

**CHILDREN AND YOUNG PEOPLE IN AND LEAVING CARE
PARTNERSHIP
STRATEGY**

2018 - 2021

Partnership Members:

Essex County Council

Essex Foster Carer Association

Essex Police

Designated Doctor and Nurses for Looked After Children, Essex, NHS

12 District/City and Borough Councils

Children in Care Council (represented by Involvement Team)

Our Vision

In Essex we are committed to supporting children to remain within their families. We do so by working with them to bring about change, so that parents and carers are able to provide good parenting, firm boundaries and emotional support. Where children cannot safely remain with their families we seek to provide high quality substitute care, preferably within family settings but otherwise in suitably matched high quality residential units, as near as possible to their home locality to maintain links with their families and communities. We aim for children to be in care for the shortest time possible to achieve a sustainable exit from care that meets all of their needs, whether that is a return home or a permanent alternative family arrangement.

We want the same things for the children and young people we look after as any good parent would want for their child. We want children to be healthy and happy in childhood. We want them to feel valued for who they are and to feel loved. We want them to enjoy learning and to have a good experience of education. Our aim is for them to: grow into well adjusted, emotionally balanced individuals who will experience positive relationships; be responsible and economically independent citizens; be successful parents should they choose to be parents; have ambition and high aspirations and achieve their full potential. We will achieve this by providing the highest quality of care delivered through the partnership of services for which we are both responsible and accountable. We will also work together with children and young people and with partner services to promote a positive image of care to counteract discrimination that can take place and that has a negative impact on children and young people's self-image and self-esteem.

The Children and Young People in and Leaving Care Partnership has built a strong and sustainable culture of involving children, young people, parents and carers in order to seek out their views and actively listen, so we can understand, respond, take action and make changes, where appropriate, to enhance life chances and choices.

We recognise that not everyone wants to be involved all or even some of the time, we always respect individual choices. What is important is to ensure that there is a culture enabling involvement that is honest, inclusive and meets individual need and situation not limited by age, ethnic background, personal circumstances or behaviour.

Our approach has been developed to fully realise the benefits of embedding the involvement of children and their families in decision making for individuals and groups of children, young people, parents and carers as well as for the development of the organisation.

In 2017 children and young people in care were consulted about improvements they would like to see the strategy delivering. These, together with an update on progress against them, are included in Appendix 1 and have informed the development of this refreshed strategy.

All partner agencies are committed to this vision, to working together and to holding each other to account to achieve it. This will be through an improved integrated and co-ordinated approach including enabling participation in universal, mainstream services in the community, providing specialist services when required and developing or commissioning new or additional services when shortfalls or gaps in services are identified. Where services are commissioned we will act as responsible commissioners in having high expectations and holding those services to account for delivering good, timely and effective services for our children in care and care leavers. All agencies will contribute to the protection and safeguarding of children in care and care leavers^{1 2} and work together to divert young people from crime.

In addition, the Essex Pledge and Care Leavers Charter are two key documents to which all agencies on this partnership are committed. These set out our promise to children in care and leaving care about how we will engage and interact with them. They also provide a standard against which we will measure ourselves and which we will in part use to identify whether or not we are being successful in delivering this strategy.

The Essex Pledge to children in care

We pledge:

- To do everything we can to make you feel cared about, valued and respected as an individual
- To make sure you have a social care worker who will spend time with you and get to know you
- To make sure you have the opportunities to succeed

¹ Working Together to Safeguard Children (July 2018)

² Essex Missing Children Policy

- To help you keep in touch with your family, brothers and sisters and friends when you come into care
- To fully involve you in decision making so your views are listened to and to explain when we make a decision that you may not like or agree with
- We will ensure that the Children in Care Council arrangements and the Pledge are promoted with all children and young people and ensure they are supported to attend participation events
- We will ensure that all those working with children and young people in care work to and know if we have kept to our promises in the Pledge. If this is not the case partners are proactive in challenging practice
- We will make opportunities to consult with children and young people in care to seek their views on the improvement of services to meet their needs and improve outcomes

There will be regular reports written on:

- The comments, compliments and complaints, by and on behalf of children and young people.
- Advocacy contract monitoring.
- Policy and practice will be reviewed in light of children and young people's feedback.

We will know we have succeeded when;

- All partners deliver services in line with the priorities in the Essex Pledge.
- Children and young people are routinely able to tell us when they feel that we are not keeping any of the promises in the Pledge and their rights are not being respected.

- We can provide evidence that children and young people are regularly consulted and service design and delivery is influenced by their feedback.

Charter for Care Leavers³

We promise:

- To respect and honour your identity, beliefs, values, relationships and help you to become a valued member of your community;
- To believe in you, recognise your strengths and will support you in your aspirations, even when you have lost faith in yourself;
- To listen to you, respect your point of view and if we disagree, we will explain why.
- To inform you, provide you with information, including information on your legal entitlements; and the information we keep about you will be accurate and we will let you know how you can see it.
- To support you and provide advice, practical, emotional and financial help, help you learn from your mistakes and will not judge you.
- To find you a home and do everything we can to ensure you are happy and feel safe, and secure, when you move to independent living.
- To be a lifelong champion, help you break down barriers and help work with the services you need, including housing, benefits, colleges and universities and employment providers and health services. We will not forget about you and will remain your supporters in whatever way we can, even when our formal relationship with you has ended.

