who are looked after under a voluntary agreement with parents and unaccompanied asylum seeking children (UASC).
A number of placement options are available for children in care dependent on their needs. They may be placed with family members, in different types of foster care, in a residential children's home and, for a very small proportion of children, secure training centres and young offenders secure units.

Section 13 sets out the requirement for the local authority to establish a Local Safeguarding Children Board for its area and specifies the organisation and individuals that must be represented on the Board.

The Children Act 1989 has been amended by the Children (Leaving Care) Act 2000, the Adoption and Children Act 2002 and the Children and Young Persons Act 2008.

The Children (Leaving Care) Act 2000 places additional responsibilities on the local authority to provide a range of practical and emotional support services to young people leaving care up until the age of 21 (or 24 if a young person is still in education or training). It also requires that the local authority must take certain actions, including carrying out an assessment to find out what advice and support a young person needs (including production of a 'pathway plan' to ensure sufficient assistance is provided to meet those needs) and provision of a personal advisor or social worker who stays in touch with the young person once they have left care and helps them build independence skills.

The main pieces of legislation mentioned above are supported by the following five statutory guidances issued by the Secretary of State for Education. They are:

- Volume 1** Children Act 1989: court orders
- Volume 2** Children Act 1989: care planning, placement and case review
- Volume 3** Children Act 1989: transition to adulthood for care leavers
- Volume 4** Children Act 1989: fostering services
- Volume 5** - Children's homes regulations, including quality standards: guide

The Kent context and overview of key issues

KCC is the largest upper tier authority with responsibility for education and children's social services functions in England. Children make up 22.98% (347,200) of the Kent population of 1,510,400 according to the 2014 Mid- Year Population Estimate (Census based) as published by the Office of National Statistics on 25 June 2015.³ Kent's looked

after children make up 0.6% of the Kent population aged under 18.

The 'Increasing Opportunities, Improving Outcomes: KCC's Strategic Statement 2015 -2020' is the main council policy framework that informs what the council does. Much of the operation of children's services is focused on helping to achieve the overarching outcome of helping 'children and young people in Kent get the best start in life'.

There are seven supporting outcomes secondary to the overarching children and young people's outcome. These are ensuring "Kent's communities are resilient and provide strong and safe environments to successfully raise children and young people; keep vulnerable families out of crisis and more children and young people out of KCC care; the attainment gap between disadvantaged young people and their peers continues to close; all children, irrespective of background, are ready for school at age 5; children and young people have better physical and mental health; all children and young people are engaged, thrive and achieve their potential through academic and vocational education and; Kent young people are confident and ambitious with choices and access to work, education and training opportunities".⁴

The last Ofsted inspection of Looked After Children Services in July 2013, found that KCC had made significant progress in improving outcomes for children and young people. Ofsted rated Kent as 'Adequate' overall. The 2013 inspection report identified a number of strengths, such as commissioning arrangements with Coram adoption service. The report also identified areas for development one of which was to "improve the quality of care development, planning and assessments".⁵

Kent's UASC population has significantly increased over the last 18 months, and this has put a substantial additional pressure on our support services for care leavers, as well as the provision we have in place to meet the needs of all our children in care. On 21 October 2015, the total number of UASC in KCC's care was 954. UASC now make up more than a third of all KCC look after children. Additionally, KCC is supporting 401 young people who are aged over 18, who were UASC and for whom KCC has statutory responsibilities as care leavers. These numbers are continuing to increase rapidly. As Chart 1 below shows, the current numbers

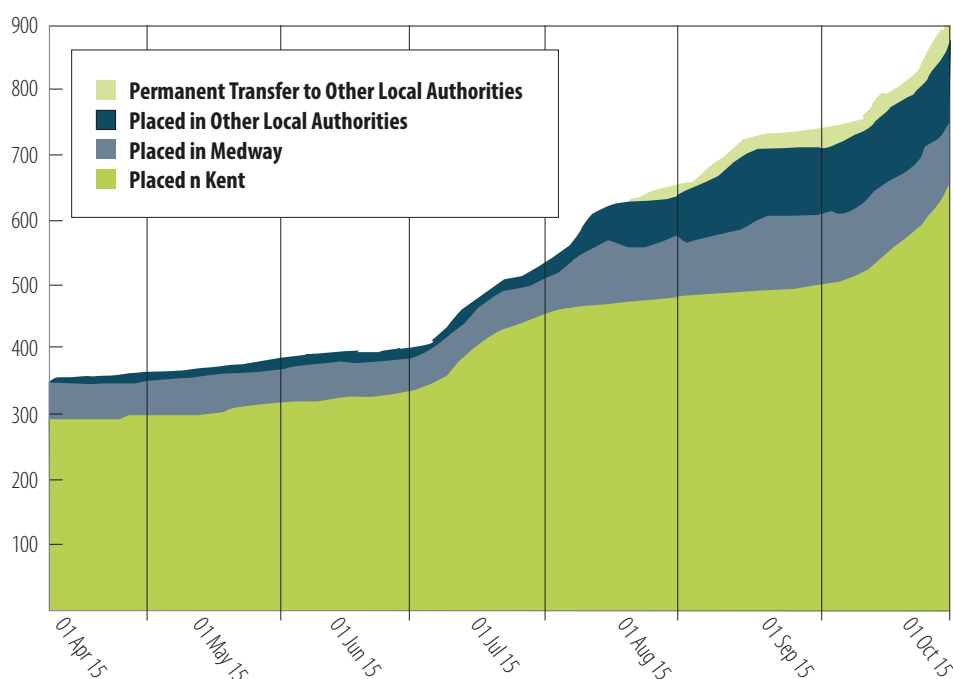
of UASC represent more than a 260% increase from the situation in April this year.⁶ Despite the unprecedented increase in activity, KCC has managed well to ensure that the necessary care is provided to UASC.

Similarly, KCC and local partners have and continue to come under tremendous pressure arising from the additional demand on services caused by the high number of looked after children from other local authorities that are living in the county. The difficulties relating to this particular issue are longstanding and of extreme concern. As at September 2015, the number of other local authority children in care

living in Kent stood at 1,324. The problems are particularly acute and growing in the east and the north of the county.⁷

The combination of the recent very high number of UASC (an issue of national importance) and other local authority looked after children living in Kent has posed significant challenges to KCC. These have pushed the local foster carer resources to the limit. KCC has written to the government over the years on a number of related legal issues and we should continue to seek a more effective policy framework with regard to these key issues.

Chart 1: UASC Placement as at October 2015



Characteristics of children in care

In the year ending 31 March 2015, the national data showed that there were 69,540 children in care in England. The statistics show that there has been a steady increase over the last seven years with an increase of 1% compared to the previous year ending March 2014. The comparison of the data between 2011 and 2015 indicates an overall increase of 6% during that period. Evidence suggests that the gradual increase of the number of children coming into care is not just down to an increase in the child population, as the number of children in care has moved to 60 children per 10,000 as at March 2015 compared to 58 children per 10,000 population of children in care in 2011.⁸

The chart below also shows the overall number of children who started to be looked after during the year, with an England total of 31,070 in the year ending March 2015, compared to a figure of 30,540 in the year ending March 2014. During the same period the national data of the number of children who ceased to be looked after during the year ending March 2015 stood at 31,100. The key point

that we take from the two sets of data is that there were as many children leaving as entering care. The high turnover of children with complex presenting needs add to the dynamics of care for children in care. However, as we were reminded by one witness, it is not only a numbers issue. As ever, we have to be mindful of how the interrelated needs of some looked after children pose a major challenge in finding the right care for them at the right time.

KCC looked after a total of 1,870 children and young people in the year ending March 2015. During that year our records show that 905 children and young people started to be looked after, whilst 870 children and young people ceased to be looked after. The number of our children in care includes Unaccompanied Asylum Seeking Children UASC. If the UASC number was excluded KCC's looked after children population is excluded, by 122 in 2014/15, from 1,624 down to 1,502⁹ (as reported by the Independent Reviewing Officer Service on 23 October 2015). The KCC rate per 10,000 of children aged under 18 stands at 57 per 10,000 children at the year ending March 2015, as opposed to 56 per 10,000 in the year ending March 2014.

Chart 2: Number of children in care

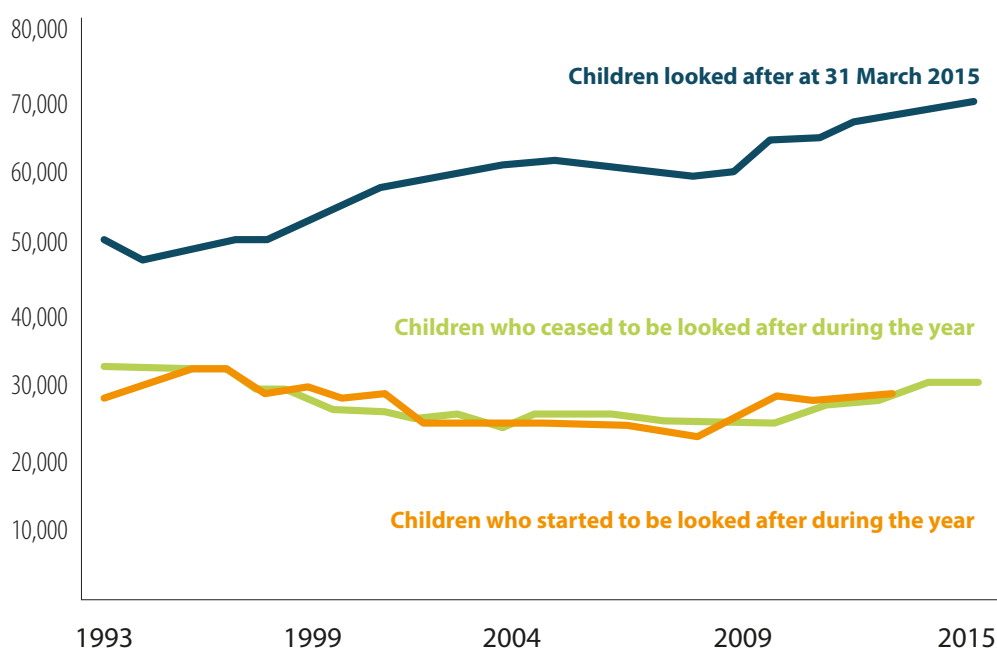


Table 1: Number of looked after children at 31 March 2011 to 2015¹⁰

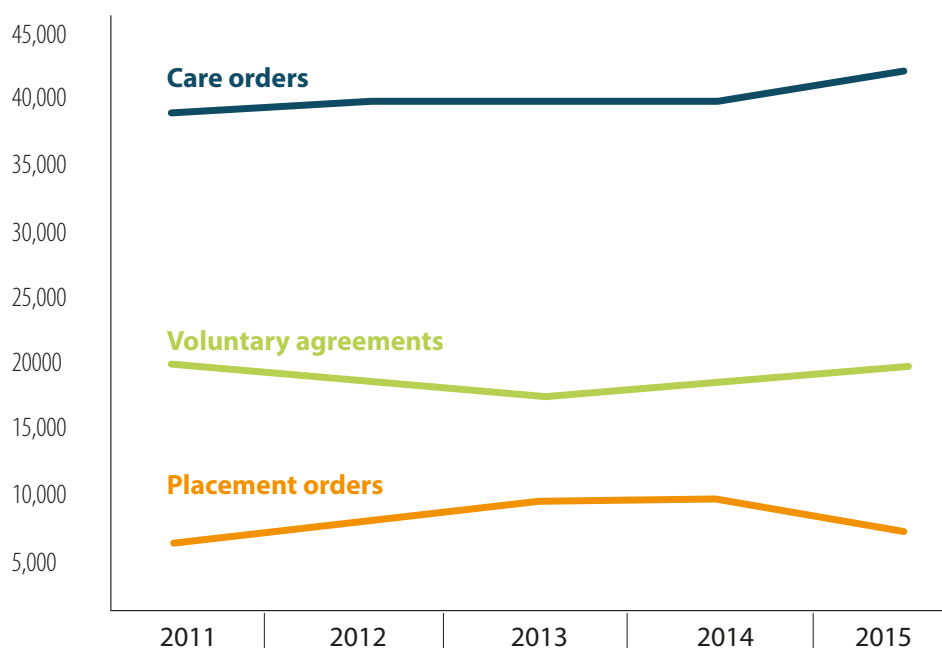
National - Year ending 31 March		Kent - Year ending 31 March	
2011	65,510	2011	1,695
2012	67,070	2012	1,800
2013	68,060	2013	1,830
2014	68,800	2014	1,820
2015	69,540	2015	1,870

The Department for Education's (DfE) statistical release for the year ending 31 March 2015 indicates that there has been a decrease in Agency Decision Maker decisions for adoption and adoption placement orders. This is in contrast with an increase in the number of children in care under a voluntary agreement.⁸ This national phenomenon is mirrored in Kent and, in the chapter on adoption, we discuss the main related matters in some detail. The

National Adoption Leadership Board and the Association of Directors of Children's Services (ADCS) have related the change in trend to the impact of two relevant court judgements.¹¹ As the chart below shows, nationally 60% of children were looked after under a care order (either an interim or full care order). This represents a 5% increase compared to 2014 and an 8% increase compared to 2011.

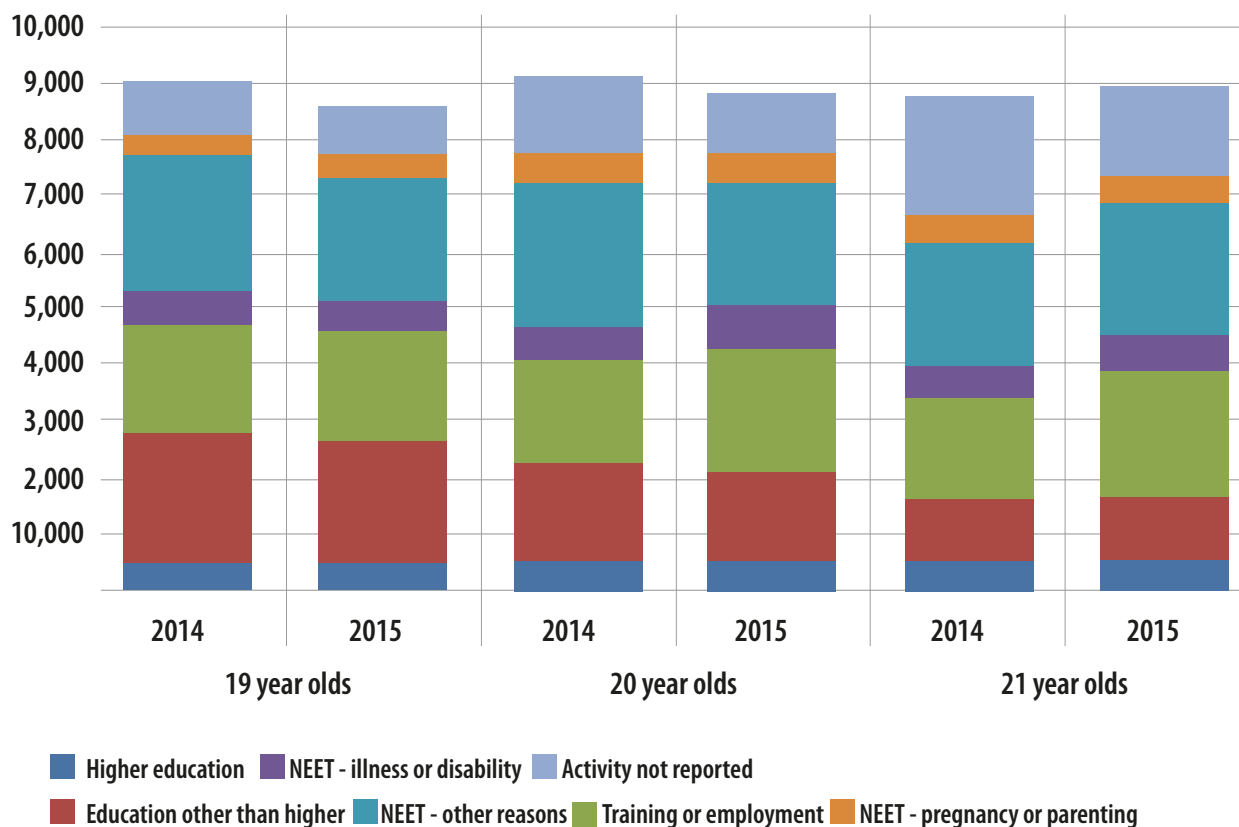
Nationally, 5,330 looked after children were adopted during the year ending 31 March 2015. This is reported as an increase on the previous period but the rate of increase is lower than in previous years. KCC's adoption figures increased positively from the year ending 2011 to 2015, with 60,70,105, 145 and 185 children being adopted during the respective years.¹² The number of KCC adoptions from April to August 2015 is 51.

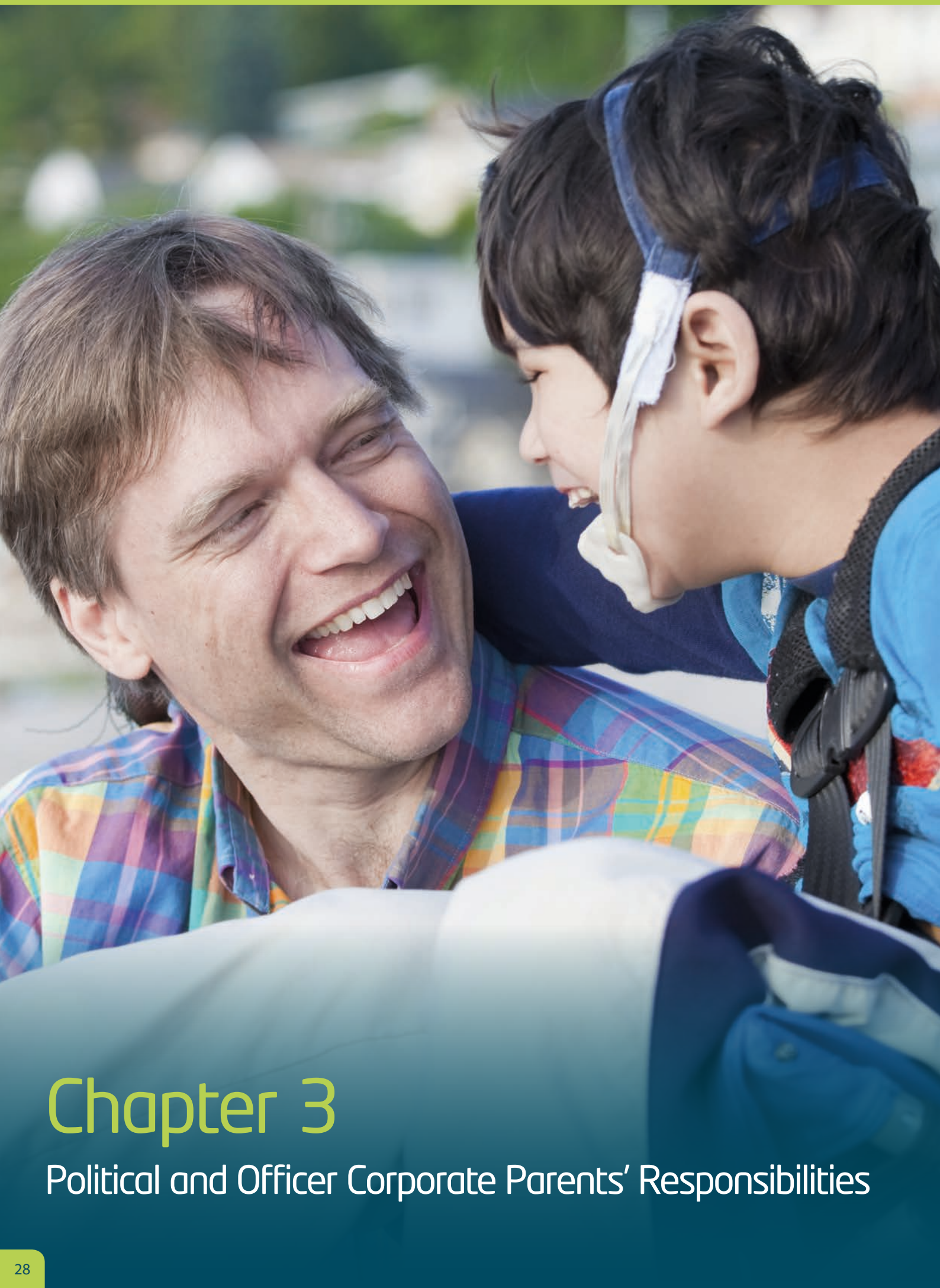
In respect of placements for children in care, we know that the number has continued to rise nationally with more children being placed with foster carers. We provide detailed information about the Kent picture in the chapter on fostering and residential care arrangements for children in our care.

Chart 3: Number of looked after children at 31 March by legal status¹³

We also explore issues relating to former care leavers not in education, employments or training (NEET). Suffice to note here that according to the latest information published by the DfE, 39% of care leavers were NEET with a further breakdown of the national position shown by the chart below. Care leavers therefore experience major barriers to their educational achievement, training and employment opportunity. We think that it is important for the NEET strategy and action plan (in development) should provide an effective platform for our care leavers.

Chart 4: Former care leavers by activity at ages 19, 20 and 21¹⁴





Chapter 3

Political and Officer Corporate Parents' Responsibilities

Introduction

As mentioned in the chapter above, the overarching duty of the local authority is to safeguard and promote the welfare of children in care and young people in its area. This duty underpins all activity by the local authority in relation to children in care. Legislation places duties on the county council which is exercised through the Leader, Cabinet, members and all officers working for the authority.

The county council fulfils its responsibilities with cooperation and support from a number of organisations to provide services to children and young people, their families and carers. This chapter addresses the main focus of this review, which is “to consider the definition of ‘corporate parent’ and the variety of roles and duties associated with it”.¹

Duties of the Whole Council

The duties and powers relevant to the provision of services to children and young people are conferred on KCC as the legal authority. As stated above, the legal authority vested in KCC is outlined in the KCC constitution. Its relevant statutory duties bind all members and all officers to always act in the interest of the health, wellbeing and educational development of children within our care.² As such, the duties apply equally to all directorates in KCC. As we know corporate parenting responsibility is reflected in the job description of officers with enhanced responsibility identified in duties of senior officers above a certain grade. The ‘Statutory guidance on the roles and responsibilities of the Director of Children’s Services and the Lead Member for Children’s Services’ issued in 2013 specifically mentions the shared corporate parenting roles for members and officers.

The Children Act 1989 requires local authorities to give due regard to the child’s wishes when deciding what services to provide. This is often commonly referred to as the ‘voice of the child’ and we would be failing in our duty as an authority if we did not ensure that the child’s wishes are centre stage.

In addition to our direct corporate parenting responsibilities to the children in our care, KCC and local partners such as the Police, schools and the NHS are called upon to support the corporate parents of other local authority looked after children living in Kent as it relates to their own statutory functions.

The Kent Picture

There are a number of internal governance bodies whose remit include paying close attention to how well KCC as a whole is working together effectively to promote the health, wellbeing and educational development of our children in care. Ultimate scrutiny is exercised by the county council and a combination of executive and officers groups. These bodies act on delegated authority from the council including the Leader through Cabinet, Scrutiny Committee, Cabinet Committees, Kent Integrated Children’s Services Board and the Corporate Parenting Panel.

Key points and high-level responsibilities

The responsibility of a corporate parent is to act as the best possible parent for our children and young people in care and to advocate on their behalf to secure the best possible outcomes.

Corporate parent is a shared role between all members and all officers and the broad responsibilities are set out in primary legislation, associated regulations and statutory guidance.

KCC also shares parental responsibility with carers and birth families of children and young people, depending on certain circumstances.

Officers working in certain agencies (such as schools and the NHS) may be responsible for taking action in fulfilment of corporate parent responsibilities under Section 10 of the Children Act 2004.

Our definition of corporate parent is taken from Kent’s Looked after Children and Care Leavers Strategy 2015-2016 as “*the responsibilities we have as members and officers of KCC to improving outcomes and actively promoting the life chances of children in our care*”. This in turn is based on the definition found in the Children Act 1989 Guidance and Regulations Volume 2 - care planning, placement and case review.

Kent’s Children in Care Council is made up of two groups: Our Children and Young People’s Council and the Young Adult Council.

In addition, we have a range of statutory and non-statutory partnership bodies which have corporate parenting oversight responsibilities. As we mentioned above, KCC is required by provisions under the Children Act 1989 to establish a Local Safeguarding Children Board and this Board plays a pivotal role in discharging corporate parenting responsibilities. The Board has the power to challenge organisations and individuals where the safety of our children in care is at risk.³ The Kent Health and Wellbeing Board also shares leadership and holds broad responsibility in this respect. Equally, the Kent Corporate Parenting Group brings together representative officers from key partnership organisations including NHS Trusts, Clinical Commissioning Groups and Kent Police, as well as KCC officers.

The groups above have a number of agreed scorecards which are used as the main framework for assessing how well we are doing against key outcomes. Perhaps Kent would be judged favourably if the depth and breadth of our performance information were the overriding factors in that assessment. Even so, in spite of the rich data available across KCC's children's services, we think that as members we face our own unique challenges in terms of all members having access to the appropriate high-level summary information that is easily understood. This is an issue we return to later on in this chapter. We acknowledge that whilst the system of oversight of the progress we are making towards improving outcomes for children and young people in our care is in place, not all members currently have access to the necessary information to enable all of us to be able to carry out the corporate parenting expectations that we assume when we are elected as county councillors.

Kent's Children in Care Council, which is made up of Our Children and Young People's Council and the Young Adult Council, brings together children and young people in care and care leavers as part of the engagement process. The groups have a real presence and they have been instrumental in challenging children's services with the aim of improving the experience of our children in care. The 'Challenge Card' concept for example has been introduced following their instigation.⁴ We heard about some of the positive contributions that the group are making at our hearing sessions and we have every hope that this will continue and to grow and have a lasting positive impact for other children and young people in the future.

Roles and Responsibilities of Local Authority Members

Strategic role: promoting the wellbeing of children and young people

Members' corporate roles and responsibilities differ from that of officers in some important ways. We believe the implications of our role as corporate parents mean it is necessary for us to understand the legal and policy framework that children's services operate within. The role of elected members is to take a strategic overview and to set the organisation's direction in relation to promoting the wellbeing of children and young people, and to challenge services where there is emerging evidence of worsening performance.⁵ The strategic aspect of our role as corporate parent includes making sure that there is a range of high quality service provision to cater for the different needs of children and young people in our care including ensuring there is sufficient supply of different types of placement provision (residential care, foster care, adoption and leaving care support arrangements).

