

Corporate Parenting Board

9 November 2017

Time 5.30 pm **Public Meeting?** YES **Type of meeting** Oversight
Venue Training Room - Ground Floor - Civic Centre, St Peter's Square, Wolverhampton
WV1 1SH

Membership

Chair Cllr Val Gibson (Lab)

Labour

Cllr Julie Hodgkiss
Cllr Milkinderpal Jaspal
Cllr Welcome Koussoukama
Cllr Lynne Moran
Cllr Peter O'Neill
Cllr Rita Potter
Cllr Paul Sweet
Cllr Martin Waite

Conservative

Cllr Christine Mills

Quorum for this meeting is three Councillors.

Information for the Public

If you have any queries about this meeting, please contact the Democratic Services team:

Contact Helen Tambini
Tel/Email Tel: 01902 554070 or helen.tambini@wolverhampton.gov.uk
Address Democratic Services, Civic Centre, 1st floor, St Peter's Square,
Wolverhampton WV1 1RL

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Some items are discussed in private because of their confidential or commercial nature. These reports are not available to the public.

Agenda

Part 1 – items open to the press and public

- | <i>Item No.</i> | <i>Title</i> |
|-----------------|---|
| 1 | Apologies for absence |
| 2 | Declarations of interests |
| 3 | Minutes of the previous meeting - 14 September 2017 (Pages 5 - 10)
[To approve the minutes of the previous meeting as a correct record] |
| 4 | Matters arising
[To consider any matters arising from the minutes of the previous meeting] |
| 5 | Schedule of outstanding matters (Pages 11 - 14)
[To consider and comment on the schedule of outstanding matters] |
| 6 | Annual Report of the Independent Reviewing Officer Service 2016-17 (Pages 15 - 30)
[Mandy Lee, Safeguarding Manager – Children, to present report] |
| 7 | Educational Achievement of Looked After Children (Pages 31 - 36)
[Darren Martindale, Virtual School Head for Looked After Children, to present report] |
| 8 | Health Services for Looked After Children Annual Report (Pages 37 - 54)
[Fiona Brennan, Designated Nurse for Looked After Children and Dr Stephanie Simon, Designated Doctor for Looked After Children to present report] |
| 9 | Performance Monitoring Report (Pages 55 - 70)
[Emma Bennett, Director of Children's Services to present report] |
| 10 | Exclusion of the press and public
[To pass the resolution: |

That in accordance with Section 100A(4) of the Local Government Act 1972 the press and public be excluded from the meeting for the following items of business as they involve the likely disclosure of exempt information falling within paragraph 2 of Part 1 of Schedule 12A of the Local Government Act 1972]

PART 2 - ITEMS NOT OPEN TO THE PUBLIC AND PRESS

- | | |
|----|--|
| 11 | CAMHS Looked After Children's Mental Health report (Pages 71 - 88)
[Dr Roberta Fry, Consultant Clinical Psychologist and Joginder Shoker Kang, CAMHS Looked After Children's Team to present report] |
| 12 | Councillor Visits to Establishments |

[NOT PROTECTIVELY MARKED]

[To receive feedback on any visits to establishments undertaken by Councillors since the last meeting]

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Corporate Parenting Board

Agenda Item No: 3

Minutes - 14 September 2017

Attendance

Chair Cllr Val Gibson (Lab)

Labour

Cllr Milkinderpal Jaspal
Cllr Lynne Moran

Cllr Peter O'Neill
Cllr Rita Potter

Cllr Paul Sweet
Cllr Martin Waite

Conservative

Cllr Christine Mills

Employees

Emma Bennett
Fiona Brennan
Dawn Deans
Alison Hinds
Puja Taloy
Helen Tambini
Alice Vickers

Director of Children's Services
Designated Nurse, Looked After Children
Senior Social Work Manager - Adoption
Head of Looked After Children
Participation Worker for Looked after Childr
Democratic Services Officer
Corporate Parenting Officer

Item No. *Title*

1 Apologies for absence

Apologies for absence were received from Councillors Hodgkiss and Koussoukama.

2 Declarations of interests

There were no declarations of interest made.

3 Change to the Order of Agenda Items

The Chair moved that agenda item 6, Care Leavers Forum – Birthday Money, be considered before item 3 Minutes of the previous meeting, item 4 Matters arising and item 5 Schedule of outstanding matters.

Resolved:

That agenda item 6 be considered before items 3, 4 and 5.

4 Care Leavers Forum - Birthday Money

Members of the Care Leavers Forum (CLF) attended the meeting and took part in an activity with members of the Board to look at how care leavers felt when they moved into their own accommodation after turning 18.

In response to questions from Board Members, officers stated:

- A grant was available to care leavers to buy personal items and to make flats feel homelier and care leavers would be helped to make those decisions with their Young Person's Adviser. There were two training flats that care leavers could use to prepare for their move and they would be supported by the Starting Up Home Grant (SHUG). Children in foster care could stay in care beyond the age of 18 so the age they would move into their own accommodation would vary.
- LACs up to the age of 18 received a present at Christmas and for birthdays.

Members of the Board thanked the young people for attending and agreed to think about ways to help care leavers during that transition and consider them at the meeting in January when the issue would be discussed again.

Resolved:

1. That members of the Board consider how they could support care leavers during this transition into their own accommodation and bring suggestions to the meeting in January 2018.
2. That a report from the Care Leavers Forum detailing suggestions on support measures for care leavers during this transition into their own accommodation be submitted to the Board in January 2018.

5 Minutes of the previous meeting - 13 July 2017

Resolved:

That the minutes of the meeting held on 13 July 2017 be confirmed as correct record and signed by the Chair, subject to the inclusion of Fiona Brennan's name in the list of attendees.

6 Matters arising

There were no matters arising from the minutes of the previous meeting.

7 Schedule of outstanding matters

The Chair presented the report on current progress on matters previously considered by the Board.

It was confirmed that the comparative figures for the general population in respect of number of babies removed from parents had been circulated to the Board.

Helen Tambini, Democratic Services Officer confirmed that under the Board's Terms of Reference it could approve membership of the Board and therefore, the Board could agree to how many foster carers it wished to join.

The Board agreed that it would ask two foster carers to become Board members.

Alice Vickers, Corporate Parenting Officer confirmed that a member of the Care Leavers Forum had asked the Board to consider if he could become a Board member.

Members of the Board agreed that it would be advantageous to have a representative of the Care Leavers Forum on the Board.

Resolved:

1. That the report be noted.
2. That two foster carers and one representative from the Care Leavers Forum be co-opted onto the Board for future meetings.

8 Impact of New Belongings Project and Outcomes of Care Leavers Survey 2017

Alison Hinds, Head of Looked After Children presented the report on the Impact of the New Belongings Project and the Outcomes of the Care Leavers Survey and highlighted key points.

Alison Hinds confirmed that 73 young people had completed the survey which was an increase of 10 compared to last year and the results overall had been positive. It was hoped that next year it would be an interactive survey and that would encourage more young people to engage.

In respect of health, the 14% of young people having received the new leaving care health summary was good as it had only been implemented five months ago. Of the 73 young people who had responded, some could have left care previously when the summary was not available.

Fiona Brennan, Designated Nurse for Looked After Children confirmed that the priority was now to ensure that all care leavers leaving care received the summary.

Alison Hinds referred to the areas highlighted that required improvement, in particular around participation and entitlements and work the LAC Transition Service could do better. She confirmed that a LAC Transitions Action Plan had been produced taking into consideration the survey results.

In addition to the information contained within the report and in response to questions from Board Members, officers stated the following:

- An Assistant Corporate Parenting Officer had just started work and would be working proactively to encourage more participation through Facebook and other social media, together with improvement to the Care Leavers' newsletter sent out every three months.
- Young people were encouraged to think about how they spent their savings and were offered advice and support.
- It was a concern that the percentage of young people who felt that they had a good relationship with their worker had decreased and that would be investigated.
- Care leavers were offered support and advice regarding financial matters and there were courses they could attend to help them manage their finances. In respect of savings, different options were being researched and a report would be submitted to the Board in due course.
- If a young person was finding it difficult to progress with their Young Person's Advisor, then that would be looked into.
- The questions related to health on the survey were generic and related to health in general rather than specific reference to mental health and wellbeing.
- In respect of employment and work experience, support was given through the Black Country IMPACT project. Care leavers were offered mock interviews to improve techniques. There was also a Talent Match to help over 18s get back into work.
- The results from the survey regarding support from workers could refer to different types of support workers.

Councillor Waite requested that in future surveys the questions on health be more specific to allow more individual responses.

The Chair thanked officers for the comprehensive report and requested that future reports include comparative data covering a three-year period and to allow responders the option of saying why they had put a particular response.

Resolved:

That the report and comments raised be noted.

9 **Annual Adoption Agency Report**

Dawn Deans, Senior Social Work Manager (Adoption) presented the Annual Adoption Agency Report and highlighted key points, with specific reference to the recent OFSTED inspection when the Adoption Service was judged as Good.

In addition to the information contained within the report and in response to questions from Board Members, officers stated the following:

- Although the A1 and A2 indicators continued to be rated 'double red' OFSTED had noted and acknowledged that because Wolverhampton continued to pursue adoptions for harder to place children that affected the indicator. A brief explanation of those factors would be included in future reports.
- A change in legislation had encouraged birth parents to inform the courts that they wished to contest Adoption Orders and more were doing so.
- All birth parents received support and counselling after a child had been removed from their care. There were several organisations that offered support, including the 'Breaking the Cycle' project and the 'Switch' project. The 'Breaking the Cycle' project had helped five parents to go onto full time education and none of them had had any more of their children taken into care. Under the 'Switch' project a specific support worker supported individuals to help them break the cycle of repeat removals. Before any child was removed considerable support was offered and warnings given. Assessments also continued once a child had been taken into care, to assess that parent's future suitability to have the child returned to them.

Resolved:

That the report and comments raised be noted.

10 **Performance Monitoring Report**

Emma Bennett, Director of Children's Services presented the Performance Monitoring Report for July 2017 and highlighted the key points.

Emma Bennett confirmed that the number of LACs remained static at around 630, with analysis showing that the average number coming into care had slowed; however, there was a number of children with full care orders with very complex needs who remained in care. Further work was being considered within the service area to try and prevent teenagers entering the system.

In respect of assessments and reviews, the number of children participating had increased.

In respect of education, the academic results for 2016/17 had yet to be collated and would be reported in due course.

In respect of leaving care, the key indicator for Wolverhampton compared to the West Midlands was very good.

In answer to a question regarding dental checks, it was confirmed that the data did not specify if the checks were for males or females.

Emma Bennett referred to the current report format and asked for the Board's input regarding an update to a dashboard format. It was suggested that the dashboard format would contain the same information; however, it would be easier to read.

The Chair suggested that she liaise with Emma Bennett on this issue.

In response to a question regarding pregnancy rates for care leavers, officers stated that although that was not measured, it would be possible to include details of young parents and compare that to the average in Wolverhampton.

Resolved:

1. That the report and comments raised be noted.
2. That the Chair liaise with the Director of Children's Services regarding the format of future reports.

11 **Councillors visits to establishments**

Councillor Potter presented an exempt report regarding her recent visit to Merridale Street West Children's Home.

Resolved:

That the report be noted.

Corporate Parenting Board

9 November 2017

Report title	Schedule of Outstanding Matters	
Cabinet member with lead responsibility	Councillor Val Gibson Children and Young People	
Wards affected	All	
Accountable director	Emma Bennett, Children and Young People	
Originating service	Governance	
Accountable employee(s)	Helen Tambini	Democratic Services Officer
	Tel	01902 554070
	Email	Helen.Tambini@wolverhampton.gov.uk

Recommendations for action:

The Corporate Parenting Board is asked to consider and comment on the schedule of outstanding matters.

1.0 Purpose

1.1 The purpose of this report is to appraise the Board of the current position with a variety of matters considered at previous meetings of the Corporate Parenting Board.

2.0 Background

2.1 At previous meetings of the Board the following matters were considered and details of the current position is set out in the fourth column of the table.

<u>DATE OF MEETING</u>	<u>SUBJECT</u>	<u>LEAD MEMBER/ OFFICER</u>	<u>CURRENT POSITION</u>
13 July 2017	Care Leavers up to age 18 that are pregnant or teenage parents	Laura Wood	Update report be submitted to the Board in six months (January)
14 September 2017	Foster Carers and CLF representative	Alice Vickers	Two foster carers and CLF representative invited to be co-opted onto the Board
14 September 2017	Care Leavers Forum – Birthday Money	Board Members Puja Taloy	Board members to consider how they can support care leavers during transition into own accommodation and bring suggestions to meeting in January Report from CLF detailing suggestions on support measures for care leavers during transition into accommodation be submitted to the meeting in January
14 September 2017	Performance Monitoring Reports	Councillor Gibson Emma Bennett	Chair to liaise with Director of Children's Services regarding the format of future reports

3.0 Financial implications

- 3.1 There are no direct financial implications as a result of this report.
- 3.2 The financial implications of each matter will be detailed in the individual report submitted to the Board.
[AS/24102017/B]

4.0 Legal implications

- 4.1 There are no direct legal implications as a result of this report.
- 4.2 The legal implications of each matter will be detailed in the individual report submitted to the Board.
[TC/01112017/P]

5.0 Equalities implications

- 5.1 None arising directly from this report. The equalities implications of each matter will be detailed in the reports submitted to the Board

6.0 Environmental implications

- 6.1 None arising directly from this report. The environmental implications of each matter will be detailed in the report submitted to the Board.

7.0 Human resources implications

- 7.1 None arising directly from this report. The human resources implications of each matter will be detailed in the report submitted to the Board.

8.0 Corporate landlord implications

- 8.1 None arising directly from this report. The corporate landlord implications of each matter will be detailed in the report submitted to the Board.

9.0 Schedule of background papers

- 9.1 Minutes of previous meetings of the Board and associate

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Corporate Parenting Board

9 November 2017

Report title	Annual Report of the Independent Reviewing Officer Service 2016-2017	
Cabinet member with lead responsibility	Councillor Val Gibson Children and Young People	
Wards affected	All	
Accountable director	Emma Bennett- Children and Young People	
Originating service	Safeguarding	
Accountable employee(s)	Dawn Williams	Head of Service – Safeguarding
	Tel	01902 550655
	Email	Dawn.williams@wolverhampton.gov.uk
	Mandy Lee	Safeguarding Manager-Children
	Tel	01902 550654
	E-mail	Mandy.lee@wolverhampton.gov.uk
Report to be/has been considered by	Children in Care Council 27 September 2017 Children and Young People Management Team 19 October 2017 People Leadership Team 30 October 2017	

Recommendation(s) for action or decision:

The Corporate Parenting Board is recommended to:

1. Utilise this report to inform strategic planning for Wolverhampton's Looked After Children population
2. Hold the Safeguarding Service to account in their delivery of services to Looked After Children

1.0 Purpose

1.1 Wolverhampton Safeguarding Service has statutory responsibility for overseeing and ratifying the care plans for Looked after Children (LAC) via the activity of the Independent Reviewing Officers. As a result, the service is duty bound to provide the Corporate Parenting Board with an annual report that outlines the activity of the service, the impact for children and recommendations for service improvement that will enhance young people's experiences. The annual report for 2016/17 is attached. The Corporate Parenting Board has received annual reports in preceding years

2.0 Background

2.1 The Children and Young Persons Act 2008 reinforced and strengthened the role of the Independent Reviewing Officer (IRO), enabling more effective independent oversight and scrutiny of the child's case. It has ensured that the child is able to meaningfully participate in planning for their own care and that the care plan that the local authority prepares for them is based on a thorough assessment of the individual child's needs.

