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CORPORATE PARENTING PANEL

THURSDAY, 18 JANUARY 2024 at 10.00 AM In the COUNCIL CHAMBER, COUNTY OFFICES, NEWLAND, LINCOLN LN1 1YL

MEMBERSHIP

<u>Lincolnshire County</u> <u>Council</u> :	Councillors S P Roe (Chairman), A G Hagues (Vice-Chairman), Mrs N F Clarke, Mrs J E Killey, C Matthews, N Sear and M A Whittington
<u>Added Members (non-</u> <u>voting)</u> :	Polly Coombes, Ann Wright, Caroline Sanders, 1 Vacancy (Lincolnshire Community Health Services) and 1 Vacancy(Children In Care Council Representative)

AGENDA

Item	Title	Pages
1	Apologies for Absence/Replacement Members	
2	Declarations of Interest	
3	Minutes of the previous meeting held on 9 November 2023	3 - 8
4	Announcements by the Chairman and Chief Officers	
5	Children in Care Performance Report Quarter 2 (To receive a report from Rachel Freeman, Head of Service - Children in Care and Residential Estates, which enables the Panel to consider and comment on the key performance information for Quarter 2 of 2023/24 that is relevant to the work of the Panel)	9 - 32
6	Children in Care Joint Annual Health Report 2022/23 (To receive a report by Rachel Freeman, Head of Service - Children in Care and Residential Estates and Rebecca Pinder, Head of Safeguarding Children, NHS Lincolnshire ICB, which invites the Panel to review and endorse the Children in Care Joint Annual Health Report 2022/23)	33 - 70

- 7 Lincolnshire Leaving Care Service Six Monthly Update Report (To receive a report by Lisa Adams, Programme Manager – Barnardo's and Kerry Mitchell, Barnardo's and Andrew Morris, Head of Service -Leaving Care, Semi-Independent Living and Unaccompanied Children, which provides the six monthly update report demonstrating the work undertaken with Lincolnshire Leaving Care Service from April 2023-October 2023)
- 8 Corporate Parenting Panel Work Programme 85 88 (To receive a report by Tracy Johnson, Senior Scrutiny Officer, which invites the Panel to consider its work programme)

Distributed on Wednesday, 10 January 2024

Please note: This meeting will be broadcast live on the internet and access can be sought by accessing <u>Agenda for Corporate Parenting Panel on Thursday, 18th January, 2024,</u> <u>10.00 am (moderngov.co.uk)</u>

Should you have any queries on the arrangements for this meeting, please contact Emily Wilcox via telephone 01522 552334 or alternatively via email at <u>emily.wilcox@lincolnshire.gov.uk</u>

Agenda Item 3



CORPORATE PARENTING PANEL 9 NOVEMBER 2023

PRESENT: COUNCILLOR S P ROE (CHAIRMAN)

Lincolnshire County Council: Councillors A G Hagues (Vice-Chairman), Mrs N F Clarke, Mrs J E Killey, C Matthews, N Sear and M A Whittington

Added Members: Polly Coombes (Foster Carer) and Elizabeth Bunney (Lincolnshire Community Health Services)

Officers in attendance:-

Kiara Chatziioannou (Scrutiny Officer), Tara Jones (Head of Service, Children in Care Transformation and Partners in Practice Programme), Andrew Morris (Head of Service -Leaving Care, Semi-Independent Living and Unaccompanied Children), Emily Wilcox (Democratic Services Officer), Nicola Brangam (Fostering Team Manager South), Sharon Clarke (Interim Team Manager, Adoption), Carolyn Knight (Head of Service - Quality and Standards and Principal Social Worker), Sarah Lane (Virtual School Team Manager), Ben Lilley (Team Manager, Quality and Standards), Emily McAllister (Fostering Team Manager), Juliet Slater, Richard Stone (Team Manager - Quality and Standards), Kim Murray (Team Manager - Independent Chairs) and Julie Vincent (Independent Reviewing Officer)

25 APOLOGIES FOR ABSENCE/REPLACEMENT MEMBERS

An apology for absence had been received by Ann Wright (Foster Carer).

26 DECLARATIONS OF INTEREST

None were declared.

27 MINUTES OF THE PREVIOUS MEETING HELD ON 7 SEPTEMBER 2023

RESOLVED:

That the minutes of the previous meeting held on 7 September 2023 be approved as a correct record and signed by the Chairman.

28 ANNOUNCEMENTS BY THE CHAIRMAN AND CHIEF OFFICERS

The Chairman announced that he had attended the 'Big Conversation' Voices4Choices meeting, which was well attended and a successful event.

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The Chairman and the Head of Service for Leaving Care, Supported Living and Unaccompanied Children continued their visits to District Councils to give training on Corporate Parenting and the Panel was expecting District Councillors to observe a future meeting.

The Assistant Director – Children's Safeguarding was delighted to announce that Paul Fisher had been appointed as the Corporate Parenting Manager.

29 <u>INDEPENDENT REVIEWING SERVICE SIX MONTHLY UPDATE REPORT (1 APRIL 2023 -</u> <u>30 SEPTEMBER 2023)</u>

Consideration was given to a report by the Team Manager – Quality and Standards, which invited the Panel to consider a six-monthly update report on the Independent Reviewing Service.

During the discussion the following points were recorded:

- The action to move to a hybrid working approach was a Countywide objective outlined in the smarter working policy. Independent Reviewing Officers had been provided with Logitec Conference Cameras to operate meetings virtually, whilst hybrid facilities were still being developed.
- Funding for an additional Independent Reviewing Officer (IRO) to support the rising number of Unaccompanied Asylum-Seeking Children (UASC) was being used to support capacity within the wider IRO team whilst two officers focussed mainly on supporting UASC.
- Specialist officers supporting UASC were IRO's who had further knowledge and experience in supporting UASC and understanding their circumstances. These IRO's would also support other children in care. UASC living out of County would continue to be supported by Lincolnshire County Council. Officers emphasised that all Children in Care were supported equally.
- A lack of local providers meant that UASC between the ages of 15-18 were often placed in registered regulated supporting living options in Peterborough, Derby and Nottingham, whilst continuing to be supported by Lincolnshire. Officers were working with colleagues in NACRO in supporting the young people in coming back to Lincolnshire once their status was agreed by the Home Office.
- The Panel was assured that a rise in sickness absence was mainly to do with planned sickness such as planned operations. Although it was acknowledged that aspects of the role could be stressful, assurance was provided that the service operated a flexible working approach and staff were well supported through supervisions and other means.
- Officers continued to work collectively with partners who were all committed to getting timescales for court proceedings back on track. Officers were pleased to report that several legacy court cases had made their way through the system and cases would meet the 26-week timescale for the completion.

RESOLVED:

That assurance be given that Independent Reviewing Officers are fulfilling their duties and obligations in line with statutory guidance set out in the IRO handbook, working with the Quality and Standards service framework to support he Local Authority to deliver good quality services, develop practice and promote good outcomes for children in Care.

30 REGULATION 44 INDEPENDENT VISITORS REPORT

Consideration was given to a report by the Head of Service, Quality and Standards and Principal Social Worker, which invited the Panel to consider the Regulation 44 Independent Visitors Report.

During the discussion the following points were recorded:

- There was a national issue with recruitment in residential services. Officers welcomed the proposed reforms which would professionalise the roles within residential care and focus on quality and standards.
- The dedication of residential care staff in Lincolnshire was significant. Issues with the recruitment of managers at The Beacon children's home was ongoing however officers were optimistic that the recruitment to the management posts would be successful and emphasised that the rest of the staff team was stable.
- Staff at children's homes worked positively with children in forming and maintaining important friendships and encouraged visits to friends. Visits within children's homes had to be managed due to group living situations, but the Panel was assured that these were well managed and there was a high focus on relationships at every level.
- Officers were pleased to report that only one Children in Care review had been completed outside of the set timescales.
- Officers would always avoid rearranging reviews, however there were some instances where this was necessary. Rearranged reviews would always consider the impact of the child and the family, but it was essential to ensure that plans had been adequately reviewed and were realistic.
- The Foster Carer Representative emphasised her experience that the children are always the priority and timescales were adhered to.
- Parents to children in care continued to maintain their parental responsibility through agreements which were formed during planning meetings. In most circumstances, parents remained involved throughout the process and child specific plans were established on how family time and contact with parents was maintained.
- Risk assessments would be carried out as part of the care plan, with many starting with supervised contact, which may change over time depending on circumstances.
- Staff actively worked with parents to address the reasons their child had been placed into care.

RESOLVED:

That assurance be given that the Independent Visitors are fulfilling their obligations in visiting the Local Authority homes each month as required and inspecting against the nine quality standards as outlined in Part six, regulation 43 of the Children's Home Regulation 2015.

31 FOSTERING QUARTERLY PERFORMANCE REPORT - QUARTERS 1 AND 2

Consideration was given to a report by the Fostering Team Manager, which invited the Panel to review the performance of the Fostering Service for Quarters 1 and 2 of 2023/24.

The Foster Carer Representative gave her view on the Fostering Service, which had seen large changes throughout her 20 years of fostering. The importance of relationships and connection and working therapeutically to overcome challenges were emphasised. Foster carers were supported by social workers each month where they discussed supporting the child and the family. The support offered to Foster Carers in building relationships was welcomed.

On behalf of the Panel, the Chairman expressed pride in Foster Carers and thanked them for their contributions.

RESOLVED:

That the report be accepted as an accurate overview of the Fostering Service.

32 PRIVATE FOSTERING ANNUAL REPORT 2022-2023

Consideration was given to a report by the Fostering Team Manager (South), which invited the Panel to consider the Private Fostering Annual Report 2022-23.

During the discussion the following points were noted:

- There was a requirement for parents to notify the local authority of any private fostering arrangements six months before the arrangement was made, but it was acknowledged that this was not always the case.
- The service relied on partner agencies to be curious to the possibility of private fostering arrangements and many of the notifications received were from schools. Awareness was raised with health colleagues in identifying children.
- Officers were confident that they were aware of most private fostering arrangements for asylum seeking children, however they would have further conversations with partners on this issue.
- It was clarified that unaccompanied asylum-seeking children became children in care and were not privately fostered.

• Members thanked Officers for their work on identifying and supporting private fostering placements.

RESOLVED:

That the Private Fostering Annual Report for 2022-23 be endorsed.

33 ANNUAL REPORT OF THE REGIONAL ADOPTION AGENCY

Consideration was given to a report by the Assistant Director – Children's Safeguarding, which invited the Panel to consider the Annual Report of the Regional Adoption Agency.

During the discussion the following points were recorded:

- Education Passports helpfully provided personal information about the additional support a child may need or how they may need to be supported differently, such as a child's likes and dislikes, including behaviour triggers, as well as information on adoption and post adoption support and signposting. Passports were reviewed annually and at every transition point and did not replace any existing education or health care plan.
- Members were pleased to see that the adoption process was improved and focussed and there was much to offer around post adoption support. Officers were congratulated for a fantastic service.

RESOLVED:

That the Family Adoptions Links Annual Report 2022-23 be endorsed as a correct record of activity across the Family Adoption Links partnership operating as a Regional Adoption Agency.

34 <u>LINCOLNSHIRE CHILDREN IN CARE COUNCIL - VOICES FOR CHOICES (V4C) UPDATE</u> <u>REPORT</u>

Consideration was given to a report by the Practice Supervisor – Children's Services (Quality and Standards), which invited the Panel to consider the Lincolnshire Children in Care Council – V4C update. The Practice Supervisor – Children's Services (Quality and Standards) thanked frontline managers in giving support to help the growth of the Children in Care Council.