Monitoring role: how well the arrangements are working

In order to effectively assess whether the standard of care being provided to children and young people in our care is good enough, we need to know about the arrangements that are in place to support our children in care. One important aspect of our corporate parent role is having appropriate information in order to know whether to challenge services on behalf of children and young people or indeed praise them. The Children's Services Taskforce also make a related point that in order to develop innovative and cost-effective provision, commissioners and providers need to take a more joined-up approach which is underpinned by an effective monitoring framework. Members' role in monitoring how well systems and processes are working is an essential, shared feature of the role of members as political corporate parents.

Engagement role: promoting the voice of children

In order to be an effective corporate parent we believe that it is necessary for us to listen to the voices of children in care and care leavers and respond appropriately to their views. We can best do this by finding appropriate ways to engage with our children in care. This includes our involvement in participation events and other appropriate opportunities to meet and hear direct from our children in care. In this way, we may determine whether everything possible is being done for the voice of children to be heard and taken into account in all suitable ways. This is not about close involvement with individual children. We also need to communicate our corporate parenting role to our children and young people, so that they are aware what members do and how we can work to improve the lives of the children within our care.

“I’m not sure what corporate parents are meant to do, and what members are.”

Voice of a Kent child in care

Advocate role: within the council and with other partners

Our corporate parent role also demands that where necessary we should seek to influence others within KCC who do not have direct involvement with children’s services and also key partner organisations on children and young people’s issues when fulfilling their role and responsibilities placed on them by statutory duties and powers that apply to them.

Types of member corporate parents

We are supportive of the three types of role for members put forward by the National Children’s Bureau (NCB) based on their idea of a model of effective corporate parenting which describes three types of corporate parents. The three distinct levels of political corporate parenting proposed by the National Children’s Bureau NCB placed within the Kent context suggests the following:

Table 2: Types of Member corporate parents based on NCB model⁶

Level 3 - Specialist responsibility	Level 2 - Targeted responsibility	Level 1 - Universal responsibility
Cabinet member for Specialist Children’s Services (Lead member for Children’s Services)	Members on Corporate Parenting Panel	All elected members

Roles and Responsibilities of Local Authority Officers

The statutory guidance on the respective roles of the statutory Director of Children Services and the Lead Member for Children’s Services endorses the shared member parents for looked after children.

The statutory Director of Children’s Services (DCS) ⁷ is expected to provide the right leadership and strategy and to ensure the overall effectiveness of children’s services. Furthermore, it is the responsibility of the DCS to make sure that there are effective systems for discharging children’s services functions for advising the Leader of the Council on these matters. As children’s services functions are distributed across different directorates in KCC, some of the responsibilities are delegated by the Leader to other corporate directors. Therefore, the requirement to secure the provision of services through sufficiency duty applies equally to relevant Corporate Directors.

As with members, officers have specific and general responsibility to be working with relevant local partners to advance the improvement of outcomes for children in our care. KCC officers are also responsible for promoting the health, wellbeing and educational development of our children in care. Officers are also obliged to ensure that the performance of children’s services, including commissioning arrangements, is effective for children in our care. Strong and consistent social work practice is an essential feature of this.

Roles and Responsibilities of Other Agencies

In the course of our review we sought to understand whether and how other agencies may be required to act in some capacity as corporate parents even though the legislation places primary corporate parent responsibilities on KCC. The 'Working together to safeguard children' guidance issued in March 2015 makes it clear that the local authority cannot fulfil its corporate parent responsibilities "without the full co-operation and support of a range of agencies which provide services to children and their families". It goes on to state that section 27 of the Children's Act 1989 also imposes a duty on other agencies, including local authority housing services, NHS England and clinical commissioning groups, to cooperate with a local authority where these agencies duties relate to local authority support for children. Significantly, the legislation requires that these bodies must comply with a request from the local authority if the request is compatible with their own statutory or other duties and obligations.⁸

Therefore, officers working in these organisations may be responsible for taking certain actions in fulfilment of corporate parent responsibilities triggered by the need to comply with a request by the local authority under section 10 (duties to cooperate) of the Children Act 2004. Thus, for example, sections 10 and 11 of the Children 2004 hold the police to account in relation to safeguarding children and promoting the welfare of children and young people.⁹

How other authorities discharge their functions

Every local authority approaches the task of corporate parenting differently, but the evidence shows that there are some key components that are essential if local arrangements are to be effective, which we discuss later on. Recent Ofsted reports on the outcomes of local authority children's services inspections identified a number of authorities that performed particularly well, including their service provision to children in care and care leavers.¹⁰ Amongst these authorities are Essex County Council, Sheffield City Council (lessons from these first two are set out below), Cambridgeshire County Council, North Yorkshire County Council and Bradford Metropolitan District Council. In addition, our review also considered other countries' approaches to corporate parenting roles and responsibilities.

Essex County Council

According to Ofsted's 2014 report¹¹, the noted strong points of Essex's approach to children in care are the following:

When children, young people and families need help the right services are provided as soon as they need them. The thresholds document 'Effective Support for Children and Families in Essex' sets out the services that are available, including the Early Help Hub and Family Solutions. The safety of children who need to be protected is ensured through effective partnership working between police and social workers.

Social workers are able to quickly identify and provide immediate positive help and support for children and families. This early engagement and intervention has led to a reduction of children under the authority's direct care, from 1,604 in 2012 to 1,047 in 2015.

Social workers are very effective at recording their work with children and families. This ensures good information sharing between colleagues and partner organisations. The Social Care Reporting Team undertakes the majority of data quality and reporting in order to monitor and improve the service. Where children and young people have difficulty saying what they want, for example because they are disabled, social workers are skilled at finding out through other ways of communicating with them.

Most children in care have a better opportunity to stay where they are currently placed because the authority has an effective system in place for planning permanency. The fostering service is skilled at making sure that there are enough foster families available for looked after children, so that they can live with a family that matches their needs.

Children in care receive a consistent, high quality service. Their reviewing officers are successful at making sure that social workers are delivering what they planned to do. If looked after children live out of the county, social workers and a core group of members visit them regularly to make sure they are provided with the same service as if they lived in Essex. The adoption service is effective in finding the right families for children in care and making sure that they are aware of the children's needs, minimising placement breakdown. The local authority provides adoptive families with a very high standard of support.

Care leavers receive a quality service which supports them to secure employment or a place to study, and provides them with somewhere safe to live, helping them to become independent adults.

Sheffield City Council

The strategy developed by Sheffield City Council is a joint statement of intent between the council and its partner agencies to work together to deliver the best outcomes for children in their care.¹² The main objectives and actions in the strategy have been determined by local and national priorities and in consultation with children and young people. Their focus includes:

- **engagement and influence (involvement) of children and young people, looked after and adopted**
- **educational attainment and achievement**
- **health and wellbeing**
- **permanence**
- **care leavers.**

The objective of this engagement is to enable children in care and care leavers to participate fully in decision-making, service design and delivery. The council believes that the experiences, views and ideas of children and young people should be captured and responded to in order to develop personalised care services. Initiatives have included the rebranding of the Sheffield in Care Council, the development of a new Sheffield Pledge and the allocation of an Independent Reviewing Officer to each child in care.

The council recognises that educational achievement is critical if children in care are going to lead fulfilling and successful lives. As a result, in 2013, the Virtual School was established to promote the educational achievement of children in care.

In terms of health outcomes, the focus has been on ensuring that all statutory health assessments are robust and within timescales and that they meet the quality standards for all children in care and young people regardless of where they are placed.

A small number of children who are in care will go on to be placed for adoption in a permanent family setting. The majority of these children will have experienced some form of disadvantage within their family of origin and will take with them a range of needs into their adoptive family. The Adoption Service is working in partnership with the Yorkshire and Humber Adoption Consortium, which consists of 15 local authorities across the region. The aim is to improve the quality of service for both children and adopters through faster delivery, sharing best practice, and improved performance management and data reporting.

The transition from being in care to adulthood presents care leavers with a multitude of challenges concerning emotional resilience, education, training, employment, accommodation, personal finances, benefits and healthcare. Each young person needs a bespoke support package tailored to their individual needs.

Sheffield City Council has signed up to the DfE's "Charter for Care Leavers", a young-person-led document which focuses on improving the quality of the support provided to care leavers as they make the transition to adulthood. A care leavers' group has been established to assist with feedback on the services they are receiving, as well as contributing to service formulation and consulting other young people leaving care.

What does good and effective corporate parenting look like?

According to Ofsted, good children in care services should demonstrate a strong cross-party commitment to children in care, championing their rights, having high aspirations for their achievement, monitoring their progress and challenging outcomes. Children in care services should also understand the roles and the responsibilities of the local authority towards children in care and prioritise their needs, resulting in a greater focus on improving outcomes. Finally, services should also actively engage with their young people, for example through children in care councils that are well-established, and have effective and regular links with senior management and elected Members.¹³

In our Kent Looked after Children and Care Leavers Strategy 2015 – 2016 we address this question directly and we state that good corporate parenting depends on us recognising

and taking action so children and young people receive the support that they need to fulfil their potential throughout life. The Strategy further states that “effective corporate parenting involves working across agency boundaries with everyone involved in the child or young person’s life working together (with minimum bureaucracy) to provide the quality of care necessary to achieve the best outcomes for the child or young person in all aspects of their lives, especially in relation to their education”¹⁴.

What are we trying to achieve?

The Kent Looked after Children and Care Leavers Strategy 2015 – 2016 sets out our comprehensive approach to corporate parenting. The strategy helpfully describes 6 key priorities which are central to the health, wellbeing, educational development and the employment opportunities for children in care and care leavers:

Kent Looked After Children and Care Leavers Strategy priorities:

- Priority 1:** Improve outcomes for children in care through high quality social work practice
- Priority 2:** Improve outcomes for care leavers through high quality social work practice
- Priority 3:** Improve outcomes for children in care and care leavers through health and education
- Priority 4:** Increase placement choice, stability and support
- Priority 5:** Increase children and young people’s impact on service design and delivery
- Priority 6:** Ensure children in care and care leavers are safeguarded

The above strategy rightly starts with an open statement from the Chair of Our Children and Young People’s Council:

Statement from the chair of Our Children and Young People’s Council:

“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

An important aspect of corporate parenting responsibility is to help children and young people know who are the key corporate parents in KCC (See Appendix B). The link below provides information about being in care for children and young people in easy-to-read leaflet form. Topics covered include: corporate parenting, advocacy, the Children’s Commissioner, the Kent Pledge for children aged under 12 and over 12, the Leaving care charter and participation information.¹⁵

<http://www.kentcarestown.lea.kent.sch.uk/information-about-being-in-care>

Our pledge to children and young people who are looked after. by KCC describes the manner in which we will seek to ensure that the aspirations we set out to achieve are made a reality. The pledge expands on the key things that matter to children and young people – a sense of belonging, getting ready for being an adult, championing the needs and interest of children and young people in care, making sure that there is an adult who is always there whilst they are in care, good education and good memories for the future.

Listening to the voices of the children and young people in terms of what and how we do things is one of the

important principles we have enshrined in our policy frameworks and social work practice. Our Virtual School Kent plays an important facilitating role in this regard, especially in organising some of the participation activities and other events. We later discuss how this principle is reflected in social work practice.

The above approaches are some of the key steps we are taking towards achieving our vision for the children in our care which is described in the vision statement thus:

**“Kent County Council’s vision for children in care:
We have the highest aspiration for all children and young people in Kent and want them to grow up safe and healthy. Every adult and every agency in Kent has a role to play in protecting all children and young people from harm. We want them to enjoy and benefit from educational and social opportunities. Above all, we want them to make the best use of their skills and abilities so they can reach their full potential as citizens and parents of the future.”**

What are we doing at present?

In Chapter 2, we outlined the principal legal provisions which set the context for our corporate parenting responsibilities, in particular the extent to which we are meeting requirements to ensure that there are a range of services available to help us to meet the care needs of children and young people. Kent County Council’s Sufficiency, Placement and Commissioning Strategy 2015 -2018 articulates our approach and ambition as to how we intend to ensure the provision of high quality accommodation for our children in care and care leavers. The sufficiency duty that all local authorities have to satisfy is key to assuring the availability of suitable placements. Further information can be found at: ¹⁶

http://www.kent.gov.uk/__data/assets/pdf_file/0016/11941/KCC-Sufficiency-Strategy-2015-2018.pdf

The supporting action plan linked to the strategy outlines the following five high-level action plan outcomes:

The sufficiency of placements and the quality of support have a major impact alongside health and education on the future chances of children and young people. This is a subject that we discuss in subsequent chapters of this report.

- Kent County Council will focus on providing targeted, effective early help services to safely prevent children from coming into care. The council will work proactively with partners and stakeholders to deliver the best outcomes for children
- Kent County Council will grow and diversify the skill, capability and capacity of its in-house foster carers
- Kent County Council is committed to facilitating the highest quality of ‘authoritative’ social work practice, supporting practitioner decision making and getting it right first time.
- Kent County Council will work in a proactive way with the independent sector to deliver the best possible accommodation solutions for Kent children and young people in the most timely and effective way
- Kent County Council’s transformation process is driving the vision of a fully integrated children’s service that delivers the best outcomes and safeguards for children, young people and families.

What more could be done?

As councillors, when we are elected we take on the role of corporate parent to children and young people cared for by KCC. We all have a duty to take an interest in the development and wellbeing of children and young people in our care as if they were our own.

A central consideration for members in our capacity as corporate parents is to determine whether we are fulfilling our responsibilities and whether KCC as a whole is providing good and effective care for the children and young people in our care.

Although our role as members is central, good corporate parenting requires the collective effort of all parts of the local authority as well as partner organisations. It also requires the appropriate involvement of children in the decisions that are made about them.

In our effort to establish the extent to which we are fulfilling our corporate parenting responsibilities we identified a number of issues around awareness, engagement and corporate parenting governance that we feel require attention in order to strengthen our arrangements. We believe that all members can and should take a more active interest in the children in our care, at all times seeking to safeguard and promote their welfare.

Awareness

If, as members, we are to effectively assess whether the standard of care being provided is good enough for the children and young people in our care, then we need a good level of awareness and understanding of our corporate parenting responsibilities. This is particularly important for those of us without direct involvement with children's services in order to empower members to effectively enquire how well our children and young people are doing.

There are a number of initiatives and mechanisms in place to help raise members' awareness of children in care and about our general corporate parenting duties. These initiatives include:

- **in July 2014 members reaffirmed our commitment to children in care by signing the revised Kent Pledge and Care Leaver's Charter¹⁷;**
- **there is a comprehensive induction programme on safeguarding and corporate parenting for all newly elected members.¹⁸ Amongst other things, this training provides some background and data on our children in care. It describes members' responsibilities and offers them guidance on how to access relevant information;**
- **a scorecard has been introduced at the request of members to improve our capacity to assess the performance of services;**
- **the Kent Looked after Children and Care Leavers Strategy 2015 -2016 which sets out what good corporate parenting looks like has recently been refreshed and published.**

Despite these initiatives, we identified a number of areas for improvement with regard to awareness, training and the provision of accessible and relevant information. The evidence we have reviewed indicated the need for a continual process of awareness, for both members and officers, and revealed that officers outside of Children's Services did not always consider corporate parenting as part of their roles and responsibilities.

Although corporate parenting training is viewed as a core component for every elected member and is delivered in a variety of ways (including briefing sessions and online), currently attendance is not mandatory and not all members attend. The Local Government Association (LGA) recommends that all members should receive mandatory corporate parenting training when they are elected and refresher sessions during their terms of office. In Essex, for example, we heard that new councillors are required to attend corporate parenting workshops and in Lincolnshire all councillors are given the corporate parenting strategy and corporate parenting training. We found that in Staffordshire two innovative training events were recently held to raise awareness of the corporate parenting role which brought together county and district councillors

and senior officers, as well as a range of practitioners and professionals who interacted with the audience and gave participants an insight into the lives of children in care.¹⁹

There are a number of sources of information for members on corporate parenting and children in care. These include a children in care Performance Report scorecard²⁰ with numerical performance indicators and a corporate parenting strategy. However, the strategy currently is embedded in the Kent Looked after Children and Care Leavers Strategy 2015 - 2016. Due to the importance of keeping members informed, we feel that information about children in care should be more easily accessible and provided more regularly.

Engagement

In order to improve our corporate parenting we think it is essential we understand the needs of our children in care and care leavers. This requires engaging with them and enabling them to be involved in decision-making. The improvement of corporate parenting also requires engagement with all those involved in the care of looked after children, such as foster carers and social workers. There is evidence that members' engagement with children in care and relevant professionals needs to be strengthened.

Recommendations

Informed by the evidence and the issues that we considered, we propose the following recommendations for the county council to endorse.

Recommendation

KCC should adopt a simply-worded and practical corporate parenting guide (handbook) for all members that clearly sets out what we need to know, including information about the fundamental areas crucial to running an effective children's service in fulfilment of our corporate parenting responsibilities. The handbook must include contact details of key officers within each division.

Recommendation

KCC should make available information about the fundamental areas of children's services such as education and health outcomes, placement stability and support for care leavers for all members on a regular schedule starting from March 2016.

Recommendation

KCC should introduce a refreshed training programme for all KCC members as part of the induction after every county council election or upon their appointment. In the event of significant changes to corporate parenting, KCC members should be updated through additional training. All members are strongly advised to take advantage of this training offer. Consideration should be given to the best option for overseeing and reporting on training attendance.

Recommendation

KCC should adhere to the ‘simplification’ principle and merge the Corporate Parenting Panel and Kent Corporate Parenting Group to strengthen the focus on corporate parenting for a more powerful and streamlined oversight.

This should be backed by the development of a memorandum on governance between the new group and relevant existing groups to reduce any avoidable overlap and/or duplication.

Questions members may wish to ask as corporate parents

There are a number of key questions which we may wish to ask, in order to satisfy ourselves that we are fulfilling our corporate parenting responsibilities in relation to our children in care:

- Do children in care have information about our role as political corporate parents and not just about those Members with Executive responsibilities?
- Do all members undertake mandatory training on our roles and responsibility as corporate parents upon being elected and and refresh this training during our term of office?
- Do we make use of appropriate opportunities for us to meet with and listen to our children in care?



Chapter 4

Health and Wellbeing of Children in Care

How good is the health and wellbeing of the children in our care?

Introduction

Children in care will often share the same health risks and challenges as their peers. However, in many cases these children and young people will also be in worse health than their contemporaries due to the impact of poverty, neglect and/or abuse prior to their coming into care. This chapter considers the key issues that we know have the most significant impact on the health and wellbeing of our children and young people in care. We also outline what more might be done to further improve health outcomes for those we look after.

Key points and high-level responsibilities
In Section 22 of the Children Act 1989, local authorities' corporate parenting responsibilities extend to the promotion of the physical, emotional and mental health of the children within their care.
Under Regulation 7 of the Care Planning, Placement and Case Review (England) Regulations 2010, local authorities are responsible for making sure that an assessment of the physical, emotional and mental health needs of each child in care is carried out within four weeks of a child coming into care, regardless of where that child lives/is placed.
Local authorities, Clinical Commissioning Groups (CCGs) and NHS England should collaborate to ensure that plans are in place to enable children leaving care to continue to obtain the healthcare they need.
A multi-agency group, including the Police and KCC's Specialist Children's Services Division, has been established to oversee the introduction of a process whereby the NHS number of each child known to social care is linked with their case records on the social care case management system, 'Liberi'. This will allow for the sharing of relevant safeguarding information across professional boundaries when completed.
As political corporate parents we should seek evidence to illustrate how what we are doing as a local authority is having a positive impact upon the lives of our children and young people. We should also enquire about the extent to which the views of our young people and their families/carers are informing the commissioning of health and wellbeing services.

National studies show us that children in care are more likely to have mental health problems than the population at large; they also have a higher incidence of emotional disorders such as anxiety than the general population. To add to this, children in care are more vulnerable to developing substance misuse problems and to engaging in risky behaviours.¹

There are significant numbers of disabled children who are in care, and research indicates that these young people are more likely to stay in the care system longer than other groups. This cohort is therefore likely to need additional and ongoing support from the local authority as their corporate parent in order to be as healthy and happy as possible.

Under Section 22 of the Children Act 1989, local authorities' corporate parenting responsibilities extend to the promotion of the physical, emotional and mental health of the children within their care. Furthermore, local authorities are required to act on any early signs of emerging health issues in order to prevent the onset of illness where possible, and to improve the lifelong health and wellbeing of their children and young people.

Under Regulation 7 of the Care Planning, Placement and Case Review (England) Regulations 2010, local authorities are responsible for making sure that a health assessment of the physical, emotional and mental health needs of each child in care is carried out within four weeks of a child coming into the care system, regardless of where that child lives/is placed. The assessment should also address any behavioural needs that the child or young person may have. In turn, the assessment should inform the development of a robust health plan in partnership with colleagues within the NHS. Each child's health plan should be reviewed (at least once every six months before a child's fifth birthday, and at least once every twelve months after that birthday) by a multi-agency group to ensure it remains accurate and fit for purpose to meet that child's needs.

We draw attention to the fact that the 2015 Department of Health report 'Future in Mind' highlights the vulnerability of children in care and care leavers, and the increased likelihood of their encountering mental health problems. The same report also highlights the importance of ensuring young people have access to Child and Adolescent Mental Health Services. New statutory guidance on the health and

wellbeing of children in care was issued in March 2015. Key elements of the new guidance include:

- articulating the specific and shared responsibilities for the health of children in care in relation to local authorities, CCGs and NHS England – including the role of social workers in promoting health
- ensuring the prominence of health needs in the wider care planning framework
- new guidance on the implementation of health assessments, plans and reviews.

Local authorities, CCGs and NHS England should also collaborate to ensure that plans are in place to enable children leaving care to continue to obtain the healthcare they need.

We note that the National Institute for Health and Care Excellence (NICE) has developed a specific Quality Standard to promote the health and wellbeing of children who are looked after by local authorities (QS31), which includes eight statements of quality. These are:

1.	Warm and nurturing care.
2.	Collaborative working between services and professionals.
3.	Stability and quality of placements.
4.	Support to explore and make sense of identity and relationships.
5.	Support from specialist and dedicated services.
6.	Continuity of services for placements outside the local authority or health boundary.
7.	Support to fulfil potential.
8.	Support to move to independence.

This Standard supports overarching NICE guidance in relation to the children in care and care leaver cohort (PH28), which sets out recommendations that cover local strategy and commissioning; multi-agency working; care planning and placements; and timely access to appropriate health and mental health services. In particular (in addition to the above) the guidance aims to place children in care and young people at the heart of the decision-making process, ie to ensure children in care are able to participate in decisions about their healthcare, and are listened to; to encourage educational achievement; to support the

transition to independent living; and to meet the needs of children who are looked-after, including those from black and minority backgrounds, unaccompanied asylum seekers and those with disabilities.

It is worthy of note that despite the wide-ranging health needs of children in care, local authorities only have a statutory duty to collect data on a small number of health outcomes. These are: development checks (ie the effect of a child's health history on his or her development), immunisations, dental checks and whether a child has had a health assessment.

A review of other local authority Single Inspection Framework inspection reports has also shown that Ofsted wishes to ascertain whether or not care leavers have been provided with a copy of their health information/health histories.

The Kent Picture

Kent's Clinical Commissioning Groups commission local health services for children in care, and the majority of the costs of meeting the physical and mental health needs of these children are met by the NHS. In relation to national statutory indicators, Kent is performing well. Indeed, the latest statutory return data shows us that 90% of Kent's children in care received up-to-date immunisations in the year ending March 2014; 96.4% had also received dental checks and 88% had received their annual health assessment at this time – meaning we compare favourably to our statistical neighbour authorities.

However, we recognise more remains to be done to ensure that all children in care receive statutory services within timescales. It is noteworthy that since early 2014, Kent's figures will have been impacted by the increasing numbers of Unaccompanied Asylum Seeking Children that have come into our care. Access to some health services may also be impacted by the high numbers of Other Local Authority Children (OLA CIC) that are placed within the county. Kent's main Child and Adolescent Mental Health Service is provided by the Sussex Partnership NHS Foundation Trust (though this service is currently in the process of being re-procured). KCC's Health and Overview Scrutiny Committee is presented with regular updates regarding its provision, as is the multi-agency Health Safeguarding Sub Group of the

Kent Safeguarding Children Board, prior to the Executive Group. There is also a dedicated Child and Adolescent Mental Health Service for children in care – though this may be merged into the main service under the new tendering arrangements. In common with the national picture, the provider has struggled to provide our children in care with timely access to CAMHS. We explore these issues in more detail below.

'The Mandate to NHS England, Statutory Guidance on Joint Strategic Needs Assessments and Joint Health and Wellbeing Strategies' and 'The NHS Constitution for England' make clear the responsibilities of CCGs and NHS England to ensure the timely and effective delivery of health services to children in care (and, by extension, to care leavers) via commissioning effective services; delivering through provider organisations; and through individual practitioners providing coordinated care for each child. From a KCC viewpoint, the various Needs Assessments undertaken by our Public Health Division (which provide practitioners with detailed information regarding various areas of need; highlight vulnerable groups; identify unmet need or gaps/inequalities; and present evidence regarding the effectiveness of interventions) and the overarching Kent Joint Strategic Needs Assessment (JSNA) which collates and builds on Needs Assessment information, are vital documents for identifying the health needs and trends upon which KCC and partner agencies' commissioning plans are based. It is acknowledged that the specific needs of children in care, and indeed the child population at large, could have received more prominence in past strategic assessments.

The JSNA, which is in the process of being systematically refreshed, should feature the health needs of children more centrally. Work to support this move is already underway, with the new Kent and Medway Public Health Observatory website ensuring child-centred information is more readily accessible. We are also mindful that plans are also being developed to review the Kent Joint Health and Wellbeing Strategy in the future to address this issue. Other key documentation includes the Kent Emotional Health and Wellbeing Strategy, which sets out the steps we are following in order to improve the emotional wellbeing (including the mental health) of children, young people and their families. Full guidance on the arrangements that should be made for the promotion, assessment and

planning of health care for our children in care is available to social workers via the online policy management system known as Tri-X, KCC's online children's procedures manual.

What are we trying to achieve

Even though there are many different outcomes we wish to attain for our children in care, we have identified four core outcomes that we feel will have the most significant impact on the wellbeing and life chances of these children and young people. These outcomes are essential in order to fulfil KCC's statutory responsibilities and to ensure that our young people have the best start to their independent adult lives, as identified as a key objective in our corporate Strategic Priorities Statement.

Below, we have set out what we aspire to accomplish as good corporate parents and what we want for our young people; this is set against the current national and local picture in relation to each outcome. This comparison often highlights the scale of the challenges we face in working to prepare our young people to lead happy and fulfilling lives – but we will continue to set high expectations for ourselves as corporate parents, and to work to accomplish these aims for our children.

We want to provide all our children in care and care leavers with timely access to clinically effective mental health support when they need it.