³ full version available at: https://www.gov.uk/government/uploads/system/uploads/attachment_data/file/264694/Care_leavers__charter.pdf

Governance

This strategy has been developed by all members of the Children and Young People in and Leaving Care Partnership Board and these partners hold the responsibility for implementation within their respective agencies and/or commissioned services. It is endorsed by Essex Corporate Parenting Panel and will be reviewed and updated in June each year.

Our Priorities

Our priorities are set out over the following pages, along with key objectives. They have been agreed by all partners who will contribute to meeting them either directly or through commissioning or supporting other agencies to do so.

Outcome 1: The right children are in care and the length of time in care is safely reduced

Outcome 2: Children in care are safe, afforded stability and the opportunity for a positive future

Outcome 3: Children in Care and care leavers make a successful transition to adulthood and independence

Outcome 4: Children in Care and young people with Special Education Needs and Disabilities are supported to prepare for adulthood by maximising their independence

Outcome 5: Children and young people in care and leaving care have good health outcomes

Outcome 6: Children in care and care leavers attend education provisions which suit their learning and training needs well, allowing them to make good progress and achieve their potential

Outcome 7: Children in care and care leavers are involved in and connected with services and their local communities

Key performance indicators are attached in Appendix 2

Outcome 1: The right children are in care and the length of time in care is safely reduced.

- To prevent the need for children entering care through the provision of effective early intervention services such as Family Intervention Funded services, EWMHS, education services, the Child and Family Well-being Service and through targeted specialist services such as Family Solutions, D-BIT and other locally based targeted services.
- To ensure we have the right children in care, through robust assessment, planning and case review and safely exiting each child from the care system as appropriate. These reviews are overseen by an independent reviewing officer (IRO) and all agencies will contribute, as appropriate.⁴
- To provide and promote services that support children in care returning home to their families where possible and appropriate, such as DBit reunification service and re-connecting families and Inside Out.

Outcome 2: Children in care are safe, afforded stability and the opportunity for a positive future.

- To achieve legal, physical and emotional permanence in a timely and appropriate way for children who will not be able to return home to the care of their birth parents.
- To place children in care as close to home as possible, by: increasing the number of in-house foster carers and by strong commissioning and contract arrangements for the provision of Independent Foster Carers and other placements able to

⁴ Care Planning, Placement and Review Regulations (2010)

meet a range of needs and to provide the highest quality care at a reasonable cost.⁵

- To place children with siblings where appropriate.
- To promote contact with birth parents, siblings, extended family and friends, in accordance with each child's care plan, including the proactive use of services such as Red Cross for Unaccompanied Asylum Seeking Children.
- To support foster carers and support workers to understand the value of peer support for Children in Care and actively facilitate the development of peer to peer relationships.
- Where legal permanence cannot be achieved to aim for children in care to have good quality foster placements and where appropriate to become long term linked.
- To ensure that where children are living in residential units that they are receiving individually tailored support that is meeting their needs at a justified and reasonable cost, to keep under review whether their needs are continuing to be met by these arrangements and to enable a move to a less intensive environment when this is in line with the child's needs.
- To provide children in care with access to Independent Visitors, as appropriate, particularly those in residential care.
- To work together as partner agencies to reduce the number and episodes of children and young people going missing from care, including contributing to the Safety Plan.
- To work together as partner agencies to provide effective advice and support to children and young people at risk of exploitation.
- To contribute to the effectiveness of quadrant-based multi-agency Missing and Child Exploitation (MACE) meetings at both operational and strategic levels.

⁵ Children & Families Business Plan and Sufficiency Strategy

- To reduce the number of children in care inappropriately being drawn into the youth justice system through effective joint working, especially with the Police and the Crown Prosecution Service.
- To support those who provide residential and foster care for children in care to reduce the involvement of the police in certain types of offences through the use of more restorative practices (e.g criminal damage in residential care).
- Where children in care do offend to ensure effective joint planning to reduce the number of 'touch points' for children in care by combining where possible CLA reviews and YOS statutory reviews.
- To match children in care with the most suitably qualified staff within the Youth Offending Service in order to reduce offending behaviour through effective interventions.

Outcome 3: Children in Care and care leavers make a successful transition to adulthood and independence

- To provide young people that are leaving care and who have left care with the appropriate level of support and advice that enables them to make a successful transition to adulthood and independence. This includes 'staying put' with their foster carers.⁶
- To develop and provide access to a range of suitably supported work experience and apprenticeship opportunities, including within partner agencies and contracted services.

⁶ Essex Staying Put Policy (2018)

- To ensure high quality support is provided by staff in Semi Independent Accommodation for care leavers; staff who are approachable and encouraging and supporting with budgeting, education, employment and social relationship problems.
- Where care leavers apply for housing to their local housing authority, to treat them preferentially, in accordance with s166A Housing Act 1996 and paragraph 4.10 of the statutory guidance: *Allocation of accommodation: guidance for local housing authorities in England*.
- To provide support so that care leavers are able to successfully maintain their tenancies when they receive them. Raise aspirations for care leavers whilst being realistic about budgeting and benefits, ensuring that care leavers do not feel guided by professionals to stay on benefits.
- To reduce care leavers' isolation and improve their social relationships with friends, family and community links both before and during leaving care.
- To provide the right level of support so that young people in care and care leavers can make informed choices about whether and when to become parents and go on to parent successfully.
- To enable a proper transition, for young people who require an adult social care service, to achieve the best possible outcomes, maximising their independence, choice and control.
- To ensure that young people leaving care are aware of their entitlement to continued services in accordance with the Children & Social Work Act 2017
- To ensure community based support is provided to care leavers through the Local Offer

Outcome 4: Children in Care and young people with Special Education Needs and Disabilities are supported to prepare for adulthood by maximising their independence

- To ensure that suitable placements are available to support disabled children and young people with additional needs, which are either in or as near as possible to their community,
- To provide effective support to the families of disabled children and young people so that they can remain fully involved in their children's lives.
- As part of the development of in house foster carers, to support foster carers to have the skills and knowledge required to support children in their care who have SEND.
- LAC health teams are enabled to contribute to the EHCP process and make sure that the EHCP informs the statutory health assessments.
- To provide co-ordinated support via a dedicated service to prepare young people to attain maximum independence in adulthood. This will include help with education and careers guidance, access to supported employment opportunities, access to suitable housing, access to community facilities, and access to health provision.