2.2 In March 2010, the Government issued statutory guidance, The IRO Handbook, for Local Authorities and IROs on care planning and reviewing arrangements for LAC. The IRO Handbook states that the statutory duties of the IRO are to:

- monitor the Local Authority's performance of their functions in relation to the child's case;
- participate in any review of the child's case;
- ensure any ascertained wishes and feelings of the child concerning the case are given due consideration by the appropriate authority;
- perform any other function which is prescribed in regulations.

2.3 The guidance became effective on 1 April 2011, as a revision to the Children Act 1989. Volume 2 of the 'Care Planning, Placement and Case Review Regulations and statutory guidance 2010'. There is an expectation that IROs are more involved with children who are looked after, not just in the Looked After Children review meeting. More contact with the child, the carers and the staff involved is also expected. This is particularly the case in matters where the IRO has concerns about the case and needs to monitor the matter between statutory reviews.

2.4 All looked after children, including children who are in an adoptive placement prior to an Adoption Order, are covered by the legislation. This applies to all children who are the subject of a care order (under section 31 of the Children Act 1989), or who are voluntarily accommodated for a period of more than 24 hours (section 20 of the Children Act 1989), including those described in this report as in Short Break Care, or who are placed for adoption under the Adoption and Children Act 2002. It also covers those who are compulsorily looked after, such as those remanded by the court to local authority accommodation. Since the publication of the Legal Aid Sentencing and Punishment of Offenders Act (LASPO) in December 2012, it has been the responsibility of the Local Authority to look after all young people who are remanded into custody. These young people now require an allocated IRO and LAC reviews in their place of custody.

3.0 Progress, options, discussion, etc.

- 3.1 The annual report provides an outline of activity covering the period 2016-2017 and determines actions to be progressed in 2017-2018.
- 3.2 The IRO service has remained stable, with an experienced and capable staff team. The Ofsted Inspection of 2017 found that 'Independent reviewing officers (IROs) are effective in driving improvements in practice and performance, leading to better outcomes for children looked after. A stable and experienced team of IROs has been given additional resources, to ensure that IROs are able to continue to deliver a high-quality service'.
- 3.3 Caseloads for IRO's have been manageable, which has enabled the team to be more effective in driving improvements and to spend more time seeing children.
- 3.4 The report shows that, overall, the service has been effective in terms of the timeliness of reviews and the participation of children in reviews, but there is still room for improvement. This is reflected in the plans for 2017-2018

4.0 Financial implications

- 4.1 There are no direct financial implications arising from this report. The IROs are funded by the Safeguarding Service within the People directorate. [AS/24102017/Z]

5.0 Legal implications

- 5.1 The relevant legislation is contained within the body of the report. There are no direct legal implications arising from the report. [TC/01112017/R]

6.0 Equalities implications

- 6.1 The Annual report recognises issues of equality for Children who access the safeguarding service and how equality is represented within the service.

7.0 Environmental implications

- 7.1 None

8.0 Human resources implications

- 8.1 None

9.0 Corporate landlord implications

- 9.1 None

10.0 Schedule of background papers

- 10.1 None.

This report is PUBLIC
[NOT PROTECTIVELY MARKED]

CITY OF
WOLVERHAMPTON
C O U N C I L

Annual report

Safeguarding Service

Looked After Children
2016 - 2017

1. Introduction

- 1.1 The IRO Handbook (issued in March 2010) is the statutory guidance for Independent Reviewing Officers (IRO) and local authorities on their functions in relation to case management and review of children in care, known as looked after children (LAC). It states that the IRO Manager (known as the Safeguarding Manager – Children, in Wolverhampton) should be responsible for the production of an annual report for the scrutiny of the members of the Corporate Parenting Board. It should also be available to the public on the Council website.
- 1.2 This report covers the period from April 2016 – March 2017 This is the 8th annual report.
- 1.3 The Safeguarding Service is based at the Priory Green Building in Pendeford, Wolverhampton.
- 1.4 Dawn Williams is the Head of Safeguarding (HOS) and has overall responsibility for the IRO functions and ensures independence from the line management of cases and the allocation of resources within Children and Families Services. Mandy Lee is the Safeguarding Manager-Children. The management of the IRO team involves the provision of supervision to the IROs and responsibility for the team including ensuring that reviews are held on time and that they are correctly administered. The Safeguarding Manager also manages an IRO who undertakes foster home reviews.
- 1.5 As prescribed by the national IRO Managers Group, this report will endeavour to ‘highlight areas of good practice and areas which require improvement, identify emerging themes and trends, describe areas of work which the service has prioritised during the year, and will prioritise in the coming year.’
- 1.6 The IROs have a key role in assuring the quality of the case planning for those children and young people who are looked after by the local authority. The purpose of this report is to provide information on the work undertaken by the IROs in 2016 – 17 and to outline the priorities for the next year.

2. Purpose of service and legal context

- 2.1 The arrangements for the statutory reviews of children in care, known as looked after children (LAC) in Wolverhampton, were amended and updated by Section 118 of the Adoption and Children Act 2002. The Act introduced the new statutory role of the Independent Reviewing Officer. In September 2004, local authorities were required to appoint Independent Reviewing Officers with the remit of:
 - chairing the authority’s LAC reviews
 - monitoring the authority’s review of the care plan
 - and where necessary, referring cases to the Children and Families Court Advisory and Support Service (CAFCASS) to take legal action as a last resort if the failure to implement the care plan might be considered to breach the child’s human rights.In addition, there is an expectation that the IROs will quality assure the local authority’s care planning for children in care.

2.2 Legislation for the reviewing of LAC cases is supported by detailed guidance which has been taken into account in making arrangements in Wolverhampton. The guidance includes Every Child Matters, Care Planning, Placement and Case Review (England) Regulations 2010 and Statutory guidance, the IRO Handbook.

Looked After Children:

2.3 The Children and Young Persons Act 2008 reinforced and strengthened the role of the IRO, enabling more effective independent oversight and scrutiny of the child's case. It has ensured that the child is able to meaningfully participate in planning for their own care and that the care plan that the local authority prepares for them is based on a thorough assessment of the individual child's needs.

2.4 In March 2010 the Government issued new statutory guidance, The IRO Handbook, for Local Authorities and IROs on care planning and reviewing arrangements for LAC. The IRO Handbook states that the statutory duties of the IRO are to:

- monitor the Local Authority's performance of their functions in relation to the child's case;
- participate in any review of the child's case;
- ensure any ascertained wishes and feelings of the child concerning the case are given due consideration by the appropriate authority;
- perform any other function which is prescribed in regulations.

2.5 Since April 2011 there has been an expectation that IROs are more involved with children who are looked after, not just in the LAC review meeting itself. More contact with the child, the carers, and the staff involved is expected. This is particularly the case in matters where the IRO has concerns about the case and needs to monitor the matter between statutory reviews.

2.6 All looked after children, including children who are in an adoptive placement prior to an adoption order, are covered by the legislation. This applies to all children who are the subject of a care order (under section 31 of the Children Act 1989), or who are voluntarily accommodated for a period of more than 24 hours (section 20 of the Children Act 1989), including those described in this report as in Short Break Care, or who are placed for adoption under the Adoption and Children Act 2002. It also covers those who are compulsorily looked after such as those remanded by the court to local authority accommodation. Since the publication of the Legal Aid Sentencing and Punishment of Offenders Act (LASPO) in December 2012, it has been the responsibility of the Local Authority to look after all young people who are remanded into custody. These young people now require an allocated IRO and LAC reviews in their place of custody.

3. Quantitative information about the service

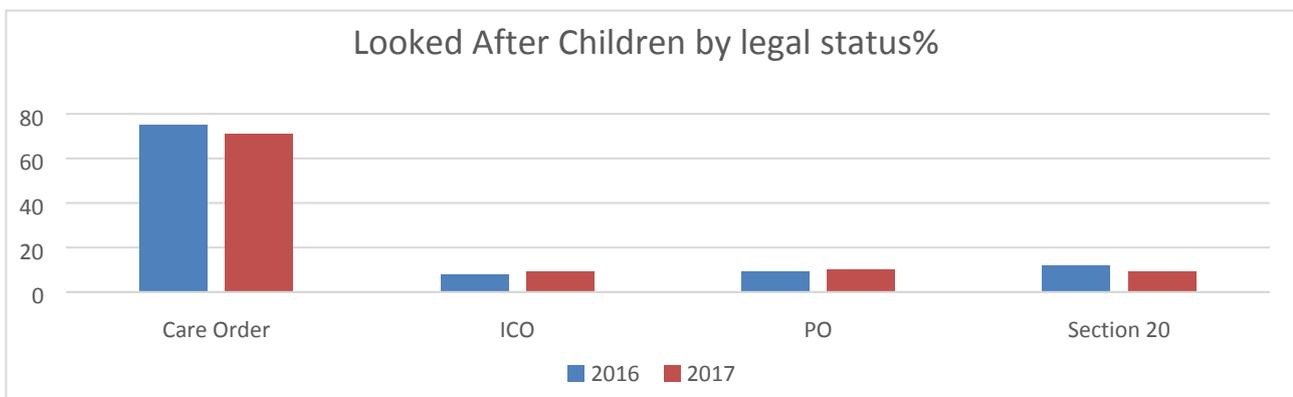
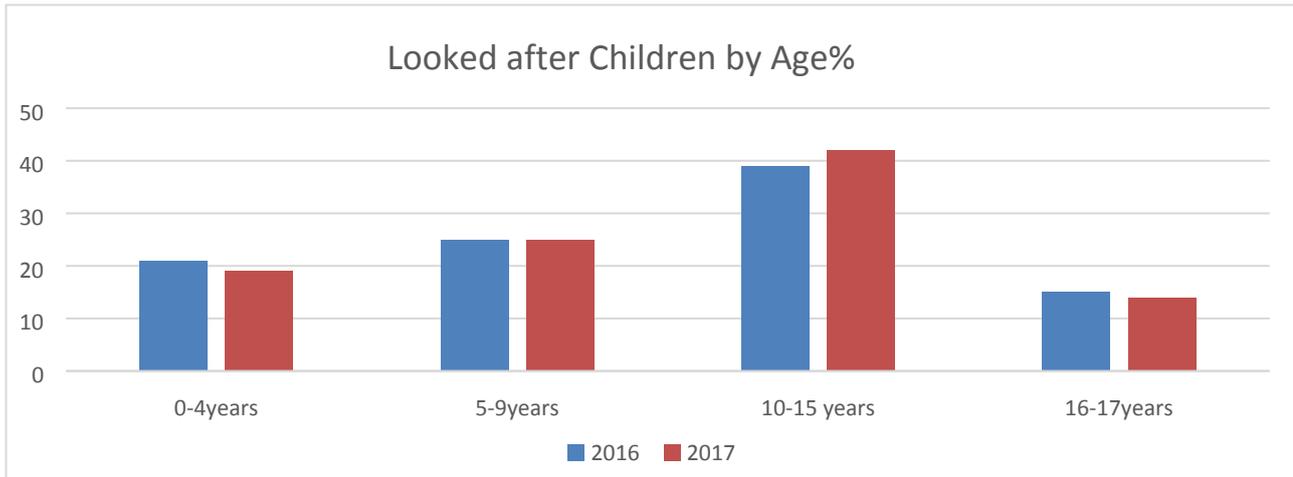
3.1 The Service has an establishment of 9 FTE IRO's. The team has been fully staffed since December 2014. A further 0.5 IRO post has been established, on a temporary basis, with the secondment of a 0.5 Foster Home Reviewing Officer to an IRO post. This will be reviewed in

September 2017 and it is proposed that this will be made permanent. There have been two additional agency IRO's in post in order to manage high caseloads arising from high numbers of looked after children. The post on Principal Independent Reviewing Officer (0.5fte) was established in 2016. The post holder supports the Safeguarding Manager with the management of the team.

- 3.2 The team has remained stable, other than the use of agency workers, over the period, and is increasingly experienced. The majority of the team have a mixed caseload of LAC and Child Protection. 3 of the permanent IROs only hold LAC cases. The makeup of caseloads is regularly reviewed.
- 3.3 The IRO Handbook recommends IRO caseloads of 50 – 70 children per IRO. The average caseload (including LAC, children on a CP plan, and those receiving care through short breaks (S20) on 31 March 2017 was 81 children. This compares to 70 at March 2016. The difference is due to the increased number of children subject to Child Protection Plans, which has doubled in the last 12 months. Although the caseloads are higher than last year, they are still within reasonable limits.
- 3.4 The team is made up of 3 men and 10 women. The team is made up of IROs from different ethnic backgrounds. (3 black/Asian, 1 black Afro/Caribbean/mixed heritage and 9 white British.) This adequately reflects the children we are serving. The looked after children of Wolverhampton were from the following backgrounds on 31.3.17. 60% white British, 4% Asian, 13% black/British/African/Caribbean, 9% mixed white/blackAfrican/Caribbean, 2% mixed white/Asian, 12% other.
- 3.5 The service also has 1 Independent Foster Home Reviewing Officer who is responsible for chairing Foster Home reviews.

Quantative information regarding the LAC population & CP population

- 3.6 There were 643 looked after children at 31/3/17, compared to 653 in 2016. Of these 262/41% were female (277/42% in 2016) and 381/59% were male (376/58%in 2016) . The charts below show the percentage of children in care by age and legal status. The data shows a slight reduction in the numbers of young children in care, whilst the proportion of older children has increased. This may be the result of effective plans to move young children on to permanence, whilst there is remaining legacy of older young people who will not leave care until adulthood.
- 3.7 In relation to legal status, the chart below shows the percentage of all children remaining subject to Care Orders has decreased, whilst children subject to other legal orders has remained relatively stable. The percentage subject to section 20 has fallen. This suggests the reduction of the number of children in care has been achieved through successful permanence planning and effective early intervention to keep children out of care.



4 Qualitative information about the IRO service

4.1 Under the provisions of the *Review of Children's Cases Regulations (1991)*³ local authorities are required to review the case of any child who is Looked After or provided with accommodation as follows:

- First review must take place within 28 days of the date upon which the child begins to be looked after or provided with accommodation;
- Second review must be carried out no later than 3 months after the first review; and
- Subsequent reviews shall be carried out not more than 6 months after the date of the previous review.

4.2 The date of the next review should be brought forward:

- If there is an unplanned change of placement or other substantial changes to the care plan.
- If the IRO has specific concerns about a child and directs that the review be brought forward.
- Any request from the child or parent(s) for a review to be brought forward should be given serious consideration.

4.3 82% of all LAC in 2016/17 were reviewed in line with statutory timescales (90% in 2015/16). This is a decrease on the previous year. The reasons for this dip in performance has been

analysed. There was a marked increase in the number of reviews out of timescale in November 2016 and January 2017. A number of these were due to sickness absence and beavement, which impacted on the reviews of larger sibling groups. A proportion of LAC reviews will always go outside of timescales due to practical considerations, such as sickness of key participants or other crisis on the day. Timeliness of reviews has improved since.