Research shows us that child and adolescent mental health problems and psychiatric disorders are surprisingly common, affecting 1 in 8 of all children and young people aged 10-15 years old.² Yet UK epidemiological studies have suggested that fewer than 25% – 35% of those with a diagnosable mental health condition have accessed support.³ Due to their life experiences, children in care are particularly vulnerable to poor mental health. Indeed national figures suggest that in comparison with their peers, children in care are nearly five times more likely to suffer from a mental health disorder.⁴ It is further recognised that delays in identifying and meeting the emotional wellbeing and mental health needs of children and adolescents can have far reaching effects on many aspects of their adult lives.⁵

In Kent, it is estimated that 20,585 children and young people have a mental health disorder - though the exact numbers of children in care with mental health concerns is at present unknown (see section below on collecting comprehensive information to inform our commissioning process for more details).⁶ These children will present with a range of conditions from Attention Deficit Hyperactivity Disorder and anxiety disorders to autism, behavioural problems and substance abuse issues. All of these are likely to require some form of intervention or specialist support in order for the child or young people to cope and, dependant on the condition, to recover. When we talk about CAMHS, we are often referring to the higher 'tiers' of specialist support offered by NHS organisations such as the Sussex Partnership Trust, which deals with children who exhibit severe and complex mental health needs requiring a multi-disciplinary response.

However, many important mental health services are provided via targeted interventions through youth counselling and primary mental health workers, who deal with children exhibiting more moderate symptoms of ill health. Many more services are provided in universal settings such as in Early Years services and via school nurses and teachers. In other words, whilst it is important that KCC provides funding to support specialist CAMH services, we also need to work effectively across all our divisions, as well as with our partner public sector agencies, to provide the right level of mental health services to meet the needs of our children and to provide effective early help to prevent their needs from escalating.

Case study

The NSPCC has recently secured funding to introduce a New Orleans Intervention Model (NIM) pilot in South London, with the aim of transforming the delivery and joint commissioning of children's social care and CAMHS teams working with children aged 0-5 who are in foster care due to maltreatment. The NIM is a model first developed in the USA to help social workers and the judiciary decide whether a child should stay with their birth family or enter care permanently. This pilot aims to gather evidence to assess whether use of the NIM is associated with positive child development outcomes. The pilot will be evaluated through a methodology developed by Kings College London, incorporating feedback received from children and families, frontline professionals and judges. It is designed to focus on the experiences of the child as he/she comes into care and their perceptions and experiences of the NIM intervention. It is expected that the NIM may improve children's care journeys and their symptoms of mental health problems. Lessons learnt from this study could be used to further improve Kent's commissioned services, and to strengthen the impact of our local Children and Adolescent Mental Health Services.

All Kent County Council's children in care have up-to-date health assessments, and this information is used to develop comprehensive plans that are effectively designed to meet their needs:

Accurate and current personal health information is important for the wellbeing of children both during their time in care and afterwards. As previously outlined, every child in care should have an assessment of their state of health soon after entering the care system and this evaluation should incorporate details of any health care needs the child may have (including physical, emotional and mental health needs). The assessment should be underpinned by an up-to-date health plan, which addresses how the child's needs are going to be/are being met. The health plan will normally be incorporated into the child's care plan to facilitate better case planning and provision. It is the duty of the responsible local authority to take all reasonable steps to ensure that each child within their care is provided with appropriate health care

services in accordance with their health plan, including access to medical and dental treatment, and that children are provided with advice and guidance on their health, personal care and health promotion issues. As a local authority, we remain committed to this duty.

We aspire to collect comprehensive and current information about the health needs of our children in care, which we will use to inform our commissioning processes in line with our commitment to continuous learning and development:

At the Committee evidence sessions, it was acknowledged that there is a paucity of up-to-date epidemiological data on the rates and profiles of physical and mental health problems in children and young people at the current time.⁷ However, plans are in place to collate information obtained from across KCC and our partner agencies in order to create a more comprehensive and 'joined up' picture of the health needs of this cohort that will allow practitioners to work with them to best effect. This will, in turn, be used to commission more tailored services in order to better meet the needs of Kent's children and young people. Alongside this work, we want to ensure that feedback from our children and young people is effectively captured so that they can actively participate in decisions about their healthcare, and so that their wishes and feelings can influence and improve service development, including the commissioning of our services.

We seek to ensure that our children are given the right information, at the right time and in the right way to empower them to make positive choices regarding their emotional, physical, mental and sexual health:

One of the most important responsibilities that local authorities have as corporate parents is to prepare our children to live independently; this requires that they have developed resilience and fortitude, as well as a good breadth of the practical knowledge and skills which all of us require to lead happy and fulfilling lives. A cornerstone of this learning is the ability to make the right choices when it comes to our health. KCC strives to ensure that our children receive the right information, training and signposting, as well as support, so that they can make informed choices about their health and wellbeing both whilst in local authority care and once they have become care leavers.

Though young people have told us that they haven't always received this support in the past, we have strived, and will continue to strive, to provide this to them in the right way, and at the right time to meet their needs.

"I have bad mental health and can't go to work or college due to anxiety. But I've had no help."

Voice of a young person, 'State of the Nation' Survey

What are we doing at present

The section below sets out what KCC is currently doing to achieve our core outcomes in relation to the health and wellbeing of our children in care.

Access to CAMHS

Since 2010, KCC has introduced a county-wide Emotional Wellbeing Service for children and young people aged 4-18. This has enabled us to respond earlier to emerging emotional (as well as mental) health needs and to deliver complementary support to families and frontline professionals. We have also commissioned a single service and a service provider to deliver tier 2 and tier 3 mental health services, offering a more unified and consistent approach to provision across the county.

There has been a significant reduction in waiting times for access to mental health services over this same period. At the present time, across Kent the average waiting time from referral to assessment is now 10 weeks, and from referral to treatment is 16 weeks.⁸ This is set against a dramatic increase in the number of referrals Kent has been receiving over recent years, particularly in relation to demand for emergency and out-of-hours referrals (a pattern we can see mirrored at a national level). However, we recognise that more needs to be done to ensure that all children and young people are able to access support at the time they need it, and we are working towards this goal – with a particular focus on reducing delays incurred by some groups of children needing to access specialist support such as children on the autistic spectrum.

KCC has also taken steps to ensure that we are appropriately scrutinising the overall effectiveness of service delivery, and are taking action to rectify any areas of weakness. For instance, in early 2014, Kent's Health Overview and Scrutiny Committee (HOSC) raised concerns regarding the performance of CAMHS across Kent. This prompted a review of provision, which concluded there were disparities between the ways in which different professionals approached building resilience in children and young people. The review also found there were too many different points of access to services; that services were in some instances disjointed; that thresholds were being applied inconsistently; and there was too much of a focus on tiers of provision rather than the needs of service users. These findings mirror the issues facing CAMHS across the country. Indeed, a national task group set up in 2014 by Norman Lamb, the then Minister for Care and Support, reported similar concerns to those found in this county. In response to the internal review, it was agreed there needed to be a new, 'whole-system' approach to children's mental health in Kent which addressed the promotion of wellbeing, appropriate identification of need and earlier intervention where appropriate.

Over the past year a lot of work has been done to strengthen and improve children's emotional wellbeing services in Kent. The Emotional Wellbeing Strategy has been developed, in consultation with children, young people and their families. Agreement has now been reached to extend two major children and young people's contracts, to allow time for Health and KCC to develop a major transformation programme for children and young people's emotional wellbeing services across the county.

The new model will draw together the current services across KCC and the NHS, with the aim of delivering a whole-system approach to emotional wellbeing, in which there is: a Single Point of Access to provision to ensure a clear 'seamless' pathway to support ranging from universal 'Early Help' through to highly specialist care; work with schools to improve resilience amongst pupils; an upskilling of the workforce to recognise and better manage mental health concerns; a reduction of transfers between services and measures to ensure a smoother transition between child and adult mental health services for the 14-25s; and improved specialist support for long term mental health problems and during crisis. Work is currently taking place

to implement the Delivery Plan and to retender contracts, and longer-term work on future commissioning plans has also started. However, it will be some time before the new approach has been implemented and the improvements embedded.

The high numbers of Unaccompanied Asylum Seeking Children that have recently come to Kent have placed additional strain on CAMH services. Due to their past experiences, many UASC children in care may have different needs to the majority of Kent's citizen children – particularly in relation to their mental health and wellbeing. Public Health has undertaken some early work to assess the particular needs of this cohort, but more work may need to be done to ensure the correct provision is in place to meet the needs of these individuals.

Kent's Children in Care Needs Assessment has shown us that there are an increasing number of care leavers who have mental health issues – primarily conduct disorders. Though this is recognised, more work may need to be done to ensure the correct provision is in place to meet the needs of this cohort. Likewise, the Needs Assessment highlighted that there may be a requirement for more CAMHS provision for disabled children, and for children living in residential homes who may have poor mental health (often linked to severe behavioural difficulties). Each of these issues will be considered as part of the newly-commissioned provision.

KCC has committed to embedding mental health professionals into our Early Help and Preventative Services Division to ensure swift and early access to support for service users, as well as professional advice, guidance and support for workers who are supporting families where there are emotional health and wellbeing concerns.

Case study

Wigan Council and CCG are in the process of establishing a combined social care and CAMHS team to provide crisis and step-down support to young people in, or at risk of, entering care with significant mental health problems. This project team is working alongside a repurposed residential home (providing respite care, short breaks and short-term placements) and a group of specialist foster carers in order to provide more intensive support for those children who need it, via respite and placement offers which will last up to a year.

This new model of intervention was launched in August 2015 and will continue until January 2016, at which time the study will be evaluated to determine the effectiveness of the intervention, and whether the pilot warrants wider expansion. Findings from the evaluation eg feedback from young people using the service and focus groups with frontline clinical staff will be used to assess the effectiveness of implementation as well as how to refine the model to better meet the needs of young people to prevent crisis and placement breakdown. Service users will be consulted on how to conduct and disseminate the evaluation to ensure that it is meaningful to those at the heart of the service.

KCC will monitor the lessons learnt from this pilot to see if learning could be used to inform delivery of services in Kent.

Current Health Assessments and Plans

As previously outlined, KCC is performing well in relation to our national statutory indicators; high numbers of our children are receiving health assessments and dental checks within timescales and are up-to-date with their immunisations. Although our aspiration is that all our children receive the right assessments and in turn access the right services to improve their health and wellbeing, ensuring that reviews are undertaken for each and every child within our care is extremely challenging. Indeed though children in any situation may find health checks uncomfortable, for children in care - many of whom have been abused - they may seem particularly intrusive. The British Association for Fostering and Adoption has

suggested that improving the proportion of children in care undertaking annual checks can prove difficult 'because young people in care don't want to feel stigmatised by health checks, which they have the right to refuse.'⁹

This issue is backed up by our own data, as we see that Kent children in care aged 5-10 years old have the highest percentage of health and development assessments completed within the required timescales (97%) whilst young people aged 16 and over have the lowest percentage completed within the required timescales (80%).¹⁰ Moreover, our young people have told us that they do not like health assessments since they cannot see the benefit 'as they are not ill' and their peers who are not in care do not have to attend.¹¹ Incentive schemes designed to encourage young people in this age group to attend assessments have met with limited success in the past eg open 'health days' with vouchers offered to attendees. Going forwards, KCC may wish to work with our health partners to establish new and innovative ways to engage our young people with the health assessment process eg conducting consultations via telephone or Skype rather than in person, or by sending additional health information/ messages to young people via post, email or text. Finally, it is essential that all staff working with young people receive the right training to ensure that they engage young people in the right way in relation to their health and wellbeing. Indeed, recent Government research has highlighted the importance of ensuring that assessments are carried out by staff who are trained to recognise the importance of undertaking sensitive enquiries about sexual health or physical and mental health issues which may relate to abuse.¹² This is all the more important given the potential for child sexual exploitation, and the warning signs of abuse which can be exposed through such assessments.

Though local authorities are required to report to Government on the numbers of health assessments undertaken, statutory return information gives no indication of the quality of the assessments that are being carried out. Furthermore, local authorities do not need to report on young people's health outcomes eg drinking, smoking, or follow up to establish whether any change has taken place post-intervention. KCC is committed to working closely with our partner agencies to ensure that the assessments of our children's health and wellbeing are robust and of a good standard, and that this information is transferred into care

plans as appropriate to ensure that the services provided best meet each child's needs.¹³ It is important for us to collate and understand such information, to ensure that we are making a difference to the lives of the children we are working with.

There is evidence that health assessments make a difference to the lives of children and young people; however, if assessments are performed in isolation the benefits are significantly reduced. If they are completed as part of a cycle of continuous engagement (eg health histories for care leavers, training and support to other health professionals and foster parents) with the children and their carers, they can be very effective. KCC will continue to work with our Health colleagues to involve them in this work, to get a comprehensive understanding of the needs of each individual child and to ensure provision is joined up and consistent.

Fit-for purpose data

It is acknowledged that there is an issue regarding a lack of up-to-date data on the rates and profiles of mental health problems in Kent children and young people. Whilst individual health assessments are completed for children in care, the information obtained from each assessment is not collated to achieve a wider strategic overview of the health needs of this cohort. Indeed, there are particularly acute limitations in relation to the data around some groups of children, for instance UASC. As a result, Kent's Public Health Division does not have a detailed understanding of the health of our children in care and care leaver population. Instead, we use national data which is then related back to Kent to address the needs of our children eg via the Joint Strategic Needs Assessment. Though this countrywide data does provide us with some very valuable information, there is a risk that in the absence of specific, local data KCC and our partner agencies may not be commissioning appropriate services (eg speech and language therapies, support and advice tailored to help young people dealing with substance misuse during pregnancy, etc). That being the case, we also have no reason to believe that the health care needs of Kent's children in care are different from those of children across in the rest of the country – though we also have no means of determining the areas of Kent where children with specific health needs are located.

In order to address this issue, a multi-agency group including the Police and KCC's children's social care has been established to oversee the introduction of a process whereby the NHS number of each child is linked with their case records on the social care case management system, Liberi. This will allow for the sharing of relevant safeguarding information across professional boundaries eg data collected by GPs, hospitals and community services, without breaching data protection laws. It is also anticipated that this will provide us with a comprehensive picture of the health of Kent's children in care. The new system is scheduled to go live in the near future, though it may take some time for it to become embedded before we will be able to collate the large scale data sets required.

In October 2015, the Health Visiting and the Family Nurse Partnership Programme for young parents was transferred across to Kent Public Health. This transfer will enable KCC to obtain quicker access to a much wider set of data that was previously held by NHS England. This data will be shared across the multiagency working group, to facilitate the establishment of a better picture of the needs of children and young people. This development is worthy of particular note in this context, as a significant proportion of young parents involved in the Family Nurse Partnership may be children in care.¹⁴

Children in care receive the right information regarding their emotional, physical, mental and sexual health

Kent Cares Town, the council's dedicated website for children and young people and those leaving the care of the authority, has an online virtual health centre. This service offers our children information which is free to access at any time of the day. The facts provided include advice on Virtual School Kent specialist nurses, sex and relationships, alcohol and drug abuse, getting fit and the intricacies of a health assessment.

Though there is no specific service designed to provide sexual health advice and support to children in care outside of cyberspace, Kent Public Health commissions standard genitourinary medicine (GUM), outreach health promotion and sexual health services for all Kent children. The Division has recently developed a mobile phone application which helps young people to access emergency contraception.

Public Health has further improved access to chlamydia testing through user-friendly testing kits available from pharmacies. To add to this, children receive relationship education and sexual health information via Personal, Social and Health Education (PSHE) classes in school. The exact numbers of children who access services is at present unknown due to gaps in Kent's datasets. At present, this means there is a risk we may not be targeting our resources effectively eg via mechanisms such as the recently developed Teenage Pregnancy Strategy.

We recognise that we may need to find new ways to work together collaboratively across KCC and with our partner agencies, to provide tailored training that meets the health needs of young people as they leave care. We also want to empower them to make positive health choices eg upskilling young people to make healthy dietary selections.

"I would have liked to have seen more information about health issues as well, especially on healthy eating. For a lot of children in care, particularly with foster carers, there is an issue with the quality of food provided. Access to cooking courses and nutrition advice would help both carers and those being cared for."

Care Leaver, aged 20

Our Early Help and Preventative Services Division has pledged to work with Public Health and schools to promote healthy lifestyles in order to reduce the number of children who are overweight or miss school because of health needs. EH&PS also provides young people with a range of therapeutic interventions, taught programmes and mentoring designed to develop self-esteem and resilience. Children in care can access Early Help services in the same way as any other Kent child – via a Kent Family Support Framework referral or through open access Children's Centres or Youth Hubs.

What more could be done?

As county councillors, members have a crucial role in providing strategic oversight to ensure the council is fulfilling its statutory responsibilities in relation to the health and wellbeing of children in care and care leavers. Members should also offer appropriate and timely challenge to ensure that the needs of our children and young people are being met. As corporate parents, members need to be assured that we are all working collectively to achieve the best outcomes for our children, working with them to build the resilience which will enable them to live successfully as independent adults and as future parents that can make a positive contribution to the communities in which they live.

In order to do this, and in light of the above information, it is suggested that members monitor and oversee progress in relation to the following areas of activity:

- request regular progress reports regarding the implementation of the new 'whole system' Child and Adolescent Mental Health services, CAHM services, including evidence of the impact it is having on the lives of children and young people – particularly the support offered to care leavers, disabled children and UASC children in care
- maintain oversight of developments in relation to the implementation of the new collated database, which will record high level information about the health needs of our children in care
- ensure we are satisfied that the revised JSNA takes full account of the needs of Kent's children and young people
- ask for information to show that KCC staff working with children in care who are delivering/designing health services have the correct systems and processes in place to track and focus on meeting the needs of each child's physical, emotional and mental health requirements without making them feel different; ensuring that our children are able to access universal services as well as targeted and specialist services where necessary
- ensure that the voice of children and young people is informing the design and delivery of health services for this cohort – particularly in relation to building resilience and preparing children for adult life
- request information to show what support is being provided to support the health needs of our disabled children and young people
- ask for an overview of what support is given to foster carers and young people themselves about promoting healthy lifestyles and how this work is scheduled to progress over coming years

Recommendations

Informed by the evidence and the issues that we considered, we propose the following recommendations for the county council to endorse:

Recommendation

KCC should ensure work is undertaken to improve the high level information we collect regarding our children in care and care leavers and their health needs. The result of this work should be fully reflected in the revised Joint Strategic Needs Assessment and future commissioning arrangements.

Recommendation

KCC and its commissioning partners produce regular progress reports to the Health Overview and Scrutiny Committee regarding the Child and Adolescent Mental Health services, including evidence of the impact in relation to children in care – particularly the support offered to care leavers, disabled children, UASC and adopted children. Updates are to include key performance information, including waiting times and any geographical variances in access to services.

Questions members may wish to ask as corporate parents

There are a number of key questions which we may wish to ask to satisfy ourselves that we are fulfilling our corporate parenting responsibilities in relation to the health and wellbeing of our children in care:

- what proportion of children's health assessments and dental checks are carried out on time? What access do children in care and care leavers have, as an at-risk group, to services to help with substance misuse, sexual health and teenage pregnancy?
- who is the designated doctor and nurse for children in care, and how do they work to ensure KCC is working with the NHS to best effect in order to meet the needs of our children?
- what do children in care and young people themselves say about their health needs and priorities and how well they are met? Is this evidence being used to inform the commissioning of services? Does the local Healthwatch provide support to champion the voices of children in care and care leavers as part of its wider work across local health services?



Chapter 5

Education and Employment of Children in our Care

Accessing education, doing well at school, and pathways to qualifications and employment

Introduction

As the corporate parents of children in care we have a duty to promote their educational achievements. This duty is enshrined in the Children Act 1989 which also requires corporate parents to give particular attention to the impact of any decision they make regarding a child's care on their education.

This chapter looks at the important issues that have the most significant impact on the progress and achievements of our children in care. As in the preceding chapter we also outline what more could be done to further improve educational outcomes for those we look after.

Key points and high-level responsibilities

Education Matters in Care (2012) an independent cross-party inquiry into the educational attainment of children in care in England, provides perhaps the best summary of the most salient learning from the approaches taken to date:

- planning care and education provision together. Both are intrinsically linked and failure in one can lead to the breakdown of the other
- stability and continuity of provision of both education and care
- managing all transitions well
- making sure all professionals in a child's life value, promote and have high aspirations for their education.

To help local authorities achieve this, the Children and Families Act 2014 amended the Children Act 1989 to require local authorities in England to appoint a Virtual School head teacher. This role focuses on discharging the local authority's duty to promote the educational achievement of its children in care, wherever they live or are educated. The purpose of this measure is to ensure that children in care receive a high-quality education as a foundation for improving their lives.

The pupil premium, introduced in 2011 to support all state schools in raising the attainment of disadvantaged children, was raised in 2014 with a further allocation specifically targeted at children in care. This measure can be seen as matching, within the school environment, the statutory measures taken to champion the education of children in care within the LA with the aim of providing wraparound support. The raising of the age of participation and the Staying Put Guidance (2013) consolidates existing good practice of continuing to support children beyond the age of 16, and formally extends the reach of corporate parenting into supporting children in care into further and higher education and work.

In 2014 the statutory guidance "Promoting the education of looked after children" was published which provides an overarching framework, consolidating all the guidance to date and laying out the responsibilities of the LA in supporting the educational achievement of children in care.

For many children who are in local authority care, it is important to understand that the events in their lives that necessitated their journey into care may have already had a negative impact on their educational progress and created barriers to accessing learning. Once in care, even though they may be safe from harm, children have to cope with the changes care brings. At this time children may be dealing with issues of loss and separation, as well as adjusting to life in a foster family and may be unable to achieve the same focus on their education as their peers. This highlights the importance of children in care to gaining timely access to services outside the education arena such as CAMHS that may support their ability to engage with learning. In response to the challenges faced by children in care, successive governments have established new measures to support and improve their educational attainment. Despite these concerted attempts to improve their educational progress, many children in care still achieve less than their peers.

Nationally, the vulnerability of education and employment outcomes for children in care is well documented. In 2012-13 the national gap between children in care and their peers in the attainment of 5 or more GCSEs at grades A*-C, including mathematics and English, was about 43 percentage points.¹ Gaps in attainment, even in the early years, can continue to have an impact throughout their education and also lead to problems in later life. In 2013, 34% of all care leavers at age 19 were not in education, employment or training, compared to 15.5% of 18-year-olds in the general population. Academics at the University of York estimated the lifetime cost of a young person being NEET at about £56,000.² According to the LGA, if young people in care followed the same paths as their peers into further education, training and employment, it could save the economy £50 million every year.^{3,4} Care leavers are over-represented in prisons and amongst the unemployed. This suggests that the experience of being in care, and leaving care, still does not prepare them adequately for adult life.

The Kent Picture

How well are our children in care doing?

In Kent our Virtual School (VSK) for children in care was established in September 2010. It acts as a local authority champion to bring about improvements in the education of children in care and young care leavers and to promote their educational achievement as if they were in a single school. The service includes professionals from education, social care, health and youth work, some of whom have themselves experienced being in care, and works in partnership with universal services such as schools, colleges and the health services to deliver the right support for children in care at the right time. To achieve this, VSK develops close working relationships with the child in care, their school or education setting, their foster carers and other professionals who work with the child.

In January 2015 of this year VSK extended their service to reflect the national changes to meet the educational needs of children in care aged over 16 and care leavers. This expanded remit now requires partnerships, externally with sixth forms, colleges, training providers, CXK and employers and internally with the Skills and Employability.

The main purpose of this expansion is to better support young people, enabling them to make more informed choices as to their options at 16. It is envisaged that this will lead to fewer young children in care disengaging from education and training, contribute to more positive onward destinations and ultimately prevent children in care or care leavers from becoming NEET.

VSK administers the Pupil Premium Grant (Pupil Premium Plus) to local schools for children in care. Schools identify the additional needs of our children in care in terms of support, interventions, training or resources and apply for additional funding. A small amount of the grant is used to provide countywide literacy development projects and pilots whilst the remaining 96% is allocated directly to local schools. At a strategic level the service provides expert advice to assist members and senior officers in fulfilling their responsibilities as corporate parents for these children and young people. The virtual school head teacher reports regularly to the Corporate Parenting Panel, Cabinet

Committee and Cabinet on the educational progress of children in care in Kent and back to central government.

The Department of Education requires KCC to return statistical information on the educational progress of children in care on an annual basis. These returns focus on the progress of children who have been in care for 12 months or more since the 31st March in the year before they have been assessed or taken examinations. This approach is taken in order to establish the impact of being in care over a clearly identified period. In the sections that follow these children are referred to as “eligible children”.

Primary age children

In the summer of 2015 all children in Kent in Year 2 (aged 6 or 7) were assessed at the end of Key Stage 1 in reading, writing, and mathematics. Within this group of children there were 41 who were in our care. These 41 children did well, achieving higher results than last year’s cohort and achieving or exceeding national targets for children in care in reading and writing and only 1% point below in Mathematics. Perhaps most importantly, the gap between how well our children in care do against all other children in Kent has narrowed to at most only 15% in any subject.⁵

This year 77 Kent children in care completed their primary education and moved on to secondary school. These children did consistently better than their national in-care peers and exceeded national targets in all three of the key areas: mathematics, reading and writing and all areas combined. Again, the gap between what our children in care achieve and their Kent counterparts has narrowed by 7.2%.⁶

Children at secondary school

The 138 children in care who took their GCSE in 2015 attained slightly better results than their national in-care peers. However, it should be noted that nationally the number of children who obtained 5 A*- Cs including English and maths is very low at 12.3 % (all England 12 %). Children in this cohort (2014) have been disproportionately affected by national changes to examinations at 16, specifically the downgrading of vocational qualifications and their GCSE equivalents and the shift in weighting towards examinations rather than coursework, especially in English

GCSE. The gap between what our children in care achieve against the wider Kent population continues to narrow but remains significant at 43% (provisional figure).

It is important to note that each year, Kent’s cohort of children in care taking GCSEs regularly includes some Unaccompanied Asylum Seeking Children. The national average percentage of UASC within the children in care cohort is 3%. In Kent it is regularly higher than this. The variance in the number of UASC will have a direct impact on the GCSE results as some of these young people may have been in the country for just over a year at the time of these examinations and may not be able to meet this academic benchmark at this time due to language acquisition difficulties.

As of March 2014 there were 491 16 to 18-year-olds in care in Kent. Two hundred of these young people are in a further education setting and monitoring is taking place to establish the educational destination of the entire whole cohort. The figure for 2014/15 was not available at the time of writing.

What are we trying to achieve?

A good education is an essential element of growing into a successful and healthy adult. As corporate parents we want our children to do well in school and in any further learning setting they chose.