Outcome 5: Children and young people in care and leaving care have good health outcomes

Outcome 5.1: Children in care and leaving care experience good health and well-being and are well supported by universal health services and targeted health services when necessary.

- To enable children in care and care leavers to register with a GP practice and a dentist in areas that they live in.
- To provide access for children in care to a LAC nurse so that they receive all routine health checks and mandated health assessments in a timely way.⁷
- To take action to recognise, identify and respond to the specific health needs of unaccompanied asylum seeking children.
- To take a proactive approach to the promotion of healthy lifestyle choices to reduce misuse of drugs and alcohol, in collaboration with mental health services.
- To take action to recognise, understand and respond to incidences of self-harm and risk taking behaviours for children and young people in care.^{8,9}
- To enable children placed out of area to receive an equitable service to those placed within Greater Essex.¹⁰

⁷ 'Promoting the health and well-being of looked-after children' March 2015

⁸ 'Preventing Suicide in England' (2012)

⁹ NICE guidelines on the reduction in incidence of self-harming behaviours in CLA

¹⁰ 'A Standard Approach to Meet the Statutory Health Needs of Looked After Children – Decreasing Unwarranted Variation' March 2017

- To provide care leavers with a summary of their health history and knowledge of where and how to access health services independently.
- To meet and manage health issues that are identified within statutory health assessments in accordance with the care pathway set within the health care plan and identified timescales.
- To provide relevant and timely information, advice and services to Children in Care and Care leavers so that they are enabled to attain healthy lifestyles including sexual health and reach optimum health throughout their childhood and adult life.

Outcome 5.2: Children in Care and care leavers enjoy good emotional well-being and mental health

- To make sure that children and young people are aware of and able to access Tier one community mental health services for emotional wellbeing, e.g. school nurse, school counselling, KOOTH, Big White Wall, MIND.
- To provide access for children to EWMHS/CAMHS, when they need it and delivered locally to the child's placement area.
- To enable the emotional and mental health needs of all children in care to be met through flexible services utilising information from SDQ scores, and understanding of the factors that impact on the emotional well-being of children in care.
- To make sure that children in care receive assessments of their emotional well-being and mental health, utilising the Strengths and Difficulties Questionnaire (SDQ), and additional information/knowledge in order to impact positively on the SDQ score and the overall emotional well-being of the child. ¹¹
- To work in partnership across services to increase understanding and skills in supporting the emotional and mental health of

¹¹ NICE Guidance for Looked after Children and Young People 2010

looked after children including the impact and consequences of trauma.

- To provide a targeted range of services to identify and respond to the emotional and mental health needs of Unaccompanied Asylum Seeking Children, including Mental Health Co-ordinators in quadrants and suitably trained and supported social workers and carers.
- To improve on the number of children in care who have an initial assessment of their emotional health and well-being within 10 working days of referral leading to the formulation of a care plan reflective of their individual vulnerabilities and needs.
- To provide Social workers, Personal Advisers and other professionals with the training and support they need in order to be able to support young people in and leaving care with mental health issues, effectively playing their role as part of the wider support team.
- To support, via Social workers, Mental Health Co-ordinators and health professionals, care leavers with mental health needs to transition to adult mental health services, where these are needed.

Outcome 6: Children in care and care leavers attend education provisions which suit their learning and training needs well, allowing them to make good progress and achieve their potential

- To provide children in care with high quality care planning which focuses on ensuring that they are in suitable educational provision.¹²
- To work with schools and Special Educational Needs and Disability services to ensure the early identification and appropriate levels of support, provision and equipment are in place in a timely way.¹³

¹² Promoting the Education of Looked After Children and previously looked after children DfE 2018

¹³ The Special Educational Needs (Local Offer) England) Regulations 2014

- To work in partnership with schools and Education Access to reduce the numbers of children in care experiencing fixed term exclusions.
- To further develop the use of the Pupil Premium Plus Grant to raise attainment particularly in respect of effective interventions and their consistent use by all schools and other education settings.
- To provide an additional focus of Virtual School resources on children needing to make accelerated progress.
- To develop the Virtual School training offer to stakeholders to improve their ability to support the educational achievement of children in care.
- To reduce anxieties for children in care transitioning to secondary school or college by ensuring they are well informed about who they can talk to in their new setting and being assured that the new setting has a good understanding of their needs.
- To support all young people in care and care leavers to be ready for the world of further education, employment and training.

Outcome 7: Children in care and care leavers are involved in and connected with services and their local communities

- To ensure that Social Workers, Personal Advisers and other professionals use a range of methods to keep children and young people informed and up to date, think about the language they are using and take the time to make sure that they are making themselves understood.
- To empower children in care and care leavers to influence their Care and Pathway plans, service design and delivery.