During the discussion the following points were recorded:

- The Panel was delighted that work was focussed on finding new ways to deal with issues, such as attending sporting clubs and other activities to help them grow.
- The Practice Supervisor Children's Services (Quality and Standards) was pleased to announce that Lincolnshire Children's Service, with help from Nottinghamshire, would be involved in the production of videos and online resources on their views on

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certain issues to be shared with professionals and incorporated to online training. The Panel welcomed the opportunity to view the videos.

• The Panel supported the excellent work of Officers and the Children in Care Council.

RESOLVED:

- 1. That satisfaction be given to the V4C activities and meetings undertaken with the reporting period;
- 2. That support for the ongoing work by officers to engage with young people and to improve the attendance at V4C meetings and events be recorded.

35 CORPORATE PARENTING PANEL WORK PROGRAMME

Consideration was given to a report by the Senior Scrutiny Officer, which invited the Panel to consider it's work programme, as set out on pages 145 to 150 of the agenda pack.

During the discussion the following points were recorded:

- Members of South Kesteven District Council were planning to attend the next meeting of the Panel.
- The Chairman thanked the Lincolnshire Community Health Service, NHS Trust Representative for her contribution and attendance ahead of her retirement. The Lincolnshire Community Health Service, NHS Trust Representative expressed her views on the brilliant care provided to Lincolnshire's young people and children in care and her enjoyment in working in partnership with the Council to support children and young people.
- The Panel was advised that discussions were ongoing about the operation of the Panel and welcomed thoughts or suggestions to make the Panel more effective, with the hope to invite young people to meetings of the Panel.
- Suggestions included meeting room and timing of meetings to engage young people and encourage attendance; inviting younger children to ensure their input was included and have focussed agendas for meetings including young people. Comments would be taken into consideration in ongoing discussions.

RESOLVED:

That the work programme be agreed.

36 PRIVATE FOSTERING STATEMENT OF PURPOSE 2022-2023

The Panel noted the Private Fostering Statement of Purpose 2022-23.

The meeting closed at 12.33 pm

Agenda Item 5



Open Report on behalf of Heather Sandy, Executive Director - Children's Services

Report to:	Corporate Parenting Panel
Date:	18 January 2024
Subject:	Children in Care Performance Report Quarter 2

Summary:

This item enables the Panel to consider and comment on the report and accompanying appendices to this report, that provide key performance information for Quarter 2 2023/24 that is relevant to the work of the Corporate Parenting Panel.

Actions Required:

Members of the Panel are invited to consider and comment on the performance information contained in the appendices of this report and recommend any actions or changes to the Executive Councillor for Children's Services, Community Safety, Procurement and Migration.

1. Background

Appendix A provides a full and detailed report that covers the measures that are relevant to Children in Care (CiC) used by Children's Services. This is available for questions.

There are 16 measures in total that relate to CiC that are reported on in Quarter 2. Of these measures four did not meet their target and four are ahead of the target set by the services.

1.1 Measures that did not meet their target:

1.1.1 Percentage of Children in Care with an up to date health check

The number of children in care has increased and there is evidence of more young people (YP) aged 16/17 entering care and exercising their right to refuse an assessment. These include young asylum seeking children who have come through the national transfer scheme. This age group of children are often not committed to

accessing their health assessment, although they continue to access healthcare when required. The Children in Care teams continue to encourage and promote health assessments with their young people but have to accept their right to refuse. There has been a lot of activity to improve the timeliness of Initial Health Assessments and this measure has improved.

1.1.2 Percentage of Children in Care with an up to date dental check

This measure is now sitting at 68.5% which remains below the target of 80%. This is due to the ongoing increased difficulties in children being able to access appointments with a National Health Service Dentist which has been the case for several years now. Availability continues to be impacted by the coronavirus pandemic, with Dental Practices closing and many restricting their practice to private patients only. In recent months we have worked jointly with health and social care and colleagues in the dental services across the county to agree a pathway for Children in Care to improve their access to dental services. For children who are not registered with a dentist at their health assessment appointments, carers are encouraged to register a child with a dentist as soon as possible.

1.1.3 Percentage of Children in Care with an up to date routine immunisations

The percentage of Children in Care with up to date routine immunisations continues to be impacted by factors such as the Covid Pandemic and an increase in the Immunisation team workload due to all males now being offered the HPV and all of the school population being offered the Covid-19 boosters and flu immunisations. The percentage of children who are up to date with their immunisations is at a higher rate of coverage compared with those of their peers in the general population. All outstanding immunisations are checked quarterly by the CiC/YP health team. Health and Social care colleagues are working together to improve the timely recording of immunisations.

1.1.4 Care Leavers in Education, Employment or Training (EET)

This measure remains below target and fluctuates throughout the year by a few percentage points either way. The Leaving Care Service continues to monitor every single young person who is not in EET. The Service continues to report monthly on the efforts of the service to re-engage individuals back into EET. Lincolnshire County Council (LCC) tracks this performance regularly and monitors those young people who fall into NEET (not in education, employment or training) and those that re-secure EET. Our EET statistics are slightly below our statistical neighbours who run at 55%. However, our 'in touch with service' statistic for care leavers is way above national average at 98% in comparison to 93% for our statistical neighbours.

1.2 Measures that are ahead of their target:

1.2.1 Stability of placements of Children in Care: Number of moves

This indicator identifies those children who experience three placement moves within the year. At this point, the performance is well within the target range of 6% however, as the measure is cumulative, we would expect this to continue to increase until the end of the financial year.

For all placements, the service continues to ensure that foster carers are well supported and that potential problems are identified early to support them in continuing to care for children whose needs are varied and complex. This has been supported by using the Valuing Care toolkit and the embedded caring2learn approach which has supported and empowered foster carers to share, find and deliver solutions within a context of a tailored fostering service training and support offer. Nevertheless, the service has continued to see that some stable placements disrupt unexpectedly, and this can have a significant impact upon this indicator. The service has also seen an increase in the entrants of older children (teenagers) which poses some challenge in terms of identifying longer term accommodation options, whilst the younger cohort of children with care plans for long-term fostering presents challenges in achieving placement stability due to the local and national shortage of foster carers who want to care on a longer term or permanent basis. In addition to positive fostering recruitment, it is hoped, with the increased cost of living, the increase in fostering allowances has enabled the service to retain our valued volunteers.

1.2.2 Children in Care cases which were reviewed within required timescales

This is testimony to the hard work across Children's Services that to date only one review has gone out of timescales.

1.2.3 Participation of Children in Care in reviews

This is a cumulative measure and there will always be some young people who chose not to participate in reviews despite our best endeavours, so the fact that we have exceeded the target is a testimony to the hard work in engaging young people in their care plans.

1.2.4 16-17 year old Children in Care who are participating in Learning

Performance this quarter is significantly above target and an improvement on last year's Quarter 2 performance of 73.3%. At the end of the reporting period, there were 192 young people in care aged 16 and 17. 164 young people met the criteria for

engaging in learning and were on roll at local colleges, post 16 providers and school sixth forms. Of the remaining 28 young people, two young people were in full time employment (without training), 10 young people were accessing interim/online ESOL (English for Speakers of Other Languages) provision whilst awaiting a college place and three young people were awaiting confirmation of a college place. Personal Education Plans for the 13 young people not actively engaged in learning aim to identify any potential barriers to progressing into employment, education or training and explore opportunities and appropriate support on a termly basis. Working in partnership with the Lincolnshire Leaving Care Service, work experience placements are sought for those young people wanting to seek employment, and short training course opportunities are revisited every term.

2. Conclusion

This report summarises the Quarter 2 performance for Children in Care and Young People, and Members of the Corporate Parenting Panel are invited to review and raise any questions on its content and recommend any actions or changes to the Executive Councillor for Children's Services, Community Safety, Procurement and Migration.

3. Consultation

a) Risks and Impact Analysis

n/a

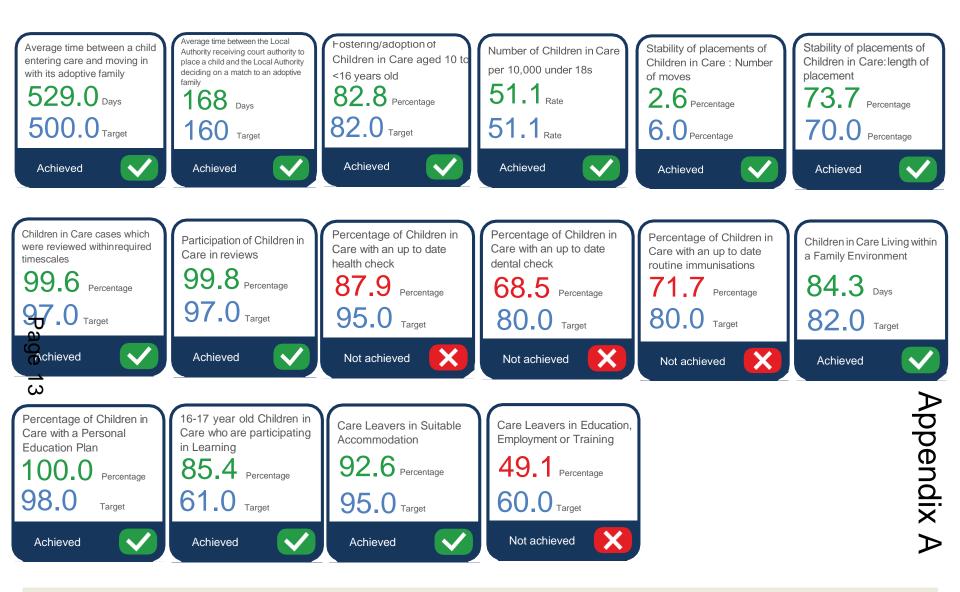
4. Appendices

These are list	ted below and attached at the back of the report
Appendix A	Children in Care Performance Measure – Quarter 2

5. Background Papers

No background papers within Section 100D of the Local Government Act 1972 were used in the preparation of this report.

This report was written by Simon Hardcastle, Performance Support Officer – Corporate Transformation, Programmes & Performance, who can be contacted by e-mail at Simon.hardcastle@lincolnshire.gov.uk.



Corporate Parenting Panel





Average time between a child entering care and moving in with its adoptive family

Average number of days between the child entering care and moving in with their adoptive family. A lower number of days taken to move a child from care into an adoptive family indicates a better performance.



About the latest performance

Performance in 2022/23 - Q1: 513 , Q2: 497, Q3: 517, Q4: 505

This measure is a 'rolling' 3 yearly average, as we have moved forward the calculation has considered more of the period covered by the pandemic, which has in turn increased the rolling average figure. There were children who experienced significant delay within the care proceedings that impacts on this figure.

It is important to note that the figure presented also includes some rare anomalies which have also adversely affected the overall timescales, such as one case which lasted for over 2000 days due to an unusual amount of disruption as well as an increase in the number of children deemed harder to place in general.

In addition to this there are also some children later adopted by their foster carers, but this measure does not properly take in to account the time they began living with those families, producing a longer timescale than there was in reality. These children have experienced a longer period of stability that does not really show within the figures.

About the target

There has been delay in court proceedings that will have impact on our average days over the next year.

About the target range

If we were to go above 550 day we would want to highlight this to Scrutiny members.

About benchmarking

No benchmarking information is available.