As corporate parents our aspirations for the education of children in care are cited in a range of strategic documents. In analysing these ambitions it is important to recognise that children in care should be seen not only as a group in need of specific and focused support, but quite simply as children living in Kent. In light of this, it is encouraging that KCC’s Education and Young Peoples Services Vision and Priorities for Improvement 2015 -18 sets the scene for improving the educational outcomes for children in care, identifying this as a key priority and reinforcing that narrowing gaps in educational achievement between the total population of Kent children is a key priority.⁷ This is important not just in recognising children in care as children first but also in setting the overarching partnership landscape (schools, colleges and other education settings) that is crucial in improving the educational achievement for our children in care. Understanding how our strategic

priorities to support the education of children in care fit together and the services and systems they relate to is an important element of corporate parenting.

From the range of priorities shown in this strategy, three themes have been identified to illustrate what we are doing in Kent to improve the educational attainment of children in care. These themes are closely linked to the key issues that concern all parents:

- will my child get the school place they need?
- how well is my child doing?
- what support can my child receive if things go wrong at school?

“The majority of children feel they can speak to a caring adult if they are unhappy or have a problem, usually this is a carer or parent, but teachers are also important.”⁸

Availability of school placements

71% of Kent children and young people in care stated that they had a choice about which school they wanted to go to in 2014.⁹

Our aspiration for Kent children is that:

Kent should be a place where all children learn and develop well from the earliest years so that they are ready to succeed at school, have excellent foundations for learning and are equipped well for achievement in life, no matter what their background.¹⁰

We aspire for all children to go to a good school, and for the most vulnerable of our children this is a vital first step to improving their educational outcomes. Children in care need the support of excellent education at whatever age they enter care. This is acknowledged by the recent government guidance on the education of children in care:

“Schools judged by Ofsted to be ‘good’ or ‘outstanding’ should be prioritised for looked after children in need of a new school. Unless there are exceptional evidence-based reasons, looked after children should never be placed in a school judged by Ofsted to be ‘inadequate’.”¹¹

In Kent our schools admissions criteria gives our children in care the highest priority:

Primary Schools

Kent County Council will then allocate a place (where it is the admission authority for the school) or contact the school directly and seek a place where it is not. Where a school refuses to admit the child, Kent County Council, as corporate parent, will decide whether to direct the school in question or consider if other education provision may be in the better interest of the child.¹²

Secondary Schools

Children in care, previously children in care (according to the School Admissions Code paragraph 1.7, previously looked after children are children who were looked after, but ceased to be so because they were adopted, or became subject to a residence order or special guardianship order) and those allocated a place at the school in accordance with a Fair Access Protocol will take precedence over others on a waiting list.¹³

Despite this, evidence to the Committee has illustrated that for some children getting a place at the right school can be challenging.¹⁴ When finding a school place for a child in care there are a number of factors to be taken into account.

Foster placements and school placements should always be planned together. The Care Planning Regulations 2015 requires that children in care, except where there are specific reasons why this is not appropriate, are accommodated as close as possible to their natural parents and wherever possible staying at the same school. For those children who, for whatever reason, need to move school this new setting will need to meet their individual needs and be as close as possible to their foster home. Meeting these requirements can be complex and may be especially so if the child is from an area of the county that has a high concentration of children in care or there are existing pressures on local schools.

Despite the enormous pressures on school places in some areas of the county, KCC has rarely had to formally direct a maintained school to admit a Kent child in care nor, in the case of an Academy, request the Secretary of State for Education to do so. This is testimony to the strength of our relationships with local schools, and where a school is resistant to admitting a child in care these relationships are central in negotiating a place for a child.

It is well documented that the east of the county from Swale to Shepway faces particular social economic challenges. Increasingly there are additional pressures, especially the coastal areas from the number of other local authority children placed in these areas. This pressure is felt acutely by all universal services and especially so by some local schools which, despite support from the KCC, struggle to meet the increasingly complex needs of the children that they serve. For a small minority of our children in care living in these areas of high need, it may be in their best interests to be educated elsewhere and for those with the most challenging needs alternative settings such as boarding school may be the most appropriate placement.

Analysing the demography of Kent, the placement of other local authority children and the family home location of our own children will help us to better understand key pressure points for matching foster and school placements. Such an approach could enhance our sufficiency planning and may help us in providing support to local schools to meet local need.¹⁵ Support to schools could come not only from the core resources available to all schools and pupils but also through creative use of the pupil premium across groups of schools in a geographical area of targeting particular needs. This type of approach is already in place in Thanet¹⁶ and through the Canterbury Coastal Alliance could potentially be extended to other areas.

KCC has no control over the Pupil Premium Allocation of other local authorities but there may be scope for collaborative working to facilitate creative use of this funding where there are high numbers of children in care in a particular school (or groups of schools) in specific geographical areas.

The pressures placed on local public services from the proliferation of independent fostering agencies and children's homes in the east of the county and the impact

this can have on services for Kent children are well rehearsed. As corporate parents we need to continue to robustly champion the needs of our own children in care in locally. We also need to work at the national level to heighten awareness of both the pressure of other LA children on Kent resources and, equally importantly, highlight the vulnerability of those children that may be placed far from home.

Improving attainment at Key Stage 4 and beyond

Children in care, like all other children, progress in education at different speeds. As has been evidenced in earlier sections, our children in care are doing well in comparison with their peers nationally, and the gap between their achievements and those of other children in Kent is narrowing.

Children entering care in their mid or late teens are likely to do less well than their peers. The pressures that have resulted in them being in care may be long term and, as a result, they may have entrenched difficulties and be disconnected from education and other services that could support them to re-engage. Such children may do less well in the public examination system and for children who do not do well at GCSE there may be challenges in finding a suitable school, college place or training placement. Unaccompanied asylum seeking children are disproportionately affected by this issue as the courses they may wish to attend are often heavily oversubscribed and limited to yearly commencement. The lack of rolling courses with staggered start dates is particularly problematic for UASC, as they arrive in the UK throughout the year and not necessarily in time to apply for a college course in September. For some UASC this can result in very long periods out of education and this lack of access - especially to Education as a Second Language (EASL) courses - may consequently affect their ability to communicate and settle in their new communities.

Evidence shows that not being in education, employment or being (NEET) between the ages of 16 and 18 is a major predictor of later unemployment, lower job security and lower rates of pay. National research by the University of York estimating the lifetime cost of being NEET¹⁷ suggests that there is a reasonable expectation that one in six

young people who are NEET will never secure longterm employment. Children in care who are also NEET are therefore further at risk of poor outcomes. In Kent, as of August 2015, 38.7%¹⁸ of our care leavers aged 16-24 were in employment education or training. We acknowledge that monitoring the education, employment, and training destinations of the remaining 61.3% of care leavers is a major priority. Further work has been commissioned on this activity and this will be an area which will be of particular interest to us as corporate parents.

What support is available to children in care if things go wrong at school?

“Being in care would be better for me if... I could change school. I got 1 to 1 tutoring at school. People understood me at school.”¹⁹

Being in school is an essential element of achieving good educational outcomes. Gaps in a child’s education, however short, can have a major impact on learning and can have a legacy that lasts throughout a child’s educational career.

Since the inception of the Virtual School Kent, permanent exclusion and absenteeism has reduced considerably (by 42% and 64% respectively).²⁰ The level of attendance and exclusion has remained stable over the past two years. In Kent we want all our children in care to be in school.

As the table below illustrates, we are working positively towards this aim. Our children in care are supported to attend school and VSK continues to ensure that this positive trend continues.

A recent survey of children in care found that most children in care feel supported by their teachers.²⁰ Indeed, one witness pointed out that for some children in care, schools are the only stable element in their lives.²¹ KCC has a role in ensuring that these children receive adequate support in their schools. For instance, VSK provides training to teachers to help them to identify and manage issues faced by children and young people in care.²²

Nonetheless, some evidence from children in care suggests that teachers do not always fully appreciate their particular needs and feelings.²³ For instance, after consulting children in care about their experiences of having a corporate parent, the National Children’s Bureau reported that the extra attention that they sometimes received from their teachers made them “stand out” and feel uncomfortable.²⁴

The VSK provides comprehensive information to schools regarding the most appropriate approaches to support children in care. The educational needs of individual children are established via their Personal Education Plan (PEP) and this supports both the child and school in leveraging the best support and most sensitive support to meet the child’s needs. In Kent the PEP transferred from a paper based to an electronic system in 2012. This application is a dynamic tool that helps young people

5Yr Attendance And Exclusion Trend Breakdown²⁵

Academic Year	2009/10	2010/11	2011/12	2012/13	2013/14	2014/15
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%	*9.5%
% Permanent Exclusion (PEX)	1%	0.9%	0.54%	0.39%	0.39%	0.36%

set their own learning targets, monitors their progress and engages all the adults significant to their education in supporting them to access the best educational opportunities available to them.

For children who disengaged with education for whatever reason, creative and alternative solutions to their needs may be the best method of raising their attainment and their aspirations. The use of the pupil premium can be critical in supporting such children, as the following case study illustrates.

Example of good practice

Roger is in year 11. He lives at home with his father, who has severe learning difficulties, his twin sister, who attends a special school and his younger sister. The family live in a supported living environment where they have 24-hour carers on call who helped Dad to manage day-to-day living and family life. All the children have been in care since 2007 when their parents became unable to meet their needs. At this time Mum left the family and moved away.

At Roger's PEP meeting in early September it was identified that he:

- lacks motivation
- is not attending revision classes
- has not made use of extra help sessions that have been provided
- is likely to achieve Gs across the board in GCSEs
- is not sure what he would like to do in further education. He has thought about being a police officer but is not sure how to achieve this or what he would need to get there.

Dad finds it tricky to motivate or understand what Roger's needs are. Roger's social worker is keen to work with the school and VSK to ensure good outcomes. At the PEP meeting it is agreed that the Pupil Premium will fund 1:1 maths and English tutoring. Roger agrees to attend these sessions and someone from the pastoral team will make sure that he attends tutoring. The plan will be reviewed in December.

By early October it becomes clear that the plan is not working, as Roger won't attend the 1:1 sessions. It is agreed with Roger that intensive mentoring would be a better solution. The mentor begins intensive work in January. A key worker system, homework support and 1:1 English and maths tutoring is put in place at a total pupil premium spend of £4,528.

Roger achieves a C in maths GCSE, is accepted on a public services course at the local college, secures a summer holiday job and is working with VSK and the school around college transition. Progress tracking indicates that Roger will get Cs in all of his GCSEs and he is motivated and aspirational.

Like any good parent, corporate parents should act in the best interests of their children and ensure the best for them now and in the future. This means being powerful advocates for children in their care, so that they are given opportunities to develop the skills and confidence for successful and fulfilling lives.¹⁸ This commitment should include promoting and safeguarding their education, taking an interest in what they do in their leisure time, celebrating their culture and encouraging and praising their achievements.¹⁹

As corporate parents, we need to know what our children in care say about their education and to know what their aspirations are. We need to work with our officers to help support our young people to achieve.

In Kent we have been formally celebrating the achievements of children in care for the last five years. The VSK awards ceremonies recognise both the education and wider achievements of children in care by focusing on the following categories:

- outstanding or greatly improved academic achievement
- outstanding or greatly improved engagement in learning
- outstanding or greatly improved attitude toward learning
- outstanding or greatly improved attendance
- outstanding contribution to the school

- outstanding contribution to the community
- wider achievements of note

These events are a vehicle for us as corporate parents to recognise what our children in care have achieved and to provide an opportunity for positive engagement with our children in care. They present an opportunity for members to engage with children's education in the same way that a natural parent or a foster parent acknowledges, celebrates and engages with a child's achievement through in-school events such as parent's evenings, sports or speech days. These events are important to our children in care and to us as corporate parents.

"I would like to be a paramedic or a policeman."

"I want to work for Apple."

"When I grow up I wouldn't want to be a scrounger. I've got two jobs at the moment – I help an elderly neighbour and I do a paper round." *Feedback from Children in Care*

What more could be done?

We take our responsibility as good and effective corporate parents seriously in order to meet the needs of children in care, to promote permanence and stability and to enable children in care to enjoy the same outcomes in education and health that we would want for any child.

In Kent we are proud of the achievement of our children in care and actively celebrate their successes but we are aware that only a limited number of members attend these celebratory events. In order to better publicise these events and other opportunities to engage with children in care it is recommended that these events should be regularly entered onto the members' calendar to give all members good notice and the opportunity to attend. Further to this, it is recommended that members receive specific training on how to get the best out of these events. Such training should identify specific approaches relevant to the particular areas of interest and facilitate peer to peer approaches from members with greater experience. These actions are incorporated into recommendations 3 and 6.

The following examples of good practice may support us in thinking about what more we can do to improve educational outcomes for children in care and improve their life prospects.

Sweden

A highly influential study by Vinnetljung et al (2005) on the educational attainment of children in care concluded that the single best indicator of future achievement and development of children in care was achieving the basic level of education which, at the time, consisted of qualifications in Swedish, mathematics and English. This study had a significant impact on the country's education service.^{26 27} One subsequent initiative involved the introduction of higher staff-to-pupil ratios within classrooms and other education residential care settings, to offer children in care that had had poor experiences in mainstream education the opportunity to start afresh.²⁸

For those Kent children who have had very poor educational experiences or who have experienced multiple educational placements a new start in a highly staffed environment may be an effective way forward.

"(I like) going to a specialist residential school for ASD and SLD and other complex issues, because they really get me."

Feedback from a child in care, 'State of the Nation' report:

Apprenticeships

"I wasn't able to achieve my potential whilst at school or college, so when I heard of the chance to apply for my current apprenticeship I went for it. You're able to study whilst earning, get vital experience and knowledge in the working world!" *Feedback from care leaver*

Apprenticeships offer an important pathway to acquiring valuable skills that can underpin long-term employment security for young people. They provide an access route to the labour market by ensuring that young people obtain and develop the skills and attributes that are necessary for employment.²⁹

Apprenticeships can also support employers in all sectors by offering a way of attracting new talent in a subsidised, low-risk environment, and by providing young people with the practical skills and qualifications businesses need.³⁰ They can offer several benefits to young people, including:

- **earning a salary and getting paid holidays**
- **receiving training**
- **gaining qualifications**
- **learning job-specific skills.**³¹

During interviews with children in care it became apparent that they held apprenticeships in very high regard. Interviewees felt that the opportunity to undertake an apprenticeship was ‘truly outstanding’, and said that Kent’s VSK apprenticeship scheme was ‘fantastic’.³²

KCC actively promotes apprenticeships for young people in care. For example, VSK currently employs eight apprentices, including three care leavers.^{33 34} All eight have passed their NVQ Level 2 which has significantly improved their employability. Last year, two former apprentices were successful in securing full-time employment and one returned to further education.³⁵ While studying for a qualification in business and administration, the apprentices also study and gain functional skills qualifications in maths, English and ICT if they have not been successful previously in attaining at least a C grade at GCSE.³⁶

VSK apprentices also provide invaluable support to other children in care. For instance, they help them to fill in their electronic Personal Education Plans, give them guidance when they are going through significant changes in their lives (such as moving school) and organise and facilitate celebratory events and activity days.

Children in care are currently given priority in the selection process for KCC Apprenticeships.³⁷ Nonetheless, a number of witnesses suggested that apprenticeships should be further promoted as they can offer children in care employment opportunities and life skills that can prove invaluable to them.^{38 39 40}

This year, one of our children in care was awarded the title of KCC Apprentice of the Year, another VSK apprentice graduated after completing her NVQ Level 2 and a further

apprentice won Kent Trainee of the month. As corporate parents we want to celebrate these and all the other achievements of our children in care.

Recommendations

Informed by the evidence and the issues that we considered, we propose the following recommendations for the county council to endorse:

Recommendation

KCC should investigate what further measures can be adopted to address - as part of the NEET strategy development - the high numbers of care leavers not in education, training or employment and to improve the life skills ‘offer’ for post-18-year-olds. Measures should be defined and implemented to address any areas in need of improvement. A report on progress should be brought to the Corporate Parenting Panel by June 2016

Recommendation

KCC and our partner agencies should explore the viability of developing opportunities for care leavers to have apprenticeship positions with KCC and/or partners, thus increasing the range and access to further education and employment opportunities for young people in care who are in the NEET position.

Questions members may wish to ask as corporate parents

What services are available to support the education of children in care across KCC?

- how is this support delivered?
- what impact do our services have?
- what evidence is there of this impact?
- how can members scrutinise these services?

What services are available to support the education of children in care across KCC:

- against their local peers and children in care peers?
- with neighbouring authorities?

What are the education, employment and training destinations of our children in care?



Chapter 6

Fostering and Residential Care Arrangements for Children in our Care

Stability, Security, and Participation whilst in Care

Introduction

In this chapter we cover a number of key areas focusing on children's experiences in care, including how KCC is ensuring that children and young people are placed in appropriate placements and that these settings are safe and stable. We also review what children and carers are saying about their experiences of the care system and highlight avenues we may fruitfully explore to further improve participation.

Key points and high-level responsibilities

Children in care are 'looked after children' in law and the primary legislation governing children in care and fostering services is the Children's Act 1989. This includes the following provisions:

- Section 20 of the Children Act 1989 compels local authorities to accommodate children in need as appropriate. Accommodation can be the result of a voluntary arrangement between the local authority and the parents or the young person if they are aged over 16; in both cases the parents retain full parental responsibility. This accommodation, either in foster care, residential care or a kinship placement, can be long or short term and does not involve the courts
- Section 22(3) of the Act provides that local authorities shall safeguard and promote the welfare of the children they look after. Local authorities must also ensure that any services they commission from fostering agencies comply with the functions, duties and powers of this Act
- Section 31 of the Children Act 1989 provides that the court can create a care order, placing a child in the care of a designated local authority with parental responsibility being shared between the parents and the local authority. The court may make an interim care order (for up to eight weeks in the first instance) to investigate a child's home circumstances
- in relation to Other Local Authority Children (OLAs) the placing authority has a duty to provide or procure placements for children in care as set out in the Children Act 1989.

Furthermore; the Care Standards Act (2000) sets out the regulatory and inspectorial regime for children's homes and establishes National Minimum Standards.

The Children and Young Persons Act (2008) amends the Children's Act and strengthens visiting requirements and the role of Independent Reviewing Officers (IROs). Regulations, including the Fostering Service 2011 and Care Planning, Placement and Case Review (England), sit under these Acts.¹

The statutory guidance on securing sufficient accommodation for children in care, 2010, requires local authorities to take steps to secure sufficient accommodation within the local authority area which meets the needs of their children in care.

The 'sufficiency duty' requires placing local authorities and relevant partners to ensure that, through provision or commissioning, a range of placements is available locally to meet the needs of all children in care. An authority may place a child out of area if it is deemed most appropriate to meet their needs – for example, if an out of area placement would enable a child to be accommodated with his or her sibling. When considering making a distant placement the responsible local authority is required to consult with the relevant local authority for the area in good time, to enable a thorough assessment of appropriateness.²

The role of the corporate parent for children in care is the same for both Kent resident children and Unaccompanied Asylum Seeking Children (UASC), and centres on the requirement to be aware of the needs of children in care and of the responsibilities incumbent on the local authority to ensure that these needs are being met. These include:

- **providing care, a home and access to health and education**
- **celebrating and sharing achievements**
- **providing safety; for example ensuring protection against issues such as sexual exploitation**
- **understanding the impact on children in care of all council decisions and working in the best interests of children and young people**
- **scrutinising information about the quality of care and services that children are experiencing and supporting work which leads to improvement**
- **ensuring that action is being taken to address any shortcomings in the service and to constantly improve the outcomes for children in care**
- **ensuring that children's voices are heard in terms of care planning and in influencing the shape of services.³**

As corporate parents, Kent does not hold responsibility for Other Local Authority (OLA) children in care. However, as a result of the high number of OLA children in care in Kent, we do have a national lobbying and networking role in this regard.

The Kent Picture

The table below shows the number of children in care within Kent, including UASC, to June 2015. It illustrates that there has been a slight reduction in the number of Kent resident children over this period, whilst at the same time, there has been a large increase within the UASC population. As a 'gateway authority' Kent supports a disproportionate number of UASC, who are predominately aged 16 and 17 years old.

In addition 1,324 other local authority children and young people in care are living in Kent (June 2015). These are children placed in Kent by other local authorities for a number of reasons, one of which could be because parts of the county have relatively inexpensive housing stock compared to the rest of London and the South East region. As a result of relatively low property prices in eastern coastal communities during the 1980s and 1990s, many children's homes and foster agencies were established within these areas. This has meant that Kent now has a large and thriving social care sector, and this has led to a considerable number of children in the care of other local authorities being placed within our local authority area.⁴

Almost all of the children's homes within Kent are run by the independent and voluntary sector, with concentrations around the coastal fringes (a map of the geographical distribution in attached within Appendix D⁵). As discussed in the preceding chapters, this has placed a significant pressure on public agencies responsible for supporting vulnerable children in Kent. We heard from a number of key witnesses who gave evidence that the additional and

Caseholding area	Jul 2014	Aug 2014	Sep 2014	Oct 2014	Nov 2014	Dec 2014	Jan 2015	Feb 2015	Mar 2015	Apr 2015	May 2015	June 2015
Kent (incl UASC)	1,827	1,824	1,829	1,873	1,888	1,881	1,875	1,899	1,870	1,861	1,869	1,948
Kent (excl UASC)	1,570	1,556	1,553	1,540	1,536	1,514	1,512	1,530	1,502	1,492	1,474	1,477
UASC	257	268	296	333	352	367	363	369	368	369	395	471

wider impact of other local authority children in care living in Kent is longstanding and is of concern. We understand that the revised Care Planning, Placement and Case Review (Regulations 2010) that came into force in January 2014 have strengthened requirements on local authority 'distant' placement decisions (notification of placement). We also understand that the revised Children's Homes Regulations 2015 have placed additional requirements on children's homes by introducing more robust quality standards relating to care and the nurturing of aspiration. Furthermore, we have been made aware that Ofsted does not report on this on a routine basis. We believe more needs to be done to hold other local authorities to account in relation to their corporate parenting responsibilities to appropriately safeguard children within their care living out of area.

What we are trying to achieve?

Kent County Council's Sufficiency, Placement and Commissioning Strategy sets out our overall objectives for meeting the needs of our children in care for whom we have a legal responsibility to accommodate by placement arrangements through KCC registered foster carers, independent fostering agency registered foster carers, connected persons or supported accommodation.

As we discussed in Chapter 3, we have developed a high level action plan with a clear focus on improving outcomes for children linked to the Sufficiency, Placement and Commissioning Strategy by continuing to improve our Early Help offer. To this end, as the strategy states: "Kent County Council will focus on providing targeted, effective early help services to safely prevent children from coming into care. The council will work proactively with partners and stakeholders to deliver the best outcomes for children." The fostering service is central to getting things right for many children and young people who often present with complex and diverse needs and a key objective for us relates to continuing to "grow and diversify the skills, capability and capacity of our in-house foster carers."

KCC is also committed to supporting high quality social work so that our practitioners are empowered to use their professional judgement and are consequently able to make the right decisions to meet each child's needs in a timely manner. The Kent Fostering Mission Statement encapsulates

what we are attempting to achieve: "Our Fostering Service aims to provide a good quality, highly-regarded service that inspires confidence in children and young people, carers, staff, managers and partner agencies. We will provide and maintain foster placements that enable children in care to most fully achieve their personal, social development and education and employment potential."

The areas discussed below reflect the Committee's evidence-gathering and aim to cover key points highlighted within the LGA guidance.⁶

- **children in care are in placements which are stable and secure. This includes foster care arrangements such as recruitment and foster care support**
- **there are clear routes to, and evidence of, children's participation in care planning and in shaping the service**
- **children are safe within placement.**

What are we doing at present?

Ensuring children and young people are in the right placement and that this placement is stable and secure is one of the key considerations we need to be aware of in our role as corporate parents. In order to do this we must scrutinise foster care arrangements, residential use and placement stability and support to ensure that these placements are meeting children and young peoples' needs.

Foster care arrangements

The Fostering Network has highlighted a national shortage of foster carers and a need for further recruitment;⁷ this is mirrored within the Kent experience.

Within Kent we use a mixed economy of provision to secure placements for our children using the most appropriate provision to support better outcomes for our children and young people. The vast majority of our citizen children are placed within in-house foster placements, which places pressure on the service to effectively recruit and retain foster carers. The Committee has collected evidence which suggests that more foster placements are required and that current numbers may be impacting the choice of placements available to social workers. As we noted in Chapter 2, the most recent DfE information shows us that nationally 60% of children were looked after under a care order (either an interim or full care order) in the year ending March 2015.

The nature of the issues around capacity, and ensuring the right balance of foster carers with the right skills sets, was brought home to us by a number of witnesses:

*'With trying to make something fit, sometimes there are problems. These could be around location; for instance the child could have moved away from school and friends, or even their own family. This was the fault of the system ie not having enough foster carers...'*⁸

Senior Practitioners who were interviewed also argued that there is a need to find more high-quality foster carers who would commit to children in the long term, stating:

*'It would be nice to have a pool of foster carers who had a high level of expertise and experience.'*⁹

This was re-enforced during our visit to social work teams in Thanet, where it was suggested that more foster carers with a range of skills are needed to place our children.¹⁰

We observe that these are some of the key sufficiency challenges identified in KCC's Sufficiency, Placement and Commissioning Strategy for which a clear implementation action plan has been developed. We support this action plan, and agree the need to maintain an oversight of the progress made, going forwards.

There are currently 900 registered foster carers in Kent who care for 1,295 children. In the current financial year an additional 140 foster carers have been approved¹¹ (with retention rates showing a loss of approximately 70-80 foster carers a year). Currently we have a 14% vacancy rate this is the percentage of in-house foster carer vacancies, which compares to a national rate of 31%. We therefore have a smaller 'pool' of placements than many other local authorities. However within this context Kent does well in relation to the placement of siblings. Out of 125 children that Kent assessed to be placed together in 2014-15, 100 were placed together.¹²

Placement types

The Kent in-house fostering service maintains targets around challenging, sibling, solo, parent and child, disability, UASC and permanent placements. The service has highlighted a particular need to strengthen in-house recruitment for adolescent placements, and to do this has recently refocused advertising to concentrate on this message. Marketing material now has a much stronger focus on recruitment for older children, sibling placements and placements for those with disabilities. The service also advertises through bus banners, radio adverts, local papers and social media and holds live web question and answer sessions,¹³ achieved on very limited spend.

The service also works with the challenge of ensuring a strong geographical spread of placements. Evidence from Kent's Management Information Unit suggests that 81.3% of children are placed within 20 miles of their home, with those from the west and north of the county being more likely to be placed further away from home.¹⁴ The shortage of placements within the west and north of the county is a longstanding one; recruitment within these areas is often challenging due to the size of accommodation within this area (smaller houses), increased financial stability of households (lower financial incentive) and the proximity to London (competition). The KCC Transformation programme

is currently working in the west of the county to ensure clear searching and matching tools are in place to increase the number of children placed in closer proximity to their homes.