- To involve children in care and care leavers in what is written about them in case notes, reports, assessments and reviews and offer a more active role in giving their views in their own words.
- To ensure that the views and experiences of children, young people and their families are heard and used to improve practice.
- To enable children and young people to access the Children in Care Council.
- To take action so that children and young people with disabilities are as fully involved and consulted with as their non-disabled peers, including within the Children in Care Council and in respect of all care and leaving care services.
- To provide children in care with access to advocates.
- To enable children and young people to feel part of their local community and participate in a range of volunteering opportunities, leisure activities and interests regardless of any disability or placement locality.
- To provide opportunities for children to participate in before and after school clubs and other extra-curricular activities.
- To provide increased opportunities for UASC to meet other young people in Essex with similar backgrounds and experiences.
- To support children and young people to continue to follow their religion and customs where they are living.

Appendix 1: Update

This appendix sets out the updated circumstances and progress made at 31st March 2018 against the previous strategy dated 2013 – 18.

Context

Over the 5 years of the previous strategy significant changes have taken place in Essex Children & Families with an overall improvement in practice and service provision including with the range of children and young people in and leaving care services.

The last formal Ofsted inspection was in 2014, when children in care and leaving care services were judged good, evidencing the improvement noted above.

Since then the Ofsted inspection framework has changed. Essex opted to pilot the new framework and received a pilot inspection in July 2017. This indicated that progress had been maintained with some areas for development identified. The areas relevant for children in care and leaving care were the response to missing children and the use of Special Guardianship Orders.

The financial and national policy landscape presents both considerable challenges and also opportunities. As a result of central government changes Essex County Council has a projected funding gap of £102m by 2021, with a subsequent funding gap in Children & Families during the financial year 2018/19 of £4m. Partner agencies across both the public and voluntary sectors are similarly under considerable financial pressure.

This means that all partners need to:

- Manage existing resources to their maximum effect
- Seek alternative sources of funding and income streams
- Collaborate across and beyond our partnership borders to achieve efficiencies
- Commission creatively and effectively

The most significant single procurement change in Children & Families took place in April 2017 to ensure delivery of our system vision for children and young people from conception to 19 years. This sees the integration of our 0-5 and 5-19 Healthy Child Programmes, Healthy Schools Programme, Family Nurse Partnership and Children's Centres into one Essex Child and Family Wellbeing Service. As a result services are less fragmented and collaborate to deliver a common set of outcomes for children, young people and families across a system that works for them rather than a system that works for us.

Procurement also took place for the delivery of child and adolescent mental health services, with North East London Foundation Trust now the service provider for integrated Tier 2 and 3 services.

With regard to investment Essex has committed growth funding to radically expand and extend its in-house fostering resource over a period of 10 years. This will not only be more cost-effective but will produce better outcomes for children by keeping them closer to home and in stable, supported placements.

Essex was also successful in a bid to the government Innovation Fund in 2017 for the Inside Out project, which goes live in 2018/19, aimed at stabilising young people in care aged 15 – 17 who have experienced multiple residential placements and achieving a successful move to less intensive and less costly forms of care and potentially back home.

Children and young people in and leaving care demographics

1010 children were being looked after on 31st March 2018 (a rate of 33.5 per 10,000 children), a small increase from 31 March 2017. Of this number:

- 213 (21.0%) live outside the local authority area;
- 82 (11%) live in residential children's homes, which is an increase of 1% from the previous year, of whom 57% live out of the authority area;
- 4 live in residential special schools, of whom 100% live out of the authority area;
- 764 (76%) live with foster carers, which is the same as the previous year, of whom 14.3% live out of the authority area;
- 18 (2%) live with parents, of whom 21% live out of the authority area; and
- 93 (9.2%) children are unaccompanied asylum-seeking children, which is a small decrease on the previous year

When children left care they did so because:

- 74 were adopted;
- 43 children became subject of Special Guardianship Orders;
- 460 children have ceased to be looked after, of whom 4% (20) subsequently returned to care;
- 162 children and young people ceased to be looked after on their 18th birthday
- 106 who had been accommodated under s20 Children Act 1989 were reunified with their parents, relatives or others.
- 76 children and young people moved on to supported lodgings/SIA.
- 17 children and young people moved on to semi-independent accommodation.

The latter part of the previous year had seen a new trend of more children entering care than leaving, which had reversed the trend of the previous 5 years. Whilst this has continued it slowed during 2017/18 with a 7% decrease

in the number of children entering care (450) and a 6% decrease in the number leaving (460). However there has been a marked shift towards younger children entering care, with a 6% increase in the number of under 1's entering care (from 78 to 83), whilst the number of 10-15 year olds have decreased by 16% (from 152 to 127.) Those entering aged 16 or over have increased by 1% (from 106 to 107).

Despite this change in age profile Essex still has a profile of more older (10+) children in care than the national average and fewer children aged 1 – 9 years although we match the national rate of under 1's. There continues to be effective intervention with very young children to achieve early exits from care and for the under 10's children in Essex are in care for shorter durations than they are nationally. This contributes to the older profile as does our rate of UASC, which at around 10% of the care population is higher than the national average.

The younger age of entrants explains the lower number of children looked after under Section 20, with a 3% decrease and a consequent 3% increase in children in care under Care Orders.

The rate of care proceedings reduced by 14% from the very high level through 2016/17, with 163 applications made during the year. The number of decisions made for adoption also reduced from 120 to 100. However, early indications in the first months of 2018/19 are that the number of proceedings is rising again. This level of activity is in the context of a rise nationally in care applications of 14%.