- 4.4 A total of 1615 (1834) Looked after Children (LAC) reviews took place in the relevant period- 92% of which were in timescale.
- 4.5 An IRO is allocated to all LAC within 24 hours of the Safeguarding Service being informed of that child's entry into care. Written information about the IRO and the reviewing service is shared with the child prior to their first review, in the form of child friendly postcard type information booklets. Children can make direct contact with their IRO's mobile phone by calling, by text or by email.
- 4.6 The majority of sibling groups, whether placed together or not, are allocated to the same IRO. This ensures consistency of information exchange, oversight of care planning and decision-making, including sibling contact, and is particularly of benefit when children have different social workers.
- 4.7 The involvement of children in their own reviews is regarded as an essential part of the process. *'A key task for the IRO will be to ensure that the review processes, and particularly review meetings, remain child and family centred'* (IRO Guidance, Adoption and Children Act 2002.) The IRO has an important role in ensuring that the child:
- can make a meaningful contribution to their review;
 - speaks for themselves if they are able and willing to do so; and where this is not possible that their views are conveyed by someone else on their behalf or by an appropriate medium; and
 - has been given the opportunity to make a written contribution to the meeting, particularly if they have chosen not to attend or are unable to attend for some other reason.
- 4.8 The recorded achievement in this area of activity is also a measure of local authority performance, although no longer a national performance indicator. At 31 March 2017 93% of children participated in their reviews. This is a slight increase on 2016 (92%). The service aims to improve this level of participation and has taken steps to improve recording of children's contribution to reviews.

Case example:

Child A is 8 years old and has been in care for 6 years with a care plan of long term fostering. The current IRO has been allocated to Child A for 4 years.

Initially, when first appointed, due to high caseload and distance to the placement, the IRO had been unable to visit prior to the review date.

It had been difficult to obtain her wishes and feelings because of her age and understanding, and as time passed, the IRO became concerned that Child A did not fully understand her position as a child in care.

As the IRO's caseload reduced, she was able to start to visit Child A prior to each review (every six months) and initially spent time building her relationship, playing games together. This has paid off, and Child A is now able to understand the IRO's role and is comfortable talking to her.

During the last visit, it was possible to have a more in depth discussion about her circumstances and Child A was confident enough to express her wishes about contact with her birth family. As she expressed her views so clearly, this has meant that contact plans have been able to progress to meet her needs.

There will always be a proportion of children who do not want to participate or for a variety of reasons, do not make themselves available to the IRO and do not take up other forms of consultation.

Case Example:

CS is a young person aged 13. She has been in care since early 2014. The IRO has been allocated since 2014. Her care plan is long term foster care and she is happy and stable in her long term placement.

CS does not wish to take part in the review process as she associates her review and IRO with unhappy feelings about her mother and what happened to her. CS doesn't want to see her mother or for her to find out where she is. So far, efforts to reassure her have not been successful. She refuses to complete a written consultation document. The IRO has written to CS and given her opportunities to take part in her reviews, suggesting a range of different ways she could contribute, but she has chosen not to respond. On this basis, the IRO has made the decision not to attempt to see CS but will write to her at least once a year to keep the possibility of her participating open.

- 4.9 Children aged 7 and over receive a written invitation to their review meeting along with the consultation document inviting their contribution to the review. The IRO is required to speak with the child alone prior to the first review and before every subsequent review (regulation 36). The requirement for direct contact with the child extends to observation of babies and younger children.
- 4.10 The Independent Reviewing Officers Guidance, Adoption and Children Act 2002, states that '*The IRO has an important role in ensuring that all parties to the review are able to make an effective contribution.*' In order to assist in this aim, age appropriate consultation papers continue to be sent to the child/young person, and carers, prior to a review. The child's consultation paper provides the IRO with a picture of the child's feelings about the various aspects of their care and the services he/she is receiving, and assists the IRO in ensuring the child's voice is heard. The service has been aware that many young people would prefer other means to provide their view, and (Mind of My Own) MOMO has been introduced. IRO's are increasingly speaking with parents outside of the review meeting, if their presence is not in the best interests of the child, to ensure they can represent their reviews both in the meeting and in the record of the meeting.

4.11 1 child was reviewed by an IRO under the Short Break Statutory Guidance (Section 20(4) of the Children Act 1989) in 2016/17 (2 in 2015/16).

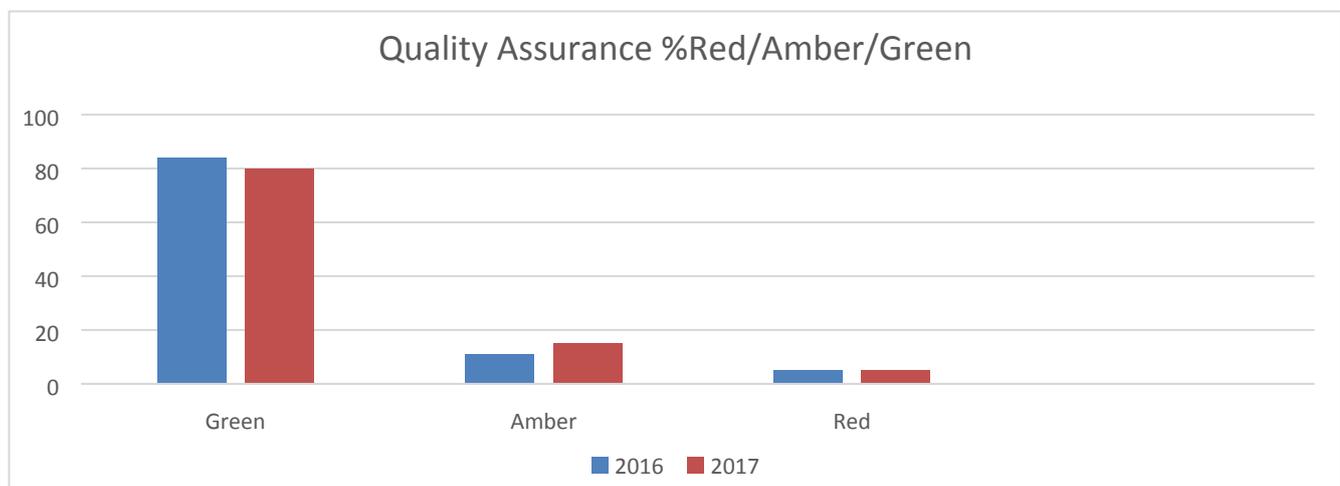
4.12 It should be noted that Ofsted inspection of Wolverhampton in 2017 found that: 'Independent reviewing officers (IROs) are effective in driving improvements in practice and performance, leading to better outcomes for children looked after. A stable and experienced team of IROs has been given additional resources, to ensure that IROs are able to continue to deliver a high-quality service'.

5. Conduct of the organisation in relation to the review

- 5.1 The IRO's quality assure each child's case at every review which include the following:
- Quality of preparation for review by social worker, including report preparation, preparation of the child/young person and sign off by manager,
 - Quality of care planning, including how up to date the care plan is,
 - Quality of contribution by the child/ young person and other attendees, to review,

Detailed reports are now available on the findings of this quality assurance work, which means the service is now able to identify trends and patterns of practice and bring them to the attention of Childreb's Social Care. The Safeguarding Manager-Children provides a report to the Children and Young People's Management Team quarterly, highlighting areas of good practice and areas for concern and action.

- 5.2 The RAG(Red/Amber/Green) quality rating system, in respect of the LAC reviews, including the progress of plans, preparation for the meeting and the quality of reports has been used consistently in Wolverhampton since August 2014. Forms are completed on the CareFirst database before the review record is completed. In 2016-17, RAG ratings were issued in relation to 1615 LAC reviews (1813 in 2015-16). The chart below compares ratings compared to 2016. This shows an overall reduction in the quality of work, but the percentage where there are serious concerns about drift and delay has remained static.



- 5.3 A notification is automatically sent to the responsible social workers and Social Work Unit manager, and ensures they are alerted to the status (red, amber or green) of the child's plan. It identifies any concerns the IRO has about a child or their care plan, and should be a clear and valuable part of the quality assurance of the Local Authority's work which is provided by the IRO. There is an expectation that the responsible Children's Social Care manager responds to the IRO in all red and amber cases. Where the IRO feels their concern is not being addressed, they would commence the agreed dispute resolution process.
- 5.4 The IROs complete a Recognition of Excellent or Good Practice notification when there is evidence of high quality practice. 52 notifications were awarded in 2016-17 (15 Excellent, 37 Good). This compares to 42 notifications in 2015-16. The IRO's have recognised the positive impact that recognition of good work has on teams, and therefore actively seeks to improve recognition.

6. Conduct of the organisation in relation to Case Management

- 6.1 During 2016 - 17 a number of formal dispute resolution protocols were implemented in Wolverhampton. This protocol commences when the IRO identifies serious concerns about drift or delay in a child's case and is unable to resolve the difficulty with the social worker or their manager. There were 18 informal stage meetings, 2 stage 1 meetings and 1 stage 2 meeting and 1 stage 3 meeting.

Case example- Informal stage dispute resolution

R has been in care since November 2013. The IRO has been allocated to R for nearly 4 years. There had been delay in progressing Review decisions to acquire legal documents and translate newspaper articles detailing circumstances surrounding R's father's murder for her life journey work.

R remained without any form of proof of identity. This has meant she hasn't been able to apply for a passport or for British Citizen. Without identification R has been unable to complete work experience at a preferred work place (pharmacy or medical setting) because DBS cannot be done without identity; this in turn means that R will not have the required work experience to apply for a pharmacy course at university. This has also delayed her application for a National Insurance number.

R wanted to understand the circumstances surrounding her father's death, searches herself via the internet were returning disturbing information. It had been agreed that newspaper articles about this would be translated, but this had not happened.

The IRO met with R before the review. She was angry because failure to implement actions had impacted on her life. The IRO advised R of the right to complain via the formal process and to seek advocacy. She suggested R waits until after the review when we will see if a resolution could be found.

R remained unsatisfied and pursued a formal complaint; the IRO escalated her concerns and had informal dispute resolution discussion with the social work manager.

The IRO is now satisfied that matters are being addressed and there is monthly management oversight, the IRO receives monthly updates and it is clear that progress is now being made. R is satisfied with the action and outcome achieved.

6.2 Reduced caseloads have meant that the IRO's are now more effectively able to monitor cases between reviews. In September 2015 audit found that there was little clear evidence of how the IRO was monitoring and intervening in case outside of the review process. Since that time, a revised recording procedure has been put in place and IRO's regularly record their actions on the child's file. Audit now shows that the IRO 'footprint' on the child's file is well evidenced.

7. Core Entitlements for Looked After Children

The All Party Parliamentary Group for Looked After Children and Care Leavers conducted an inquiry with the Who Cares Trust in 2013/4 which found that looked after children and care leavers did not always know their rights and entitlements. There are ten core entitlements: Five for looked after children and five for care leavers. These are:

- You must have a care plan which says what your needs are now and how they will be met.
- The care plan must include your views and these must be taken into consideration
- No important decisions about you should be taken without a review meeting unless it's an emergency
- Looked after children aged 16-19 should get a £1,200 bursary if staying in full time education.
- When a social worker visits you, they must speak to you alone, unless you refuse, it's not appropriate at the time, or the social worker is not able to.
- You can ask your authority for £2000 for the setting up home allowance.
- Your local authority must give you help with the costs of getting and keeping a job
- You must be given a copy and an explanation of your assessment and Pathway Plan
- If you are in higher education, your local authority must provide you with vacation accommodation.

In 2016/17 a task group has reviewed Wolverhampton's response to the Core Entitlement. The group found that the Local Authority is fully compliant. However, it was not clear that young people would always be aware of their entitlements. As a result, work has been undertaken to update and improve the information provided to children and young people in leaflets and on the Children in Care webpage. The IRO service has produced a flyer to give to children to remind them of their rights and key contact information.

8. Consultation with Young People - Feedback from the Children in Care Council

Most young people were aware of their IRO's name and spoke positively about them. All the young people were familiar with the consultation booklet. Many young people do not like the current booklet and it was agreed that the CICC would help design a new booklet.

Most of the young people were aware that MOMO existed, but most had not used it, and had not been shown how to use it by their IRO or Social Worker. It was agreed that we need to do more to help children become aware of how to use it.

The young people agreed that the three priorities for this year were right and did not suggest any additional ones.

9. Review of last year's priority areas for improvement and action

- 9.1 Monthly reporting of key information to be provided to the IRO service. It remains a priority for improved and more regular reporting to the Safeguarding service in respect of:
- Timeliness of reviews/conferences
 - Participation
 - Quality assurance information
 - RAG ratings and timeliness of responses

Completed- RAG rating and quality assurance information is now provided regularly and this is reported quarterly to CYP Management Team

- 9.2 Improve proportion of children participating in reviews and develop performance reports in relation to IRO consultation with children. The IRO service will fully support the roll out of the electronic new child consultation tool 'Mind Of My Own' app (MOMO).

Partially complete- A new IRO Child Consultation document was developed in 2016 and it is possible to receive performance reports from this. Participation has slightly improved from 2015/6, but remains a challenge to improve further. The service has supported the roll out of MOMO, but take up has not been as strong as anticipated and more work is needed in this area.

- 9.3 Institute an annual process of seeking and evaluating social worker feedback in relation to IRO performance.

Completed- survey of social workers in relation to IRO performance was completed, with positive feedback received. This will be an annual process.

- 9.4 To institute a task group with the LAC service in relation to the delivery and reporting of the Who Cares Trust Five entitlements for Looked After Children and Five entitlements for Care Leavers.

Completed- a task group was convened to review delivery of the entitlements. There is evidence that Wolverhampton effectively deliver all the entitlements, though some work has been needed to ensure children and young people are aware. Improvements have been made or are in progress to the information provided to young people via the website and leaflets. A flyer has been produced by the IRO service to remind young people of their entitlements. The content of the flyer was agreed by the Children in Care Council.

- 9.5 To explore more ways to help young people have greater awareness of the role of the IRO, such as through social media and Children in Care website.

Completed, the Children in Care website has been updated and a new flyer has been produced, reminding children and young people about the IRO role.

10. Priorities for 2017-18

- 10.1 To improve participation of children and young people in their LAC reviews by further promoting MOMO and through the development of other means of participation, in consultation with the Children in Care Council
- 10.2 To improve the timeliness of reviews
- 10.3 To improve parental participation in LAC reviews and improve performance monitoring in this area.

11. Conclusion.

- 11.1 This report has highlighted the work of the IROs in Wolverhampton from April 2016 to March 2017 and is an update on the last annual report.
- 11.2 The service needs to evidence, through the enhanced quality assurance role, RAG rating and dispute resolution that they are an effective service with a culture of intervening and challenging when there is drift and delay or issues effecting children's human rights and/or their safety. This report shows the service has improved in this respect. However, further improvement is needed for the service to be more effective in identifying trends and patterns in practice and therefore more effectively contribute to whole service development.
- 11.3 The next report will cover the period from 1 April 2017 to 31 March 2018.

Corporate Parenting Board

9 November 2017

Report title	Educational Outcomes of Looked After Children 2017
Cabinet member with lead responsibility	Councillor Val Gibson Children and Young People
Wards affected	All
Accountable director	Emma Bennett, Children and Young People
Originating service	Looked after Children
Accountable employee(s)	Darren Martindale Virtual School Head for LAC & Youth Offending Tel 01902 556951 Email Darren.Martindale @wolverhampton.gov.uk
Report to be/has been considered by	Education Board 29 September 2017

Recommendation(s) for action or decision:

The Corporate Parenting Board is asked to consider the report on the recent educational attainment of Looked after Children.

1.0 Purpose

- 1.1 To report on the educational attainment of Looked after Children (LAC) in the 2017 academic year and to briefly highlight successes, learning points and areas for further development.

2.0 Background

- 2.1 This report briefly summarises the Local Authority's progress in its key, statutory responsibility to promote improved educational outcomes for the children in its care, and its care leavers. The Virtual School Head's (VSH) full 2017 annual report will add further detail to this briefing and will be presented to Corporate Parenting Board in January 2018.