In order to ensure that children are placed as close to their home community as possible (where appropriate) and that children are not concentrated within particular areas of the county we need to ensure that everything possible is being done to attract a broader spectrum of foster carers.

We therefore recommend that more needs to be done to respond to the recognised shortage of placements, in particular those for adolescents and placements within the north and west of the county.

Case study

Kirklees Council's marketing approach to foster carer recruitment has been given as a best practice example by Ofsted. Reasons for this include:

- the establishment of a separate team responsible for foster carer recruitment (from matching and support), to ensure that potential foster carers are approved as quickly and effectively as possible
- the use of marketing expertise to ensure the use of the correct medium to attract specifically targeted groups;
- a strong focus on market research
- thinking more broadly around 'ruling people in to fostering' as opposed to 'ruling them out'
- increasing the number and frequency of panel meetings (to increase the speed of approval)
- continuous social work input through the entire recruitment journey.¹⁵

We acknowledge that many of these best practice principles are in place within Kent. However it is interesting to note that the Kirklees case study suggested that through a review of long-held assumptions some roles were challenged which led to improved practice. It is possible that such a review in Kent could be beneficial.

Residential placements

Residential provision is sourced via spot purchase arrangements with providers based on the needs of the child.

Through a desire to maintain children in a family environment, KCC places relatively low numbers of children in residential provision. Currently only 6% (excluding UASC) of our children in care population are in residential accommodation against a national average of 11%.¹⁶ KCC only places children in Ofsted-rated outstanding or good placements.

Our success in maintaining children in a home environment does mean that those who go into residential care are those with the most complex and challenging needs, requiring specialist provision. Despite the large number of residential children's homes within Kent boundaries, KCC still finds it challenging to secure placements for some of our children in Kent. This is particularly an issue for disabled children; whilst only 24% of residential placements in Kent are for disabled children, this rises to 46% of all placements made outside the county. Understandably, out-of-area placements impact families in terms of visiting distance and also have an impact on social worker time (travel for visits).¹⁷

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 in 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.

Kent's Short Break 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 and whole-family fun days. We also provide a direct payments scheme to more than 700 families so they can purchase their own respite.¹⁸

Foster care support and training

All foster carers must be supervised and offered a range of services to support them in their fostering task. The support includes an induction programme, foster carer annual reviews, targeted support such as an Adolescent Team (to help manage the day-to-day behaviour management issues posed by older children in care) and a mentoring (buddying) scheme with experienced and trained carers mentoring newly-approved carers during their first year.

All carers with disabled children undertake general fostering training, and some specialist courses are offered on subjects such as learning disability, autism, Makaton and moving and handling. Where children have specific and complex medical needs, one-to-one training from medical clinicians is provided. There is also an Occupational Therapy Service which delivers support through equipment and adaptations for those children who are placed permanently.

Foster carers that were interviewed highlighted a number of areas they felt could lead to improved services. This included the instability they felt through changes in social workers and how these changes could be challenging and stressful.¹⁹ It was also suggested that additional, specialist training for foster carers would be beneficial. While the foster carers who gave evidence said that the current training was "excellent" they also suggested that training could be extended to include specialisation in subjects such as mental health therapy or around 'missing children'.²⁰ Training, including courses around trafficking and safeguarding and universal training on child sexual exploitation (CSE) will be introduced for all foster carers with children aged over 10.²¹ However training was also highlighted within social worker focus groups, who suggested to us that there may be a difference in the

support offered by Independent Fostering Agencies and the support offered in-house. We think it would be helpful for this issue to be explored further in response to our main recommendation for this service area.

Within evidence presented to the Committee both foster carers and social workers argued that training for in-house carers could do with being improved further. Therefore we believe training and support for foster carers must be comparable or stronger than that offered by IFAs. Moreover, there is a need to increase awareness of training and support available.

Expenses

During evidence hearing sessions foster carers described a number of instances where they received delayed refunds for care-related expenses. Examples were given that included waiting six months to receive a payment for respite, delays in reimbursing travel expenses and the refusal to refund the purchase of a pair of shoes.

We were informed that the payment systems for foster carers has recently been upgraded, and this should ensure that regular payments are made within given timeframes and are correct. It is worthy of note that one-off payments would need to go through other processes, and that any delays which may arise as a result of this should be kept to a minimum.

Delegation has also been highlighted as a key issue during evidence sessions for this report. From previous evidence we know that this is important to children and young people as delays in clear delegation arrangements can make young people feel different from other children. Trips and other opportunities are sometimes missed due to delays in getting the necessary consents from managers of children's services²². Within evidence for this Committee foster carer's highlighted issues with taking children on holiday.²³

Our understanding is that the Children Act 1989 Guidance and Regulations Volume 2: care planning, placement and case review (June 2015) sets out expectations required of practitioners and managers. The guidance states:

'...Whatever the permanence plan, the carer should have delegated authority to take day-to-day parenting decisions. This enables them to provide the best possible care for the child.'

'...day-to-day parenting, e.g. routine decisions about health/hygiene, education, leisure activities...'

"All decisions in the first category should be delegated to the child's carer (and/or the child if they can take any of these decisions themselves). Where day-to-day parenting decisions are not delegated to the carers, any exceptions and reasons for this should be set out in the child's placement plan within their care plan."²⁴

Authority to take a particular decision or give a particular consent must be clearly named on the Placement Plan with any associated actions.

Schools use a definition from the Education Act 1996, where 'parent' includes a person who has care of the child in question. Therefore a child's foster carer or residential worker is deemed a parent for the purposes of education law.²⁵ It therefore follows that in most cases a foster carer should have the delegated responsibility to be able to sign off school trips for example (as long as this is not abroad). Within evidence-gathering, social workers confirmed that delegation matters were addressed during placement plans and that this would include information such as visits to the birth family, school trips, hospital appointments, CAMHS and sleepovers, amongst other matters.²⁶

There are some decisions where the law prevents authority being delegated to a person without parental responsibility, which includes applying for a passport. Also, children cannot be removed from the UK for more than a month without the written consent from everyone with parental responsibility. Therefore in the event of obtaining a passport or arranging overseas travel for over a month, sign-off may need to be given by multiple parties²⁷ which may lead to a delay.

Placement stability

Placement stability is absolutely key to a child's journey through the care system and children who have many changes of placement fare worse than those who do not in terms of psychological, social and academic outcomes.²⁸

According to a recent KCC survey, the majority of children in care (89% of 7- to 10-year-olds and 93% of 11- to 15-year-olds are happy living with Kent foster carers and believe that their carers are caring and supportive May 2014 ²⁹ (May 2014), but unfortunately not all placements are stable. There are many reasons why some placements breakdown and we fully support the actions outlined in the Kent Sufficiency, Placement and Commissioning Strategy to help improve overall performance and outcomes in respect of placement stability.

A key measurement around placement stability is placement breakdown. The national proportion of children in care who have had more than one placement during the year is 34%, whilst 11% have had three or more placements (March 2015)³⁰. In Kent, 9% of children in care have had three or more placements within the last 12 months based on figures from the July 2015 scorecard, which is therefore lower than the national average.

There are a number of factors which play an important role in preventing placement breakdown. A Corporate Parenting Panel (4th September 2014) report suggests that to reduce placement breakdown, KCC must:

- reduce changes of social workers – especially for children who are more likely to experience a placement breakdown
- improve the range of in-house foster placements available
- ensure that foster carers are well supported and provided with full and accurate information about the children to be placed
- provide a quick and responsive approach to requests for help from carers
- provide regular respite support for carers of children who are presenting challenging behaviour or are out of school. Ensure that there is continuity for the child with the respite carer provided
- provide accessibility to CAMHS, improving delays in waiting times for appointments and working proactively to encourage children and young people to attend appointments
- reduce school exclusions and ensure that all school aged children in care receive their full-time education
- ensure consistent use of disruption meetings to help prevent placements breaking down.³¹

Moreover during evidence-gathering, social workers highlighted a number of contributory factors to placement breakdown which may include:

- **emotional instability of young people**
- **absence of the right preventative intervention**
- **foster carers who lacked resilience**
- **a financial motivation in becoming a foster carer**
- **challenging presenting needs of older children.**

The response to placement breakdown is, therefore, multi-dimensional and requires a multi-disciplinary approach to care planning. This includes well-timed preventative interventions, emotional health and wellbeing, support through education, strong foster carer recruitment and support and a consistent workforce.

Significant work has been undertaken in the council to increase stability for children in care. Placement Panels consider whether placement moves are in the best interests of children and a more proactive approach has been taken to prevent placement breakdown through establishing placement stability core groups, which work to resolve issues at an early stage.³² However it is key that a strong multi-agency response to placement breakdown is in place for all children. Due to this importance, members should have a stronger overview on the multi-agency response to placement breakdown.

Participation

A key role of a corporate parent is to ensure that children are empowered to shape the care and the services around them. We found that there are clear routes to, and evidence of, children's participation in care planning, and in shaping the service. The 2014 LILAC review ('Leading Improvements for Looked After Children: a set of seven quality standards, which assess how well an organisation is involving, and listening to the views of, children in care') found that within Kent, children and young people felt involved in the decisions which affected their lives and that all decisions were fully explained to them. In questionnaires completed for the review (by children and young people in placement who were, at the time of assessment, over 10 years old) 80% of Kent's children knew what their care plan was, 70% said that they had helped to write/agree it and 71% said that they felt it reflected their wishes and feelings.³³ This mirrors findings within the Children in Care Performance Report³⁴ which shows 95.2% of Kent resident children in June 2015 participated at Child in Care reviews. However the number including UASC is lower at 93.4% which suggests that participation of UASC in care planning may be lower than Kent resident children.

Evidence presented to the Committee through the Independent Reviewing Officer (IRO) service highlights that some children may not always be comfortable talking to their social worker.³⁵ While there is evidence from audits that children are being visited within statutory timescales and that social workers are seeing children on their own during home visits, we recognise that a key part of the social worker's role is listening to children and therefore it is essential that children and young people feel able to discuss issues with social workers where possible.

Other potential avenues of participation, such as through the IRO service may also require improvement; an internal survey published by Business Intelligence found a low awareness amongst 11 to 15-year olds of the role of the IRO. Nearly one third of children who took part in the survey did not know how to speak to their IRO.³⁶

This evidence shows us that there are a number of areas where the participation process could be strengthened to ensure that all children and young people are able to influence and understand their care plan and the care planning processes.

There are a number of other routes to participation, some of which help to develop and shape children's services:

The Kent Pledge - The Kent Pledge outlines KCC's promises to children in care and is therefore key to corporate parenting. Importantly, within this pledge we promise to listen to children by making sure they are able to tell us of their needs and wishes before making decisions, and by making sure children know how to complain.

Our Children and Young People's Council - The Virtual School Kent apprentices help to organise and support council meetings for children and young people in care. These meetings are set up to help children in care have their say on what it is like being in care and to make sure that children have a voice in how this can change.

Participation days - Activity days for children and young people in care

District events - Activity events for children in Care, organised and supported by district teams. These have included a 'leading the way' event where young people were encouraged to think about how they might be able to influence their lives. Topics covered included helping young people to gain greater control of their Looked After Review, encouraging them to talk with their social worker about their hopes and dreams for the future, discussing their school, plus talking with their foster carer to ensure they get to know the 'real' child.

Interview panels - children are involved in interview panels, for example for foster carers and for all new posts created within the 18 plus service.

The 2014 LILAC review suggests that participation options are not always known about by young people and that additional work may be necessary to ensure that all young people know how to be involved in shaping and improving services.³⁷

Reflecting the lower participation levels of UASC previously discussed, the Virtual School Kent's Annual report highlights an under-representation of UASC and young people with disabilities in the Our Children and Young People's Council and at participation days. This was supported by a verbal update given to the Corporate Parenting Panel from Our Children and Young People's Council, highlighting the need to increase support to disabled children so that they are able to participate in mainstream activity days.

To address this, the Virtual School Kent Participation Team will be working towards engaging with these groups of young people, to enable them to have their voices heard. This will mean accommodating specific needs and addressing issues such as language barriers.³⁹

In evidence sessions with young people in care, participation events were valued. One young person suggested extending participation processes to biological children living within foster families:

*'My foster sister (the biological daughter of my foster carer) asked if there was any support for her. She often feels left out of the loop; I think there should be a service that the children of foster carers can use if they need some extra support or want to go to the VSK activity days with their foster siblings.'*³⁸

The Committee recommends that further work is required to ensure that the voice of young people clearly influences the organisational shape of Specialist Children's Services, and that participation processes are inclusive and reflect the children in care population.

Keeping children safe within placement

Children may run away from a particular issue, such as abuse or neglect at home, to somewhere they want to be, or they may have been coerced to run away by someone else. Whatever the reason, it is thought that approximately 25% of children and young people that go missing are at risk of serious harm.⁴⁰

In Kent, between January and December 2014, there were 695 reported cases of children going missing - an increase of 15.8% from the previous year (600). As children in care are three times more likely to run away than other children, agencies' understanding of, and responses to, this issue are critical.⁴¹ In August 2015 alone, 73 children in care went missing (out of a total of 284 missing children), and 18 were UASC.⁴²

Children who run away or go missing are particularly vulnerable to suffering harm including sexual exploitation. Other Local Authority Children are particularly vulnerable, insofar as they are further away from their social worker, Independent Reviewing Officer, Child Protection Chair and other support services.⁴³

A number of actions have been undertaken to respond to and reduce the risk of children going missing and Child Sexual Exploitation (CSE). These include:

- the missing children Single Point of Contact (SPOC), which brings together notifications regarding any child that goes missing in Kent in a single database (in partnership with Kent Police). Children could be known to a KCC service, or they could also be children placed in Kent by other local authorities. Whilst the SPOC continues to embed, work is underway in partnership with Kent Police to build the ability to cross-reference those children who go missing with those who are known to be at risk of sexual exploitation
- communication and raising awareness. Substantial efforts have been undertaken by all aspects of the council to work with both our staff, our providers and colleagues in other agencies to assess training needs, levels of awareness and actions required to ensure the safeguarding response is as robust as possible. This includes auditing external providers in terms of awareness and use of appropriate policies and toolkits
- training: KCC is committed to all front line staff responsible for safeguarding assessments undergoing CSE training. Training will also be in place for all foster carers with children over the age of 10
- audits of children identified to be at risk have been carried out and independently reviewed with improvements highlighted
- strategic needs assessment and analysis of prevalence. The CSE Joint Strategic Needs Assessment (JSNA produced by Public Health) will become part of the wider children's chapter and will inform commissioning and safeguarding priorities moving forward
- strengthened information sharing: There is currently an ongoing project led by Kent Police to develop a specialist multi-agency CSE team which could support investigations across in Kent. This team aims to be operational later in 2015
- multi-Agency Child Sexual Exploitation (MACSE) Panel: Kent's Safeguarding Children Board has set up a multi-agency strategic sub-group to address the issues of child trafficking on a county, national and international basis.⁴⁴

With regards to Other Local Authority Children, work is ongoing to ensure that placing authorities are made fully

aware of the challenges associated with very high numbers of out of authority placements being made in Kent, often in areas with higher levels of deprivation. 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.

A recent paper to the Children's Social Care and Health Cabinet Committee highlighted the need to strengthen information sharing across partners, stating that while a number of informal information sharing networks exist these are not consistent across the county or formally published as protocols.

The service is working actively to address these issues.

Corporate parents also have a lobbying role on this agenda to ensure that information is shared appropriately and to retain local and national focus on issues related to children going missing.

What more can be done?

The Committee found a number of areas where improvements may be possible which include:

- in-house fostering manages and maintains a high level of placements. However greater recruitment is required to ensure strong choice, particularly in relation to adolescent placements and within the north and west of the county
- within evidence-gathering, potential improvements were suggested around the training and support of foster carers
- there may be ways to strengthen the participation processes for children and young people through further support and clear awareness of participation routes
- the Committee suggests that further work should be undertaken to ensure that the voice of young people clearly influences the organisational shape of Specialist Children's Services, and that participation processes are inclusive and reflect the children in care population
- further consistency is required around information sharing for missing children
- progress is being made against KCC's Sufficiency, Placement and Commissioning Strategy Action Plan, and that updates are presented to the Panel at timely intervals.

Recommendations

Informed by the evidence and the issues that we considered, we propose the following recommendations for the county council to endorse:

Recommendation

KCC should identify a lead participation officer to coordinate how children, young people and their carers' views are taken into account at the service level and for such information to be made available to members annually.

Recommendation

KCC should conduct a review of the fostering service with the objective of improving the matching process and reducing the number of placement breakdowns. The review should take place six months after the county council has endorsed this Select Committee Report and report back to the Corporate Parenting Panel.

Recommendation

All KCC members should commit to actively championing and engaging with divisional and county-wide participation events (Virtual School Kent activities and Achievement Award ceremonies; organised foster carers events) to hear about the achievements of our children and young people as well as finding out about emerging issues that concern those in our care. It should be made the responsibility of the relevant service managers to extend an invitation to all members to events and meetings and to ensure that this automatically happens, and that relevant information is included in the Member Bulletin (or Members' calendar) to give all county councillors adequate notice and opportunity to attend.

Questions members may wish to ask as corporate parents

The role of the corporate parent

This chapter has touched upon a number of large topic areas including the recruitment of foster carers, their training and support, placement and stability, children and young people's participation and the safety of placements.

These key areas make up part of the life of children in care and interact closely with issues such as education and health. From a corporate parent's perspective there are a number of questions which it may be useful for members to ask:

- identifying a strong placement requires choice, effective assessment and planning processes and listening to the views and wishes of children and their families throughout the placement process. Are there any improvements which could be made to our fostering processes?
- residential: Are we doing everything that we can to keep children in residential care close to their families and what do we know about the outcomes of children within residential care in comparison to other children in care?
- are we doing everything we can to prevent placement breakdown including specialist training for foster carers and strong respite options?
- can we improve how children influence the shape and commissioning of the service?



Chapter 7

Adoption and Support Arrangements for Children

How well do we do in relation to adoption arrangements for children in care?

Introduction

In recent years adoption has become a significant government priority, with a strong focus on increasing the total number of adoptions, and on streamlining the process of adoption.

Government statistics (published in June 2015) indicate there were 2,960 children awaiting an adoption placement at 31 December 2014. This is a 37% decrease from 31 March 2014 when there were 4,680 children waiting. Recent estimates by the DfE suggest that the “adopter gap” has closed, resulting in more adopters than children waiting.¹

Key points and high-level responsibilities

The coalition government introduced reforms aimed at simplifying the adoption system. These included: introducing a £19.3m Adoption Support Fund (encouraging a national search for adopters for hard-to-place children by reimbursing the costs of the inter-agency fee), ensuring that employed adopters are now entitled to the same pay and leave as birth parents; providing £16m of funding to the voluntary adoption sector and £50m to local authorities to aid adopter recruitment; extending the pupil premium, giving adopted children priority in school admissions and access to early education from the age of two.

The Children and Families Act (2014) enabled local authorities to place children with their prospective adopters more swiftly and removes some restrictions around ethnicity and sibling placements. The Act allows adopters and prospective adopters to access personal budgets on request and introduces adoption scorecards that allow a comparison of the delay for placement of children in care in each local authority.²

The Education and Adoption Bill is currently (Oct 2015) being considered by Parliament. If the Bill is passed, councils will be encouraged to identify their own regional approach that would see (multiple) authorities uniting their adoption services under one system or outsourcing the delivery of their adoption functions into a single regional agency. If local authorities do not comply within two years the government will require councils to combine adoption functions.³ The idea behind this is that local authorities will be more likely to work across regions to find matches for children and hence decrease the amount of time it takes for a child to be adopted as well as pooling resources in relation to support services.

Within this context, corporate parents will want to make sure they have the necessary information to be assured that:

- children have access to adoption if this best meets their interests (ie court processes), this includes children who may be ‘harder to place’
- the recruitment process for prospective parents is strong and ensures the availability of loving homes for children
- the service works with partners to ensure the strongest match for a child/ren;
- adoption processes are timely and effective
- there are strong levels of pre- and post-adoption support.

Under the Children and Families Act 2014, the local authority also has a duty to provide information and support through adoption support services.

National drop in placement orders

Despite government efforts to streamline the adoption process, recent national evidence suggests that the number of placement orders granted by judges to give local authorities permission to find adoptive families for children in care has reduced and further evidence is provided by the DfE's first statistical release of 2015. This reduction is linked to key Supreme Court and Court of Appeal judgments in 2013.⁴ The number of adoptions will therefore decrease because fewer children's care plans now include adoption.

The National Adoption Leadership Board⁵ has challenged this reduction in placement orders stating that the legal process in adoption proceedings has not changed.

Courts must be provided with expert, high quality, evidence-based analysis of all realistic options for a child and the arguments for and against each of these options. This does not mean every possible option. The judgment in *Re B-S* clearly states that the "evidence must address all the options which are realistically possible".

Where such analysis has been carried out and the local authority is satisfied that adoption is the option required in order to meet the best interests of the child, it should be confident in presenting the case to court with a care plan for adoption.

Mirroring the national picture described above, the number of children within the adoption system in Kent is reducing. This is partly due to the reduction of children waiting for adoption as processes and systems within the service have improved. However, this is also linked to the drop in placement orders. Between 1 April 2014 and 31 March 2015, 79 placement orders were granted to children in Kent; 51.8% lower than in 2013/14 (164).⁶

What are we trying to achieve?

As part of the Ofsted Inspection of the Looked After Children's Service (2013) the Adoption Service was highlighted as making demonstrable improvements through partnership with Coram with strengthened practice and creative family-finding.⁷ The associated action plan highlighted a number of areas including timelines around permanence planning and placement, Later Life Letters and Life Story Books. Reflecting these areas and other information collected by the Committee the key issues discussed below include:

- improvement of timescales (permanence, placement and supporting documentation)
- continuous improvement processes and learning from feedback from adopters
- ensuring that children defined as 'harder to place' have access to strong adoption services
- effective post-adoption support.

The Kent Picture

The adoption services in Kent have been on a significant improvement journey and have worked to secure a substantial increase in the numbers of adoptions taking place per year, within shortened timescales. The table below shows the level of improvement achieved in the number of children adopted.

Kent - Year Ending 31 March

2011/12 70

2012/13 105

2013/14 145

2014 /15 182

2015/16 51 (April to August)

Improvement of timescales

Unnecessary delays in the adoption process and in finding a suitable family for a child may prove detrimental to the child's welfare and their chances of adoption.⁸ therefore Increased speed in adoption is therefore often associated closely with the best interests of the child.

The timeframes below reflect the national adoption scorecard and show a comparison between ourselves, Essex (local comparator) and Cambridgeshire (from the information available Cambridgeshire appears to perform well). This should be seen in the context of strong improvements made in timescales in Kent over the last three years.

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Coram Cambridgeshire Adoption

In 2014, Coram and Cambridgeshire County Council formed a new voluntary adoption agency, Coram Cambridgeshire Adoption. Cambridgeshire argue that the agency brought together the best skills and expertise from Coram and Cambridgeshire County Council, building on an earlier successful partnership, to help more children find permanent, loving homes more quickly.

Through this partnership Coram provides an integrated service by delegated function from the local authority for recruitment and assessment, family finding, post adoption support and panel management to secure early permanence decisions for children, including concurrency (placement with prospective adopters while the courts decide if the child can stay with the birth family or be adopted). The formal service framework agreement enables this delegation and is underpinned by effective and continuous working relationships across the parties.

The agency's reach of primarily Cambridgeshire also extends to surrounding regions, including Norfolk, Suffolk, West Essex, East Hertfordshire and North East London. Early soundings from this new delivery model are positive including a Good rating in all categories by Ofsted as part of the post registration inspection (January 2015). A Partnership Advisory Group made up of local professional experts, including the Judiciary, Children and Family Court Advisory and Support Service CAFCASS (representing children in family court cases) and health and social care partners, adds additional strategic and local knowledge in the development of the services.⁹

	Average time between a child entering care and moving in with its adoptive family, for children who have been adopted (days)	Average time between a local authority receiving court authority to place a child and the local authority deciding on a match to an adoptive family (days)	Children who wait less than 18 months between entering care and moving in with their adoptive family (number and %)
Kent's 3-year average (2011-14)	680	223	280 (49%)
Essex	663	236	215 (50%)
Cambridgeshire	517	78	110 (58%)
England 3-year average (2011-14)	628	217	11,360 (51%)
Kent's distance from 2011-14 performance threshold	133 days	71 days	
Essex	116 days	84 days	
Cambridgeshire	Threshold met	Threshold met	

Supporting documentation (Background Letters and Life Books) are completed to a high standard and within given timescales

Once a plan for adoption has been agreed the child's social worker will begin preparatory work with the child. They will talk with the child during supervision sessions and (particularly with older children) will talk to the child about the type of parents they may be looking for.

The Adoption Service has recently published an Adoption guide for children. This guide forms part of the ongoing dialogue between the child, social worker and foster carer and aims to help the child engage in the opportunity to express their wishes and feelings and personalise their journey through the adoption process. Children are encouraged to talk about how they feel about prospective adopters and let their social worker or foster parents know if they have any concerns or worries.¹⁰

All children with a plan for adoption must have a Life Story Book and Background History Letters as part of their preparation for the adoptive placement. It is a requirement that Life Story Books are ready by the second review of the adoptive placement, and that the Background Letters are given to adopters no later than 10 days after the adoption ceremony.¹¹ These are a vital part of the adoption process, as they help children in care make sense of their past. A child's social worker needs to begin to plan the child's life history as soon as possible after they come in to care. Missed or inadequate information can lead to disruptions or gaps for both the child and the carer.¹²

Life Story Books and Background Letters are also vital in helping children understand the context of their adoptions. In recent research which included interviews with children from Kent, London, Essex, the East Midlands, Manchester, Brighton and Hampshire the following core messages were made by children:

- Children valued their Life Story Books and associated birth objects but were concerned about the lack of narrative, about the honesty conveyed in their book and the one-sided nature of the story that was told (ie not as they recalled their past).

- They were keen to emphasise the need for Life Story Books but also of the need to be honest and to respect children's own knowledge and memories.
- Consistency and fairness in the provision of Life Story Books was also highlighted particularly in cases of siblings who had different books of variable quality/content.