The anticipated rise in the number of Unaccompanied Asylum Seeking Children (UASC) as a result of the National Transfer Scheme has not yet materialised and the number has been stable for around 3 years. Plans to extend the work currently undertaken almost exclusively by West quadrant to North quadrant have therefore been put on hold.

Placement stability continues to be good, both in the short and longer term however a small number of children have an excessive number of moves and it is at this group that the Inside Out initiative is aimed.

Sufficiency of suitable placements has become increasingly challenging over the period of time since the last strategy, particularly in the last year. The Sufficiency Strategy is being updated to reflect the change in looked after profile, our forecast need and the imperative of maximising our in-house local resource alongside managing the provider market in a smarter way.

Health

The Essex Designated Nurses for children looked after and Doctor for children looked after work closely with provider health services and other partners to facilitate services to children in care in the Essex. The aim is to improve health outcomes for children looked after and support those involved in their care.

Going forward the CLA health strategy 2018-20 has identified 4 themed areas:

- Quality and Performance
- Emotional Health and wellbeing
- Voice of Children and engagement
- Commissioning of services

The areas of work include:

- Quality monitoring and improvement of health assessments, to include meeting statutory timescales
- Improve processes, pathways and value of Strength and Difficulty Questionnaire (SDQ).
- To improve access and involvement for all Looked after Children
- Ensuring the JSNA profiles Looked after Children to raise profile of LAC within Safeguarding contractual standards and commissioning arrangements
- Improve provision of health training to foster carers and professionals around health needs of LAC
- Quality visits to semi-independent accommodation – Designated Nurses for children looked after to join visits when appropriate to contribute to the assessment with a health focus for the child.
- The health needs of unaccompanied asylum seeking children and the role of primary care in meeting these needs.

Emotional Well-being Mental Health Service

Since 2016 NELFT has provided Integrated Emotional and Mental Health Services to children/young people and families in Southend, Essex and Thurrock.

- Referrals to the Emotional Well-being Mental Health Service (EWMHS) for Children in Care have an initial triage by the Single Point of Access (SPA) within 2 working days, which includes a risk assessment. Social workers are informed of referrals received from other referrers and consent obtained.
- The EWMHS Practitioner undertakes an initial consultation with the child/young person's allocated Social Worker within 10 working days of the referral being received. This incorporates the SDQ and all previous psychological assessments and a chronology of the child's history

- Following the initial consultation a summary of the consultation meeting with a formulation outlining the needs of the child/young person and a plan for the work required will be given to the social worker within five working days.
- If the child/young person requires a full assessment this will be prioritised according to clinical need and risk level.
- EWMHS may not offer direct work. They may offer further consultation to the system around the child or recommend work that could be put in place by social worker or foster carer.
- If the child/young person requires allocation for treatment within EWMHS they will be prioritised according to clinical need, with consideration also of their LAC status and placement stability.

An increased focus is required on early intervention and prevention activity so that information and support can be accessed at an early stage to prevent escalation of problems, alongside continuing to appropriately address higher clinical need. This involves all partners at universal and Tier 2 level and is a challenge given reducing resources.

In December 2017 the government published a green paper 'Transforming children and young people's mental health provision'. Prior to that, in November 2017, the DfE/DoH commissioned SCIE to undertake a review and produce recommendations relating to the improvement of support for children in care with mental health issues. The government is now considering whether and how these can be implemented alongside forming its response to the green paper consultation. Once these are available we will need to review the outcome of both the SCIE recommendations and the government green paper response against our priorities.

Suicide prevention for all young people is a priority in Essex with significant activity taking place over the past year aimed at raising awareness and response at all levels. This will continue through 2018/19.

Education update from the Virtual School

Engagement with the Virtual School continues to be very strong, with the additional benefit of a Virtual School Governing body which has good commitment from head teachers.

As noted below there has been some good progress against priorities and also areas for development identified.

Outcome 11: Children in care and care leavers have access to	Progress
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appropriate education, training and/or employment.	
• To ensure every child in care is able to access 'good' or 'outstanding' early years provision and achieves a good level of development in early years	97% of early years children now in good or outstanding provision.
• To enable carers and parents to support their child's early learning and development and provide social emotional and personal development	Virtual School termly training events now in place: Guide to Education for carers and parents and advanced level Education Matters.
• To ensure through school improvement, that every child in care goes to a good or outstanding school that meets their needs	92% of children in care attend good or outstanding schools.
• Provide good care planning that takes account of educational stability and needs and provides them with a positive experience during their school years	Many good examples but inconsistency is very evident and, in some cases where non-mainstream education is required, social workers and IROs fail to understand the nature of an emergency placement.
• Ensure that children in care make expected or accelerated progress in line with their abilities and prior attainment levels.	At EY, KS1, KS2 & KS4 and taking into account proportions with SEN progress and attainment generally at expected levels.
• To maintain or reduce the low levels of persistent and overall absence.	Persistent absence lower than regional and national for children in care. Overall attendance for Essex children in care better than <i>all</i> children nationally.
• Work in partnership with schools to reduce the numbers of children in care experiencing fixed term exclusions and consider alternatives to ensure there are no permanent exclusions.	Focus on Designated Teacher workshops and Attachment Awareness training. Inclusion team work individual cases. No permanent exclusions for several years but a rise in fixed term exclusions in the last year.
• To work with schools and Special Educational Needs services to ensure the early identification and appropriate levels of support, provision and equipment are in place in a timely way.	Virtual School Inclusion Team and Achievement Advisers advise schools, social workers and carers to ensure more appropriate and earlier action. Virtual School Head attends Complex Casework Forum.
• To ensure through rigorous oversight that the Pupil Premium Grant (PPG) is used to raise attainment and provide additional support to achieve good educational outcomes.	PEP/PPG moderation process introduced to provide greater rigour in checking that schools are setting SMART targets and using effective interventions. Data introduced to CLA tracker so that outcomes can