3.0 Attainment of LAC in 2017

- 3.1 Local authorities have a statutory duty to promote the educational achievement of Looked after Children and the Virtual School Head's annual report is also a statutory requirement, detailing how that duty has been discharged and the educational outcomes of LAC. This briefing acts as a precursor to that report and presents the 'headline' attainment data. The results below relate to eligible LAC (in care for one year + at 31 March 2017). The results below are currently un-validated. However, it is very rare that any significant changes are made to the cohorts following validation, therefore we can safely assume that this is representative of overall performance.
- 3.2 Early Years Foundation Stage (EYFS)
- 38% of the whole cohort were assessed as at a 'good stage of development' in reading, writing and number (the same as 2016).
- 3.3 Key Stage 1 - % achieving the age-related expected level in test
- Whole cohort: 73% in reading, 60% in writing, 80% in maths.
 - In-city cohort: 83% in reading, 83% in writing, 83% in maths, 73% in year 1 phonics check.
 - Out-of-city cohort: 67% in reading, 44% in writing, 78% in maths.
 - Performance has improved dramatically since 2016 (e.g. overall % has doubled in writing and almost doubled in reading).
- 3.4 Key Stage 2 - % achieving the age-related expected level in tests
- Whole cohort: 44% in reading, 44% in writing, 41% in maths.
 - In-city cohort: 44% in reading, 44% in writing, 44% in maths.
 - Out-of-city cohort: 44% in reading, 44% in writing, 39% in maths.
 - Performances in teacher assessments are slightly better – average 50%.
 - Performance has dipped since 2016.

3.5 Key Stage 4 – GCSEs

- Whole cohort: 23% achieved level 4 (previously grade C) or higher in five subjects including English (language and/or literature) & maths.
- In-city cohort: 23% achieved level 4 in five subjects including English & maths.
- Out-of-city cohort: 22% achieved level 4 in five subjects including English & maths.
- Five children achieved BTEC or other equivalent qualifications alongside GCSEs.
- Of the children who did not achieve GCSEs, four achieved functional skills qualifications at levels 1, 2 or 3.
- 81% of the whole cohort achieved qualifications of some level.
- Overall performance has improved since 2016.

3.6 Comparison between 2016 & 2017 results. The following tables compares 2016 and 2017 academic outcomes, with pupil numbers in brackets:

KS1 IN CITY	READING	WRITING	MATHS
2015/2016 (13)	46%	47%	77%
2016/2017 (12)	83%	83%	83%
KS1 OUT OF CITY			
2015/2016 (18)	33%	17%	33%
2016/2017 (14)	67%	44%	78%
KS1 COMBINED			
2015/2016 (31)	39%	29%	52%
2016/2017 (26)	73%	60%	80%
KS2 IN CITY			
2015/2016 (16)	63%	81%	69%
2016/2017 (18)	44%	44%	44%
KS2 OUT OF CITY			
2015/2016 (27)	56%	44%	52%
2016/2017 (18)	44%	44%	39%
KS2 COMBINED			
2015/2016 (43)	60%	59%	59%
2016/2017 (36)	44%	44%	41%
KS4 IN CITY			
5 OR MORE GCSE'S (*A-C) NOW GRADE 4 INCLUDING ENGLISH & MATHS			
2015/2016 (13)	31%		
2016/2017 (13)	23%		
KS4 OUT OF CITY			
2015/2016 (24)	13%		
2016/2017 (18)	22%		
KS4 COMBINED			
2015/2016 (37)	19%		
2016/2017 (31)	23%		

3.7 Post-16 (Further Education - year 13 – and Higher Education)

- 10 achieved entry-level qualifications.
- 14 achieved BTEC/Diploma qualifications – four at level 1, four at level at 2, six at level 3.
- two achieved A-levels.
- one passed a GCSE resit.
- 13 are continuing into the following year of their course.
- two Care Leavers achieved a degree – one 2:1 and one 2:2.
- eight Care Leavers have entered university.

3.8 Summary/Conclusions on the attainment of LAC:

- Outcomes in 2017 continue to improve overall – EYFS is the same overall percentage, but we do have more complete data than in previous years due to better monitoring of out-of-city LAC. KS1 has improved very significantly, although there has been a dip at KS2, and GCSEs have improved for the fifth consecutive year. Many other students have achieved vocational or alternative qualifications at KS4 and KS5. Some pupils have done exceptionally well, including several in very challenging circumstances. The numbers of Care Leavers entering higher education also continues to be a strength for Wolverhampton.
- Out-of-city LAC are also doing better generally than in 2016, when their achievement was far lower than the in-city cohorts – a discrepancy that was highlighted by Ofsted. In-city pupils are still doing better at primary level (while the reverse is true at KS4) but the two cohorts are much closer in attainment than they were in 2016.
- There will always be fluctuations in the performance of relatively small cohorts. Comparisons should also be made with caution due to recent changes in curriculum and assessment arrangements (and KS2 outcomes were exceptionally high in 2016).
- Nevertheless, performance at KS2 is clearly a priority in 2017/18, and it is noted that writing is once again the weakest area at primary level. COPE will be monitoring the progress of years 2 and 6 more closely than ever, prioritising these year groups for 1:1 tuition and other uses of premium funding etc. The VSH will also present this briefing at the Education Leadership Meeting to identify how School Standards and COPE can work more closely together to ensure that our schools are subject to the strongest possible support and challenge, regarding looked-after pupils.
- COPE have conducted an analysis of the year 6 cohort to understand any trends or characteristics that have impacted on attainment. We have identified the following:

School attendance and OFSTED ratings

The average attendance for Wolverhampton LAC is 95%. In this cohort, 83% were above this average, with only 17% below the average. The 17% consists of one two-week fixed exclusion and medical appointments. 83% of the relevant schools were rated

good or outstanding. This would indicate that attendance and Ofsted ratings (while important in themselves) were not a key factor in underachievement.

Academic progress

Despite the apparent dip in attainment, this cohort had made above-average progress in reading and writing since the end of KS1. Progress was slightly below average in maths. However, we can see that this cohort made substantial progress since KS1. This indicates a high percentage with a low academic starting point, but that they have made substantial progress. Nevertheless, only 22% out of the OOC cohort achieved age related expected standards in all core subjects, writing, maths and reading (national average for all pupils in 61%). However, it must be acknowledged that this was a small cohort compared to last year and the recent assessment changes may also have been an influential factor. Indeed, many head teachers have reportedly stated that 2017 results should not be compared to 2016 for that reason.

- **Stability**

78% of this cohort had a change of social worker within the academic year. Of those who did not meet the expected level in any core subjects, more than half of these had experienced changes in care placement and some experienced school changes. Of those that passed all three core subjects, none of them experienced changes in school or care placement. This indicates that placement stability was key to academic success, and closely mirrors our findings in 2016, when there was a strong correlation between stability (of both school and care placement) and academic achievement.

- **Special Educational Needs & Disability (SEND)**

Despite the improved performance of the OOC cohort, 44% of that cohort had identified SEND and 22% had an EHCP. Several other children were being assessed for an EHCP during the period, all of which indicates a very high level of SEND (around 12% of Wolverhampton LAC usually have an EHCP).

3.9 At the same time, we should not overlook the many broader achievements of these remarkable children and young people. It is also true that many of them worked extremely hard and achieved very well, in relation to their starting point and previous outcomes, even if they did not achieve the 'expected' level. Further detail will be given in the 2017 VSH annual report.

4.0 Financial implications

4.1 There are no immediate financial implications arising from this report.
[JD/25102017/M]

5.0 Legal implications

5.1 There are no immediate legal implications arising from this report.
[TS/25102017/Q]

6.0 Equalities implications

6.1 An equalities analysis has not been completed for this report.

7.0 Environmental implications

7.1 There are no environmental implications arising from this report.

8.0 Human resources implications

8.1 All proposals can be met within existing resources.

9.0 Corporate landlord implications

9.1 There are no corporate landlord implications.

10.0 Schedule of background papers

10.1 There are no background papers to this report.

WOLVERHAMPTON CLINICAL COMMISSIONING GROUP

Corporate Parenting Board

Health Services for Looked After Children Annual Report September 2016 - August 2017

TITLE OF REPORT:	Health Services for Looked After Children Annual Report September 2016 - August 2017
PURPOSE OF REPORT:	This report aims to summarise the key areas of development and outcomes achieved by local health service providers during the identified time frame.
REPORT WRITTEN BY:	Fiona Brennan Designated Nurse Looked After Children Dr S Simon Designated Doctor Looked After Children
REPORT PRESENTED BY:	Fiona Brennan and Dr Simon
KEY POINTS:	The report was collated with information provided by Wolverhampton Clinical Commissioning Group (WCCG). The final copy presented to the Corporate Parenting Board will include Provider information. CAMHS provide a separate report, however all future contributions will be incorporated into this report.
RECOMMENDATIONS:	
CORPORATE PARENTING BOARD ACTION REQUIRED:	Decision Approval ✓ Assurance

Implications on resources

Legal implications

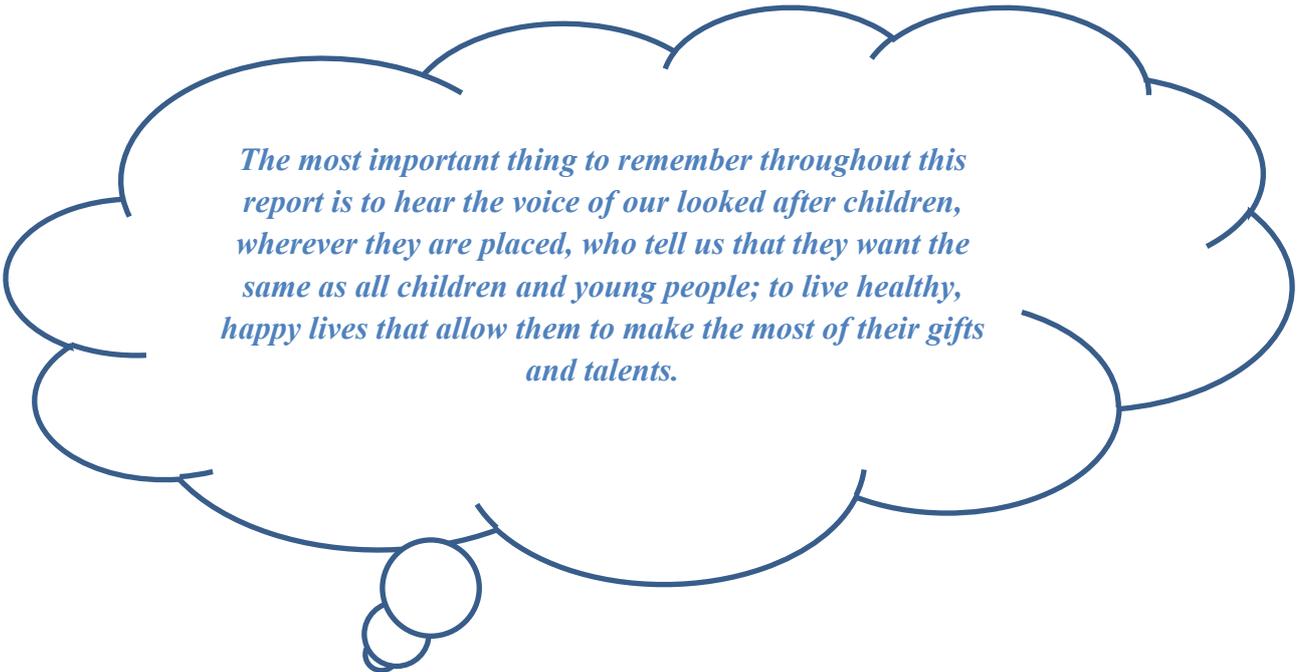
FOREWORD

Welcome to the Annual Health Report for Wolverhampton's Looked After Children (LAC).

Over the following pages it is hoped you will get a sense of the achievements, progress and challenges in meeting the health needs of our children in care. Partners across Wolverhampton are committed to improving the health and wellbeing of our LAC and young people whether they live in our city or further afield. We aim not just to meet these standards but to pursue excellence in order to give our children and young people the opportunities they need to grow and develop into adults with fulfilling lives.

PURPOSE OF THE REPORT IS:

- To provide an overview of the health and wellbeing of our LAC who are in the care of City of Wolverhampton Council placed either within City or further afield.
- To provide assurance to members of the Corporate Parenting Board that action is being taken to deliver on-going improvement to health outcomes for LAC and identify areas requiring improvement.
- To make appropriate recommendations for future developmental and joint commissioning needs in response to the review of health services for LAC and Safeguarding in Wolverhampton, Care Quality Commission (CQC) Inspection Report, published February 2017.



The most important thing to remember throughout this report is to hear the voice of our looked after children, wherever they are placed, who tell us that they want the same as all children and young people; to live healthy, happy lives that allow them to make the most of their gifts and talents.

1. Background and current situation

- 1.1 Experience and research has demonstrated repeatedly that our LAC are more likely to experience difficulties with their development, physical health and emotional wellbeing compared to a child or young person who is not looked after.

Children often enter the care system with a worse level of health than their peers, in part due to the impact of poverty, poor parenting, chaotic lifestyles and abuse or neglect. Longer term outcomes for looked after children also remain worse than their peers, with over 50% diagnosed with a mental health disorder and 2/3rds with special educational needs.

These difficulties are likely to be more significant and more difficult to treat the further away from their home a young person is placed.

2. Main body of report

What are our statutory requirements?

- 2.1 Promoting the Health and Well-Being of Looked-After Children 2015, provides statutory guidance for local authorities, clinical commissioning groups and NHS England. The NHS contributes to meeting the health needs of Looked After Children by:

- Commissioning effective services.
- Delivery through provider organisations.
- Individual practitioners providing co-ordinated care for each child, young person and carer.

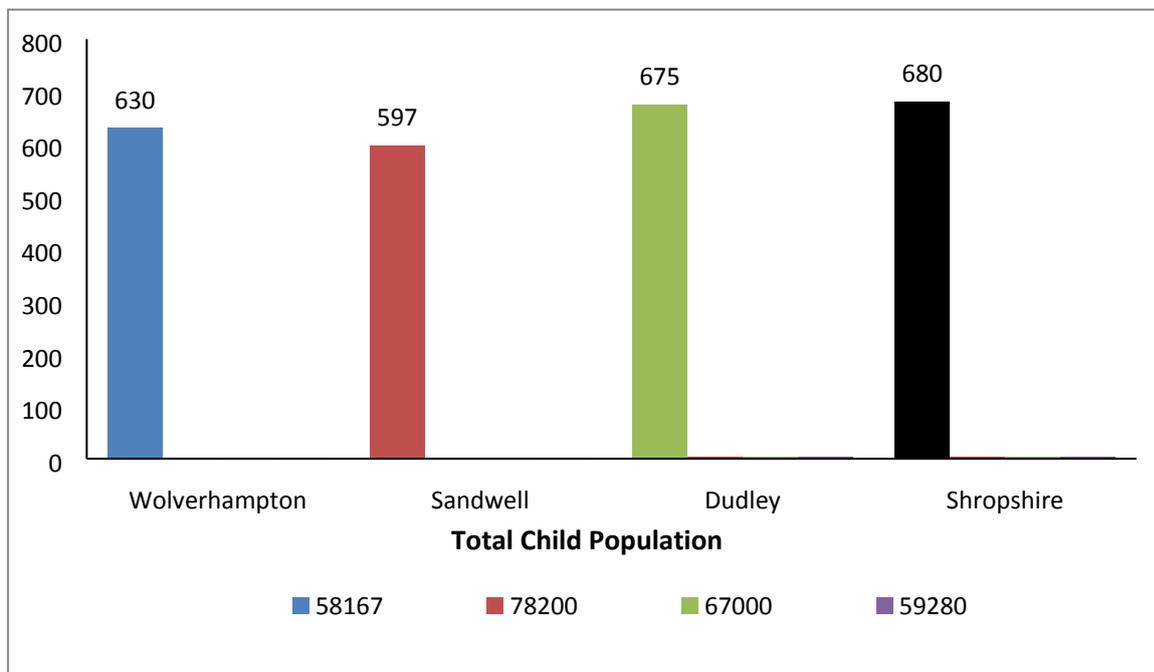
- 2.2 The core activities that require commissioning for LAC relating to statutory duties are:

- **Initial Health Assessments (IHA)** - The initial health assessment should take place in time to inform the child's first LAC review within 20 working days of entering care.
- **Review Health Assessments (RHA)**- The review of the child's health plan must take place once every six months before a child's fifth birthday and once every 12 months after the child's fifth birthday.
- **Care Leaver Summaries (LCS)** - Care leavers should be equipped to manage their own health needs wherever possible. They should have a summary of all health records (including genetic background and details of illness and treatments), with guidance on how to access a full copy if required.
- **Adoption Reports** - the collation of reports for adoption and fostering panel.