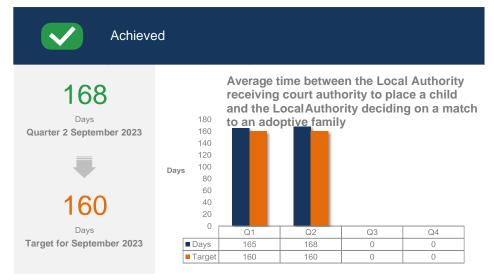


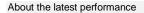


Average time between the Local Authority receiving court authority to place a child and the Local Authority deciding on a match to an adoptive family

Average number of days between the local authority receiving the court order to place a child and the local authority deciding on a match to an adoptive family.

A lower number of days taken to match a child to an adoptive family indicates a better performance.





Performance in 2022/23 - Q1: 167, Q2: 160, Q3: 161, Q4: 165

There are signs that the timescale is continuing to decline, this has, however been impacted in an increase in the number of birth parents who are appealing the decision to make a Placement order which impacts on the timescales for matching which has been seen in this quarter. This impacts on the timescales for this measure as we cannot family find whilst an appeal is ongoing.

Despite these challenges this figure is under the national average of 178 days, meaning that once we have authority to place for adoption, Lincolnshire is able to move children onto their adoptive families in a timely manner.

About the target

There are signs that this timescale is going down , and this has been helped by the family finding processes in the region as well as in house

About the target range

Both upper and lower tolerances have been set at 10 days (average

About benchmarking

No benchmarking information is available.



Children are Healthy and Safe

Fostering/adoption of Children in Care aged 10 to <16 years old

Percentage of Children in Care aged 10 to under 16 who have been fostered or placed for adoption



About the latest performance

Performance in 2022/23 - Q1: 79.4%, Q2: 80%, Q3: 80.7%, Q4: 80%

Current performance has met the targets set.

About the target

Target to remain the same as previous year at 82% performance has improved over the last year and has remained above 80%. This is indicative of a reduction in the number of foster carers, challenges in foster carer recruitment and children with complex needs.

About the target range

A 3% variance is set for the upper value and 2% for the lower value.

About benchmarking benchmarking data no longer available.

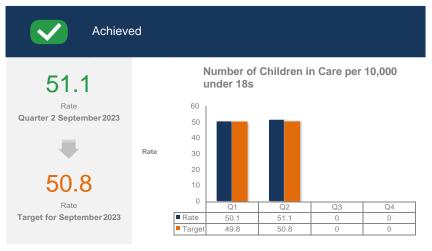


Children are Healthy and Safe

Number of Children in Care per 10,000 under 18s

Children in Care per 10,000 population aged under 18. There are a number of reasons why a child may be 'looked after' by the local authority. Most often it is because the child's parents or the people who have parental responsibilities and rights to look after the child are unable to care for the child, have been neglecting the child or the child has committed an offence. The local authority has specific responsibilities and duties towards a child who is being looked after or who has been looked after. This measure is reported taking a snapshot in time. So for example Q2 is performance as at 30th September.

A lower rate of children looked after by the Local Authority indicates a better performance.



About the latest performance

Performance in 2022/23 - Q1: 50.1, Q2: 50, Q3: 51.3, Q4: 49.1

At 51.1 per 10,000 children in care, this measure is slightly above target (50.8) but is within tolerance, so has therefore achieved this quarter. This target has been revised upward in comparison to recent years to take into account the effects of the National Transfer Scheme and the number of children in care per 10,000 remains at a relatively high level compared to recent years. The recent growth in numbers is attributable to the Council's safeguarding responsibilities and is partly attributable to the number of unaccompanied asylum-seeking children that have arrived as part of the new temporary mandated National Transfer Scheme. The expectation is that Lincolnshire will take a maximum of 144 children which equates to 0.1% of the general child population and therefore there continues to be a likely impact of growth going forward.

Despite the recent growth and the potential for future increase there continues to be an emphasis on prevention from children coming into care and exit planning from the care system where it can be achieved. However, even with the increase, the Lincolnshire number of Children in Care (CiC) per 10,000 remains significantly below the most recent published figures both nationally and by our statistical neighbours (70 per 10,000 and 65 per 10,000 respectively as of 31st March 2022).

About the target

The target remains the same as last year due to sustained consistency. The unsettling situation in the Ukraine may impact and the increasing number of children who are presenting with more complex needs.

About the target range

The target varies per quarter to take into account variances in the projected Children in Care cohort throughout the year. The tolerance allows for the number of Children in Care to vary by approximately - 35 children and +70 children either side of the target each quarter.

Anything above or below this number would be flagged, indicating a significant variance from the current position.

About benchmarking





Children are Healthy and Safe

Stability of placements of Children in Care : Number of moves

Percentage of Children in Care with three or more placements



About the latest performance

Performance in 2022/23 - Q1: 1%, Q2: 5%, Q3: 6%, Q4: 9%

This indicator identifies those children who experience 3 placement moves within the year. At this point, the performance is well within the target range of 6% however, as the measure is cumulative, we would expect this to continue to increase until the end of the financial year.

For all placements, the service continues to ensure that foster carers are well supported and that potential problems are identified early to support them in continuing to care for children whose needs are varied and complex. This has been supported using the Valuing Care toolkit and the embedded caring2learn approach which has supported and empowered foster carers to share, find and deliver solutions within a context of a tailored fostering service training and support offer. Nevertheless, the service has continued to see that some stable placements disrupt unexpectedly and this can have a significant impact upon this indicator. The service has also seen an increase in the entrants of older children (teenagers) which poses some challenge in terms of identifying longer term accommodation options whilst the younger cohort of children with care plans for long-term fostering presents challenges in achieving placement stability due to the local and national shortage of foster carers who want to care on a longer term or permanent basis. In addition to positive fostering recruitment, it is hoped with the increased cost of living the increase in fostering allowance has enabled the service to retain our valued volunteers.

About the target

Target is set at 9% current perfomance at qtr 3 is showing 7%, however we know that the data cleaning for the 903 will increase this figure to 9% which was similar to last years position.

About the target range

We have apllied a tolerance for each quarter to allow for the cumulative performance throughout the year. Our stat neighbours for last year were performing at 9% which matches our target for this year.

About benchmarking





Children are Healthy and Safe

Stability of placements of Children in Care: length of placement

Percentage of Children in Care in the same placement for at least two years



About the latest performance

Performance in 2022/23 - Q1: 67.6%, Q2: 70.3%, Q3: 69.9%, Q4: 64.2%

Current performance has met the targets set.

About the target

Target to remain the same as the previous year. Performance over this year has remained consistent at around 69%.

About the target range

Tolerances for this measure take into account the current performance.

About benchmarking





Children in Care cases which were reviewed within required timescales

Percentage of Children in Care cases that have been reviewed within timescales



About the latest performance

Performance in 2022/23 - Q1: 99.9%, Q2: 99.5%, Q3: 99.1%, Q4: 98.8%

This is testimony to the hard work across Children's Services that to date only 1 review has gone out of timescales.

About the target

Target remains at 97% to take into account current performance.

About the target range

As the target is 95%, an upper value of 4.5% has been set.

A lower value of 95% has been set to highlight any performance lower than 95%

About benchmarking





Children are Healthy and Safe

Participation of Children in Care in reviews

Percentage of Children in Care who participated in their reviews

Achieve	ed				
99.8	F	Participatio	on of Child	Iren in Car	e in reviews
Percentage Quarter 2 September 2023	120 100				
	80 Percentage 60				
97.0	40 20 0				
Percentage Target for September 2023	PercentageTarget	Q1 99.6 97	Q2 99.8 97	Q3 0 0	Q4 0 0

About the latest performance

Performance in 2022/23 - Q1: 94.8%, Q2: 94.6%, Q3: 98.6%, Q4: 98.6%

This is a cumulative measure and there will always be some young people who chose not to participate in reviews despite our best endeavours so the fact that we have exceeded the target is a testimony to the hard work in engaging young people in their care plans.

About the target

Target remains at 97% to take into account current performance.

About the target range

As the target is 95%, an upper value of 4.5% has been set.

A lower value of 95% has been set to highlight any performance lower than 95%

About benchmarking

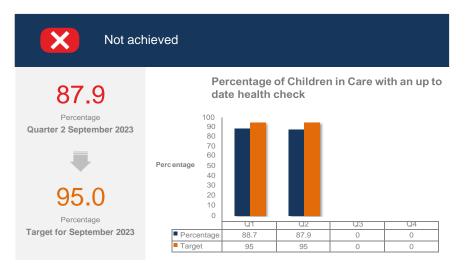




Children are Healthy and Safe

Percentage of Children in Care with an up to date health check

Percentage of Children in Care with an up to date health check record



About the latest performance

Performance in 2022/23 - Q1: 88.3%, Q2: 90.1%, Q3: 89.6%, Q4: 90.9%

The number of children in care has increased and there is evidence of more young people aged 16/17 entering care and exercising their right to refuse an assessment. These include young asylum seeking children who have come through the national transfer scheme. This age group of children are often not committed to accessing their health assessment, although they continue to access healthcare when required. The Children in Care Teams continue to encourage and promote health assessments with their young people but have to accept their right to refuse.

There has been a lot of activity to improve the timeliness of Initial Health Assessment and this measure has improved.

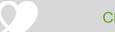
About the target Target remains as previous year, tolerance allows performance to be in line with this year's performance. About the target range

An upper tolerance of 4.5% has been set. This would mean that if all checks were done within timescale we would have achieved an excellent outcome, which would be shown as better than target.

A lower tolerance of 2% has been set to allow for under performance. Data from the last two years shows achieving 93% is very achievable and performance has not often fallen below this marker.

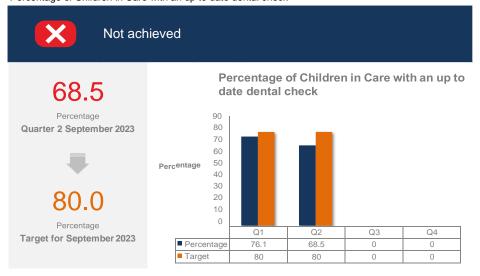
About benchmarking





Children are Healthy and Safe

Percentage of Children in Care with an up to date dental check Percentage of Children in Care with an up to date dental check



About the latest performance

Performance in 2022/23 - Q1: 71.1%, Q2: 72.5%, Q3: 72.9%, Q4: 77.5%

This measure is now sitting at 68.5% which remains below the target of 80%. This is due to the ongoing increased difficulties in children being able to access appointments with a National Health Service Dentist which has been the case for several years now. Availability continues to be impacted by the coronavirus pandemic, with Dental Practices closing and many restricting their practice to private patients only. In recent months we have worked jointly with health and social care and colleagues in the dental services. For children who are not registered with a dentist at their health assessment appointments, carers are encouraged to register a child with a dentist as soon as possible.

About the target

Target remains as last year due to sustained consistency.

About the target range

An upper tolerance of 5% has been set. This would mean that if all checks were done within timescale we would have achieved an excellent outcome, which would be shown as better than target.

A lower tolerance of 5% has been set to allow for under performance.