Photographs and other mementoes were especially significant but they were concerned that these often came to them with little description so they were valuable but they were not sure exactly why.¹³

Reflecting on the above and on feedback from the Ofsted action plan, we found that improvements could be made with regards to the completion of Life Story Books and Background Letters. Furthermore, evidence presented to the Committee indicates that sometimes, life story work is incomplete and not of the expected quality. Some adopters have complained that they did not receive the books, or that they were poorly prepared, for example with children's names misspelled. These complaints have been corroborated by the IRO service. The 2013-2014 IRO annual report states that life story work is not always evidenced and timely, and that Life Story Books still vary in standard and quality.¹⁴

Some improvements have been identified. Within their annual report Coram states that:

'Timescales for both Life Story books and Later Life [background letters] are measured against National Adoption Minimum Standards in the monthly joint tracking meetings with children in care service managers to ensure that adopters and children are provided with both essential pieces of work in a timely way. Later Life Letters and Life Story books are quality assured by Children in care Service Managers'.

'Children who had a celebration hearing between the 1st April 2014 and 31 March 2015 received their Life Story book on

average 58 days before their celebration hearing, with the National Minimum Standards met for 75% of the children. [With regards to the] Later Life Letter, this should be given to the prospective adopter within ten working days of the adoption ceremony. Children who had a celebration hearing between 1 April 2014 and 31 March 2015 received their Later Life Letter on average 1.3 days before their celebration hearing, with the National Minimum Standard met for 64% of children.¹⁵

Timelines and other learning: feedback from adopters

KCC seeks feedback from adopters at various points within their adoption journey. Information collected after an Adoption Order has been granted is felt to reflect the most honest feedback collected. Feedback received is largely contingent on the relationship built with social workers; however a number of areas were highlighted for improvement. These include:

- the continuity and consistency of social workers;
- the reduction of administration and communication errors
- the matching process for a minority of respondents
- post-adoption support and communication (addressed below)
- the time taken between application and approval.¹⁶

The service is in the process of collating feedback information and will bring together an action plan. However, they have started to implement improvements by, for example, ensuring that any handover between social workers is done on a face-to-face basis to improve continuity. In relation to the time taken between application and approval, the service now briefs prospective adopters around any delays which are likely to impact the adoption process so there is a clear understanding of potential timelines.

The service's ability to ensure children defined as 'harder to place' have access to strong adoption services

The service uses the DfE definition of children who are 'hard to place'.¹⁷ Using their definition, these are children who meet one or more of the following criteria:

- children who have been waiting for 18 months or more at the time of placement
- children who are aged five or over at the time of placement
- children who are in a sibling group of two or more and placed as siblings at the time of placement
- children who are from a Black and Minority Ethnic background
- children who are disabled.

Between March 2014 and March 2015, 83 of the 143 (59%) children fell into one of these categories.

- 15% of children adopted were aged 5 or over
- 7% of children were BME
- 3% were disabled
- 34% were part of a sibling group.¹⁸

47 children were placed in sibling groups of two. Six children were placed in two sibling groups of three. Five of the children had a recorded disability according to data provided by MIU from Liberi

The March 2015 Adoption scorecard suggests that 96.4% (year to date) of sibling groups were placed together (where the plan was to place them together) although this has fallen to 66.7% in the first quarter of 2015/16 due to the breakdown of 3 sibling placements.¹⁹

The service reports that it is hardest to find families for children with complex disabilities. However at the time of writing (Oct 2015) there was only one such child not linked to a prospective adopter.

The service may find families outside Kent for harder to place children if Kent placements are not available, through interagency placements and in association with other local authorities.

Effective post adoption support

The provision of a range of adoption support services by the local authority and its partners is a crucial element of the statutory framework. This is based on the recognition that adoptive children and their families are likely to require support at different stages of parenting.

Adoption support includes any support likely to be required for an adoptive placement to endure through to adulthood and is applicable to existing and new situations both pre- and post-Adoption Order, and will be formulated through an Adoption Support Plan.

These services often respond to the effects that separation, loss and trauma can have on children and young people who have been adopted. They can facilitate adjustment processes; promote child, youth, and family well-being and support family preservation.²⁰

The Post Adoption Support Team is a multi-disciplinary team that works with adopted children and their families post-Adoption Order. The team includes social workers, child psychotherapists, clinical psychologists, family therapists and a music therapist.

The team works with adopted children, their siblings and parents through the provision of a range of interventions dependent on need and can include, individual therapy, group programmes for parents and children, parenting and learning and development programmes and sibling, parent or family work.

In 2014-15, 133 families were receiving post-adoption support. The majority of cases were due to requests for therapeutic support.

The most significant issue raised during evidence gathering concerned timely access to Child and Adolescent Mental Health Services (CAMHS) provision. CAMHS provision for children awaiting adoption orders is provided through the children in care CAMHS contract. Evidence presented to the Committee suggested that children may have a long wait before they are able to access the CAMH service which, it is suggested may have an effect on placement stability. This is particularly true for children who are in an adoption placement prior to the granting of the formal order (the

child still has looked after status). During this period, access to services such as CAMHS support is not available in a timely way.²¹ Our recommendation relating to improving access to CAMHS specifically includes reference to adopted children and those going through the adoption process.

What more could be done?

Corporate parents have a critical role in pushing for continued improvement of the Kent adoption service by scrutinising and challenging key areas of performance. Particular attention should be given to:

- **maintaining an overview of the types of feedback the service is receiving from parents and children and how this is being responded to**
- **further exploration into the Kent context of slowed placement orders to ensure that children who may benefit from adoption as a care pathway are maintaining access to this option and that work is ongoing with courts to ensure placement orders are granted as appropriate**
- **although Kent has made great improvements in terms of timescales, the maintenance and development of this is vital to ensuring that Kent children are offered the strongest possible outcomes. Moreover a particular concern has been raised in relation to Life Books and Background Letters, and a continued focus on the timely completion and quality of these documents is necessary**
- **reflecting a theme running through this report, we believe that CAMHS support must be available in a timely way.**

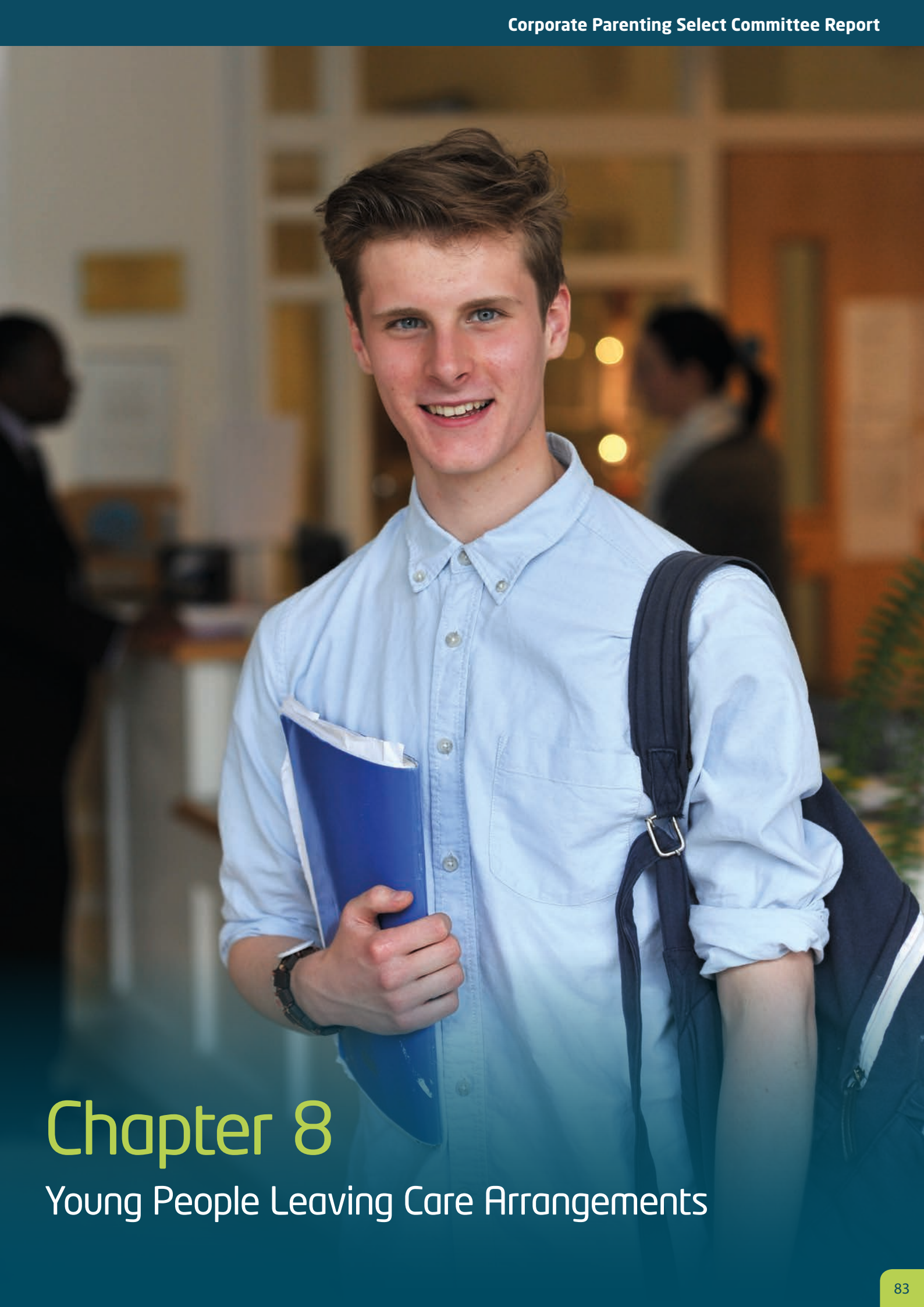
Questions members may wish to ask as corporate parents

What is the Kent context of reduced placement order numbers, and what work is being done with the judiciary to ensure that children are having access to adoption as a care pathway?

How is the profile changing of our children awaiting adoption? How is the service developing to deliver to these changing needs (including recruitment and support services, pre- and post-adoption)?

How are we responding to feedback collected from children and adopters. Are changes actioned and monitored?

How are we working to reduce sibling placement breakdown? What are the challenges here? How can we improve access to, and the availability of, post-adoption support packages available?



Chapter 8

Young People Leaving Care Arrangements

What support does our local authority provide to young people leaving care and how effective is it?

Introduction

Local authorities have a number of legal duties they need to fulfil in order to ensure young people are appropriately supported to make the transition from foster care or local authority care to independent living - either through re-integrating with their families or by becoming self-sufficient. Indeed, our corporate parenting responsibilities do not simply stop when a young person reaches 18. The Children Act 1989 (and its underpinning regulations and statutory guidance) requires local authorities to provide support to care leavers as they move into adult life. The precise level of care required by each individual care leaver will depend on their assessed needs and on their leaving care ‘status’, as defined by statute (See Appendix E for details). This chapter outlines the headline issues that are likely to have the greatest impact on the life chances of our care leavers. We also set out what more could be done to further the outcomes for our care leaver cohort.

Key points and high-level responsibilities
The Children Act 1989 (and its underpinning regulations and statutory guidance) requires local authorities to provide support to care leavers as they move into adult life.
The Children (Leaving Care) Act 2000 stipulates that local government should provide a range of practical and emotional support services to young people leaving care up until the age of 21 (or 24 if a young person is still in education or training), including an assessment of need, aligned care pathway plan and provision of a personal advisor.
The Children and Families Act 2014 introduced a ‘Staying Put’ duty on local authorities to give young people the choice to stay living with their foster carers until their 21st birthdays (or until the end of an agreed programme of education or training being undertaken on the young person’s 21st birthday if they continuously lived in the arrangement).
The Care Leavers Charter describes all the commitments that central and local government make to young people when they leave care.
As corporate parents, Members should be satisfied that we are fulfilling these obligations in order to appropriately support our care leavers.

More recent legislation has enhanced the responsibilities of local government to provide a range of practical and emotional support services to young people leaving care up until the age of 21 (or 24 if a young person is still in education or training). In line with Children (Leaving Care) Act 2000 stipulations, this must include carrying out an assessment to find out what advice and support a young person needs (including production of a ‘pathway plan’ to ensure sufficient assistance is provided to meet those needs) and provision of a personal advisor or social worker who stays in touch with the young person once they have left care and helps build independence skills. Local authorities should also ensure young people have suitable accommodation and enough money to live self-sufficiently during this time.

Furthermore, the Children and Families Act 2014 introduced a new ‘staying put’ framework to give young people the choice to stay living with their foster carers until their 21st birthdays (or until the end of an agreed programme of education or training being undertaken on the young person’s 21st birthday if they continuously lived in the

arrangement). This change has been important as it provides young people with stability during their transition into adulthood and enables them to remain in care as they complete further education and training. The Act also made provision to ensure that 18 year olds can stay in placements until the end of the academic year of this birthday; this is essential to avoid any disruption to their exams and studies.

At the same time that young people leave care some of them will also make the transition to become the recipients of adult social services. This is a particularly significant time for disabled young people and those that use health and social care services for long-term conditions and mental health needs. The Care Act 2014 outlines support for this process and requires local authorities to make a further assessment of need. This assessment is equally relevant for those young people who do not currently receive services but who may need to do so in the future.

The Care Leavers Charter describes all the commitments that central and local government make to young people when they leave care. It sets out the principles that should be followed in order to raise expectation, aspiration and understanding of what care leavers need and what Government and local authorities should do in order to be good corporate parents. KCC has our own version of the Care Leavers Charter, 'Our Promise to Care Leavers: The Kent Care Leavers Charter' which echoes the pledges made in the national agreement and includes important signposting and contact information for young people.¹ Finally, the 2013 cross-governmental Care Leavers Strategy covers the full range of services (including education, employment, housing, financial support, health and housing) that care leavers are entitled to, and seeks to ensure that all central Government departments and local agencies are aligned and cooperate to appropriately support this cohort.

The Kent Picture

Over the last five years, KCC has had an average of 814 young people leaving care each year.² This is a significant number of care leavers; indeed, Kent had an average of 60% more young people leaving care annually than our statistical neighbour authorities in 2014.³ A significant proportion of these young people are former Unaccompanied Asylum Seeking Children (UASC). As covered elsewhere in this report, Kent's UASC population

has markedly increased over the last 18 months - and this has put a significant additional pressure on our support services for care leavers, as well as the provision we have in place to meet the needs of all our children in care. KCC does not have a statutory duty towards all of the care leaver population, but we will need to provide the vast majority of our young people with some form of advice or assistance as they move into adult life. The details of the various levels of support we provide to different groups of care leavers can be found in the Kent care leaver 'offer', the 'Care Leavers Transition to Adulthood' policy.⁴ For more information, see Appendix E.

Due to the circumstances in which some of our children have grown up before moving into care, many have been exposed to responsibilities that their peers will not take on until much later in life, for example looking after their families by cooking, cleaning and caring for younger siblings. Having taken on such obligations at an early age may mean that some of our young people are ready to live independently at 18 years old. However, many will not be. Some will also have a number of additional difficulties due to their previous circumstances and negative life experiences, for instance ongoing mental health issues. As covered in Chapter 4, national statistics show us that care leavers are often over-represented in prison populations and are more likely to be NEET (not in employment, education or training) than the general population.⁵ Like the rest of the country, these same challenges face Kent's care leaver population. Such issues suggests that, overarching, the current system of preparing young people for adult life is in need of further development in order to provide care leavers with the best foundations upon which to build happy and fulfilling futures.

What are we trying to achieve?

Even though there are many different outcomes we wish to obtain for our care leavers, we have identified four core outcomes that we feel will have the most significant impact on the wellbeing and life chances of our care leavers. These outcomes are essential in order to fulfil KCC's statutory responsibilities, and to ensure our young people have the best start to their independent adult lives. Below, we have set out what we aspire to accomplish as good corporate parents and what we want for our young people; this is set against the current national and local

picture in relation to each outcome. This comparison often highlights the scale of the challenges we face in working to prepare our young people to lead happy and fulfilling lives. However, we will continue to set high expectations for ourselves as corporate parents, and to work to accomplish these aims for our care leavers.

We want to provide all our care leavers with safe and secure accommodation in the right place, at the right time and to the right quality standards to meet their needs.

Care leavers should be able to live in suitable accommodation which meets their needs. However, national research indicates that a number of care leavers live in inappropriate, insecure or poor housing.⁶ This is partly due to the unaffordability of better quality accommodation in their local areas; difficulty in accessing social housing and substandard private housing and limited support in finding appropriate, affordable accommodation. In Kent, though we work hard to secure appropriate housing for our care leaver population, we know that there have historically been significant inconsistencies in the quality of supported lodgings provided across the county. Indeed, our 2013/14 statutory outturn figures suggested that only 42% of Kent care leavers were living in suitable ie safe, secure and affordable accommodation at this time – though this figure is perhaps most illustrative of the additional pressures brought about by the high proportion of Unaccompanied Asylum Seeking Children who reside in Kent.⁷ We also cannot state that a young person is living in suitable accommodation if we are not in contact with that individual. Since this time a lot of work has been undertaken to try to improve the availability and the quality of accommodation offered to young people leaving care across the region. More detail is provided in the ‘what are we doing at present?’ section below.

Case study

There are initiatives going on across the country which KCC can use to develop our own services on the basis of ‘lessons learnt’.

Stoke-on-Trent Council is in the process of developing ‘the house project’, a housing co-operative that is led by young care leavers using homes owned by the council. The project will provide young people with the right skills to manage their own home and aims to reduce long term homelessness; youth offending and anti-social behaviour; unemployment and to help build confidence and resilience amongst young people leaving care. Care leavers can remain within their homes for as long as they want to and the project is aiming to reach 10 young people (aged 16+) in its first year.

The project is currently being evaluated by the University of York, to determine how effective it has been to date. The young people who are involved in the project will be involved in the design of the evaluation and interpretation process and in the dissemination of the findings. The assessment will review the expected impact areas, as well as the potential cost savings generated by this new approach.

Though KCC does not own housing stock, we continue to work with relevant district authorities to improve the quality and availability of housing offered to our care leavers; partnership projects of this nature may provide us with future opportunities to further improve care leaver outcomes.

We aspire that our care leavers receive the right training and practical skills so that they can be self-sufficient adults.

Care leavers need to be equipped with the life skills they need in order to live independently. In ‘The Costs of Not Caring’ report, Barnardo’s found that providing young people in care with the skills they need in order to live independently is one of the care system’s greatest challenges. If care leavers are to be ready to be self-supporting, they need to be prepared for the complexities of adult life that lie ahead of them. Indeed, care leavers,

in common with most young people, can often find it difficult to understand the consequences of issues such as not paying rent on time, or of ignoring reminders to pay bills. And unlike their peers, they do not necessarily have the support network of family and friends around them to help them through these challenges. Whilst in care, such situations are normally dealt with by young peoples' carers. Once outside of care, care leavers need to be able to deal with such situations on their own.⁸ Our care leavers have told us that, in common with the national picture, this is an issue in Kent. In fact, a recent survey of our children in care found that a quarter of them felt they were not adequately supported in gaining the relevant skills for independent living. Only 59%, for example, felt they had adequate budgeting skills.⁹ This would suggest that training needs to be tailored to ensure our young people are receiving the right preparation and support in order to obtain the life skills they need to be self-reliant.

We seek to ensure all our care leavers are in employment, education or training in order to give them the best life chances

Chapter 5 outlined why a good standard of education is key to young people achieving positive employment outcomes in adulthood and why there remains a significant gulf between the educational achievements of care leavers and their peers. Recommendation 12 specifically addresses how to reduce the numbers of care leavers who are NEET and recommendation 13 seeks to guarantee apprenticeship opportunities for care leavers.

All Kent's care leavers are safe and well, and are able to live free from all forms of exploitation or risk of exploitation.

Local authorities, alongside partner agencies which have statutory safeguarding responsibilities, are required to protect all children known to social care, including children in care and, by extension, care leavers from harm or the risk of harm. Care leavers have the right to expect that they will be appropriately safeguarded and that provision is in place to support their wellbeing so that their statutory needs are met. This is more challenging with care leavers than their younger counterparts, since they are young adults who have greater choice, freedom and flexibility over their movements than children. However, in Kent we are aware

of the need to safeguard our young people from the risk of sexual exploitation and gang activity; to prevent, where possible, offending behaviour and to try to reduce and prevent care leavers from going missing. Social care staff will remain in touch with care leavers to ensure they are safe and well that their wellbeing is being monitored and evaluated via regular contact with the local authority staff (through their personal advisor).

What are we doing at present?

KCC has recently integrated the UASC and non-UASC aspects of our Care Leavers Service and we will be monitoring and managing our progress to ensure that the experiences of our care leavers improve. New senior personal advisor posts have been created to provide an enhanced service to care leavers with more complex needs, and to provide supervision and professional guidance to the personal advisors supporting the majority of care leavers. The Care Leavers Service is focusing on enablement, assisting care leavers to gain life skills and to make the most of opportunities to enhance their life chances as adults. The service is being run under a single management structure, and it is expected this will help bring clarity to KCC's duties under child care legislation and immigration legislation.

The section below sets out what KCC is currently doing to achieve our core outcomes for our care leaver population:

Suitable Accommodation

KCC strives to offer a range of accommodation options to our young people aged 16+ and our care leavers to best meet their needs. Provision options include supported lodgings which includes 'staying put', shared accommodation and living independently in the community. The council has a contract for 'Accommodation Services for Looked after Children and Care Leavers' to provide shared accommodation to care leavers across the county. To further strengthen and streamline our provision, and to provide a consistent 'offer' to all care leavers, KCC is rolling out a 16-25 Accommodation Strategy Programme with our efficiency partner, Newton Europe. The Programme aims to redesign and align the accommodation and support 'pathway' for our children in care, care leavers and vulnerable young people aged 16-25. It is expected this work will improve the experience of young people,

meaning they will have better access to stable, safe and well maintained accommodation that they can access at the time they need it. Implementation is on a staggered timeline, but is expected to be completed by Autumn 2016. The KCC 'Supporting People Strategy' has also been designed to offer accommodation solutions to vulnerable young people by facilitating the commissioning of a range of floating support services to help them maintain accommodation placements. The Strategy supports KCC's commitment to ensuring that support is provided based on need not age, and that it is flexible and responsive to the requirements of the young person. It is intended that the strategy will be used to inform the commissioning of services to better meet the needs of care leavers into the future. However, provision is currently only used by a small numbers of care leavers. Further to this, we are commissioning a similar service to provide support to UASC, though this is yet to be completed and launched.

KCC has embraced the 'Staying Put' framework which has allowed for increasing numbers of care leavers to remain with their foster carers beyond the age of eighteen. We have also put in place contract arrangements with independent organisations such as Porchlight to provide a range of supported lodging and accommodation arrangements for our care leavers. Negotiations are ongoing with relevant district councils to establish more consistent processes which recognise and prioritise the needs of care leavers in gaining access to social housing. This work is ongoing.

Amidst concerns that some local authorities are inappropriately placing care leavers in bed and breakfast accommodation for extended periods, our Specialist Children's Services Division has highlighted KCC's policy that bed and breakfast is only used as an option of last resort for our young people in an emergency situation, for a maximum of two days. Any such use must also be individually authorised by the Director of Specialist Children's Services.

Effective Life Skills Training

KCC is very committed to supporting our children in care and care leavers into work, and one of the ways we do this is through apprenticeships. Our Assisted Apprenticeship Scheme provides ring-fenced funding and support to

vulnerable groups as they undertake work-based training. In February 2015 there were 35 children in care and care leavers undertaking apprenticeships in Kent. As set out in Chapter 5, care leaver apprentices are employed by the Virtual School Kent to support the participation and engagement of children in care and care leavers; they also assist with the development and functioning of Kent's children in care Council (OCYPC), and act as a representative 'voice of the child' in a variety of forums. Kent's Looked After Children Strategy 2015-16 further pledges to increase the number of apprenticeships and work experience opportunities provided to our care leaver cohort both within the council and with partner public and private sector agencies.

The Care Leavers service is working with KCC's Skills and Employability Division to broaden the range of employment, training and skills opportunities offered to Kent's children in care and care leavers. Incipient plans are being developed to design a care leavers work and training strategy, honed to improve the options available to young people and to expand the current apprenticeship programme. There are also emerging plans to develop an independent living skills programme to prepare young people for independence - including help with life skills e.g. preparation for interviews and work environments- and plans to provide 'drop in' points to help young people with filling in forms and signposting to other helpful services. Though such additional provision will be extremely useful to our young people, it may be some time before the schemes are fully implemented.

Young people who have a disability may receive comprehensive life skills training as part of their specialist placement provision. However, care leavers who do not have an Education, Health and Care Plan may continue to receive a less wide-ranging package of life skills training since there is no legal imperative for all schools to provide this function. KCC may have some capacity to ameliorate this issue by enhancing our life skills training offer. At present, Kent's in-house post-16 learning and training provider, Kent Training and Apprenticeships, does not offer a specialist life skills programme for KCC's care leaver population. Indeed, only small numbers of children in care and care leavers are referred to this body at present. Some other local authorities have successfully utilised their learning and skills contracted services to provide

specialist provision to their care leaver cohort. Surrey County Council, for example, has developed a 'linked learning' programme, which provides 16- to 18-year-olds with a free online gateway to continue learning and gain qualifications at home. Learning options include money management; nutrition and health; and enterprise and work skills, alongside more traditionally academic subjects. This approach may be worthy of further exploration, to ensure Kent is doing all it can to equip our young people with the right skills to manage their own homes and to live self-sufficiently.

Employment, Education and Training

The educational needs of children and young people in care and leaving care are assessed and supported through care planning and pathway planning to maximise the likelihood they will participate in some form of further education, training and employment.

KCC remains committed to supporting vulnerable learners, including care leavers, in order to reduce the attainment gap between those in care and their peers; to reduce the likelihood of vulnerable young people becoming NEET; and to ensure more people from disadvantaged backgrounds go on to Higher Education and apprenticeships.¹²

Virtual School Kent took on responsibility for educational participation and achievement for 16- to 18-year-olds in January 2015; the service was previously delivered by CXK (Connexions). It is expected this change will encourage the greater use of apprenticeships and access to further and higher education amongst the care leaver cohort. However work is in its early stages, and is primarily focused on delivering post 16 update training to the new children in care social worker teams to ensure they are informed about the most up-to-date options/support available to children in care and care leavers. The recruitment of four Post 16 support officers has enabled the service to begin forging links with education and training providers, so that they are better able to support young people to make more informed choices as to their options.

In line with the government's commitment to provide support to care leavers aged 21-24 who wish to return to education or training (set out in the Care Leaver Strategy), bursaries of £1,200 are offered to children in care and

care leavers who wish to attend FE courses, and £2,000 is offered to those who wish to go to on university. In Kent, we exceed this offer, providing all care leavers who wish to attend university with £3,000. We also assess each young person's needs, and may provide them with extra support eg to cover travel costs and similar items. In spite of this, the uptake of higher education amongst our care leaver cohort remains low.