3. *A local perspective*

3.1 Wolverhampton continues to have a relatively high number of LAC, but comparable with neighbouring authorities as shown in the table below:

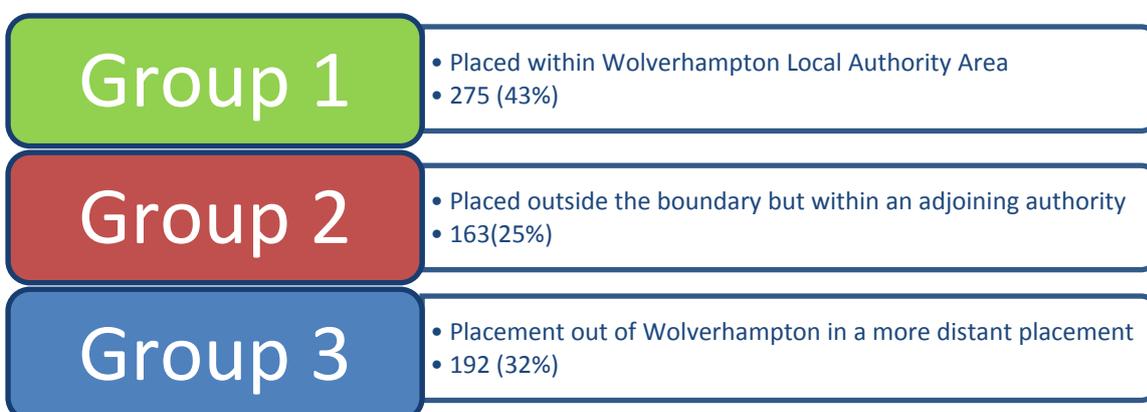
Table 1 – August 2017



3.2 Considerable work has taken place by the local authority, and as a result, the numbers have reduced from 804 in August 2015, to 636 in August 2016, to 630 in August 2017. They have remained relatively static over the reporting period. Capacity to place children within Wolverhampton remains a challenge, with almost 60% living outside of the City.

3.3 There are three groups of LAC as identified in 'Out of authority placement of looked after children – Supplement to Children Act 1989, as follows;

Table 2 – August 2017



4. **Current Commissioning Arrangements**

- 4.1 The Designated professionals for LAC recommend that Wolverhampton Clinical Commissioning Group (WCCG) commission a service that ensures appropriate arrangements and resources are in place to meet the physical and mental health needs of all Wolverhampton looked-after children regardless of where they are placed.
- 4.2 The current health provider service in Wolverhampton is commissioned, through the Royal Wolverhampton Trust (RWT), to deliver statutory health assessments for Wolverhampton LAC placed within the city. This does not include children placed here from other areas, who remain the responsibility of the originating local authority and clinical commissioning group.
- 4.3 The WCCG Designated Nurse LAC (DNLAC) completed health assessments for children placed in neighbouring boroughs at the Gem Centre in Wolverhampton up until June 2017. The DNLAC from June has focussed on its primary purpose with a strategic role, with RWT currently undertaking these clinics under a service level agreement.
- 4.4 WCCG commission health assessments for those LAC placed further afield. The reliance on other areas comes with some challenge, which include the timeliness and quality of interventions. All health assessments are quality assured by the DNLAC against the national screening tool before being approved and sent out.
- 4.5 A briefing paper was submitted to the commissioning committee in October 2016, recommending changes to the way we commission health services for our Wolverhampton LAC, wherever they are placed.
- 4.6 Approval was given, and as a result, the Provider Service will extend their geographical coverage, undertaking review health assessments for all our children placed within 50 miles of the City. Only 8% of our children are placed further than 50 miles away.
- 4.7 Within the reporting period there were:

Table 3

Group 2 (table 2)	Initial health assessments	Review health assessments
Number requested	0	145
Number completed	0	138 95%
Number Quality Assured	0	138 100%

Table 4

Group 3 (table 2)	Initial health assessments	Review health assessments
Number requested	0	188
Number completed	0	90 48%
Number not yet due	0	63 34%
Number Quality Assured	0	90 100%

- 4.8 Challenges remain around meeting statutory timescales, particularly for those children placed further afield.
- 4.9 Of the 98 in Group 3 not completed, 63 of those were not yet due by the end of August, all of these are booked in for completion within timescales.
- 4.10 The remaining 35 had not been completed due either the child moving placement, issues around capacity in the area the child was living, or late requests from the local authority meaning delays in assessment. DNLAC continues to monitor and escalate individual cases where there are significant delays by liaising with the LAC health team and Designated leads where the child is paced.
- 4.11 The new commissioning arrangements proposed by the WCCG (4.5) will support in reducing some of these challenges. A dedicated health professional within the Provider who will travel out to these young people, wherever they are placed to enable oversight
- 4.12 Following contractual negotiation between WCCG and RWT, key performance indicators are to be added to the RWT LAC dashboard in September 2017. This will enable us to better monitor, challenge, manage and identify common themes around compliance with statutory timescales for health assessments in order to improve outcomes for our LAC. This will be underpinned and supported by regional and national comparative through attendance at associated forums by Designated leads.

5. The Royal Wolverhampton Hospital Trust (RWT)

- 5.1 The LAC health team within RWT is made up of the Named Doctor, the Named Nurse and LAC administrator.
- 5.2 Due to staff leaving the Trust, the Named Doctor post has been vacant since Jan 2017. Duties have been covered by senior medical staff and the Named Nurse. This is registered as a risk on both the Provider and the CCG register.
- 5.3 The Named professionals for LAC have the responsibility for coordinating provision of clinical services for children, providing advice and expertise for fellow professionals.

Duties include:

- Training and supervision for health care staff.
- Quality Assurance of health assessment.
- Audit and performance monitoring.
- Report writing and analysis.
- Development of key policies and pathways.

5.4 The Named Nurse attends weekly drop in sessions at The Way to engage harder to reach young people and works closely alongside:

- LA transitions team.
- The youth offending team health advisor.
- The pupil referral unit school nurse.
- The sexual health prevention co-ordinator.
- The multi-agency sexual exploitation team (MASE).
- Neonatal and maternity services.

5.5 The Named Doctor and Medical Advisor provide advice to prospective adopters, adult health reports for fostering and adoption, adoption medical reports, and attend adoption panel as expert health advisors.

5.6 Initial health assessments are undertaken by medical practitioners, and review health assessment by other health professionals, including school nurses and health visitors.

5.7 Within the reporting period there were:

Table 5

Group 1 (table 2)	IHA		RHA		Adoption reports		Adult health reports		Meeting with adoptors
Number requested	149		368		110		197		40
Number completed	120	81%	346	94%	110	100%	197	100%	40 100%
Number Quality Assured	120	100%	346	100%	110	100%	197	100%	N/A

- 5.8 The 19% of children who did not receive an IHA were either due to them leaving care prior to medical taking place, or the report being counted within adoption figures.
- 5.9 The 6% of children who did not receive a RHA were due to the children refusing, or moving out of area. For those who refuse, the Named Nurse will offer a telephone consultation.
- 5.10 Compliance with statutory timescales continues to be a challenge for both health and the LA, but a number of operational strategies are being implemented to address this, including:
- Development of enhanced LAC database to enable improved performance monitoring.
 - Electronic requesting of health assessments by the LA to improve timeliness.
 - Access to the LA database by LAC health team to improve information gathering.
 - IHA flowchart incorporated into LA health policy.

6. The Family Nurse Partnership

- 6.1 The Family Nurse Partnership consists of a nurse supervisor, four family nurses and quality support officer. They continue to have a small number of their overall client group who are LAC. The team are heavily involved in the care of these young people, and this includes the undertaking of statutory health assessments. They are also major contributors at LAC reviews.
- 6.2 Support offered focuses around attachment issues, abusive relationships and good sexual health.
- 6.3 In the reporting period they have had four clients that have been LAC and two babies – one of whom went into long term foster care.
- 6.4 Of these four clients; two are living with their partners and babies independently, one is in a mother and baby foster placement, and one has moved out of the area and no longer involved with the service.
- 6.5 The commissioning arrangements for Family Nurse Partnership are currently under review as part of the Healthy Child Programme. This is led by Public Health and will specify a new service model that supports what is working well and addresses areas that need improvement.
- 6.6 RWT are currently working to implement a new service model which will still include the intensive support currently provided under FNP. The new service will be called The Partnering Families Team.

7. *Wolverhampton Sexual Health Service*

Teenage Pregnancy

- 7.1 The latest under-18 conception figures (for 2015) were released by the Office for National Statistics in March 2017. The under 18 conception rate in Wolverhampton (2015), has risen slightly since 2014 (29.6 → 31.9), as has the maternity rate, whilst the abortion rate has dropped very slightly. The rate is the number of conceptions per 1000 females aged 15 – 17. Therefore, a rate of 31.9 is 3.19%
- 7.2 The percentage of conceptions leading to abortion has dropped from 45.3% in 2014 to 41.5% in 2015. This is still below the percentage for England as a whole (51.2%) Birmingham and Solihull are the other West Midlands areas which saw slight increases in the under 18 conception rate.

It is difficult to obtain accurate figures for conceptions in LAC (as opposed to maternities) as termination data is anonymised and used only for statistical purposes. The number of conceptions to under 16s in Wolverhampton (2015) has risen by from 24 to 25 which is a slight rise in the rate from 5.6 to 6.0. The abortion rate in under 16s has risen from 50% to 60%.

8 *'Embrace' Sexual Health Service*

- 8.1 There are currently 12 LAC registered with the service. The service has been involved in the development of the new Relationships and Sex Education curriculum which is delivered in schools. Other organisations can access the curriculum resources for delivery to young people, and can choose specific stand-alone modules which are relevant to their client group.
- 8.2 The Sexual Health Service manages the National Chlamydia Screening Programme for Wolverhampton and chlamydia screening kits are available at health and young people's venues across the city, including the LAC Nurse and the Transitions Team. There are approximately 100 venues across the city. Kits can also be ordered online via the Embrace website.
- 8.3 The team offers a Tier 1 sexual health service through the majority of pharmacies across the city. This consists of free emergency hormonal Contraception, with an offer of a chlamydia screening kit for those aged 15 – 24 years and condom distribution to any young people who present with a C card.
- 8.4 The LAC Nurse offers sexual health advice and information and also signposts young people to Embrace clinic sessions such as The Way Youth Zone (Monday evenings). Individual referrals for sexual health services have been made to the Prevention Team by the CAMHS. The Prevention Team nurse has delivered sexual health awareness sessions and clinics at Upper Pendeford Farm and sees referrals on a needs-led basis.

- 8.5 The Embrace website is now fully functional and is the main source of up to date information about the service.
- 8.6 LAC have access to free condoms and pregnancy testing at venues across the City, via the C card (condom distribution) and pregnancy testing schemes. Between September 2016 and August 2017 30 condoms were issued to LAC via the C card scheme. This number is currently an estimate, due to the reliance on staff accurately recording the status of our children at time of collection. The team are currently revising the registration form in order to prompt staff into asking the question.
- 8.7 The Named Nurse offers C card registration and condom distribution on the C card scheme, pregnancy testing, and distribution of chlamydia screening kits under the National Chlamydia Screening Programme. The Transitions Team also offers condom distribution on the C card scheme and chlamydia screening kits.

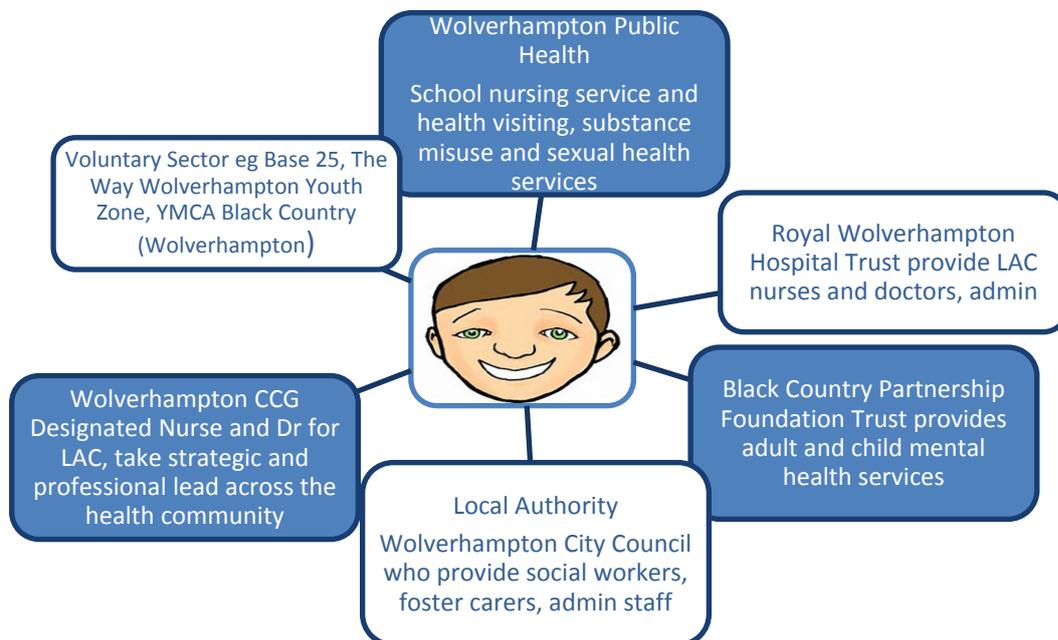
9. *Current messages in relation to sexual health.*

- Condoms should be promoted as sexually transmitted infection (STI) prevention rather than as contraception.
- Long Acting Reversible Contraception (LARC) methods should be promoted as the most effective contraception.
- Continued promotion of the 'delay' message to young people.
- Focus on 'relationships' in Relationships and Sex Education (R.S.E).
- Promotion of the importance of chlamydia screening amongst under 25 year olds in particular, as this is the age group which has the highest prevalence rate.

10. *Who is the Corporate Family and how well do these services work together?*

- 10.1 Those who contribute to the care of children and young people who are looked after can be regarded as 'the Corporate Family'. Those who are particularly important in meeting the health needs of our LAC and young people include:

Table 6



11 *Inspections; CQC and Ofsted*

- 11.1 In July 2016, The Care Quality Commission (CQC) conducted an inspection of health services for LAC and safeguarding in Wolverhampton to explore the effectiveness of health services we offer, and how we work together in partnership with other agencies. Their report was published in February 2017. Overall, they reported that services were well led by WCCG and that the health services provided in the City are adequate.
- 11.2 Ofsted arrived in Wolverhampton on the 16th January 2017 and the report was published on 31st March 2017. The judgement for LAC was 'good', however the report did highlight on-going challenges around inequality of care, including social, education and health provided to those children placed a distance from Wolverhampton.
- 11.3 Key recommendations from the inspections for LAC health have been effectively implemented, and will be monitored through the Health Steering Group.