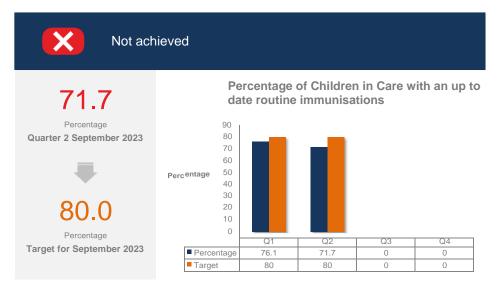
About benchmarking





Percentage of Children in Care with an up to date routine immunisations

Percentage of Children in Care with an up to date routine immunisations recorded



About the latest performance

Performance in 2022/23 - Q1: 70.5%, Q2: 69%, Q3: 70.6%, Q4: 75.5%

The percentage of Children in Care with up to date routine immunisations continues to be impacted by factors such as the Covid Pandemic and an increase in Immunisation team workload due to all males now being offered the HPV and all of the school population being offered the COVID19 boosters and flu immunisations. The percentage of children who are up to date with their immunisations is at a higher rate of coverage compared with those of their peers in the general population. All outstanding immunisations are checked quarterly by the CiC/YP health team. Health and Social care colleagues are working together to improve the timely recording of immunisations.

About the target

Target remains as last year due to sustained consistency.

About the target range

An upper tolerance of 5% has been set. This would mean that if all checks were done within timescale we would have achieved an excellent outcome, which would be shown as better than target.

A lower tolerance of 5% has been set to allow for under performance.

About benchmarking



Children are Healthy and Safe

Children in Care Living within a Family Environment

Percentage of Children in Care Living within a Family Environment



About the latest performance

Performance in 2022/23 - Including Unaccompanied Asylum Seeking Children (UASC) Q1: 80.4%, Q2: 79.2%, Q3: 79.0%, Q4: 77.3%

Performance in 2022/23 - Excluding UASC Q1: 84.2%, Q2 83.7%, Q3: 84.0%, Q4: 83.0% Performance in 2023/24 - Including UASC Q1: 76.3%, Q2: 77.7%

Performance in 2023/24 - Excluding UASC Q1: 81.8%, Q2: 84.3%

Unaccompanied asylum seeking children (UASC) have a large impact on the total percentage of children in care living within a family environment as the majority of them are over 16 and are more suited to semi-independent living arrangements. The number of UASC has been rising steadily, making up around 9% of the total child in care population in Lincolnshire at the start of the 2023/24 business year. To illustrate the underlying level of children living within a family environment without the distortion of UASC, we are now providing figures both including and excluding UASC in the Corporate Plan, but this commentary will focus on excluding UASC, with an updated target of 82%.

At 84.3% in quarter 2, this measure is performing above the target, but within target tolerance of 80-85%. It has increased markedly since Q1, which had a figure of 81.8% (excluding UASC). Family placements are a continued focus for the Council as for many children in care, a family placement is deemed the most suitable means of offering care and maintaining children within their family networks. The Council continue to explore enabling children and young people to remain within their family or extended network if they cannot, for whatever reason, live with their parents.

About the target

Target increased to 82% to take account of move to showing figures with unaccompanied asylum seeking children removed.

About the target range

We aim to have the majority of our children in care placed within a family environment where appropriate. Anything above 84% is worthy of celebration and anything below 79% needs to be addressed with actions.

About benchmarking

Benchmarking data is not available due to the measure being a local measure





Learn and Achieve

Percentage of Children in Care with a Personal Education Plan

Percentage of Children in Care with a Personal Education Plan



About the latest performance

Performance in 2022/23 - Q1: N/A, Q2: 100%, Q3: 99%, Q4: 99.5%

Current performance has met the targets set.

About the target

Target remains at 98%, reliability of the EPEP system and timely notification of Virtual school should see the performance being reached.

About the target range

Lower tolerance is set to 2% below the target which would represent poor performance. The tolerance range reflects the need for emergency placements out of county/in county for a small proportion of children in care.

About benchmarking



Readiness for Adult Life

Readiness for Adult Life

16-17 year old Children in Care who are participating in Learning

This measures young people recorded as being Children in Care participating in learning at the end of the reporting period and will not take into consideration the length of time that they have been in local authority care.

Numerator: Number of Children in Care participating in learning at the end of the reporting period. Denominator: Number of Children in Care at the end of the reporting period.

The percentage is calculated as follows: Numerator divided by the denominator multiplied by 100. The parameters of this measure were previously defined as recording 16-18 year old Children in Care participating in learning. As of Q1 2017/18 onwards, the Department for Education no longer require monitoring of children aged 18, and so the measure has been amended accordingly, restricting data provision to 16-17 year old Children in Care only. A higher percentage of Children in Care participating in learning indicates a better performance.



About the latest performance

Performance in 2022/23 - Q1: 81.4%, Q2:73.3% , Q3: 75%, Q4: 83.2%

Performance this quarter is significantly above target and an improvement on last year's Q2 performance of 73.3%. At the end of the reporting period, there were 192 young people in care aged 16 and 17. 164 young people met the criteria for engaging in learning and were on roll at local colleges, post 16 providers and school sixth forms. Of the remaining 28 young people, 2 young people were in full time employment (without training), 10 young people were accessing interim/online ESOL provision whilst awaiting a college place and 3 young people were awaiting confirmation of a college place. Personal Education Plans for the 13 young people not actively engaged in learning aim to identify any potential barriers to progressing into employment, education or training and explore opportunities and appropriate support on a termly basis. Working in partnership with the Lincolnshire Leaving Care service, work experience placements are sought for those young people wanting to seek employment and short training course opportunities are revisited every term.

About the target

Target remains the same as the previous year. Q2 & Q3 targets lower to allow for the expected dip at this time of year due to September being the start of the tracking process

About the target range

The target range is set at a level to allow for 2 percentage points above the target and 5 percentage points below the target.

About benchmarking

Benchmarking information is not available for this cohort





Readiness for Adult Life

Readiness for Adult Life

Care Leavers in Suitable Accommodation

A care leaver is a young person who reaches the age of 18 who had been in local authority care. Numerator: Number of care leavers turning 19 years of age in the year who are living in accommodation deemed as "suitable".

Denominator: Number of care leavers turning 19 years of age in the year.

The percentage is calculated as follows: Numerator divided by the denominator multiplied by 100. A higher percentage of care leavers in suitable accommodation indicates a better performance.



About the latest performance

Performance in 2022/23 - Q1: 92.4%, Q2: 93.5%, Q3: 92%, Q4: 91.7%

The definition of the suitability of accommodation is very strict, and whilst the definition would deem some of the accommodation options unsuitable, the young person might be making an informed choice (as an adult) about where they live and how they live. For example, the monthly tracker continues to identify a small number of young people who are choosing to live with friends and sleep on their sofa. This is deemed unsuitable, but the decision to live on a friend's sofa is the informed choice of the young person. We also know of one young person who still chooses to live in a caravan on their ex foster carers driveway in a car. Both these young people have had multiple offers of supported living but choose to live where they are. This is still deemed as unsuitable by the criteria. There is also a small number of young people in temporary accommodation, provided by the District Council, whilst the housing authority is addressing homelessness and finding a long-term solution with the leaving care service.

In addition to the above, custody is also always deemed unsuitable. There has however been a small increase in the numbers of young people in custody. Ironically, being in custody qualifies as being in education training and employment but is deemed as unsuitable accommodation.

The Head of Service continues to monitor unsuitable accommodation on a case by case basis every month.

About the target

Target has remained the same. Performance in the low nineties and if we achieve this or higher this reflects good performance overall.

About the target range

The lower target has been set at the 25% quartile. Meaning if we fall below this we will not be in the top 25% of authorities. The upper target has been set 5% above this.

About benchmarking

Benchmarking information is available.





Readiness for Adult Life

Readiness for Adult Life

Care Leavers in Education, Employment or Training

The number of care leavers turning 19 years of age in the year who are in either Education, Employment or Training



About the latest performance

Performance in 2022/23 - Q1: 54.3%, Q2: 50.7%, Q3: 47.3%, Q4: 47.1%

This measure remains below target and fluctuates throughout the year by a few percentage points either way. The Leaving Care Service continues to monitor every single young person who is not in EET. The Service continues to report monthly on the efforts of the service to re-engage individuals back into EET. LCC tracks this performance regularly and monitors those young people who fall into NEET and those that re secure EET.

Our EET statistics are slightly below our stat neighbours who run at 55%. However, our in touch with service statistic for care lavers is way above national average at 98% in comparison to 93% for our stat neighbours.

About the target

Target to remain the same as this is based on both recent performance and in comparison with other local authorities nationally.

About the target range

Tolerances for this measure take into account the current performance

About benchmarking

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Agenda Item 6



Open Report on behalf of Heather Sandy, Executive Director – Children's Services

Report to:	Corporate Parenting Panel
Date:	18 January 2024
Subject:	Children in Care Joint Annual Health Report 2022/23

Summary:

This report covers the period 1 April 2022 to 31 March 2023. The Department of Health Statutory Guidance on Promoting the Health and Well-being of Looked after Children (DCSF/DH. 2015) requires a report on the delivery of service and the progress achieved for the health and wellbeing of Children in Care (CIC). In addition, the Local Authority (LA) requires an annual report to provide a summary of the core activities relating to Children in Care.

Actions Required:

Members of the Corporate Parenting Panel are invited to review and endorse the Children in Care Joint Annual Health Report 2022/23 attached at Appendix A.

1. Background

This annual report covers the period 1 April 2022 to 31 March 2023 and contains information relevant to the delivery of service and the progress achieved for the health and wellbeing of children in care (CiC) and provides a summary of the core activities relating to CiC.

Recommendations for 2023-2024:

- 1. LLA, Integrated Care Board (ICB) and Lincolnshire Community Health Services NHS Trust (LCHS) to continue to work together to improve the number of Initial Health Assessments (IHA) completed within the statutory timeframe.
- 2. LCHS to continue to maintain the current GP workforce to complete IHA's.
- 3. The annual report to be shared with the Independent Reviewing Officer (IRO) service to promote improvement in constructive challenge.
- 4. A review of the management of and support provided to children with above average SDQ (Strengths and Difficulties Questionnaire) scores to be completed.

- 5. Continued utilisation of the valuing care toolkit and expansion of our residential estates as part of our transformation programme in response to the shortage of local placements for Children in Care.
- 6. Work with the Oral Health Alliance Group to continue to support access to Dentistry for Children in Care.
- 7. Work on ensuring transition into Adulthood and Transitional safeguarding for Children in Care and Care Leavers is improved.

3. Conclusion

Members of the Corporate Parenting Panel are invited to review and endorse the Children in Care Joint Annual Health Report for 2022/23 attached at Appendix A.

4. Appendices

These are liste	d below and attached at the back of the report.
Appendix A	Children in Care Joint Annual Health Report 2022/23

5. Background Papers

No background papers within Section 100D of the Local Government Act 1972 were used in the preparation of this report.

This report was written by:

- Rachel Freeman, Head of Service Children in Care and Residential Estates, who can be contacted at rachel.freeman@lincolnshire.gov.uk
- Rebecca Pinder, Head of Safeguarding Children, NHS Lincolnshire ICB, who can be contacted at rebecca.pinder1@nhs.net

Appendix A

CHILDREN IN CARE ANNUAL REPORT 2022/2023











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EXECUTIVE SUMMARY

This report covers the period 1st April 2022 to 31st March 2023. The Department of Health Statutory Guidance on Promoting the Health and Well-being of Looked after Children (DCSF/DH. 2015) requires a report on the delivery of service and the progress achieved for the health and wellbeing of Children in Care (CIC). In addition, the Local Authority (LA) requires an annual report to provide a summary of the core activities relating to Children in Care.

The NHS has a major role to play in supporting the LA as Corporate Parent in ensuring the timely and effective delivery of health services to Children in Care. As directed by the Children Act 1989, Integrated Care Board and NHS England have a duty to comply with the requests from the LA to help them to provide support and services to these children. The NHS is also statutorily obligated to support Children in Care who have been placed by an external LA within the County of Lincolnshire when they have been notified of the placement.