	be linked to PPG from 2018 results onwards.
• To recognise and promote the educational achievements of children in care.	Achievement letters and certificates sent to children and young people on recommendation from social workers, IROs and school staff.
• To ensure all children in care are able to access information, advice and guidance to develop their career pathways and enhance their wellbeing.	Reliance on school provision shows evidence of inconsistency and lack of information and advice for some children in non-mainstream provision.
• To support all young people in care and care leavers to be ready for the world of further education, employment and training.	Development of the Local Offer will improve this and, once substantive VSH is in post, service redesign for Virtual School can examine the possibility of developing the Virtual School role.
• To develop an offer for the education for post LAC children (Adopted, SGO, CAO) to support children, families and schools (updated June 2017)	In place and already meeting the requirements of the statutory guidance which comes into force Sept 2018.
• To ensure schools, carers and social work staff have access to training and development opportunities on the educational development of young people from a care background (updated June 2017)	See above re training for all stakeholders.

Permanency

Achieving permanence for children and young people in and leaving care is a key priority with a focus on this aim in all services.

The DBit Service continues with its successful intervention and reunification work. In respect of reunification 78% of children worked with have returned home (20 young people) over the first 18 months in operation. All of these remain living in their family networks post-reunification. An additional young person has subsequently moved on from the family home to live in a semi-independent setting. Another three young people were not reunified and alternative plans were agreed for the longer-term future in collaboration between child, family and professional network. Where reunification is not possible the aim is to re-connect children with their families so that the contact between them is more positive, their relationships are strengthened and consequently the child has greater stability in their care placement.

Whilst it is still relatively early in life, the team has been successful in significantly limiting the number of breakdowns post reunification. As well as the clear benefits in achieving permanency this work has realised significant

savings which are ongoing year on year until the child's 18th birthday and beyond via cost avoidance.

A second Reunification Team has been established, to work with children under the age of 10. This team will be operational by the end of September 2018.

The Adoption Service, in its capacity as an Adoption Agency, continued to be proactive in achieving legal permanence for children during 2017/18, with 74 Adoption Orders made. 14 (18%) of these children were over 5 years old at the point of the Adoption Order.

85 children were matched with adopters in 2017/2018: 30 (35%) were under 1 year; 48 (57%) were aged 1 - 5 years; and 7 (8%) were 5 years or older. The youngest child was matched at 3 months and the oldest at 8 years old. 15% of children were placed in Early Permanence placements; these children have therefore benefited from having no change of primary carer when moving from fostering to adoption placement. Early Permanence (fostering for adoption) therefore remains a positive option for some children who are likely to be placed for adoption once care proceedings have concluded.

The Adoption Service performance continued to improve, the average time from a child entering care to moving to an adoptive family reducing from 485 to 369 days and from Placement Order to matching from 156 to 135 days.

The regionalisation of adoption services continues to present the most challenging and time consuming reform of adoption services seen for many years and will continue to be the focus of significant strategic and practice discussion during 2018/19. We have already seen working relationships with regional colleagues strengthen, good practice more readily shared and common or shared activity increased. This is likely to continue further during 2018/19, with the appointment of the Head of Regional Adoption Alliance underway and as we progress towards full implementation of the alliance.

9.4% of children leaving care did so to SGO arrangements, up from 8.1% the previous year, with a specific rise in the number leaving care to SGOs with people other than former foster carers. The SGO Policy is being updated in 2018 with a view to foster carers being further supported to consider applying for SGOs for children in care that they have been caring for long term.

Youth Justice

The Youth Offending Service continues to play an important role in supporting young people in care to desist from becoming involved in crime and when they do get drawn in, to reduce the rate and seriousness of offending behaviour.

In 2017-18, 115 young people were looked after at the time of contact with the YOS or 15% of all young people supervised by the YOT. 47 of these young people were from other authorities (41%) and 68 (59%) were the responsibility

of ECC. Of the 68 from Essex, address data at start of programme (earliest if multiple programmes in period) was analysed and shows that 23 were living outside ECC area at the commencement of their order (34%) (note this number excludes those commencing a custodial sentence where the secure establishment is not in Essex).

Essex YOS monitors a fixed cohort of young people each year to determine local reoffending rates. Each year's cohort is taken from those receiving a YOT-supervised programme between January and March. Cases that are the responsibility of other authorities are not included. The cohorts are relatively small so some caution should be used in interpreting the results, but they do give an indication that being looked remains an important factor in a young person's chances of becoming involved in offending.

	Non CiC cohort			CiC cohort		
	Cohort	Reoffended	Binary rate	Cohort	Reoffended	Binary rate
2013-14	125	49	39.2	15	13	86.7
2014-15	93	37	39.8	29	21	72.4
2015-16	132	36	27.3	21	11	52.4
2016-17	114	36	31.6	11	7	63.6
2017-18	84	23	27.4	16	9	56.3

For both cohorts in 2017-18, the reoffending rate was lower than the previous year. The non-CiC cohort was smaller this year whereas the CiC cohort was larger (approximately twice the proportion it was in 2016-17). The direction of travel over the past five years around young people in care offending is positive; however analysis of the offences committed indicates that criminal damage and violence against the person remain the primary offence types and this is often associated with disrupted placements. Many of the young people in this cohort are on care orders and present with complex behavioural needs.