12 *The CQC looked at:*

- The role of healthcare organisations in understanding risk factors, identifying needs, communicating effectively with children and families, and liaising with other agencies.

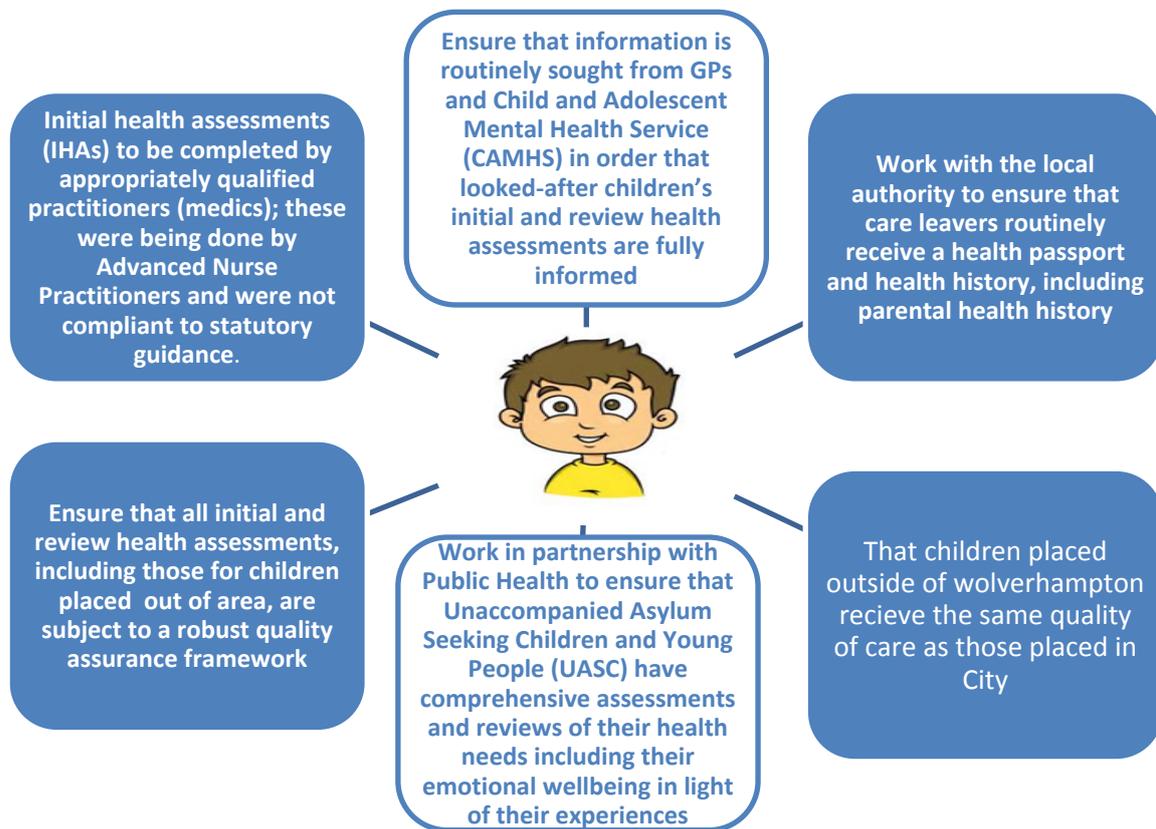
- The contribution of health services in promoting and improving the health and wellbeing of looked after children including carrying out health assessments and providing appropriate services.

13 What they told us we were doing well...

- In health there is strong leadership from the designated nurse for LAC.
- WCCG governance arrangements are in place and are effective.
- Health assessments effectively capture the voice of the child.
- The LAC steering group is an effective forum for the partnership to continue to take the service forward.

14. Recommendations for improvement included:

Table 7



15. What we are doing as a result:

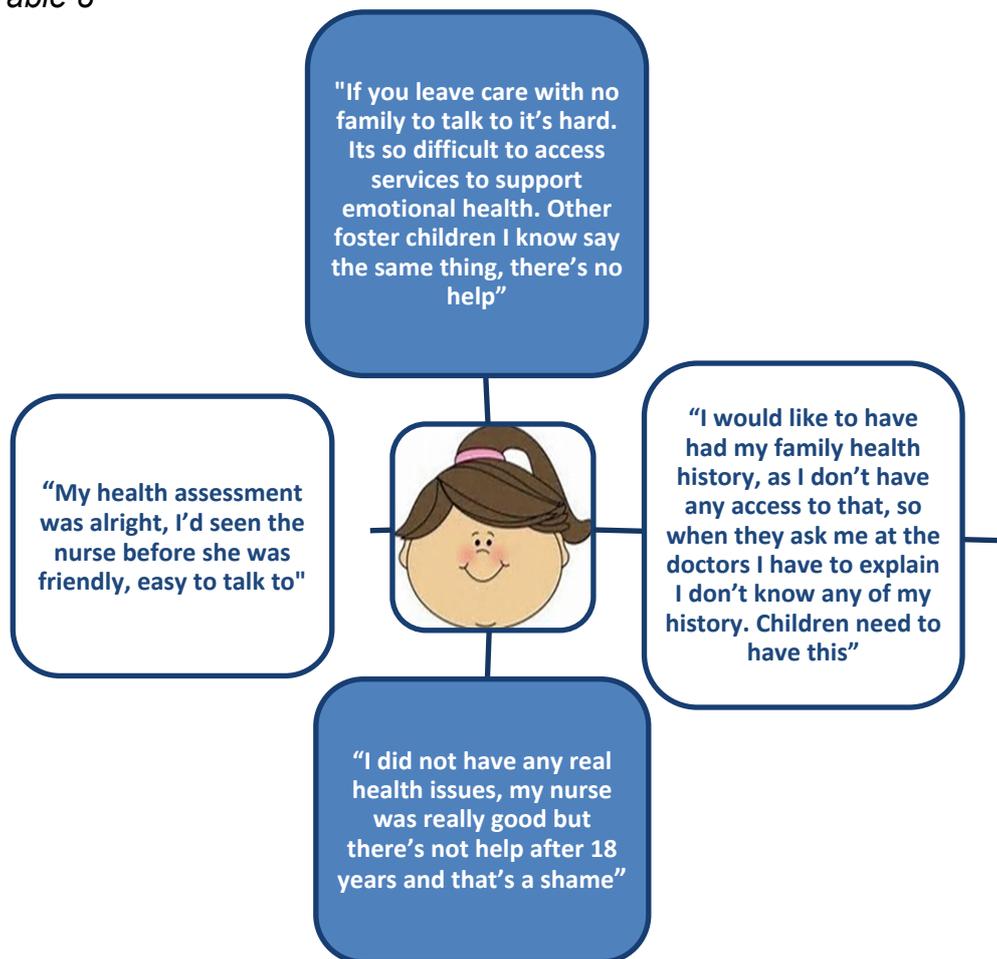
- Training programme delivered by Named Nurse has achieved 100% compliance within school nursing service and 81% within health visiting service. This includes training on the health needs of USAC

- WCCG safeguarding team have included a presentation on USAC in the level 3 safeguarding training for GP's and practise nurses. With 90 professionals booked onto Octobers training, it will be delivered by Designated Doctors at Wolverhampton Science Park.
- Health organise an interpreter to support all UASC during their health assessments to ensure good communication in order to accurately identify any physical or mental health needs
- All initial health assessments are undertaken by a medical professional.
- Business plan submitted by the DNLAC to ensure that we are able to offer those children placed outside of the City have a dedicated health professional to oversee their health needs, including those transitioning into adulthood. WCCG are leading a Strategic Group to receive assurance from each organisation of the implementation of the wider action plan.
- The Named Nurse LAC requests updates of interventions by the CAMHS to inform health assessments and LAC reviews where needed. For those placed further afield, the health professional undertaking the assessment will contact the DNLAC who will liaise directly with CAMHS, should more information be required.

15.1 All actions have been addressed and implemented and these will be monitored through the LAC Health Steering Group and Provider safeguarding forums, attended by Designated safeguarding leads.

16. What the young people told them...

Table 8

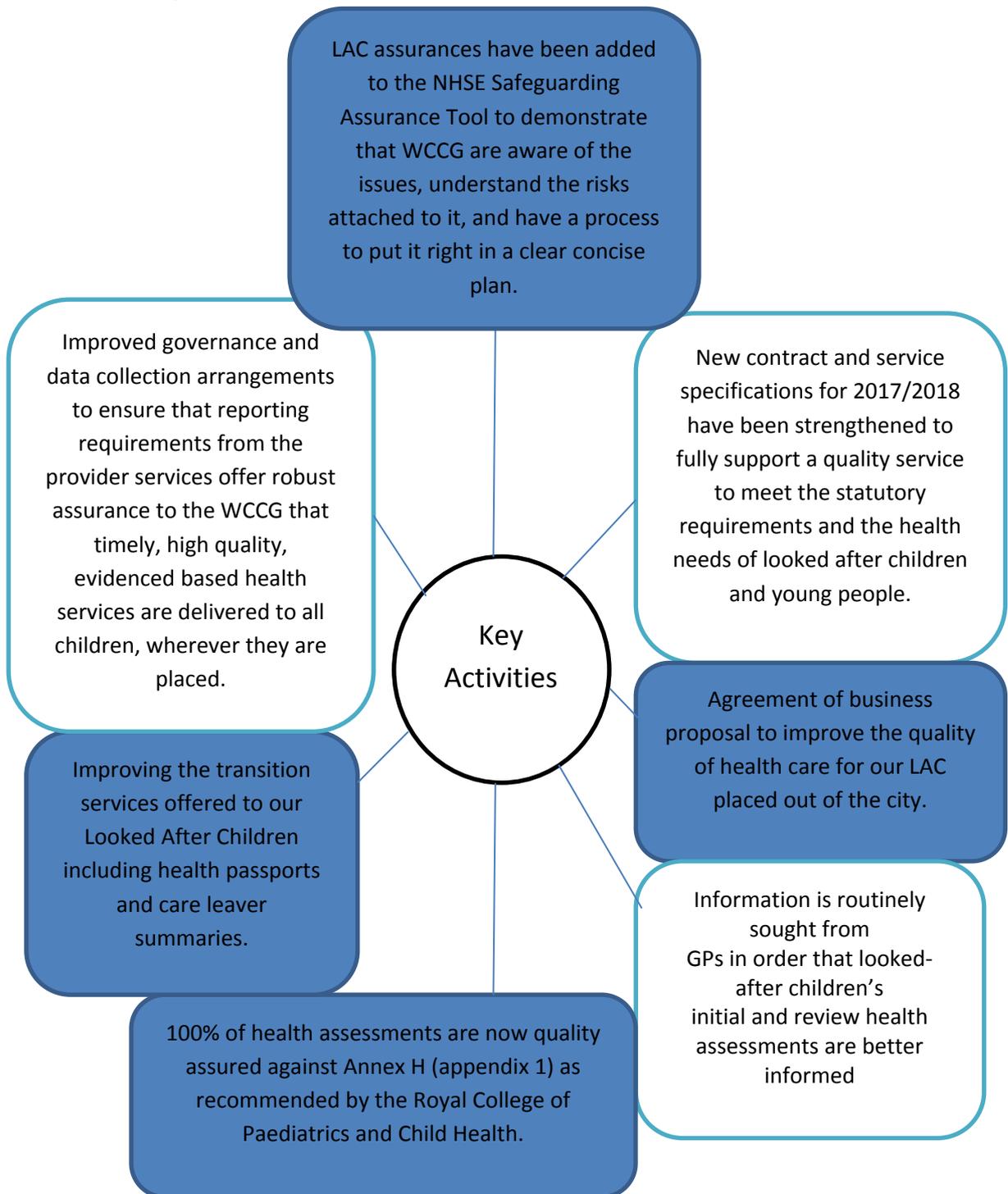


17. What we are doing as a result:

- Business proposal to the Provider includes more dedicated health support for those young people leaving care.
- All young people are offered a leaving care health summary including a GP summary.
- Implementation of health passports for all of our children in care.
- Quality assurance of health assessments continue to focus on the voice of the child, with action plans and summaries reflecting their wishes and feelings, evidencing that they are involved in decisions made about them.

18. Work activities completed between September 2016 and August 2017.

Table 9 - Key activities



19. The overall work programme objectives continue to be underpinned by the following principles:

- The health and wellbeing of children and young people are maximised.
- Inequalities in health status are minimised.
- Children and young people receive timely and appropriate health care provision according to need.
- Care planning and health care service developments are informed by children and young people.

20. *On-going pieces of work*

20.1 *Consistent high quality*

- Implementation of a national database containing exemplars of good practise to address the unwarranted variation for LAC. This has been led by NHSE, with input from Designated LAC professionals, and will inform the Standard Approach document.

20.2 *Provider assurance*

- In order to ensure robust reporting arrangements are in place, designated leads at WCCG continue to work with the Heads of Service in provider organisations and the LA.
- Improved governance and data collection arrangements to ensure that reporting requirements from the provider services offer robust assurance to the WCCG.
- A template has been developed by the WCCG Safeguarding Team which reflects the Safeguarding Assurance Framework for services commissioned by WCCG. This has been agreed to be used by the Heads of Safeguarding for RWT and BCPFT (CAMHS) prior to its inclusion in contracts 20017/18.

20.3 *Audit and Analysis*

- A more robust case file audit programme by Provider services, to focus on the quality of health assessments, waiting times, and therapeutic interventions to. offered to both children and carers. This will reflect the more robust reporting requirements, alongside issues identified through service user feedback, practitioner discussion and initial findings CQC.
- Findings will be discussed within the LAC steering groups, and included in future annual reports to the Corporate Parenting Board.

20.4 Policy

- A number of policies are being reviewed and developed to ensure there is a joint approach to the way we work with children between health and the Local Authority. This includes hospital discharge policies and the LA fostering medical policy.

21. Future Plans

- The Designated Nurse LAC is vice chair of the regional LAC forum, and a member of the national Group. She has also been asked by NHSE to represent the region at the newly developed national expert reference group.

Attendance at this forum will enable WCCG to:

- Participate in the decision-making process in clinical service planning and delivery for our LAC on a national level.
 - Debate and be involved in developing clinical recommendations that improve services for LAC nationally.
 - Be involved in innovate new models of care and service delivery.
 - Provide assurance and expert advice to WCCG and the Corporate Parenting Board.
- Implementation of the revised LAC service, to ensure that children placed outside of Wolverhampton receive a high quality, timely health service in line with those placed in City. This includes expansion of Provider health team.
 - Stakeholder forums to engage independent fostering agencies in order to be assured that as a City we have a sound oversight, and a co-ordinated approach to supporting children placed here from other areas.
 - WCCG to strengthen working relationship with colleagues in Public Health in order to mobilise and monitor the right health services to meet the needs of unaccompanied asylum-seeking children who arrive in Wolverhampton.
 - Electronic transfer of health assessment documentation to secure email addresses within the LA, and generic consent.
 - Robust, consistent quality assurance of therapeutic placements to ensure that children are appropriately placed.



Wolverhampton
Clinical Commissioning Group

Corporate Parenting Board

9 November 2017

Report title	Performance Monitoring Information
Cabinet member with lead responsibility	Councillor Val Gibson Children and Young People
Wards affected	All
Accountable director	Emma Bennett, Children and Young People
Originating service	Communications, Insight and Performance Team
Accountable employee(s)	Helena Kucharczyk Insight and Performance Manager Tel 01902 555440 Email Helena.Kucharczyk@wolverhampton.gov.uk
Report to be/has been considered by	Corporate Parenting Board 9 November 2017

Recommendation(s) for action or decision:

The Corporate Parenting Board is recommended to:

1. Consider the report and request any additional indicators or data items that they would like to see reported in future performance updates.