This Annual Report is intended to inform Children in Care, the public, elected members, stakeholder partners and staff of the progress and developments of the services to date.

The key messages within this report are:

- The number of children in the care of Lincolnshire County Council was 728 at year end an increase from 680 the previous year. Some of this increase can be attributed to the introduction of the National Transfer Scheme in November 2021 which has triggered a rise in Unaccompanied Asylum Seeking Children receiving our support. The number of children and young people placed into Lincolnshire by external authorities also continues to rise.
- The 16/17-year-old age group now makes up 25% of our Children in Care population.
- The placement of children within kinship placements remains the preferred outcome for most children who enter care.
- Initial Health Assessments completed in timescales continues to improve.
- The rate of completion of review health assessments remains amongst the highest in the country, regarding completion within the statutory time frame. Nurse led provision has provided continuity and supported more children to engage in the process.
- Up-to-date immunisation and vaccination of the Children in Care was impacted by the COVID19 pandemic and there remains a small number of children still requiring their immunisations
- The health data used in this report is only a small proportion of the amount of reporting against health issues which has continued to be developed over the last year.

Introduction

Our vision

"Putting Children First"

It is the ambition of Lincolnshire County Council for our children and young people in or leaving care to be safe, happy, and healthy, to enjoy life and realise their potential.

Supported by a workforce which

- Uses evidence informed practice
- Understands and applies Relationship Based Practice
- Is Restorative in approach
- Is well trained and supported

Enabled and equipped by

- Clear governance that puts children and families at the heart of how we plan and deliver support for them
- Using a system called Signs of Safety that builds on family's strengths

Our purpose within Regulated Services is to ensure that every child in every part of the county achieves their potential, responding appropriately to the assessed needs of all Children in Care to ensure that their life chances are maximized by their experience of the service.

This Annual Report details the services and expected health outcomes for Children in Care who reside either in Lincolnshire or in out-of-county placements and is aligned to the Children and Young People's Commissioning Plan.

This report relates to children and young people who, within the reporting period of April 2022 – March 2023 are:

- 1. Corporately parented by Lincolnshire County Council / Local Authority, with strategic oversight through the Corporate Parenting Panel.
- Or
- 2. Are placed by an external LA who maintains corporate parent status, and local strategic oversight and quality assurance is maintained via the Lincolnshire Safeguarding Children Partnership (LSCP) and is incorporated in the LSCP business plan.

The evidence tells us that Children in Care are disadvantaged when compared to their peers in the general population, in all the wider determinants of health. Accordingly, they

require proactive commitment from the professionals working with them.

The level of commitment is made explicit within Lincolnshire's 'Children's Promise', which was co-produced with a group of young people in care in 2019 and was launched in 2021.

Central to this commitment is the aspiration for health needs to be accurately identified with care and support provided that maximizes the health and well-being of Children in Care. The services around the child must ensure that this care complies with all relevant legislation and the statutory guidance surrounding these children.

This report incorporates specific health data which offers a full year profile of the health of all Lincolnshire's Children in Care. It identifies issues that impact upon the health and well-being of all Children in Care and will support future service commissioning and delivery. Such data is crucial to the Joint Strategic Needs Assessment (JSNA) which is now amended on a quarterly basis to incorporate emerging policy developments.

The population incorporates corporately parented children by Lincolnshire County Council (LCC) and those placed in Lincolnshire by external authorities. The status of the children is identified within the population data included in this report.

2. Background and Context

2.1. Definition of "Children in Care"

Most children enter care as a result of abuse or neglect.

'In care' refers to children and young people under 18 years of age, who have been provided with care and accommodation by Children's Services, as defined in law under the Children Act 1989 (CA 1989).

Children in Care fall into five main groups:

- Children who are accommodated under voluntary agreement with their parents Section 20 (S20)
- Children who are subject to a care order Section 31 (S31) or interim care orders Section 38 (S38)
- Children who are the subject of emergency orders for their protection Section 44(S44) and Section 46 (S46)

And;

• Children who are compulsorily accommodated, including children remanded to the local authority or subject to a criminal justice supervision order with a residence

requirement Section 21 (S21).

16/17-year-olds who are homeless and require accommodation under section 20 (S20)

A child entering care will be disrupted from his/her familiar relationships and home environment. The Local Authority Children's Services strive to do all that is possible to minimize disruption to the child's education. Lincolnshire County Council is committed to ensuring continuity of educational placements unless a care plan determines that a change in school would be beneficial, such as when a child moves to a permanent placement.

Children in Care share the same health and social issues, risks, and problems, experienced by their peers, but often to a greater degree. They will often enter care in a poorer state of health, due to the impact of:

- Abuse and neglect
- Poverty
- Poor parenting
- Chaotic lifestyles
- Alcohol and substance misuse

Their experience can be further compounded by being over-exposed to significant challenges, such as:

- Conflict within their own families
- Frequent changes of home or school
- Lack of access to support and consistent advice from trusted adults

National statistics demonstrate that the longer-term outcomes for Children in Care remain worse than their peers in general. As adults, they are more likely to experience:

- Psychological problems / mental illness,
- Homelessness,
- Imprisonment,
- Unemployment,
- Poorer health outcomes and life limiting conditions and/or
- Poor educational attainment levels.

The NHS and LA officers responsible for Children in Care services are required to:

• Recognise and give due regard to the greater physical, mental and emotional health needs of Children in Care in their planning and practice.

- Give equal importance (parity of esteem) to the mental health of Children in Care and follow the principles in the national document, 'Mental Health Crisis Care Concordat, *Improving Outcomes for People Experiencing Mental Health Crisis*' and the work commissioned by the Social Care Institute for Excellence (SCIE) "Improving mental health support for our children and young people".
- Agree multi-agency action to meet the health needs in their area.
- Ensure that sufficient resources are allocated to meet the identified health needs of the Children in Care population, including those placed in the area by other local authorities, based on the range of data available about their health characteristics.
- Consider the views of children, their parents, and carers, in order to inform, influence and shape service provision, including through Children in Care Councils and local Healthwatch; and voices for choices.
- Arrange the provision of accessible and comprehensive information to Children in Care and their carers.

Reducing the acknowledged disadvantage for these children is the responsibility of a designated team of elected members, and health and social care practitioners, including the following:

2.2. Corporate Parent

The 'Corporate Parent' is the collective responsibility of the council, elected members, employees, and partner agencies, to provide the best possible care and safeguarding for each child in care. Every member and employee of the council and partner agencies has a statutory responsibility to act for the child in the same way that a good parent would act for their own child. This includes the children that LCC place outside of the county. Additionally, LCC ensures that all elected members undertake training in their role as a Corporate Parent.

The placing authority maintains the Corporate Parenting responsibility for their children residing in Lincolnshire. However, they may be placed a long distance away from the child and their communities. Each child has an allocated social worker responsible for the management of their care plan. Services and aspirations for Children in Care are enshrined in Lincolnshire's 'Children in Care and Care Leavers Strategy'.

2.3. Designated and Named Health Professionals

In accordance with the Statutory Guidance, '*Promoting the Health and Well-being of Looked after Children*', designated and named health professionals are appointed in Lincolnshire. It is the responsibility of the designated doctor and nurses to ensure that every child has timely access to their statutory health assessments, and that a care plan is formulated to address all identified health needs.

The health team provides statutory health services for the Children in Care population, irrespective of the LA corporate parent status. The role of the designated doctor for Children in Care is to provide strategic leadership and quality assurance of the statutory initial health assessments.

The health service responsible for the completion of health assessments for Children in Care is provided within Lincolnshire Community Health Services (LCHS), who work closely with the children's social care teams, including the independent reviewing officers.

2.4. Independent Reviewing Officers

Independent Reviewing Officers (IROs) are employed locally, in addition to the child's social workers to provide services to Children in Care. IRO's undertake statutory reviews as per the statutory guidance for all Children in Care to ensure that their needs are being met on a multi-agency basis.

For children who are "in the care" of other Local Authorities but who reside in Lincolnshire, it is the responsibility of the placing authority to ensure that an IRO is accessible to ensure that these children, who are placed far from their support mechanisms, have access to local services according to their needs.

The Children's Commissioner in Lincolnshire is a joint post between Health and the Local Authority and is situated within Children's Services Directorate Leadership team.

3. Profile of Children in Care

3.1. Numbers of Children in Care

The number of children in the care of Lincolnshire County Council was 728 at year end, an increase from 680 the previous year. This rise can partly be attributed to the introduction of the National Transfer Scheme in November 2021 which has triggered a rise in Unaccompanied Asylum Seeking Children receiving our support. The number of children and young people placed into Lincolnshire by external authorities also continues to rise.

Over the same period the number of children/young people who entered care reduced slightly to 303. Within this figure, the greatest numbers are in the age bands 0 - 4 and 16 +. Over recent years there has been a marked increase in 16 / 17-year-olds in care and they now comprise 25% of all Children in Care. We have continued to see an increase in children aged between 8 and 12 who have care plans for permanent fostering, and therefore demand for long term foster carers has increased. In 2022-2023 there has been continued emphasis on achieving permanent outcomes for all Children in Care.

3.2. Placement Profile

Stability of placement for children is key to improving health outcomes through providing as normal a family arrangement as possible. At year end the composition of the Children in Care cohort was:

- 1. 54.5% accommodated with foster carers /parents.
- 2. 17.5% placed in kinship arrangements.
- 3. 5.7% subject to care orders and are placed at home with parents.
- 4. 11.6% in residential homes; and
- 5. 2.4% in other accommodation, including residential schools, custody etc.
- 6. 8.2% in Independent accommodation

There is a continuing trend in the greater use of residential care for children and a growing number of young people aged 16+ placed in independent accommodation.

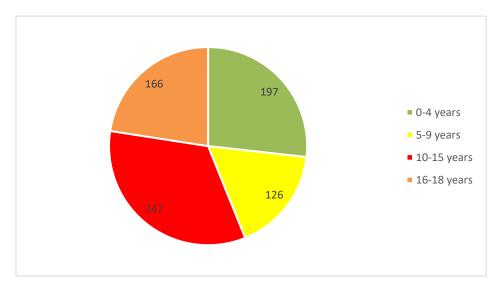
Lincolnshire transformation program remains ongoing and includes the rollout of the Valuing Care toolkit and expansion of our residential estate. This will enable us to place more children requiring residential care within Lincolnshire, maintaining family links and identity, and enabling them to continue to access local services.

Lincolnshire remains at the forefront of using kinship placements, and, at year end, 17.5% of all Children in Care were in such placements.

The reporting period has witnessed a continued increase in the number of children with especially complex needs who are corporately parented in Lincolnshire. In 2022-2023 this has resulted in an increase in the number of children who find living in foster families difficult and as a result the average age profile of children placed in in-house residential care has reduced. This has in turn, resulted in a further increase in the number placed in external residential placements. In addition, this year there have been several large sibling groups who have been subject to care proceedings. The lack of suitable in-house foster placements to maintain them together has resulted in them being placed in independent fostering placements. At year end there were:

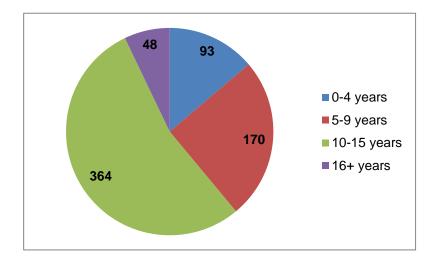
- 27 children (5 of whom were unaccompanied asylum-seeking young people) were placed in externally commissioned foster placements, and
- 54 children were placed in external residential homes, which is the same as the previous year-end figure.