Priorities for the Youth Justice Service will continue to be:

- Maintaining stable placements by working in partnership with providers and allocated social workers to integrate youth justice interventions into the care plan.

- Highlighting the unique needs of children in care to the Police to avoid the risk that behaviour in residential care settings leads to a criminal justice intervention - this is jointly with the Crown Prosecution Service.
- Working with the Courts to ensure that due regard is given to the enhanced vulnerabilities that children in care are likely to have.
- Reducing the need for children in care to have multiple meetings (so for example wherever possible combining looked after children reviews with YOTs statutory planning meetings). This is particularly relevant in the case of remanded young people who automatically acquire looked after children status.

Care Leavers

The end of year data shows that there has been significant improvement in the engagement of care leavers aged 17/18 in education, training and employment, increasing from 61% to 71%. The engagement of 19 to 21 year olds remains the same as last year at 49%.

The 2 Employment Advisers have made good progress in developing initiatives particularly in brokering opportunities within Essex County Council and its contracted services. There has been an improvement in 19 to 21 year olds remaining in contact with the Leaving Care Service, which is a very positive development.

Accommodation continues to be one of the main concerns for young people leaving care. Staying Put is encouraged for those in foster care or supported lodgings and take up continues to be reasonably good, with just under 60 in these arrangements, however this option is not open for those moving on from semi-independent accommodation (SIA) or residential provision who are often the most vulnerable. The SIA provision was re-commissioned in 2017/18 with the intention of making it more attuned to individual young people's needs. This is still in its early days, with some varied feedback, positive and negative and progress is being closely monitored.

The provision of suitable accommodation for care leavers 18+ continues to present one of the top problems for young people. The deposit and rent guarantor scheme is used where appropriate to improve access to suitable accommodation in the private rented sector but where this isn't suitable identification of stable and secure accommodation via district councils remains a considerable challenge and inconsistent across the county. This will only be tackled by increased co-ordination between the Essex County Council at a service and corporate level and the district housing authorities.

Each Leaving Care service has a Mental Health Co-ordinator who provides direct support to care leavers and/or assists them to access the appropriate level of mental health service. Through this we are ensuring an accessible and flexible emotional health offer to care leavers who can easily fall between the gap of EWMHs and adult mental health services. This provision was

expanded in 2017/18 to allow a greater focus on UASC and former UASC who can have very particular emotional and mental health needs.

The Children & Social Work Act 2017

The new Act was enacted in April 2018. All former care leavers potentially eligible for the extended service have been notified of this and all rising 21 year olds are routinely advised of their right to request continued services. To date the number returning for a service is very low and it is too soon to determine how many current care leavers may request that they remain open to services. The government has made limited funds available to all local authorities to assist with the implementation of the new duties and demand will be kept under review through 2018/19 to determine where these funds should be deployed.

A Task & Finish group has been established to develop the Care Leaver Local Offer and this will be completed by October 2018.

Briefings on the new responsibilities have been provided to Corporate Parenting Panel, ECC Corporate Management group and the Children's Partnership Board at County and local level.

Missing Children

The MACE arrangements in each quadrant are now well embedded and due to this and the increased focus on CSE and exploitation through gang activity within Children and Families there is now a greater awareness and better recording of children in care both missing and/or at risk of exploitation. This has resulted in an apparent rise in prevalence but what is in all probability a more accurate capturing of the problem.

In 2017/18 552 young people went missing from home or from care in Essex accounting for 2,249 episodes. There is a small increase of 1% in the number of missing children compared to 2016/17; however there has been an 18% increase in the number of missing episodes over the same period. The number of frequently missing children (3 or more episodes within a 90 day period) has also increased by 8%. So we have the same amount of children going missing but doing so more frequently.

There are some ongoing difficulties in reporting accurate and consistent figures so the figures quoted here may be subject to change in future updates.

2017/18 has seen a rise in Child Exploitation Risk records particularly in relation to Criminal Exploitation and Gangs. There have been a number of Complex Abuse strategy meetings as well as a development at MACE to include gang related exploitation into these meetings; this may account for some of the increased Missing Episodes.

In 2017 Ofsted reported inconsistency in offering "missing chats" and variable quality of those undertaken. In response there has been a review of the process and practice around missing chats.

Young people have also been consulted about what needs to change. The most common feedback on this was that “nothing needs to change”, further explained by the fact that many young people do not feel that they are missing at all and parents and carers need to stop reporting them as missing.

“Foster carer needs to stop reporting me as missing for no reason” 15 year old female in foster placement

Other feedback was that many young people go missing because they are unhappy in placement and a change of placement would help prevent future missing episodes.

“It has changed because I was kicked out of my other placement. It took to being kicked out rather than moving me because I wanted to. You need to listen to young people more about what they want” 17 year old female in semi-independent accommodation

Young people also say that they want more freedom or independence in order to see friends or boyfriends and girlfriends. Some spoke of being unhappy at school or being bullied at school and some said they needed to work on improving communication at home or in placement, making sure that parents and carers are informed of their whereabouts and making sure they have a working phone on them.

However many young people say they ‘don’t know’ what needs to change in order to prevent future missing episodes and this demonstrates the need for trusted relationships to be developed so that conversations can take place about risks and solutions.