Recommendations for noting:

The Corporate Parenting Board is asked to:

1. Note the most recent performance relating to Looked After Children and Care Leavers.

1.0 Purpose

1.1 The purpose of this report is to update the Corporate Parenting Board on the latest performance relating to Looked After Children and Care Leavers.

2.0 Background

2.1 The Corporate Parenting Board has regularly received a performance report. The report in its current format has been presented to the Board since January 2015, with some additions and enhancements made to the report over time at the request of the Board.

3.0 Update

3.1 All current indicators in the report have been updated with data as at September 2017. Please note that some 2016-17 out-turn data remains provisional and will not be confirmed until statutory data is published by the Department for Education.

3.2 Where available national and comparator data has been updated, including:

- Population data
- Looked after Children numbers
- Absence Data - *please note there was an error in previous reports where persistent absence was underreported this has now been corrected and updated with 2016 data*
- Care Leavers Data

4.0 Financial implications

4.1 There are no direct financial implications arising from this report.
[AS/30102017/J]

5.0 Legal implications

5.1 There are no direct legal implications arising from this report.
[TS/30102017/Q]

6.0 Equalities implications

6.1 The report contains some demographic data, however, there are no direct equalities implications arising from this report.

7.0 Environmental implications

7.1 There are no direct environmental implications arising from this report.

8.0 Human resources implications

8.1 There are no direct human resources implications arising from this report.

9.0 Corporate landlord implications

9.1 There are no direct corporate landlord implications arising from this report.

10.0 Schedule of background papers

10.1 There are no background papers related to this report.

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Key Points to Note

Demographics

Demographic data has been updated with the 2016 mid-year population estimates. A considerably lower proportion of LAC are from BME backgrounds compared to the Wolverhampton CYP population.

2017 comparator data has been updated for the number of Looked After Children (LAC). The number of LAC remains fairly static after decreases through early 2016. Further reduction is required to bring Wolverhampton in line with our comparators.

Placements

In-house Foster Carers trend data shows that the percentage of children placed with in-house foster carers has increased over the past two months.

The proportion of LAC placed more than 20 miles from home increased slightly to 15%.

The indicators that look at placement stability have remained strong in the month against a backdrop of static LAC numbers and increased adoptions. Stability generally continues to show positive results and demonstrates that Looked After Children in Wolverhampton benefit from stable placements.

Routes into Care and Ofsted Ratings

This data shows which proportion of LAC were known to children's services in the 30 days prior to becoming looked after and the proportion of LAC that are asylum seekers and UASC (unaccompanied asylum seekers). Please note that children are classed as CiN if they are in the process of being assessed and may not have been CiN for very long or the subject of formal CiN plans. On-going work is being undertaken to identify how many children were also known to Early Help services and it is anticipated that this will be available by the end of the year.

The report now also shows the number of children placed in children's homes and the Ofsted ratings of those homes - of the 36 children currently placed in children's homes, 29 (80%) are in homes that are rated good or outstanding.

Assessments and Reviews

Assessments of Looked After Children in Wolverhampton remain up to date and performance remained strong at 97% . Reviews completed on time in the year have remained static over the past two months after an increase from 82% in 2016-17 year out turn. The percentage of children that participated in their reviews has increased after lower rates of performance in early 2017/18 and stands at 93%.

Education

The 2016 KS2 and KS4 results show that Wolverhampton LAC performed better than LAC nationally, regionally and within statistical neighbours, however, there remains a significant gap between the performance of LAC and all Wolverhampton children.

Small numbers can make these measurements volatile. For further information about the education attainment of LAC in Wolverhampton please refer to the Virtual School Head teacher annual report.

Attendance data has been updated for 2016 - attendance of Wolverhampton LAC at school is better than that of comparators. please note there was an error in previous reports where persistent absence was under-reported

Health

The percentage of children with up to date dental checks increased in the month to 91% and is now in line with year out-turn 2016/17. The result remains significantly higher than the 60% of children in the general Wolverhampton population that have seen a dentist in the past 2 years which is falling.

The percentage of health checks that are up to date has decreased in the month to 88% compared to 91% at year out-turn 2016/17. Most children who do not have up to date health checks are placed outside of the city.

Leaving Care**Adoption**

Adoption timeliness in the year 2017-18 show weak signs of improvement and are close to national targets for the first year. There have been 20 adoptions in 2017/18 with 75% within A1 indicator timescales. Average timescales are within 40 days of national targets, a result even more impressive when considering one longer term LAC adoption took place in the year of over 1500 days.

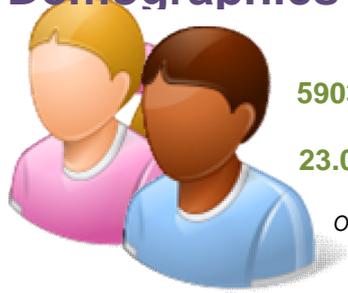
Care Leavers

The percentage of Care Leavers in Employment Education and Training cohort has changed to include all children and young adults who turn 17 to 21 in the year. At the end of September 60% of 17-21 year olds were in Education, Employment or Training. NALM (not available for the labour market) data has now been included and shows that out of 246 care leavers in the cohort, 81% of care leavers are available for work with 19% (41 young people) not available due to pregnancy or young motherhood, illness or disability or because they are in custody.

Work continues in this area to ensure that education, employment and training information is recorded and updated.

The proportion of care leavers currently deemed to be in suitable accommodation is also included and shows that 91% of the cohort are currently in suitable accommodation.

Demographics



59038 children aged 0-17 live in Wolverhampton
23.0% of the total population

ONS 2016 mid-year estimate

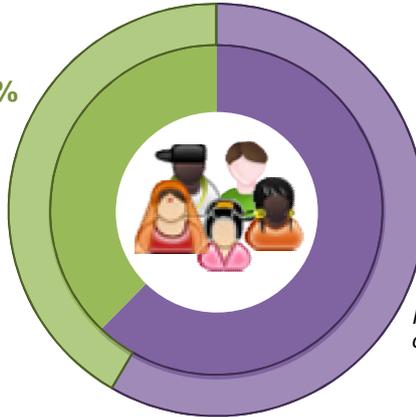
48.8% of the CYP population and 42.1% of LAC are female



51.2% of the CYP population and 57.9% of LAC are male



41.6% of the CYP population and 37.6% of LAC are BME

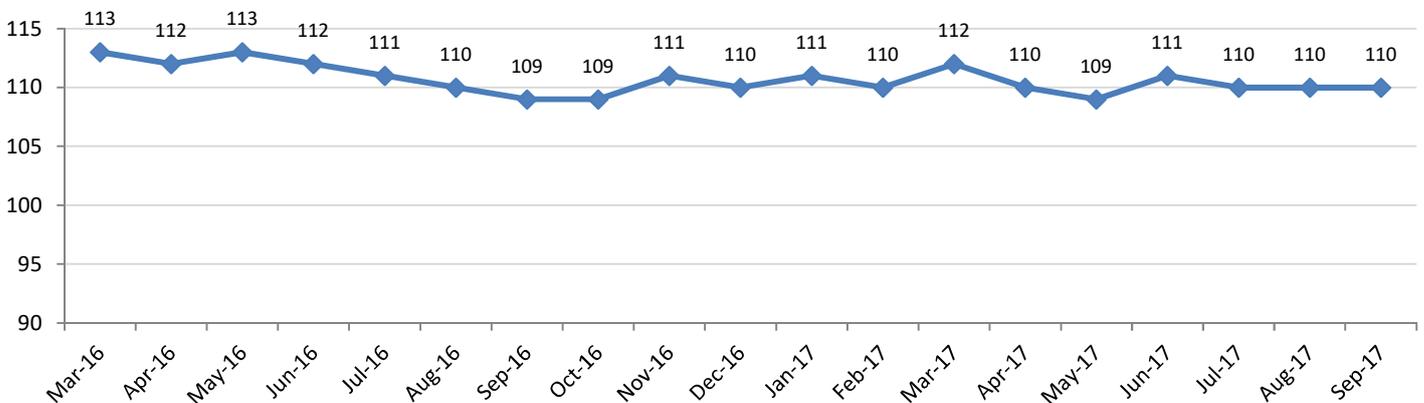
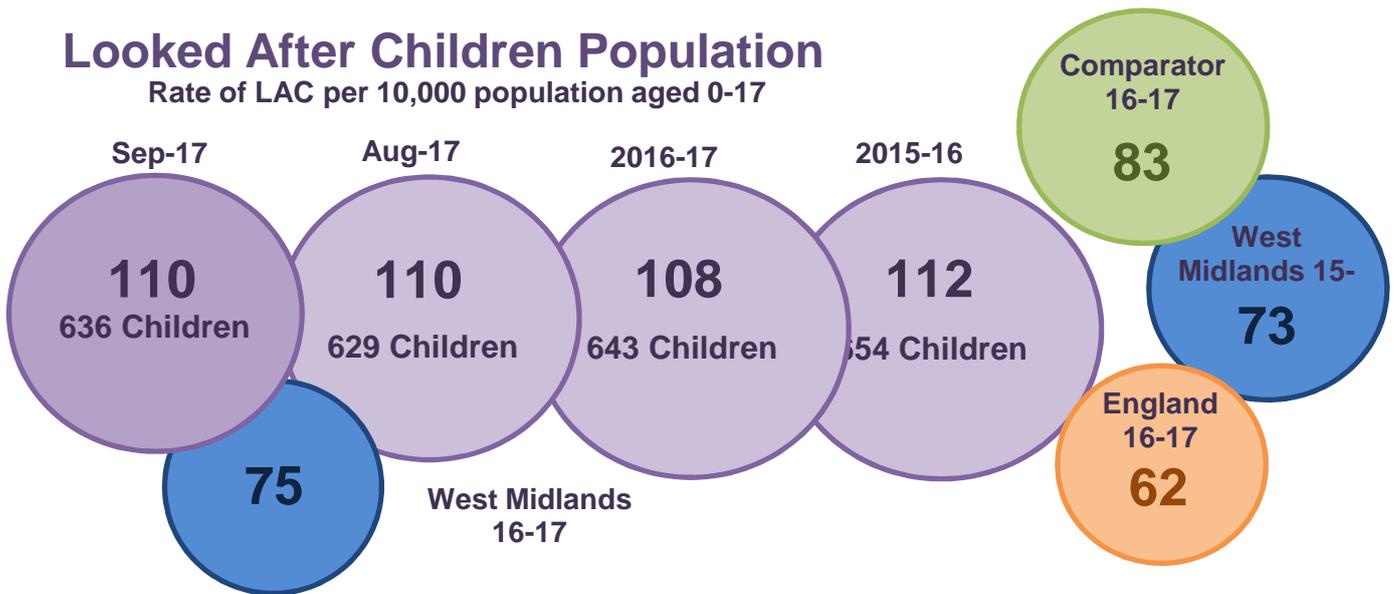


58.4% of the CYP population and 62.4% of LAC are white

Inner circle represents the LAC population, the outer circle is the CYP population

Looked After Children Population

Rate of LAC per 10,000 population aged 0-17



Placements

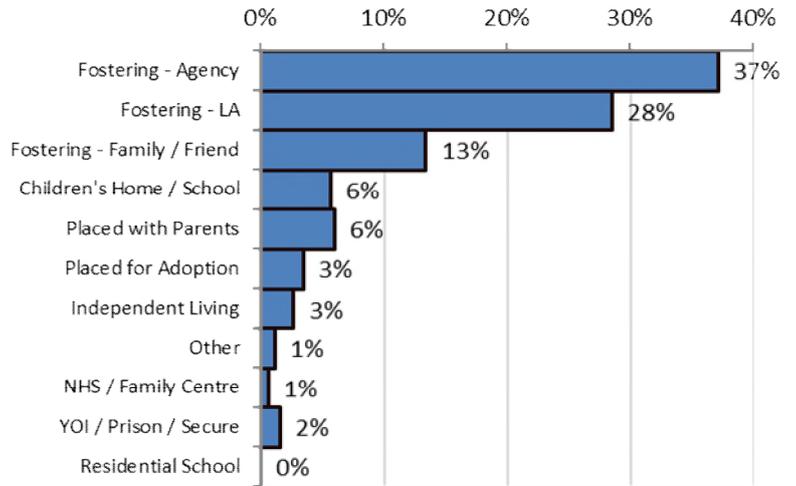


% LAC Placed 20 miles + from home

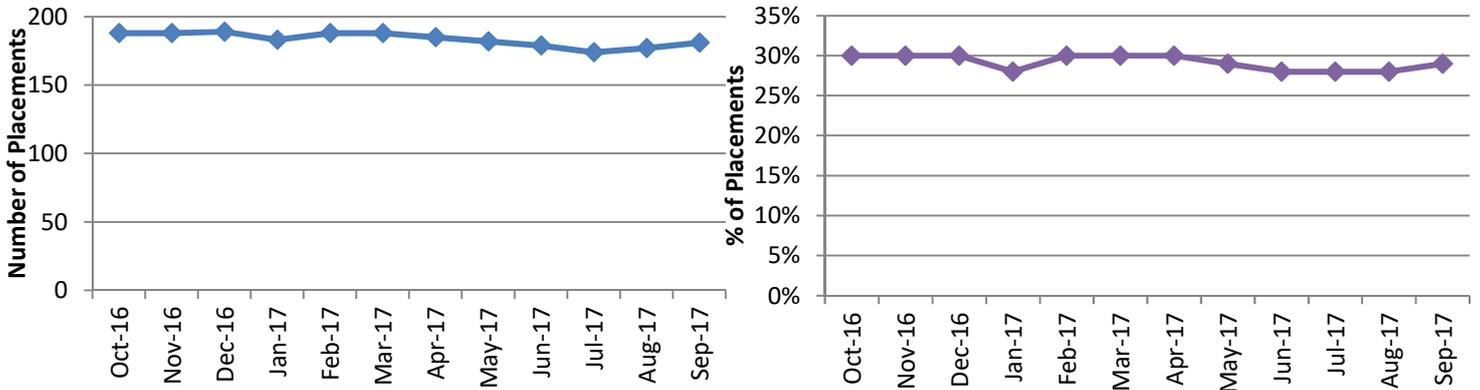


2016-17 Out-turn = 14%
2015-16 Out-turn = 16%
2014-15 Out-turn = 16%

LAC Placements



In - House Foster Placements

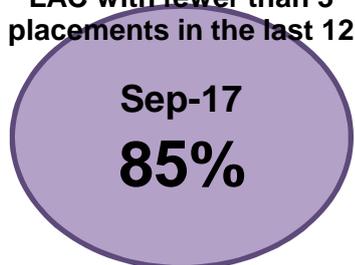


The proportion of LAC Placed with in-house foster carers has increased in the past two months and is now at 29% The gap has narrowed between the proportion of internal and agency foster placements.