Despite this increase in the use of independent sector placements the ratio of in house to external placements remains significantly lower when compared to other local authorities. Lincolnshire continues to have one of the lowest per head costs for a looked after child, being £787.00 in contrast to the average of £989.00 (CIPFA 2020).



Lincolnshire LA Children in Care 2022/ 2023

Children placed into Lincolnshire by external Local Authorities 2022-2023



Lincolnshire has consistently had a significant number of Children in Care placed within the County by external LA's. At year end they numbered 687 which is an increase of 7 from the previous year.

The high numbers of Children in Care placed by other Local Authorities within Lincolnshire are predominantly residing within residential care homes and with foster carers who work for Independent Fostering Agencies. The placements are often intended to remove children away from on-going, high risk environments within the LA area responsible for their care. As a result of this some can present with challenging behaviours such as going missing, self-harm, substance misuse and the risk of Child Exploitation (CE). It needs to be recognised that often the risks may continue despite the move out of their LA area as there is often potential for abusers to follow the young person to their new address. The vulnerabilities and needs of these young people also impact on the workload of Lincolnshire Integrated Sexual Health Services, Child and Adolescent Mental Health Service (CAMHS), Education and The Police.

Summary:

- The largest numbers of children entering care are aged less than one year.
- The greatest number of Children in Care overall are in the 10-15 years age group (35.3% of the total as at the 2022/23 year end).
- 54% of the children admitted into care during 2022/23 were aged 4 or under.
- 24% of all children admitted to care were aged 16+.

Most children will be subject to care proceedings and will have care plans for permanence.

3.3. Ethnicity

The vast majority (77%) of children corporately parented by Lincolnshire County Council are of White-British origin, but the demographics are gradually changing, with 23% of Children in Care of a non-white British ethnic background. This reflects an increase in the number of unaccompanied asylum-seeking children/young people who become looked after upon arrival in the county.

The table below shows the ethnic background of children who are corporately parented by Lincolnshire County Council during the period April 2022to March 2023

Ethnic Origin LCC	Total
White-British	611
Mixed Race	34
Asian / Asian British	4
Black-African	2
Any Other Ethnic Group	29
Total	680

Ethnicity of Children in Care Cohort 2022/23 (derived from MOSAIC)

Ethnicity_STAT008	Ct of Child	% of Total
White British	798	76.9%
Any other ethnic group	88	8.5%
Any other White background	71	6.8%
Any other Mixed background	23	2.2%
Information not yet obtained	16	1.5%
African	11	1.1%
White and Black African	9	0.9%
White and Black Caribbean	8	0.8%
Any other Asian background	6	0.6%
Gypsy/Roma	5	0.5%
White and Asian	3	0.3%
Grand Total	1,038	100.0%

Nationality_STAT008b	Ct of	% of
	Child	Total
British	619	85.0%
United Kingdom	4	0.5%
Afghan	20	2.7%
Albanian	3	0.4%
Bulgarian	1	0.1%
Caribbean	1	0.1%
Chad	1	0.1%
Egyptian	3	0.4%
Eritrean	3	0.4%
Ethiopian	1	0.1%
Iranian	6	0.8%
Iraqi	5	0.7%
Kurdish	1	0.1%
Latvian	9	1.2%
Lithuanian	9	1.2%
Polish	4	0.5%
Portuguese	1	0.1%
Romanian	1	0.1%
Russian	2	0.3%

Slovakian	2	0.3%
South African	1	0.1%
Sudanese	15	2.1%
Syrian	1	0.1%
Turkish	2	0.3%
Unknown	10	1.4%
Vietnamese	3	0.4%
Grand Total	728	100.0%

4.0 Care Proceedings Initiated

Cases Issued in 2022-2023

Number of s31's	Number of Children
132	234

Cases Concluded in 2022-2023 – outcomes (some of these relate to proceedings issued pre April 2022):

Type of Order	2022-2023
Care Order	130
Placement Order	36
Supervision Order	69
No Order	11
Child Arrangements Order	31
Special Guardianship Order	88
Family Assistance Order	1

Of the cases concluded in 2022-2023, timescales as follows:

Cases Concluded in ** weeks:		
Up to or below 26 weeks	40	
Between 27-40 weeks	41	
Between 41-80 weeks	75	
Over 81 weeks	14	

Number of proceedings concluded in 2022-2023:

171 (these relate to 296 x children) (Some of these relate to cases issued pre-April 2022)

Number of proceedings Issued/on-going from 2022-2023 year:

36 (these relate to 70 x children)

Case impact:

Within the 2022-2023 timeframe, the Court was continuing to conclude the back log of cases which were impacted/delayed due to covid. This, along with Lincolnshire being without a Designated Family Judge from the end of December 2022 – the end of the 2022-2023 financial year, also impacted cases being able to conclude due to lack of judicial availability. It is very clear that the impact of the pandemic continued into this financial year and was then compounded by a lack of judicial availability.

From the cases within this period, there has continued to be repeat families due to new babies being born to parents who have previously had their children removed from their care. Large sibling groups appear to have reduced, with the average number of children per proceedings being 2 siblings or less. Whilst the large sibling groups are still known, these are less frequent than previous years.

Hearings within Lincolnshire are now all taking place in person with a few exceptions. The Pre-Proceedings Process in Lincolnshire continues to be robust with a high rate of diversion from pre-proceedings preventing the need for proceedings.

5. Health of Children in Care

5.1. National Context

Most children/young people enter care because of abuse and neglect - past experiences such as this increases vulnerability to disadvantage, including mental health issues, lower educational achievement, and social exclusion. The childhood trauma of Children in Care is also associated with poorer health outcomes which have life-long consequences.

Nationally, key issues for consideration for the health of Children in Care include:

- Poorer health outcomes when compared to peers,
- Difficulty in accessing universal and specialist services,
- Failure of annual health assessments to meet their health needs,
- High prevalence of mental health problems,
- Poorer educational achievement,
- Increased likelihood of teenage pregnancy
- Increased risk of offending behaviour and substance misuse.

In view of such increased disadvantage, measurement of the child's health on first coming into care is crucial – Initial Health Assessments are a key element to achieving this.

5.2. Children Reported Missing and Child Exploitation

Children and young people in care are particularly vulnerable to safeguarding risks— they are more likely to go missing and are at an increased risk of being trafficked, exploited or of experiencing domestic abuse. A number of children are also placed in Lincolnshire from other areas within privately owned residential care homes, although these placements enable movement away from the high-risk environment, there is also a potential risk for continued exploitation as perpetrators may follow the young person to their new home.

Practitioners are actively engaging with children and young people and developing key relationships that enable identification, and appropriate response, to such risks, including Child Sexual Exploitation (CSE) and Child Criminal Exploitation (CCE). In Lincolnshire, there is a dedicated Missing/CE Co-Ordinator resource within the Future4me team that co-ordinates a response towards missing children in conjunction with Lincolnshire Police and reports on the missing episodes of children in the County. There is also weekly oversight of any outstanding missing return interviews shared amongst senior managers to provide assurance around this key area. Through the LSCP, Lincolnshire has an operational multi-agency child exploitation forum who meet on a weekly basis to consider those children deemed at risk of exploitation and to provide support, interventions, disruption, and enforcement. These meetings are a dedicated forum for discussing, mapping, and analysing concerns and for identifying solutions for all children/young people who are thought to be at risk of CE, including those in care.

Lincolnshire Children in Care Missing Incidents	168
No of Children in Care Reported Missing	63
Lincolnshire children Placed in Other Authority Missing Incidents	106
No of Children in Care Reported Missing	34
Return interviews offered	100%
Return interviews completed	97.8%

2022-2023 Missing Incidents

This data shows that there were 274 incidents of children being missing reported to Police for Lincolnshire Children in Care between April 2022 and March 2023. These incidents involved 97 individual children, demonstrating that some children have experienced a number of missing episodes. A return interview has been offered in 100% of incidents when a young

person has gone missing. In Lincolnshire, if a young person is missing again before the return interview can be completed, this request is 'withdrawn' and a new return interview requested when the young person is found, ensuring the return interview captures both missing incidents. 97.8% of return interviews were completed for Children in Care, some of which will have encompassed more than one missing episode.

5.3 Care Leavers

- Barnardo's is commissioned by the LA to deliver the leaving care service in Lincolnshire. The contract was renewed in 2020 and will enable more timely transitional planning for those aged 16 +.
- Arrangements for Review Health Assessments for 16–18-year-olds, as part of transition, are undertaken by the Community Nurses within the Children in Care/Young People team.
- There is a process in place for the compilation of a health history summary for Lincolnshire children which is completed, discussed with and given to the young person when they leave care.
- The number of completed Children in Care health history summaries is reported quarterly.

5.4 Meeting the Health Needs.

Performance indicators for the Children in Care service are:

Health Assessments:

- i) The number of Initial Health Assessments (IHA) completed within 20 working days of the child/young person coming into care.
- ii) The number of Review Health Assessments (RHAs) completed every 6 months for children below 5 years of age.
- iii) The number of Review Health Assessments completed on an annual basis for all children/young people 5 year's up to 18 years of age
- 1. Registration with a GP
- 2. Registration with a dentist
- 3. Immunisations up to date in line with local and national programmes; and
- 4. Emotional wellbeing: Completion of the Strengths and Difficulties Questionnaire (SDQ) for 4 to 17-year-olds.

5.4.1 Health Assessments

Statutory Initial Health Assessments are completed on all children in the care of the LA followed by six-monthly or annual reviews, depending upon the age of the child. The CIC

health assessment questionnaire includes the following categories:

- Children in Care health assessment
- Access to services
- Growth
- Development and disability
- Medical conditions/hospital admissions/emotional and behavioural issues
- Lifestyle indicators
- Education and development
- Onward referrals identified in health plan

Health Assessments

299 IHA's were completed – An increase of 71 compared to 2021-2022

This comprised of 228 *who were in the care of Lincolnshire County Council and 71 from other Local Auth*orities.

A further 63 Lincolnshire Children in Care had their IHA completed out of county. The significant increase in numbers is due to young people placed into the care of Lincolnshire County Council by the National Transfer Scheme for Unaccompanied Asylum Seeking Children, (UASC)

998 Review Health Assessments were completed – An increase of 67 compared to 2021-2022

Of these, 558 were children in the care of Lincolnshire and 440 were from other Local Authorities (an increase of 31 for Lincolnshire children and an increase of 36 for external authorities).

A further 91 Review Health Assessments were completed for Children in the Care of Lincolnshire placed out of county. An increase on 75 in 2021-2022-again mainly due to the number of UASC placed out of county.

Health Assessments Total = 1451 – an increase of 119 compared to 2021-2022

5.4.1.1 Initial Health Assessments (IHA)

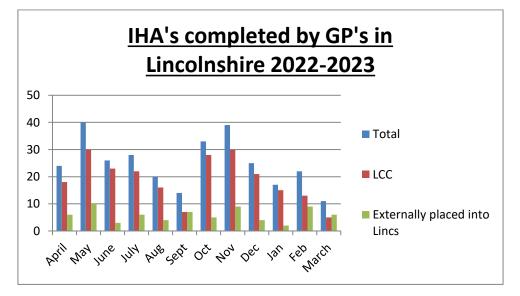
Each child entering care has a statutory IHA and health care plan completed. The IHA is undertaken by a registered medical practitioner and should take place within 20 working days (4 weeks) of a child entering the care system. A health plan is formulated from this which is copied to the child's social worker who ensures that the plan is implemented, and then reviewed at least every six months in a meeting chaired by the independent reviewing officer (IRO).