It is now easier for care leavers to claim benefits so they do not experience delays when they leave care. Indeed, care leavers can claim Income Support and Housing Benefit if they return to full time, non-advanced education to make up for missed qualifications. However, there is currently no targeted, wrap-around national or local resource to assist young people aged 18+ who have not attained the necessary educational standards to enable them to progress through to further education, training and/or employment. More work could be done to identify and provide for those young people who may need additional support and assistance in order to achieve the right level of skills to give them the best life chances.

Appropriate Safeguarding

Safeguarding is, and remains, at the core of the support local authorities provide to all our young people, including those aged 16+. In order to assure ourselves that our care leavers remain safe and well, KCC staff maintain regular contact with them (dependent on their needs). But recent performance reports suggest that we are not currently in touch with as many care leavers as we need to be (58.4% in July 2015, against a target of 75%).¹³ This incongruity is likely to be attributable to a change in the way local authorities are required to provide statutory return information to government. This change means we no longer have the ability to highlight when contacts are not occurring because we know that a young person is safe and their circumstances have not changed, or where contacts have been reduced or halted at the request of the young person. This situation requires further monitoring to ensure we are doing all we can to maintain regular contact with our care leavers to make sure they are, and remain, appropriately safeguarded and that their statutory needs are being met.

As an authority, we are very aware of the risks of Child Sexual Exploitation and the overlap into exploitation in adult life. We are committed to working with our partner

agencies in order to reduce the risk of exploitation occurring, and to expose and eradicate it when it does occur. The Kent Safeguarding Children Board (KSCB) has a multi-agency CSE sub group, which focuses on ensuring agencies are working together to best effect in order to achieve this aim. The KSCB also has a missing children group, which ensures that divisions across KCC, as well as partner agencies, are working together to monitor, track, provide for and prevent young people from going missing. We must ensure that our children and adult social care divisions are working together effectively in order to minimise the risk of exploitation being perpetrated against any of the vulnerable individuals known to our services.

Guidance from the Children Act 1989 specifies that corporate parents should be aware of the risks of children entering the criminal justice system and states that it is good practice for local authorities to have strategies in place to reduce this possibility. There has been a substantial change in recent years in the management of low level offending. This includes the use of restorative approaches. Kent has committed to reducing the prosecution rates of our children in care and care leavers and to reduce the number of our young people involved in the criminal justice system in the Children's Development Plan. A joint Kent and Medway Protocol has been drafted to set out how best to address Criminal Justice Agency involvement with children in care and discussions are currently taking place regarding how to implement this protocol to best effect. The procedure recognises the value of encouraging the use of restorative justice and avoiding where possible formal criminal proceedings. We are further planning to undertake cross-divisional audits to assess joint working with young people either known to be at risk of offending, or whom are already known to the Youth Offending Service and our Specialist Children's Services Division.

Our Youth Justice teams closely monitor gang activity occurring across Kent and work closely with our partners to ensure vulnerable young people are not drawn into organised crime. Thanet has been nominated as an Ending Gang and Youth Violence (EGYV) area, to ensure appropriate levels of scrutiny and oversight is given to this issue. EGYVs support the development of an informed, evidenced-based view of how the local area is doing in terms of delivering on its EGYV ambitions and priorities (e.g. 'breaking the cycle' of crime and mobilising communities), and identify practical

actions to improve outcomes and productivity – looking at how all partner agencies are working together to achieve their objectives.

Case study

In June 2015 it was announced that Lord William Laming had been appointed to lead a major review to ascertain why such a high proportion of children in care and care leavers end up in the criminal justice system. The review has been established by the Prison Reform Trust to consider the reasons behind, and to determine how best to tackle, the over-representation of children in care in the criminal justice system.

Children in care aged between 10 and 17 years are more than five times as likely to be convicted or subject to a final warning or reprimand than the general population. 61% of 15- to 18-year-old girls and a third of boys in custody have spent time in care. However, for nearly two-thirds of children in care the main reason they are in care is that they have suffered abuse or neglect; only 2% are taken into care primarily because of their own socially unacceptable behaviour.

The review team has been formed from a broad cross-section of senior policymakers and practitioners, including social workers, police, magistrates, academics and other experts. It will be informed by a consultation group of children and young people who have been in care and been in trouble with the law. It is expected the review will conclude in April 2016.

KCC is keeping abreast of the review developments, and intends to use the learning from the study to enhance the design and delivery of local services to support our children and young people.¹⁴

What more could be done?

As county councillors, members have a crucial role in providing strategic oversight to ensure the council is fulfilling its statutory responsibilities in relation to care leavers. Members should also offer appropriate and timely challenge to ensure that the needs of care leavers, as with

all children under their care, are being met. As corporate parents, Members need to be assured that we are all working collectively to achieve the best outcomes for our care leavers, working with them to build the resilience which will enable them to live successfully as independent adults so that they can make a positive contribution to the communities in which they live.

In order to do this, and in light of the above information, it is suggested that members monitor and oversee progress in relation to the following areas of activity:

- request regular progress reports regarding the implementation of the 16-25 Accommodation Strategy Programme, with particular regard to improvements and impact of the care leaver 'pathway'
- ensure we are satisfied that the needs of care leavers are being met through the 'Supporting People' accommodation commitments, and that KCC is working with our district partners to best effect in order to prioritise the needs of care leavers in gaining access to social housing
- ensure that KCC continues with its aspiration to eradicate the use of B&B facilities for the accommodation of care leavers
- preside over the care leaver life skills 'offer'; review the training provision that is currently in place, and the timescales for implementation of the various initiatives. Request that evidence regarding training effectiveness and impact is obtained, drawing on feedback from our service users, children in care and care leavers. Ensure this evidence shows that training is being developed and updated in light of the feedback received, to ensure it remains relevant and useful
- have oversight of the numbers of NEET care leavers, and ensure that figures have been subject to data quality measures to obtain a true picture of the situation in Kent. Request regular updates of the initiatives that are being put in place, or that are planned to be implemented, to address the high numbers of care leavers not in education, training or employment
- request information to ascertain what support young people leaving care receive to access housing, and what assessments and support is provided to disabled young people to make a successful transition to adult services
- the Committee fully supports the use of restorative approaches to avoid, where possible, the criminalisation of children in care and to promote positive behaviour. It is suggested that progress against the implementation of the protocol is brought to a future Select Committee meeting

Recommendations

Informed by the evidence and the issues that we considered, we propose the following recommendations for the county council to endorse:

Recommendation

KCC should continue to strengthen work with our district partners (through Kent Council Leaders and Joint Kent Chief Executives) to prioritise the needs of care leavers in gaining access to social housing and support. This partnership work should consider district partners' 'supporting corporate parenting responsibilities' in relation to the accommodation needs of care leavers through mechanisms such as the Kent Housing Strategy and the Joint Housing Protocol.

Recommendation

KCC should review the independent living skills support arrangements for care leavers (including their training provision and who they should contact for support at whatever time).

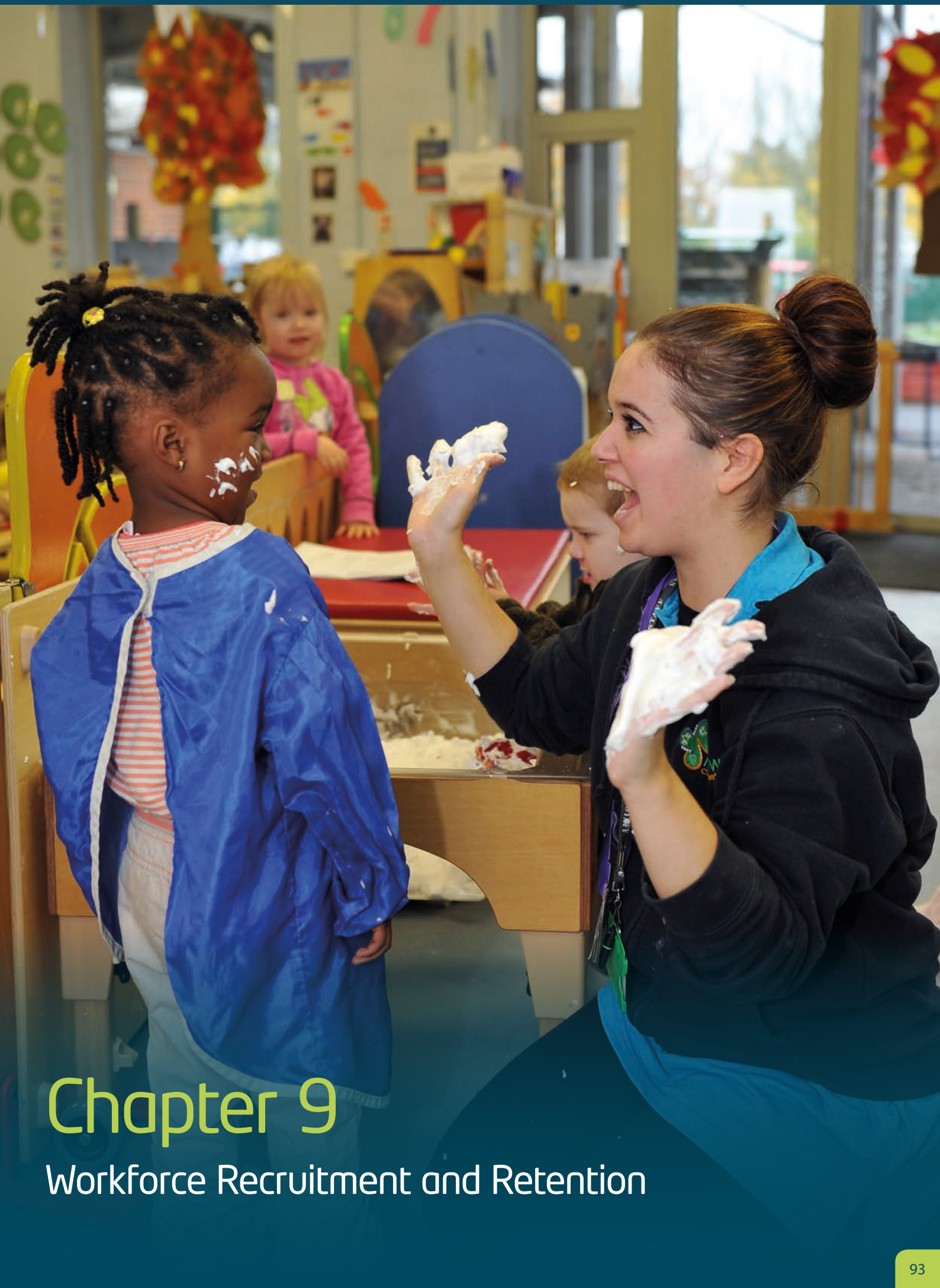
Questions members may wish to ask as Corporate Parents

How many care leavers are KCC still in touch with a year after they have left our care? How many are we in touch with after three years?

What do you know about the outcomes of children who were formerly in KCC's care?

How many of our former children in care are not in any form of education, employment or training (NEETs)? What are we doing to improve this?

What do former Kent children in care and young people say about the experience of leaving care and the support that was provided to them? What are we doing with this information, and how is it informing service design and delivery?



Chapter 9

Workforce Recruitment and Retention

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Workforce Recruitment and Retention

How effective is our professional workforce of social workers and others responsible for running services for children in care?

Introduction

In order for children and young people to be appropriately safeguarded and provided for, it is essential that they have a personalised care plan based on a thorough assessment of their needs. This is the responsibility of their allocated social worker. Across the country, local authorities have struggled to recruit and retain sufficient numbers of suitably qualified and experienced social workers to do the difficult job of effectively working with vulnerable children, young people and their families. This can be a key cause of poor performance, and it is an area which is central to Ofsted's evaluation of local authority effectiveness. A high turnover of staff can also be very detrimental to the experiences of children and their carers since a frequent change of social worker can lead to alienation, disengagement and, potentially, a perception of being uncared for. This chapter outlines the headline issues that are likely to have the greatest impact on our recruitment and retention of social workers.

Key points and high-level responsibilities

The Independent Reviewing Officer (IRO) service plays an important role in all local authorities and in their relationship with families, as IROs are able to challenge both individual instances of poor practice and also to have an overview of the effectiveness of care planning across the organisation. In some cases, the IRO may be the most constant figure in a child's life.

Research by the National Children's Bureau has highlighted key features of an effective IRO service. They include:

- ensuring that reviews and other activities are child-centred
- promoting the voice and experiences of the child
- providing independent challenge to local services and care planning systems
- creating effective relationships with frontline practitioners and strategic managers
- contributing to local policy and development.

Though they may be employed by local authorities, IROs need to be independent of other children in care services in order to be effective and it is expected that local authorities should be able to demonstrate this.

A high proportion of the national social care workforce are either new or recently new entrants to the profession. In fact, a study in 2014 found that one in ten local authority social workers across the UK at that time were newly qualified.¹ In order for these individuals to develop the skills to become motivated, competent and experienced social workers in their own right, they need additional and ongoing support throughout their qualification placements and in their first year in work (Assessed and Supported Year in Employment and local authorities need to be in a position to provide them with this support. Yet seemingly counterintuitively, in spite of the high numbers of newly-qualified social workers (NQSWs) there are still fundamental and long term staffing shortages across the social care sector as not enough people are choosing to enter the profession. This was graphically illustrated in a recent study which, utilising the Centre for Workforce Intelligence Supply and Demand Model, suggested that even with optimistic projections regarding the proportion of social work students moving into the profession, the supply of staff will only come close to equalling demand in 2022.²

This shortage has been compounded by related national issues around the retention of qualified staff. Indeed, large numbers of social workers have left permanent local authority employment over recent years in order to work for agencies. Recent data sourced from the Community Care magazine annual survey, for example, shows us that whilst overall social worker vacancy rates have dropped across the country, there has been a simultaneous rise in the number of agency staff employed by local government - up by a third between 2012 and 2013.³ This has contributed to increased costs levied on local authority finances and greater instability within their workforces.

“I believe that social workers are the most important as they support you. So when they change it’s not helpful.”

Feedback from a Kent child in care

Members can also help shape strategic planning in relation to the approach each local authority takes to the recruitment and retention of its social care staff. It is important to note that although qualified social workers are key to fulfilling local authorities’ statutory duties to support and safeguard children and young people, there are also a host of other employees who are essential to the running of an effective social service. All council officers and members should also be aware of their responsibilities to children in care, such as those in Early Help services, environment and leisure services, education, legal services and public health departments.

The Kent Picture

The South East region as a whole has faced a particularly marked challenge in recruiting and retaining enough qualified social workers within local authority employment over recent years. Indeed in September 2014, the South East was carrying a significantly higher children’s social work vacancy rate than the national average (17.6% compared with a UK average of 14.9%).⁴ Like our neighbours, Kent has historically struggled to attract and maintain enough qualified social workers to fulfil our statutory and moral duties to children, young people and their families. Staff shortages have been particularly acute at first-line management level (team manager). However, we have made some headway irrespective of these obstacles. In

September 2015, Kent was carrying a low vacancy rate of 3.9%, with 75.7% of our caseholding posts being filled by permanent, KCC employed qualified social workers and 20.4% being held by agency staff.⁵

We have driven down our average caseload levels, so that our social workers have more time to do direct work with families (we average 17 cases per social worker in our children in care teams and 19 per staff member in our Assessment and Intervention and Family Support Teams). Moreover, senior managers have made a commitment to maintaining a caseload ‘ceiling’ to ensure practitioner workloads are actively managed and remain at a reasonable level. Staff turnover has also reduced, from 16.9% in September 2014 to 10.6% in March 2015, suggesting that efforts to retain our social workers may be beginning to have an impact.⁶ To add to this, we have made progress in recruiting more permanent team managers with, for example, all but one post filled by permanent employees in the West Kent area at the present time.

Specialist Children’s Services has developed a Social Work Contract which clearly sets out the standards we expect from our social workers and the support which the organisation will offer them in return; it conveys how we value professional practice and the contribution made by our children’s social work staff. We have also developed a robust Recruitment and Retention Strategy, which is underpinned by a focused action plan designed to ensure that our employment ‘offer’ is as attractive and effective as possible. Progress against the plan is monitored by the Resourcing Group and regular reports are presented to the SCS Divisional Management Team, SC Directorate Management Team and Cabinet Committee. What is more, a monthly HR performance dashboard has been developed to assist managers and members to maintain oversight of information relating to recruitment and retention levels, sickness rates and Total Contribution Pay (TCP) performance scores.

It is worthy of note that a recent survey of Kent’s children’s social work staff identified the ‘top five’ reasons why people may wish to leave either local authority employment and/or the social care profession. They include: salary (66.7%), the flexibility and the nature of the work (both 22.2%), opportunities for training development (22.2%) and the working environment (22.2%).⁷

In August 2015, KCC had to increase its workforce by taking on a peripatetic team of social workers dedicated to supporting the greater numbers of UASC in care whom are entering Kent from the continent.

What are we trying to achieve?

Even though there are many different ways that we are approaching recruitment and retention as an organisation, we have identified three core outcomes that we feel will have the most significant impact on recruiting and retaining the best staff to work with our young people and to improve their life chances.

Below, we have set out what we aspire to accomplish as good corporate parents and as a successful organisation in this regard.

We want to attract sufficient numbers of highly skilled, motivated and capable social workers to work with Kent's children, young people and their families.

KCC wishes to recruit social workers with the right skills to support our children, young people and their families. We want to ensure that social workers from across the UK view us as an 'employer of choice'; that we are regarded as having an attractive and competitive recruitment offer and as being a generally good organisation to work for. It is essential that we attract the right numbers of experienced, skilled and qualified staff to do the difficult job of working alongside Kent's children and young people to ensure they are appropriately safeguarded and to help them develop individual and familial resilience. It is also essential that we recruit the right numbers of supervisors and managers to support this work, alongside successive generations of NQSW who will become the experienced staff and managers of tomorrow.

We aim to ensure that our frontline social workers and managers want to continue to work for KCC because they are satisfied in their jobs, fulfilled by the work that they do and feel valued as employees.

We strive to successfully retain our experienced social workers. Research shows that local authorities face multiple barriers to retaining their qualified social work staff. Nationally, many local authorities have high turnover rates, as evidenced in numerous Ofsted reports. Studies have also shown that many social workers suffer from low workplace morale (indicated through high levels of staff absence due to illness). These problems are compounded by the comparably short working life of someone in this profession ie the amount of time people stay in one career before leaving it, from point of qualification to renouncement – currently averaging just 7.7 years for females and 8 years for males.⁸ However, there is a lot we can do to make sure that our staff want to stay working with us. We intend to continue to strive to ensure our social workers feel valued and supported within their teams, by ensuring they receive competitive salaries; good management and supervision; that they are provided with reliable advice and guidance in order to ensure best quality practice and that they achieve the right work-life balance.

We want our social workers and support staff to feel they are working in the right environment – that they are receiving sufficient guidance, backing and training to do focused work with children and families, and to enable them to grow and progress within their chosen profession.

We seek to ensure that our staff feel they are working in the right environment which supports them to grow and develop as professionals. Underpinning the development of an effective approach to both recruitment and retention is fostering the right working environment to enable people to grow and develop professionally. Alongside consistent and supportive management oversight, our social workers need to feel that they have access to the right level of post-qualification training in order to practice good quality social work, and that they operate in an environment in which reflective practice, so central to their work with children and families, is the norm. Our staff should be able to see how they can progress within their chosen career, and to expect to receive the right support to enable them to do so. KCC

is a learning organisation, and as such we are committed to creating a culture in which continuing professional development is part of our everyday work. Our social workers should have the right infrastructure around them (ICT, policies and practice guidance, etc) to enable them to commit to this.

Case study

Whilst social work vacancy rates remain high across the UK and councils increasingly rely on agency staff to address any establishment shortfalls, the Children and Family Court Advisory and Support Service (Cafcass) - the organisation that represents children in family court cases - has a vacancy rate of less than 3% and has significantly reduced the number of agency staff it employs (from 464 to 107 between 2010-2014).

Cafcass attributes its success to a number of factors, including:

- **staff having control over their working lives and the ability to use their own professional judgement:** Cafcass staff are able to work flexibly and remotely. They can also be granted delegated authority to audit and close their own cases after three consecutive assessments which show they are meeting organisational expectations in relevant types of work such as safeguarding letters and case files (though there is still management oversight, as managers quality-assure examples of work each month). This has created a 'high trust' model of work which staff value and have responded to
- **training and development support and opportunities:** staff have access to the organisation's in-house schemes as well as training in collaboration with local authorities and a suite of e-learning with a focus on self-directed professional supervision, and a personalised learning approach based on individual needs and stages of development
- **a commitment to employee health and wellbeing**
- **a commitment to 'a reduction in bureaucracy'** and a move towards paperless working and enhanced technology.

Cafcass has also invested time and resource into the development of an e-recruitment system which it states has been 'instrumental in attracting high quality social workers' to the organisation. The process includes an online assessment centre where applicants are presented with real-life scenarios, designed to ascertain how they use evidence in everyday practice.

KCC intends to review the Cafcass model to determine which lessons could be usefully adapted to enhance Kent's own recruitment and retention processes.

What are we doing at present?

The section below sets out what KCC is currently doing to achieve our core outcomes in terms of recruitment and retention.

Recruitment

KCC has worked hard to ensure we are offering very competitive rates of pay in comparison with other local authorities eg Essex, West Sussex, Swindon and a number of the London boroughs. We have also worked (and are continuing to work) hard to enhance our training and working environments (see section above on social workers working in the right environment, for more information) so that our staff want to stay with us into the future, thereby reducing our reliance on temporary agency staff. On top of this, Kent offers all our NQSWs a £2,000 'golden hello' to inaugurate their starting salaries.

Our organisation has been working with higher education institutions in Kent to ensure they are delivering high quality social care courses; this allows KCC to maintain a consistent flow of competent NQSWs coming into our organisation. We have also recently undertaken a recruitment campaign targeted at attracting NQSWs, and these approaches combined have led to a high number of successful appointments, with 50 NQSWs starting with KCC between September and December 2014. This approach has been complemented through the development of a 'grow our own' social worker scheme, which identifies and develops non-qualified staff into qualified social workers via a three year programme of study. Five individuals

were appointed to this programme in 2014, and ten were appointed in 2015.

The current recruitment campaign has been focused on attracting team managers and experienced social work practitioners to Kent. In addition a number of experienced professionals were recruited from overseas in 2014. We have further maintained an active presence at national recruitment events such as those run by Compass in London and Birmingham as part of this drive. Work has been undertaken to improve Kent's online presence in relation to children's social work using social media channels and the recruitment micro-site that was developed to make information about our organisation and the jobs that we advertise easier to find and access.

HR regularly undertakes a New Joiners Survey to determine how engaged our new employees are with us as their employer. It is used to assess what attracted them to work for us in the first place and to identify the positives and negatives of their experiences of the recruitment process and of their first few months at work. This information is then used to inform and improve our recruitment systems and retention plans. The most recent New Joiners Survey, undertaken between 1 January 2014 and 30 September 2014, showed us that 94% of the staff who responded had given us a positive score on 'Friends and Family' tests. What is more, the vast majority of our new starters wanted to continue working for KCC – though feedback also showed more could be done to draw their attention to the Division's business priorities.

Retention

Whilst exit surveys are not normally undertaken with professionals leaving our organisation, focused interviews are offered to some staff and managers to enable us to understand what has motivated them to leave. This information is then considered in relation to retention initiatives targeted at staff that may be looking to leave our employment in the future. Surveys are also undertaken with SCS's current employees and even staff who have only recently joined the organisation, to identify what 'push' and 'pull' factors may entice them to leave their employment with Kent. This information is used to shape our retention plans, and is under continual review.

KCC regularly evaluates the rewards and benefits that our organisation offers to children's social workers, to ensure they remain competitive and that the hard work undertaken by our staff is appropriately rewarded via the reward and recognition process (Total Contribution Pay). To augment this offer, and to introduce a system which better facilitated career progression, a professional Capability Framework was implemented in May 2015. This was specifically honed to allow social work staff at KR9-KR10 grades to build up a portfolio which recognised their skills and achievements leading to opportunities for promotion. It was recognised that the system required refinement to ensure it was effective, and to this end a review was conducted in September 2015 to determine how the process could be streamlined to minimise any barriers to access and achievement. It is anticipated the Framework will remain in place until the launch of the national Knowledge and Skills Statement for children and family social workers, anticipated to take place in 2016, which will change the process for advancement across the profession. However, in the meantime a further review is scheduled for April 2016 to determine whether the modifications made to the current system have been effective.

In order to reduce the organisation's reliance on agency staff and to improve the stability and motivation of our workforce, KCC has signed up to a Memorandum of Cooperation (MOC) with a number of other local authorities in the South East of England such as Surrey, East Sussex and Medway. This agreement aims to reduce competition between local authorities for qualified social care staff by identifying the ways in which authorities can work together across a range of measures to mutual benefit. Work has been in progress to develop and implement the MOC since November 2014, and Phase 1 of the Memorandum (which focuses on improved information sharing and a commitment to desisting from aggressive headhunting techniques) is due to be completed in November 2015. Phase 2 of the MOC (which works towards achieving comparable rates of pay across authorities, and potentially introducing measures to dissuade permanent staff from moving onto agency contracts etc) is due to be implemented between November 2015 – May 2016.

KCC has embraced the Principal Social Worker (PSW) post as championed by Eileen Munro, and their role within the organisation as the voice of children's social workers across

our authority. Our two PSWs both support individual social worker development and provide valuable feedback to senior managers about the requirements and needs of our frontline staff. This information can then be used to ensure we are putting our resources in the right areas to develop and foster consistently good reflective practice, supervision and support across our workforce. A good recent example of an effective, practice improvement methodology initially spearheaded by Kent's Principal Social Workers is the Signs of Safety Model of social work – an innovative, strengths-based approach to managing risk with children from Early Help through to children in care, which is currently being rolled out across the county.

Working Environment

Kent has invested in an updated, integrated case recording system (Liberi) to ensure that our ICT and surrounding infrastructure is facilitative to good social work practice, rather than acting as a barrier to effective casework. As part of our transformation activity, KCC's Specialist Children's Services Division is working with efficiency partner Newton Europe to improve the operating environment of our social care teams by streamlining services to support good practice, enhancing working arrangements and, through these changes, strengthening the effectiveness of our work with families. Improvements brought about by the Unified 0-25 Transformation Programme include:

- **merging the functions of the Assessment and Intervention Teams (AIT) and the Family Support Teams (FST) to ensure continuity of support for families. The resulting locality children's social work teams cover the full breadth of SCS' intervention with families whilst maintaining the children in care service and structures.**
- **ensuring managers get protected time to manage the casework of their teams**
- **enhanced the support we offer to young people on the 'edge of care'**
- **changes to the Central Referral Unit to build on management capacity and the quality assurance of consistency in decision-making alongside a better alignment between SCS and the Early Help triage service.**

In spite of pressures brought about by the increase in UASC, the transformation process has led to a marked reduction in caseloads for some social workers, meaning that they have more time to work directly with families. In Maidstone, caseloads were reduced by an average of 5.4 per social worker within the first three months of the Newton project 'go live', whilst Shepway has seen a 2.5 caseload reduction per practitioner. The Early Help transformation programme has now completed its work in the West of the county, and work has now started across the remaining county areas.