Involvement

The Children in Care Council (CiCC) continues to develop its work, and now has an additional, targeted 10 week programme, on Positive Health and Wellbeing; and a care leavers fortnightly drop in. It does this based on feedback from young people through CICC activities. This feedback is also used inform Service decision making, through regular meetings with Directors for Local Delivery, and members of the Corporate Parenting Panel.

The CICC has recently developed a Volunteering to Work Passport, that can be used to document young people’s volunteering, and the skills they have developed, in order to assist them in gaining employment

Young people contribute to the training of staff through the Lively Trainers programme. In 2017 they offered four sessions, giving their perspective on different issues:

- *Are you really listening?*, exploring how staff and young people can communicate better;
- *When it’s not a choice*, looked at child sexual exploitation and going missing;

- *Understanding neglect*, giving a young person's experience of neglect; and
- *New to care*, considered entering the care system.

The sessions received excellent feedback from staff

Through 2016/17 children and young people in care were consulted about improvements they would like to see through the Strategy and provided the following response, which is as follows, along with progress made:

- More effective matching of social workers

Update: this is attempted where possible but is inevitably affected by the capacity of the service

- Improve communication with the young people leaving care

Update: young people were involved in developing the Care Leavers guide and have been very instrumental in supporting understanding of needs in relation to the extended Local Offer to care leavers

- Keep young people up to date with things happening via text message, as and when something changes that affects them

- Social workers to be more available for young people;

Update: the Cicc has developed Cards for social workers to give to young people with their contact details, working pattern and duty number; these are currently with the design team

- Social workers to inform young people when they are on annual leave;
Update: this should happen as part of business as usual and social workers have been reminded

- More effective communication – which young people can understand: -
Update: Co-design work with the IRO service has resulted in a more appropriate Review Meeting process and documentation which has been implemented county wide through 2017/18. This work has had a wider legacy as it impacted directly and positively on the organisational culture, understanding and practice wider than the IRO service. There is current co-design work being undertaken on Care Plans to ensure these are more relevant to children and young people, whilst being appropriate for the organisation.

- Having the health nurses being more readily contactable

- Nurses to keep information confidential and not to discuss the young people in front of others

- Young people to be spoken to if a school move is happening, particularly when it is far away from their current placement

Update: the Virtual school has focused this year both on working alongside the social worker where this is happening but to also educate and influence more widely (see education update)

- Not to have LAC review meetings at school as it victimises them:

Update: as part of the new co-designed process children are asked where they would like their Review Meeting and who they would like to attend.

- More semi-independent provisions available to young people:

Update: under the new SIA commissioned service there is more provision however care leavers do still feel that they do not always have a choice in accommodation options available to them, or that the only alternative choice is homelessness. The majority describe support staff in independent living as not being supportive enough and some young people feel that staff are not there when they ought to have been, particularly at night.

- Remove shared flats from semi-independent living as young people can sometimes end up paying when someone else in the flat leaves. This would also stop them learning the basic housing/budgeting skills.

Update: shared living is a reality for many young people, leaving care or not and the problems described are common. Shared living can also be a positive experience and rather than not provide this as an option young people need to be given the support they need to navigate their way through the problems that can arise

The Children in Care council has also worked in 2017/18 with a group of officers, including the Independent Reviewing Service to produce a welcome pack for children and young people entering care and this is ready for distribution.

Appendix 2: Data

Children in Care Performance Indicators

Theme	Measure	End Q4 13-14	End Q4 14-15	End Q4 15-16	End Q4 16-17	End Q1 17-18	End Q2 17-18	End Q3 17-18	End Q4 17-18	Direction of travel
Take up	Children in Care at Quarter end (n.)	1,137	1,034	1,004	1,010	1,054	1,065	1,048	1,025	△
Reviews & Visits	Children with all reviews of the year held within timescale	97%	96%	95%	85%				88%	△
	Social work visit undertaken in last 6 weeks (%)	83%	87%	85%	73%	71%	65%	66%	76%	△
Stability & Placement	Placement 1: Percentage of Children in care at period end with three or more placements during the year	9%	10%	10%	7%	10%	8%	9%	7%	↔
	Placement 2: Percentage of Children in care at least 2.5 years at period end living in their current placement for at least 2 years	69%	71%	67%	71%	70%	70%	71%	68%	▽
	Placement 3: Percentage of CIC at 31 March placed outside LA boundary and more than 20 miles from where they used to live (excluding children placed for adoption).	14%	16%	15%	13%				13%	↔
Physical health	Children in Care for at least 12 months with Dental Checks in the last 12 months (%)	85%	85%	89%	77%	77%	72%	78%	85%	△
	Children in Care for at least 12 months with Annual Health Checks up to date (%)	85%	83%	93%	89%	89%	82%	82%	86%	▽
	Children in Care for at least 12 months with Immunisations up to date (%)	87%	87%	97%	80%	80%	74%	78%	78%	▽
Education	Children in Care of statutory school age with a Personal Education Plan part 2 completed in last 6 months (%)	95%	96%	91%	75%	64%	63%	68%	87%	△
Placement type	Children in Care in Residential Accommodation (%)	10%	11%	10%	10%	11%	11%	11%	11%	△
	Children in Care Fostered (%)	75%	75%	76%	76%	70%	69%	74%	76%	↔
Adoption	Children who left care who were adopted (%)	21%	17%	17%	17%				16%	▽
Care Leavers	19-21 year olds who are in EET (%)	41%	45%	47%	49%				49%	↔
	19-21 year old care leavers (open cases) who are in suitable accommodation (%)	78%	77%	80%	83%				84%	△