Despite this being a statutory requirement, it is not being achieved in Lincolnshire or

nationally. The availability of medical practitioners and challenges in obtaining the relevant paperwork including signed consent from parents has significantly impacted on this target. Close liaison between the Specialist Nurse CiC and the Family Assessment and Support Team (FAST) managers over the past year has resulted in an improvement in the numbers being completed within timescale.

From April 2021 LCHS has employed a General Practitioner who provided 8 appointments a month and a further General Practitioner was employed in November 2021 providing a total of 16 appointments per month. In November 2021 a Community Paediatrician from ULHT also joined the team offering between 12 and 36 appointments per month. This has enabled the backlog of appointments to be addressed and the number of assessments completed in timescale to improve. During the reporting year April 2022-March 2023 the percentage of Initial Health Assessment completed with the 20 working day target increased from 20% (April 2022) to 81% March 2023. Several factors are an ongoing challenge to meeting the target-these include placement changes, large sibling groups, children remaining in hospital and conflicting responsibilities for foster carers

Graph 2 shows the activity of initial health assessments that has been completed during 2022-2023 by the contracted GP's.



Graph 2

The total number of IHAs undertaken in Lincolnshire during 2022-2023 was 299. This was an increase on the figure for 2021-2022.

During this period 63 children in the care of Lincolnshire County Council were placed outside of Lincolnshire and their IHA was completed by the 'host' trust.

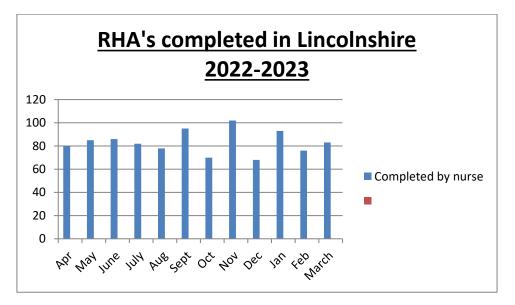
5.4.1.2 Review Health Assessments

Review health assessments may be carried out by an appropriately qualified Registered

Nurse/Midwife.

The timeframe for review health assessments is twice yearly for children under 5 years of age, and annually for children over 5 years, up until a child is 18 years of age.

Graph 3 shows the number of review health assessments completed in Lincolnshire during2022-2023. The total number completed by the Community Nurses was 558 for Lincolnshire children and 440 for children placed by other Authorities. This is an increase of 67 RHAs completed by the nurses from the year2021-2022.



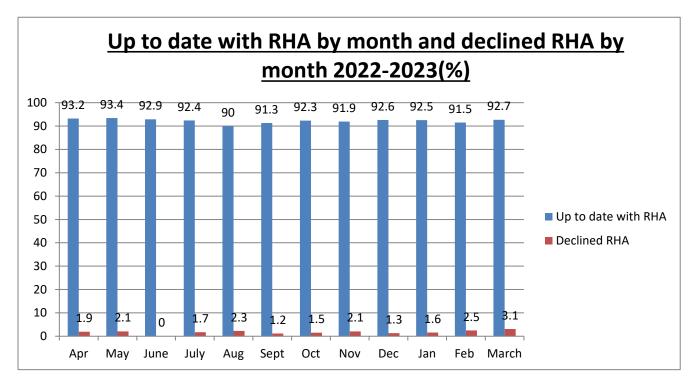
Graph 3

For Lincolnshire LA the percentage of completed RHAs for Lincolnshire children was 92.9% at year-end March 2023. The increase in workload has impacted on the ability of the team to complete RHA's within timescale. COVID continues to result in cancelled appointments.(see graph 4).

This is a continued high achievement and demonstrates the robustness of the health assessment process and the commitment and partnership working between health and social care practitioners.

Graph 4 shows the percentage of children with an up-to-date review health assessment and identifies the number who declined a Health Assessment from 01.04.2022-31.03.2023. There is an increase in RHA declined by young people on the previous year.

Graph 4



Young people who decline their RHA are predominantly within the 15 – 18-year age group. They are all offered alternative access by LCHS Looked After Children's team which has proved to be very successful.

5.4.2 Registration with a General Practitioner

The 2022-2023 health assessment reporting indicates that 99.4 of Children in Care are permanently registered with a GP.

5.4.3 Dental Practice Registration

Children and young people often enter care with poor oral health: usually because of their pre-care experience.

Attendance for annual dental checks is a national performance indicator.

Lincolnshire Local Authority reporting on this performance indicator shows that 84% of Children in Care had dental checks as of 31.03.2023. This is a small improvement on the previous year (availability continues to be impacted by the coronavirus pandemic, with Dental Practices closing and many restricting their practice to private patients only.) In recent months LCC has worked jointly with health and social care and colleagues in the dental services across the county to agree a pathway for Children in Care to improve their access to dental services.

For children who are not registered with a dentist at their health assessment appointments, carers are encouraged to register a child with a dentist as soon as possible.

The Lincolnshire Dental Strategy has a priority on 'improving access to dental services'. In the Strategy Children in Care are specifically identified as a population group, where improved access will be focused. Work is also underway with the Local Dental Committee to encourage practices to prioritise access to routine services for Children in Care.

5.4.4 Immunisation's and vaccination

Children who are not immunised are potentially more susceptible to a range of infectious diseases. In sophisticated industrialised societies such as the UK many diseases have been all but eradicated; however, in areas where immunisation up take is poor the potential for infectious diseases to re-emerge is significant.

There are only a small number of reasons why children should not receive a course of immunisations:

If the immune system is compromised, certain, e.g., live vaccines are not given, (this could be that a parent or immediate family member has a compromised immune system resulting in a delay until it is safe to vaccinate).

If a child / sibling has previously had a severe reaction to the same vaccine.

Young people may refuse to have their vaccinations.

For Children in Care the vaccination history is recorded by the GP on the CORAMBAAF form at their IHA. Any outstanding vaccinations must be identified on the health plan section of the CORAMBAAF form.

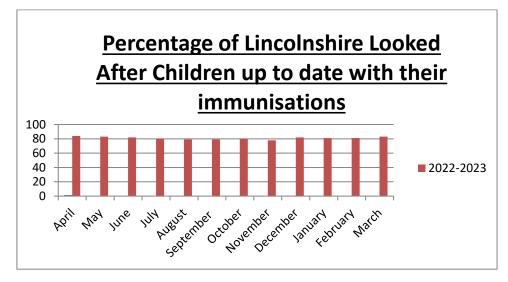
The IRO also has a responsibility for performance managing and identifying outstanding vaccinations and agreeing plans for them to be completed.

The vaccination and immunisation status submitted by Lincolnshire LA for the final percentage at year end 2022-2023 was 84.6%. The immunisation programme, particularly the schools programme, has been impacted by the COVID19 pandemic. There was a catch-up programme to ensure all children were up to date by the end of 2022. This has been completed however some children remain outstanding and they are being followed up individually.

The percentage of children who are up to date with their immunisations is at a higher rate of coverage compared with those of their peers in the general population. All outstanding immunisations are checked quarterly by the CiC health team. Health and Social care colleagues are working together to improve the timely recording of immunisations.

Graph 5 (below) shows the monthly percentage of children up to date with vaccinations **2022**-**2023**





5.4.5 Children and Young People Mental Health and Emotional Wellbeing Services

Lincolnshire has a number of services designed to provide support to children and young people (CYP) with emotional wellbeing and mental health concerns, from prevention and early intervention through to crisis, mostly provided by Lincolnshire Partnership NHS Foundation Trust (LPFT).

It is widely recognised that care experienced CYP are more likely to have poorer mental health than their peers. Most CYP enter care as a result of abuse and neglect and the trauma they experience can have far reaching effects on all aspects of their lives. Promoting the Health and Wellbeing of Looked After Children (statutory guidance) identified that c.50% of Children in Care (CiC) have a diagnosable mental health disorder.

In Lincolnshire, CiC and care leavers can access a range of CYP mental health services including targeted support such as:

• Fast-track referral for CiC into CAMHS (4 week target from referral to assessment).

- Specialist staff within Children's services, for example trained Early Help staff to deliver NHS Talking Therapies for Anxiety and Depression.
- A Leaving Care Mental Health Practitioner, employed by LPFT, who is co-located in the Barnardo's Leaving Care Service (soon to be expanded with another practitioner working with NACRO Supported Accommodation, as part of the Staying Close pilot).
- A Complex Needs Service focused on supporting CiC and care leavers, which also includes CiC Link Workers co-located within the new residential children's homes in Lincolnshire, to provide a strong therapeutic, trauma informed offer.
- Mental health support for CiC in our existing in-house residential care homes.

The tables below show the referrals received by LPFT CYP services in respect of CiC for 2022/23 and reason for referral.

Table 1

The table illustrates the CAMHS services provided to Children in Care corporately parented in Lincolnshire. (The data for those placed by external authorities is not available for this reporting period). **Referrals Received 2022/23**

Gender/Age	Attended one or more contacts (a)	Did not attend any contacts (b)	Total
Female	182	3	188
Female aged 4-9	10	1	11
Female aged 10 - 14	78	1	79
Female aged 15 -19	90	1	91
Female aged 20 - 22	4	0	4
Male	97	4	101
Male aged 4-9	10	1	11
Male aged 10 - 14	42	1	43
Male aged 15 -19	45	2	47
Male aged 20 - 24	0	0	0
Total	279	7	286

Reason for referral	% out of 291 referrals 2022/23
Suicide Risk With Harm	19.59%
Behavioural Problems	17.53%
Anxiety	18.56%
Suicide Risk Without Harm	16.49%
Low Mood	8.93%
Advice Line	4.12%
Post Traumatic Stress Disorder	
(PTSD)	3.09%
Attachment Difficulties	2.75%
Emotional Wellbeing Difficulties	2.06%
Autistic Spectrum Disorder	1.72%
Depression	1.03%
Other - Including: Autism Diagnostic	
Pathway, Behaviours that Challenge	
due to a Learning Disability, Court	
Report Requested, Dysphagia,	
Eating Disorders, Reasonable	
Adjustments, Risk of Hospital	
Admission, Self-Harm	4.12%

Age On Referral	Attended one or more contacts	Referral Reason/Description	Reason for non-attendance
4	No	Anxiety	Moved out of area - referred to new locality (sibling 1/3)
9	No	Anxiety	Moved out of area - referred to new

			locality (sibling 2/3)	
14	No	Anxiety	Referral was end of March therefore	
			consultation held in FY 23/24	
10	No	Anxiety	Moved out of area - referred to new	
			locality (sibling 3/3)	
17	No	Suicide Risk Without	DNA crisis intervention (was seen for	
		Harm	assessment by Core CAMHS)	
16	No	Suicide Risk Without	CYP/SW/Carers DNA Core CAMHS apt.	
		Harm	and CYP declined Crisis input.	
15	No	Anxiety	Referral was end of March therefore	
			consultation held in FY 23/24	

Future Developments around Mental Support for CiC and Care Leavers

- There is currently a CYP Mental Health Transformation Programme underway. The Council and LPFT are jointly undertaking a wholesale review of children's mental health support in Lincolnshire in order that "together with CYP in Lincolnshire, we will understand how we can best support their emotional wellbeing and mental health and transform and improve services, enabling CYP to live independent safe, well and fulfilled lives in their local communities". This will be delivered across five workstreams:
 - Prevention and community assets ensuring CYP stay healthy through mental health promotion and prevention by creating mentally health communities.
 - Early intervention ensuring CYP access timely and effective support at the right level in their community or at school.
 - Mental health support for learning disabled or autistic CYP ensuring CYP receive specialist care in the community, tailored to meet their specific needs.
 - Community specialist mental health ensuring CYP who need it are able to access specialist assessment and evidence-based treatment.
 - Urgent and emergency mental health ensuring CYP have access to 24/7 assessment and support at times of mental health crisis.
 - 0

Across all of these areas, CiC and care leavers are a key group being considered in terms of their unique experiences and emotional wellbeing and mental health needs.