KCC is committed to ensuring that our staff are able to participate in regular professional development and training activities. The training package offered to social workers, managers and social work assistants has been reviewed and redeveloped to ensure it remains relevant, pertinent and is seen as useful/desirable by our staff.

What more could be done?

As county councillors, members have a crucial role in providing strategic oversight to ensure the council is fulfilling its statutory responsibilities in relation to the recruitment and retention of qualified social workers. As corporate parents, members need to be assured that we are all working collectively to achieve the best outcomes for our children, working with them to build the resilience which will enable them to live successfully as independent adults and as future parents that can make a positive contribution to the communities in which they live.

In order to do this, and in light of the above information, it is suggested that members monitor and oversee progress in relation to the following areas of activity:

- **keep abreast of developments to support flexible working options and reflective practice- two areas which our staff have told us are important in relation to their job satisfaction and which have a significant impact on their work with children and families. Ensure that updates also address whether there are enough opportunities for social workers to develop their skills and to engage in training**
- **request regular progress reports regarding the implementation of the Memorandum of Cooperation with other authorities across the South East of England**

- Maintain oversight of developments in relation to the Professional Capability Framework, in particular the results of the April 2016 review, and progress in relation to the national Knowledge and Skills Statement for children and family social workers.
- Request updates to ensure that newly qualified social workers are receiving the right levels of supervision and support to become effective, motivated and experienced social workers.
- Request evidence to show what children and young people say about their experiences of engaging with social workers and other professionals, and to illustrate how their views are informing recruitment and the development of services.

Recommendations

Informed by the evidence and the issues that we considered, we propose the following recommendations for the county council to endorse:

Recommendation

Processes need to be established to ensure all members take an active role in getting to know our frontline staff and their concerns, informally as well as via formal consultation exercises. We should also ensure that feedback from our social workers is informing the development of activities and planning at all levels of the organisation. Protocols must be established to clarify this process.

Questions members may wish to ask as Corporate Parents

What is the profile of the social work workforce in the authority?

What data is available regarding:

- social work vacancies?
- caseload levels?
- turnover of staff?
- stress-related and other sickness rates?
- the deployment of agency and temporary staff?
- the ratios between newly qualified and experienced social workers?

What proportion of social workers' time is spent doing face-to-face work with children in care as opposed to paperwork, and could this be improved?

What does the annual IRO report say about the effectiveness of care planning in the authority? What action has been taken to address any weaknesses that it identifies?

Chapter 10

Conclusion and Questions Members
may wish to ask

Conclusion

The children and young people who have come into local authority care are some of the most vulnerable in our society; many have suffered significant levels of abuse and neglect prior to coming into care, and it is the collective responsibility of the whole council – members and officers alongside our partner agencies - to ensure that they receive the best possible support and protection.

All good parents want the very best for their children, and it is our statutory duty to ensure that every child we look after is able to flourish by being safe and happy, doing well at school, having good health and enjoying fulfilling relationships with their peers. As they grow towards adulthood, our young people should be equipped to lead independent lives and to make their way as young adults with good jobs, access to higher education and financial security.

It is the responsibility of all members, not just the lead members for children's services, to work hard to ensure that our children receive the right support to enable them to reach their full potential.

This report aims to provide members with a framework to ensure that we have a comprehensive understanding of our statutory responsibilities to children in care.

The recommendations in this report aim to:

- **provide members with a framework to ensure that we have a comprehensive understanding of our statutory responsibilities to the children within our care**
- **ensure members are aware of what we need to do and what questions we need to ask of our officers in order to ensure we are doing the right things as an organisation to support and provide for our children and young people**
- **make sure we have the right systems and structures in place to fulfil our corporate parenting duties in the best and most effective way**
- **make certain that the voice of the child informs everything we do, from casework to organisational design and delivery**
- **strengthen the work we do with our partner agencies to ensure that the needs of children in care and care leavers are prioritised.**

At Kent County Council, we take seriously our moral as well as our legal responsibilities to our children and we will continue to strive to improve our services so that our young people can experience happy and fulfilling lives.

Questions Members may wish to ask as Corporate Parents

There are a number of key questions which we may wish to ask, in order to satisfy ourselves that we are fulfilling our corporate parenting responsibilities in relation to our children in care:

Political and Officer Corporate Parenting Responsibilities:

- do children in care have information about our role as political corporate parents and not just about those members with Executive responsibilities?
- do all members undertake mandatory training on our roles and responsibility as corporate parents upon being elected and refreshed during our term of office?
- do we make use of appropriate opportunities for us to meet with and listen to our children in care?

Health and Wellbeing of Children in our Care:

- what proportion of children's health assessments and dental checks are carried out on time? What access do children in care and care leavers have, as an at-risk group, to services to help with substance misuse, sexual health and teenage pregnancy?
- who is the designated doctor and nurse for children in care, and how do they work to ensure KCC is working with the NHS to best effect in order to meet the needs of our children?
- what do children in care and young people themselves say about their health needs and priorities and how well they are met? Is this evidence being used to inform the commissioning of services? Does local Healthwatch provide support to champion the voices of children in care and care leavers as part of its wider work across local health services?

Education and Employment of Children in our Care:

- What services are available to support the education of children in care across KCC:
 - how is this support delivered?
 - what impact do our services have?
 - what evidence is there of this impact?
 - how can members scrutinise these services?
- How well are our children in care doing:
 - against their local peers and children in care peers?
 - with neighbouring authorities?
 - what are the education, employment and training destinations of our children in care?

Fostering and Residential Care Arrangements for Children in our Care:

- identifying a strong placement requires choice, effective assessment and planning processes and listening to the views and wishes of children and their families throughout the placement process. Are there any improvements which could be made to our fostering processes?
- residential: Are we doing everything that we can to keep children in residential care close to their families. What do we know about the outcomes of children within residential care in comparison to other children in care?
- are we doing everything we can to prevent placement breakdown, including specialist training for foster carers and strong respite options?
- can we improve how children influence the shape and commissioning of the service?

Adoption and Support Arrangements for Children:

- what is the Kent context of reduced placement order numbers? What work is being done with the judiciary to ensure that children are having access to adoption as a care pathway?
- how is the profile of our children awaiting adoption changing? How is the service developing to deliver to these changing needs (including recruitment, support services pre and post adoption)?
- how are we responding to feedback collected from

children and adopters? Are changes changes actioned and monitored?

- how are we working to reduce sibling placement breakdown? What are the challenges here? How can we improve access to and the availability of post adoption support packages available?

Young People Leaving Care Arrangements:

- how many care leavers are KCC still in touch with a year after they have left our care? How many are we in touch with after three years?
- what do you know about the outcomes of children who were formerly in KCC's care?
- how many of our former children in care are NEET? What are we doing to improve this?
- what do former Kent children in care and young people say about the experience of leaving care and the support that was provided to them? What are we doing with this information, and how is it informing service design and delivery?

Workforce recruitment and retention:

- what is the profile of the social work workforce in the authority? What data is available regarding:
 - social work vacancies?
 - caseload levels?
 - turnover of staff?
 - stress-related and other sickness rates?
 - deployment of agency and temporary staff?
 - ratios between newly qualified and experienced social workers?
- what proportion of social workers' time is spent doing face-to-face work with children in care as opposed to paperwork, and could this be improved?
- what does the annual IRO report say about the effectiveness of care planning in the authority? What action has been taken to address any weaknesses that it identifies?

Acknowledgements

The Select Committee would like to thank the witnesses including members, KCC officers, external partners, and most importantly the young people who gave up their time to give evidence to this review by attending evidence gathering sessions, submitting written evidence, or providing background information.

All the information received, whether or not it has been included in the final report, has contributed to the Select Committee's knowledge and appreciation of the issues.

Our thanks go to our Strategy, Policy, and Assurance officers including: Michael Thomas-Sam; Jennifer Maiden-Brooks; Serine Annan-Veitch; Amanda Hornsby; and David Firth; our Research Officer Gaetano Romagnuolo, whose support in gathering and analysing information has been invaluable, and to Democratic Services.

Minutes of Hearing Sessions

Substantive time of the Select Committee was dedicated to evidence gathering hearings where internal and external witnesses were invited to give evidence. The full details of all the evidence hearing at the public meetings can be accessed via the following link below:

<https://democracy.kent.gov.uk/ieListMeetings.aspx?CId=850&Year=0>

In addition, written evidence was submitted by identified interested organisations, a list of which can be accessed via the link above.

Appendices

- A List of evidence gathering/site visits
- B 'Your Corporate Parents' leaflet (Kent County Council)
- C Examples from abroad
- D Map of residential provision
- E Extract from Kent County Council Policy: Care leavers and transition to adulthood 'definitions of care status for former relevant children and qualifying young people'.

Appendix A

Committee interviews/site visits

Tuesday 24th February 2015

- **Ann Allen**, KCC Member and Chair of Corporate Parenting Panel
- **Tony Doran**, Headmaster – Virtual School Kent
- **Sinead Whelan and Sarah Jenner**, Senior Practitioners – Children in Care Team, KCC

Friday, 27th February 2015

- **Andrew Ireland**, Corporate Director – Social Care, Health and Wellbeing, KCC
- **Catherine Atkins, Janet Latter, Janette Sams and Nicki Bailey**, Kent Foster Carers
- **Christine Liggins, Kim Keen and Neil Foad**, Independent Reviewing Officers, KCC

Monday 2nd March 2015

- **Susan Cruickshank**, Clinical Lead for Children in Care in Kent and Medway and Jo Scott, Programme Director – Kent and Medway Children and Young People's Services, Sussex Partnership Foundation Trust
- **Nancy Sayer**, Designated Nurse for Looked After Children for Kent and Medway

Thursday 12th March 2015

- **Annabelle Taylor, Kahleigh Jenner and Matthew Roberts**, Apprentices with Virtual School Kent, KCC
- **Nick Wilkinson**, Youth Offending Service, KCC
- **Yashi Shah**, Interim Head of Adoption Service and Improvement, Coram/KCC

Wednesday 18th March 2015

- **Jenny Boyd**, Director of Local Delivery West, Councillor **Dick Madden**, Lead Member for People Operations and Chair of Corporate Parenting Panel, Sheila Woodward, Community Involvement and Engagement Manager, Essex County Council

Thursday 19th March 2015

- **Noreen Ahmad-Bhatti**, Designated Doctor for Looked After Children, East Kent
- **Teresa Vickers**, County Manager – Fostering, KCC
- **Philip Segurolo**, Acting Director – Specialist Children's Services, KCC

Monday 5th October 2015

- **Andrew Scott Clarke**, Director of Public Health, KCC
- **Carol Infanti**, Commissioning Officer, KCC
- **John Littlemore**, Chief Housing Officer, Maidstone Borough Council

Friday 9th October 2015

- Informal site visit to St Peter's House, Thanet. Social workers, focus groups and one to one sessions

Monday 26th October 2015

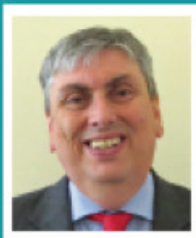
- Informal evidence gathering session with children in care

Appendix B

Your corporate parents

Your “corporate parents” are the people in your local authority who take on the role of looking after you as a child in care.

Our Children in Care Council (known as the OCYPC) and Young Adults Council (YAC) speak to corporate parents as representatives for children in care across Kent, telling them their views of being in care.



Andrew Ireland

Corporate Director of Social Care, Health and Wellbeing

I am the senior director responsible for all social care services in Kent. Part of my job is to make sure that we are meeting the care needs of children and young people to a high standard.



Philip Segurola

Director of Specialist Children’s Services

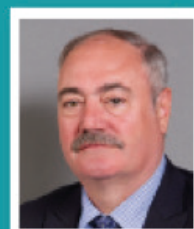
I am the director responsible for children’s social services in Kent. I make sure that our social workers have everything they need to properly support you while you are in our care.



Peter Oakford

Cabinet Member for Specialist Children's Services

I am a County Council Member, elected by local people. I steer and shape how care services for children and young people are run. I also make decisions about what we do for children in our care and how we should do it.



Ann Allen

County Council Member

I am the Chairperson of the Corporate Parenting Panel. This group is here to help make sure that what the council does, and the decisions it makes, helps to improve the wellbeing of children and young people in our care.

Tony Doran

Head Teacher at Virtual School Kent

My role is to make sure that you are receiving all the support you need to help you achieve your best at school and college.



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Appendix C

Examples from abroad

The 'Investing in Children's Services: Improving Outcomes' 2014 was published by the European Social Network and it advocates the development of effective social policy and social care practice through the exchange of knowledge and experience. The report reviews children's services in several European countries and it highlights good practice examples in this field.

Ireland

In Ireland a new Child and Family Agency was established in January 2014 with the aim of providing a more equal, co-ordinated and focused approach to the delivery of care for children and families. The responsibilities of the Agency include child welfare and protection services, child and family-related services and the National Education Welfare Board. The establishment of the Agency represents one of the largest and most ambitious public sector reforms, involving over 4,000 employees and a budget of over €570 million.

Better Outcomes, Brighter Futures: the National Policy Framework for Children and Young People 2014-2020 was launched in April 2014 in order to provide a seamless, whole-of-childhood approach to the development of policies and services to improve children and young people's outcomes. The policy requires that services should be of quality, outcomes-driven and able to prove their effectiveness and value for money. Strategies are coordinated through this single policy framework. The establishment of an infrastructure for monitoring and evaluating services is provided by the new Child and Family Agency.

Poland

In Poland, families identified as having problems with the care and upbringing of a child may be eligible for a "family assistant", who acts as the point of contact and support for families and their children. The Blue Card is a mechanism for guiding the actions of basic and specialist social services when a child or young person has been identified as being at risk. It has various layers of risk with a matching set of actions for social services, local health and education professionals and the police.

The 2011 Act on Family Support and Foster Care focuses on preventive and intensive work with families to avoid the placement of children in care. The Act also emphasises that care should take the form of professional foster families and family homes. Since the introduction of the Act, there has been an increase in the number of family assistants. From 2015 onwards, municipalities will become responsible for hiring the assistants directly, which will further clarify the municipal role in co-ordinating the preventative work with children and families.

Sweden

In Sweden, the 2001 Social Services Act requires that municipalities assess the needs of children who may be at risk. In their assessment they work with families, health and education professionals, who share the statutory duty of reporting to social services when a risk has been identified. The National Board for Health and Welfare provides a system of risk identification and documentation (BBIC) used by social services in almost all municipalities

In the country there is an emphasis on evidence-based practice in the delivery of education, health and social care based on the best available knowledge and assessment of the child or the family's needs and circumstances. For instance, the growing number of unaccompanied children implies that they should be recognised as individuals and not as another group that is expected to have relatively similar needs.

A highly influential study by Vinnetljung et al (2005) on the educational attainment of children in care concluded that the single best indicator of future achievement and development of children in care was achieving the basic level of education which, at the time, consisted of qualifications in Swedish, mathematics and English. This study had a significant impact on the country's education service.

One subsequent initiative involved the introduction of classrooms and education residential care settings, with high staff to pupil ratios, to offer children in care who had poor experiences in mainstream education the opportunity to start afresh.

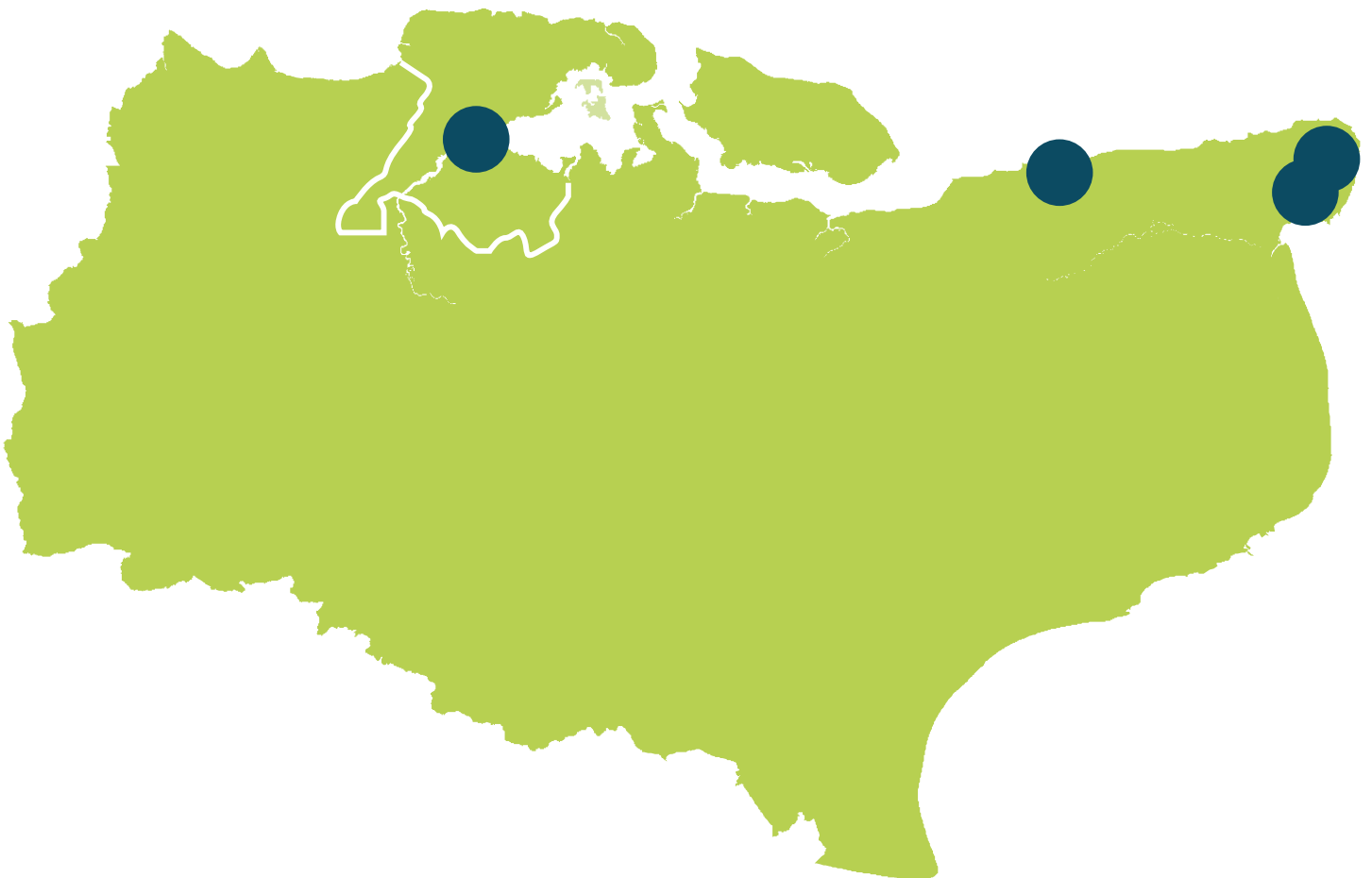
Scotland

Responsibility for child protection is devolved to the Scottish administration. Local authorities are responsible for ensuring that child protection procedures are pursued by all relevant agencies and overseen by local Child Protection Committees. These committees bring together key local services to ensure that there are common procedures, guidance and training and to oversee any reviews of particular cases that warrant a retrospective inquiry.

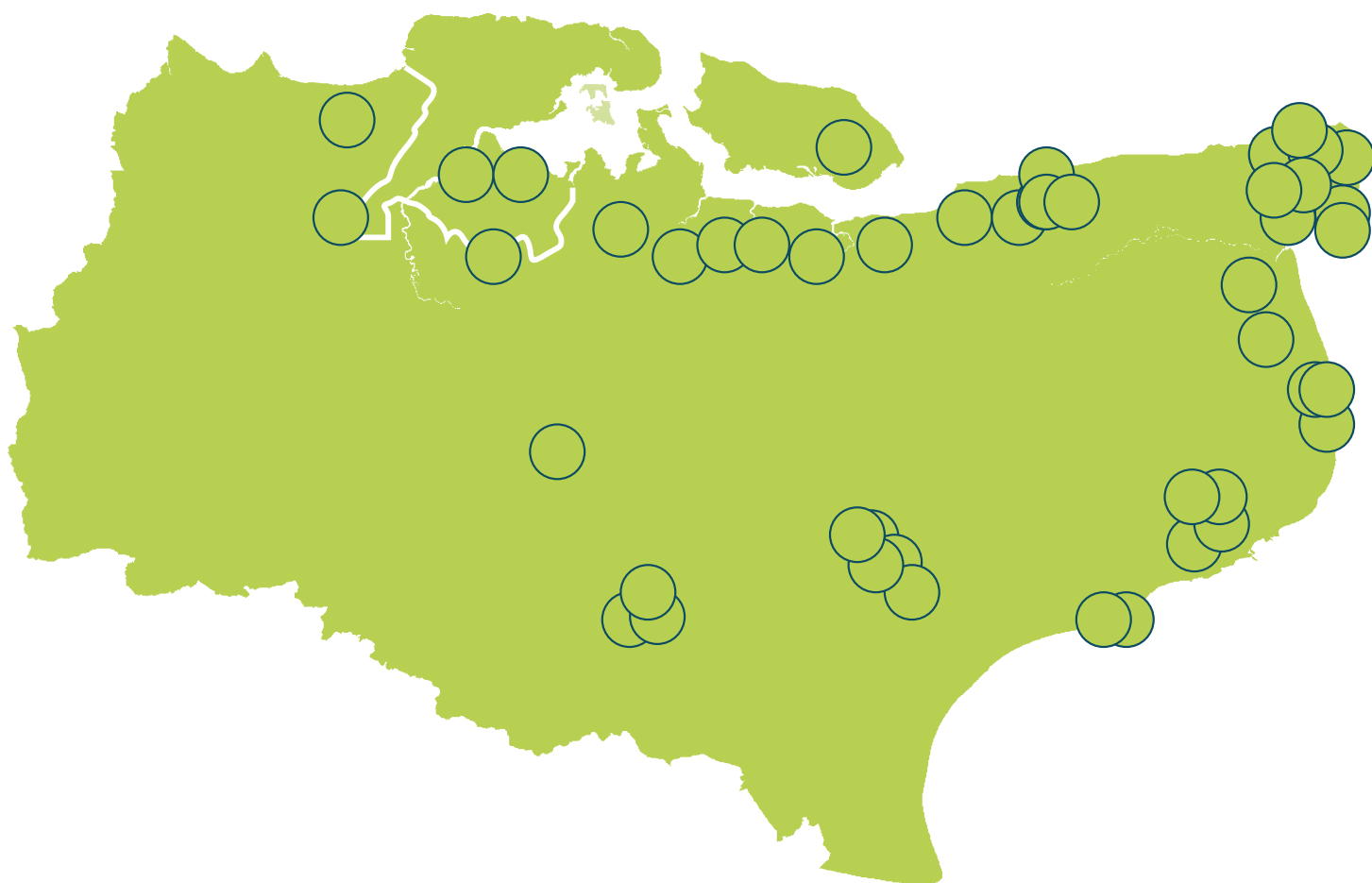
The support for vulnerable children takes place within the 'Getting it right for every child' (GIRFEC) framework. GIRFEC seeks to put into practice a series of key principles that ensure public services provide full and appropriate support for children and young people. These principles include planning to meet the identified needs, finding the right cooperation structures and ensuring that all actions are driven by the child's well-being, with each child having their own plan and a designated professional providing a single point of contact.

Appendix D

The chart below shows the geographical distribution of residential homes run by the local authority



The second chart shows the location of private or voluntary-run children's homes as at the 31 March 2014 (both charts are extracts from the Department for Education: Children's home data pack, as at 31 March 2014).



Appendix E

Definitions Of Care Status For Former Relevant Children And Qualifying Young People

Eligible Children

Young people aged 16 and 17 years of age who have been looked after for at least 13 weeks (with at least one episode of care lasting more than 4 weeks) since the age of 14 years and who continue to be looked after for at least 24 hours following their 16th birthday.

Children or young people receiving a number of short term breaks, none longer than 4 weeks and who return to their parents or someone with parental responsibility, do not meet the criteria of an eligible child.

Time spent by a young person in a hospital or in custody immediately prior to being looked after does count as time looked after for the purposes of defining entitlement to services and support as a care leaver. These young people would become eligible if they met the 13 week requirement and, after discharge/release from hospital/custody, they become Relevant Children following their 16th birthday if under 18 years, and a former relevant child following their 18th birthday.

Relevant Children

Children and young people aged 16 and 17 years of age who met the criteria as an eligible child but ceased to be looked after prior to their 18th birthday.

Qualifying children and young people over 16

This refers to young people between the ages of 16 and 21 who have been looked after for at least 24 hours following their 16th birthday and do not meet the 13 week criteria necessary to become an eligible or relevant child.

Young people who have been privately fostered or were looked after immediately prior to becoming subject to a Special Guardianship Order also come under these criteria following their 16th birthday.

An eligible or relevant child who successfully returns home to their parents would revert to the care leaver status of a

'qualifying child/young person' if their return home was deemed permanent (usually determined as a minimum of 6 months);

- If a young person was looked after following their 16th birthday for any period over 24 hours but less than a total of 3 months.
- If a young person, since age 14 years has been looked after but has not been looked after for more than a month in any single period.
- Young people who were eligible but returned home permanently, prior to 18th birthday.
- Any young person who is subject to a Special Guardianship Order who was immediately prior to the making of the order looked after.

This status lasts until the young person's 21st birthday. Other than those in Higher Education (university) where there is an entitlement for the Local Authority to pay for their accommodation costs over the vacation periods, the level of support provided by the Local Authority is significantly less than it is for former relevant children.

Former Relevant Children

Young people who are not children but rather young adults aged between 18 and 20 who met the criteria of an eligible and/or relevant child prior to their 18th birthday and who have subsequently reached 18 years of age.

The category extends up to a young person's 21st birthday or 25th birthday if they are disabled or engaged in Higher Education and (since April 2011) if after 21 they wish to pursue some form of Further Education.

Former Relevant Children pursuing Further Education post 21 years

This refers to young people aged 21 to 24 years of age who met the criteria of a former relevant child prior to their 21st birthday and who have subsequently returned to further education or expressed a desire, to the responsible authority, to pursue further education beyond their 21st birthday.

Responsible Authority

This is the council/local authority that last looked after the young person and therefore remains responsible for providing the Care Leaver Service to the young person as a qualifying, relevant or former relevant child wherever they are living.

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