Placement Stability

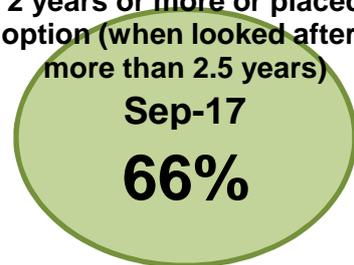


LAC with fewer than 3 placements in the last 12



Wolves 16-17 (Provis) = 86%
Wolverhampton 15-16 = 87%
West Midlands 15-16 = 90%
Comparator 15-16 = 90%
England 15-16 = 90%

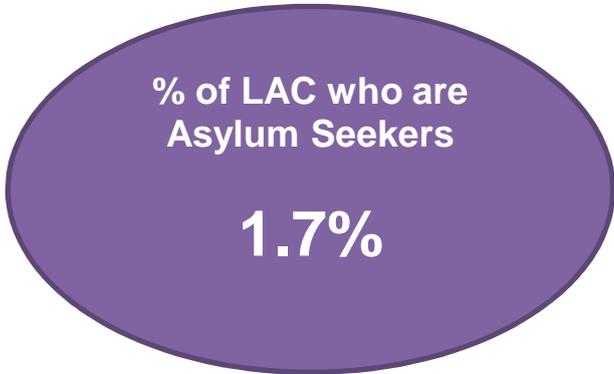
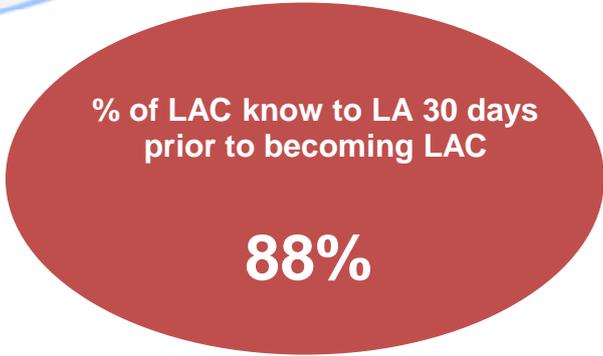
% of children in same placement for 2 years or more or placed for adoption (when looked after for more than 2.5 years)



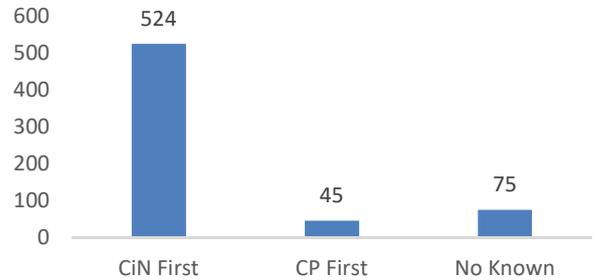
Wolves 16-17 (Provis) = 67%
Wolverhampton 15-16 = 68%
West Midlands 15-16 = 69%
Comparator 15-16 = 69%
England 15-16 = 68%

Performance shows that Looked After Children in Wolverhampton benefit from largely stable packages although percentages of stable relationships has decreased in the current year

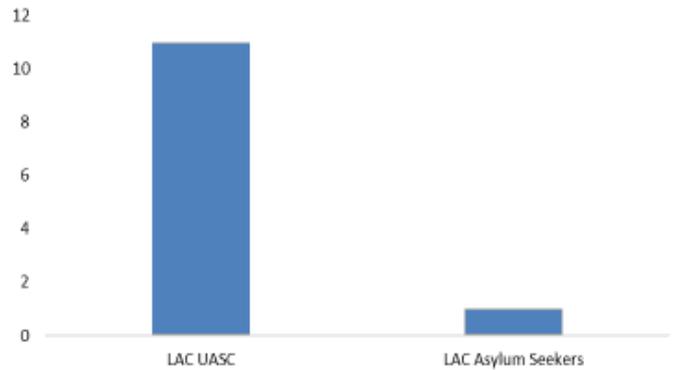
Routes into Care and Ofsted Ratings



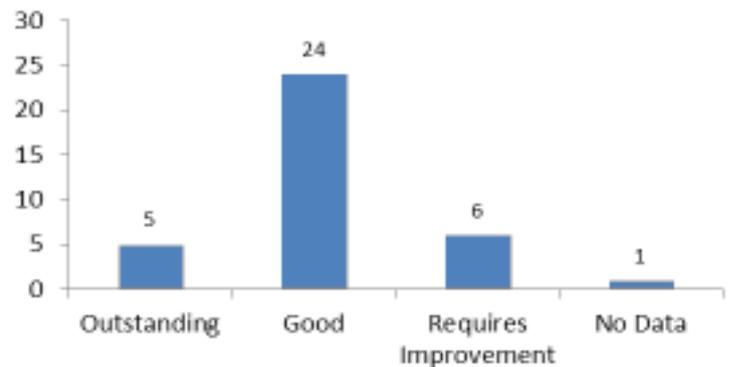
Knowledge of Child Pre LAC (30 Days)



How many LAC are Asylum Seekers



Number of Children in Residential Care Homes by OFSTED Rating



Assessments & Reviews

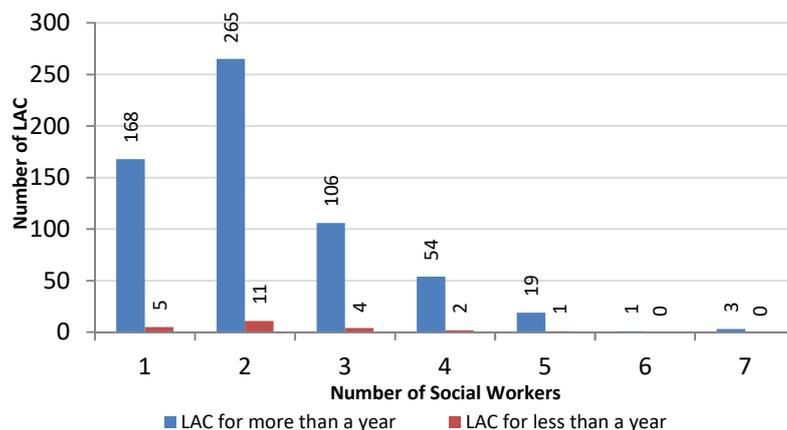


Average caseload of LAC children for LAC social workers

20

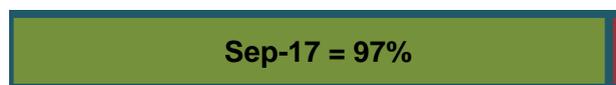
The most cases assigned to a social worker is 24. 13 social workers hold over 20 cases. The fewest cases allocate to a worker is 1.

Number of Social Workers LAC have had in the past 12 months



Looked After Children with up to date assessments

An up to date assessments is one that has been authorised within the last six months.

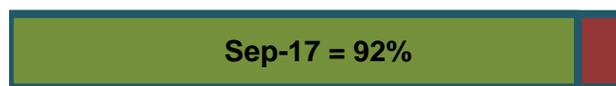


2016-17 Out-turn = 98%

2015-16 Out-turn = 97%

Looked After Children whose reviews have been completed on time

First Review is within 20 working days. Second review within three months. Third and subsequent reviews every six months



2016-17 Out-turn = 82%

2015-16 Out-turn = 90%

97% of LAC assessments are currently up to date, compared with 98% at the end of March 2017

Since 1 April 2017, 370 reviews have been completed with 33 not completed within timescales.

The proportion of LAC reviews where the child was present or contributed by other means since 1 April 2017

93%

Sep-17

Performance in LAC participation in reviews since year end has increased to 93%

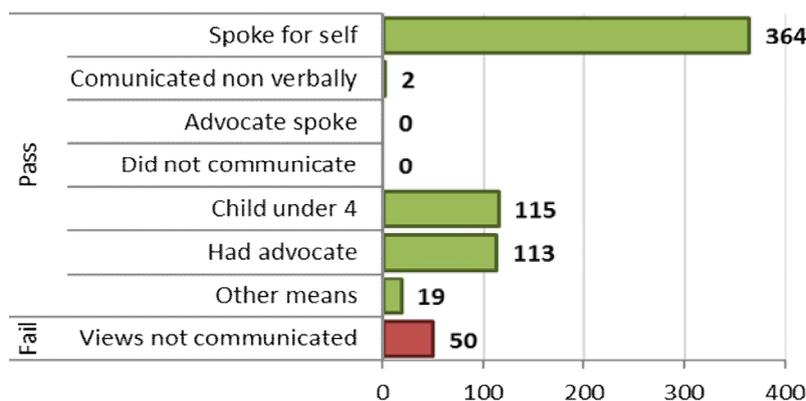
90%

2016-17 Out-turn

93%

2015-16 Out-turn

Participation of LAC in Reviews



Education



KS2 Expected Standard	Maths	Reading	Writing	Reading, Writing and Maths	Key Stage 4	GCSE A* - C in Eng & Maths	Attainment 8	Progress 8
Wolverhampton LAC 2016	51%	60%	58%	37%		20.0%	24.1	-1.16
Wolverhampton 2016	70%	65%	75%	53%		58.8%	47.7	-0.13
West Midlands 2016	41%	38%	43%	23%		17.1%	23.4	-1.07
Statistical Neighbours 2016	40%	35%	43%	25%		18.0%	22.2	-1.17
England 2016	41%	41%	46%	25%		17.5%	22.8	-1.14

PLEASE NOTE: Small numbers in the cohort reaching each key stage can cause results to be volatile making comparison difficult.

National results show that looked after children reaching KS2 level 4 in Maths, Reading and Writing in 2016 performed better than regional, statistical neighbour and national results. Performance in GCSEs is also better. However, there remains a significant gap between the performance of all children and LAC.

Detailed analysis of LAC educational performance was presented to the Panel via the Virtual School Head teacher report. Please note that there is some discrepancies when nationally published data is compared with locally held data - it is the national data that is presented here.

The proportion eligible LAC with an up to date Personal Education Plan (PEP)



95%
2016-17 Out-turn

90%
2015-16 Out-turn

83%
PEPS (Years 1 -11)
- Sep-17

70%
PEPS (Years 12 and 13)
- Sep-17

LAC Absence from School - 2016
(taken from nationally published data)

* Children looked after for 12 months or more

Unauthorised Absence *

0.6%

West Midlands - 0.8%
Statistical Neighbours -1.1%
England - 1.0%

Overall Absence *

3.3%

West Midlands - 3.8%
Statistical Neighbours - 3.9%
England - 3.9%

LAC Persistent Absence

6.7%

West Midlands - 8.2%
Statistical Neighbours - 9.4%
England - 9.1%

There has been an decrease in the number of PEP's in the month and both indicators still show a strong result. The new E-PEP system is due to go live from the start of November 2017.

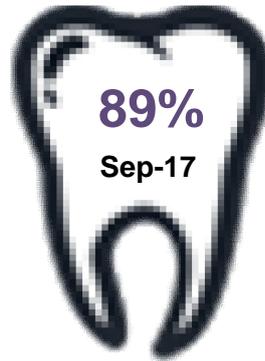
* Absence data has been updated - please note there was an error in previous reports where persistent absence was under-reported

LAC Health



60% of children in the
Wolverhampton Local Authority
Area have seen a dentist in the last
two years

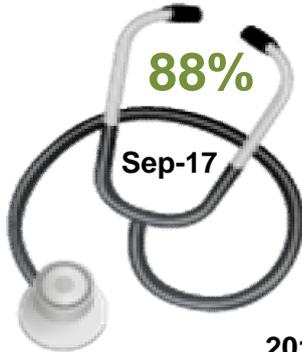
Dental Checks



2016-17 Out-turn = 81%

2015-16 Out-turn = 89%

Health Checks



2016-17 Out-turn = 91%

2015-16 Out-turn = 88%

There has again been an increase in performance since year out turn in dental checks and results in this area remain strong as a result of improved working with the CCG and RWT.

Performance of Health Checks remains strong however has seen decreased since year out-turn.

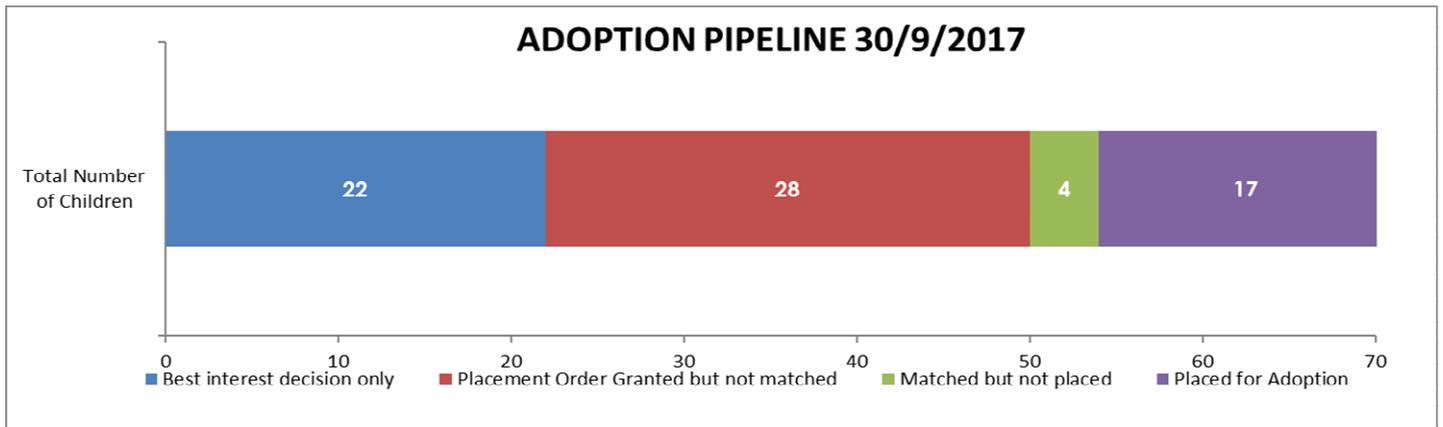
Leaving Care



Children Adopted 2014-15 2015-16 2016-17 July 2017

51 61 47 20

Adoptions



Adoption Scorecard Results

The adoption scorecard is calculated using results and performance over a three year period

A1 - Average time between a child entering care and moving in with their adoptive family

606 Days

3 Year avg 2015-2018

(672 days 2013-2016)

Target - 428 days

A2 - Average time between receiving court authority to place and finding a match

224 Days

3 year avg 2015-2018

(242 days 2013-2016)

Target - 121 days

A10 - Average time between a child entering care and moving in with their adoptive family (stopped at point of fostering for foster carers adoptions)

501 Days

3 year avg 2015-2018

(508 days 2013-2016)

Target - 428 days

Single year performance 2016-17

A1 - 651 days with 64% of children adopted within timescales

A2 - 238 days

A10 - 518 days

Single year performance (2017-18 as at 31 May)

A1 - 469 days with 75% of children adopted within timescales

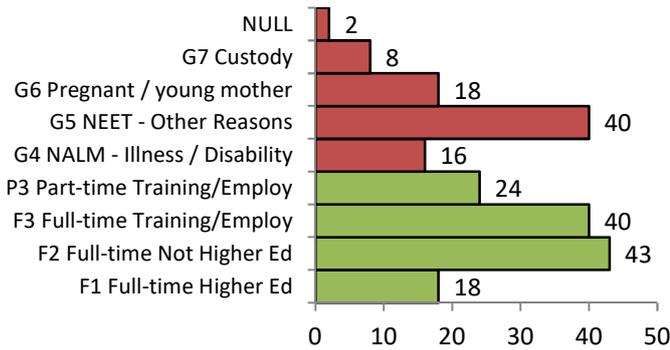
A2 - 183 days

A10 - 390 days

The adoption scorecards for 2013-16 were published in March 2017. Wolverhampton were once again rated 'double red' in the two key indicators, however, performance around adopting hard to place children including those over the age of 5 and from BME backgrounds continues to be better than performance nationally. Detailed analysis of the results has been undertaken and is available.

Care Leavers

Number EET Statuses



Care Leavers in Education, Employment and Training

Current - 60%
Wolverhampton (16/17) - 56%
West Mids (16/17) - 46%
Statistical Neighbours (16/17) - 47%
England (16/17)- 50%

% of Care Leavers in Suitable Accommodation

89%

% of Care Leavers available to work

81% Available
19% NALM

(34 Care Leavers are NALM (not available for the labour market) due to illness / disability, pregnancy or young mothers or being in custody)

The percentage of children and care leavers in education, employment or training (EET) has increased slightly at 60% compared with year out turn 2015-16

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