There are plans to continue and expand support for care leavers following Lincolnshire's successful 'Staying Close and Connected' bid to the Department for Education. Two LPFT MHPs will be co-located; the existing Barnardo's Leaving Care Service MHP and an additional MHP within the supported accommodation service – Nacro Education, Support and Transition (NEST). They will upskill staff to better support young people's mental

health and wellbeing, providing additional trauma-informed resources to help stabilise challenging behaviours and support to remain connected as they move on.

• The key priorities for the Complex Needs Service for the next year are to further build up the support to the Council's residential care homes and increase the support it offers to Lincolnshire's care leavers. Other priorities include embedding the Positive Futures offer within the Complex Needs Service, recruiting to a 'Lived Experience' post and expanding co-production of support, expanding the team's training offer and evaluating the various elements of the service.

6.1. Learning and Achievement – Education for Life

The Virtual School Team showed great flexibility throughout the pandemic and worked alongside the Caring 2 Learn Team, foster carers, social care teams, children, and schoolbased colleagues to provide practical support for the educational needs of our children and young people in care throughout the year. The examples below provide a flavour of how the team responded.

- Ensuring that most of our children and young people attended school throughout the pandemic where appropriate
- Delivering laptops to enable children to continue lessons online if required
- Ensuring Out of County placed children, carers and schools were supported through regular weekly contact
- Supporting carers to access **online learning portals** and other resources set up by schools.
- The team continued to complete all Personal Education Plans
- Continued to support Children in Care Reviews as required
- Ensured catch up tuition was provided as required
- The team also distributed resources such as **books** and stationery where appropriate
- Supported our **Residential Homes** with learning resources, school transport issues etc.
- Through partnership working ensured our more vulnerable carers could better support their children's **transitions back into school** when appropriate
- Caring2Learn continued to provide networking opportunities for our carers alongside support and advice from our Carer Champions network.
- Three Virtual School Staff also provided cover to support our residential colleagues throughout the first Lockdown.

7. Social Care

7.1 Permanence

During the reporting year 1st April 2022 and the 31st March 2023 (2022-23) Family Finders has continued to meet monthly in order to consider children whose care plan is one of permanence through long-term fostering. These meetings are in person, although MS Teams can be utilised if necessary.

Over the reporting year, twenty-nine children have been considered, which is a 31.8% increase on the previous reporting year which saw twenty-two children considered. Of the twenty-nine children considered, sixteen children were newly referred from 1st April 2022 onwards. This is a 23% increase on last year's figure (13 children).

Out of the twenty-nine children considered, in house foster families were identified for four children, two singletons and a sibling group of two children, with the singleton children remaining with their existing carers with long-term permanent placement being agreed. The sibling group moved to a new placement which was identified as a direct result of one of the permanence events held during the year. Of the remaining twenty-five children, eight remain in residential settings, one is with an Independent Fostering Agency and the remaining sixteen are with in-house foster carers.

This year seven fostering families have been linked for Permanence at Fostering Panel creating permanency for eleven children in total. However, all of these were with the existing task centred foster carers and the children had not been referred to Family Finders.

For several years there have been difficulties in recruiting permanent foster carers. However, during 2022-2023, eleven fostering households were approved as permanent carers, compared to 2021-2022 where there were no permanent approvals made. The eleven households include six newly approved fostering families and five changes of approvals for existing foster carers. Whilst the six sets of carers have not yet been linked with children on Family Finders it is hoped in the next few months this will take place. The majority have attended the permanence event and appropriate matching is taking place.

Within Family Finders this year we have also focused on the level of support offered to young people during the transition period. Placement Support Workers are being allocated earlier to ensure the young people and carers receive the most appropriate support and that families can continue to work with a placement support worker before, during and after their transition to a permanent carer.

For several years recruitment of permanent foster carers has been difficult with most permanent matches being made with their Task Centred carers and this year demonstrated that continued trend.

The Family Finders Review panel continues to meet when necessary to consider children where no potential placement matches have been identified within a three-month period, enabling senior management to have oversight of actions already taken and discussions around any further options to be considered or explored. During this year thirteen children have been reviewed by this process, one of whom has been removed from Family Finders as permanence has been achieved.

7.2 Placement Stability

Placement stability continues to be a critical factor in offering an effective Fostering Service and is crucial to ensuring that the Local Authority delivers good outcomes for each Child in Care. The service has been developed and structured to promote stability and support to foster carers. Stability is measured by 2 national indicators, NI062 relating to children who experience 3 placement moves within 12 months, and NI063 which relates to children who have been in care for 2½ years who have been in the same placement for 2 years.

The national indicator NI062 reported 9.3% at year end. This figure suggests that Children in Care in Lincolnshire have a high level of placement stability from the point of coming into care. The figure is higher than the Council would prefer but does take into the account and reflects some of the challenges and the intricacies of meeting the needs of children and matching them within our existing resources. The complexity of children requiring placement and reduced placement options have had an impact on the indicator, and this is likely to remain a challenge. Over recent years there has been considerable focus on supporting foster carers to maintain placements. Placement support workers have been trained to offer therapeutic interventions and caring2learn has developed champions and hub supports to all carers. Together they have supported an improvement.

The NI063 placement stability figure which measures the percentage of Children in Care under 16 year who have been cared for continuously for at least 2.5 years who were living in the same placement for at least 2 years ended with a year-end figure reported as 64.2%. The Valuing Care tool has now been embedded within the Fostering service. The tool continues to be used alongside the Children in Care Valuing Care tool to support and inform matching with a view to improving placement stability by identifying carer's strengths in accordance with a child, young person's needs.

7.3. Staying Put Scheme

The 'Staying Put' scheme in Lincolnshire has, since its inception, enabled a total of 254 young people to remain with their previous foster carers. Staying Put arrangements provide the young person with stability at a key stage of their life remaining until their 21st birthday. On-going support for carers is provided by the Fostering Service, with the young people having their own designated Personal Adviser from Barnardo's Leaving Care Service. To further support young people in their transition to adulthood if they are ready to move on before their 21st birthday, or for those who join the military, each young person is given a window of up to three months in which they are supported by their carer. For those young people who attend university and live away, carers receive a retainer in recognition of the on-going support they provide, and to enable the young person to return during holidays and continue life within their family setting.

Lincolnshire's Staying Put Service has continued to support young people and their carers with a total of 45 young people living in a Staying Put arrangement at the end of March 2023. Of these, 24 were in either full of part-time further education, 6 attending university, 5 young

people are in employment, 4 young people are on Apprenticeship Schemes including 2 young person are on the Care Leavers Apprenticeship Scheme and 6 young people were NEET. It is a core requirement of Staying Put for young people to be in education, employment or training. For the 6 young people who are NEET there are clear plans in place to support them in to education, employment or training.

The Staying Put offer in Lincolnshire positively reflects the current guidelines and best practice from the Government and Fostering Network. Signs of Safety is used and embedded in all the documents relating to Staying Put with Social Pedagogy being used to support the transition and understanding around moving to adulthood.

During the past 12 months connections with carers have remained in place; with Supervising Social Workers and the Staying-Put Co-ordinator keeping in contact with carers by telephone, virtually or face to face meetings. Meetings are now primarily face to face, and this has enabled better working relationships, and provided a higher level of support to young people and their Staying Put providers.

Looking forward to the next 12 months, there are currently 19 referrals waiting to join the Staying Put scheme. There may well be additional young people move into this provision (if this is the preferred option for them and their carers) this scheme continues to be an option for those leaving care at the point of attaining adulthood.

8. Consultation with Children in Care

8.1. Voices 4 Choices (V4C)

V4C is Lincolnshire's Children in Care Council. It shares experiences of being in care, informing Children's Services about what does and does not work for them, and what needs to change. V4C meetings have been held month in each of the 4 localities and are delivered by Senior Youth and Community Development Workers, with support from Participation Officers over the past 12 months. During this time the Quality and Standards Service has led a review into the model of how are V4C meetings operate and following consultation with Children in Care and professionals a move to a county wide group is being implemented which will be held within the day time during school holidays with senior managers and elected members invited along to specific dates. It is anticipated that this will further encourage attendance and contributions from our Children in Care. Over the past 12 months V4C groups have been involved in feeding back about their experiences and views on a range of subjects including views on school experiences, living in residential care and the support they receive from their workers.

8.2. Big Conversation Events

Big Conversation events have taken place over the past 12 months. Meetings have been well attended by Children in Care, senior managers and elected members and a range of

discussions and views have been shared by children and young people relating to their education, home life and leisure activities.

8.3. Development work

Pieces of work done by V4C in Big Conversation have continued to be developed:

- Updating and relaunching the Coming Into Care Kit as the 'Living in Care Guide'
- Proving feedback to help inform the planning and delivery of the annual Children in Care FAB! Awards that were held in June 2023 for the first time since 2019.
- Contributing to the update of the Participation Strategy
- Developing the model of how future V4C meetings will operate

9. Advocacy and Complaints

The Living in Care Guide has been reviewed and redeveloped by the Participation Team with views and input from young people attending V4C. This provides children with information as to how they can express any feelings of dissatisfaction they may have including making formal complaints. There are however several informal dispute resolution options which are available to children and young people who are in the care of the local authority.

These include the following: -

Voiceability: All children and young people coming into care are offered an Independent advocate from our commissioned provider Voiceability who can attend their 28-day review and/or represent their views in a report. Voiceability also provide an issues resolution service which CIC can access as and when required.

Independent Reviewing Officers: The Independent Reviewing Officer has a duty to engage with children and young people to ascertain their views in respect of their care plans and to advise them of their entitlements including their right to complain. Children are encouraged to attend their reviews in order that they are aware of their plan and can comment on this. Where children's wishes are contrary to the plan, the Independent Reviewing Officer can escalate matters on behalf of the child in order to resolve matters in a timely manner. Where children and young people continue to be dissatisfied, the Independent Reviewing Officer can support young people in making formal complaints.

Regulation 44 Visits: The Regulation 44 Officer is an Independent Visitor who visits all residential homes within the authority monthly. An integral part of the role of the Independent Visitor is to talk to children, young people, and their families about their experiences of the residential home. The Regulation 44 Visitor can engage in discussions with

the homes manager to resolve any issues which the child may identify. Where this early attempt at resolution is unsuccessful, the Independent Visitor can support the young person in making a formal complaint.

Social Workers: Social Workers meet with children on a regular basis. A fundamental part of this visiting is ascertaining the wishes and feelings of children and young people. Where children are unhappy with the level of care which they are receiving, their social worker will in the first instance work with the child to see whether changes are able to be made which would comply with the child's wishes. Social Workers can direct children to the advocacy service if they wish to pursue a formal complaint.

9.1 Complaints

This year has seen no complaints made directly by children who are in care. However 3 complaints were received from parents, carers or other family of Children in Care. The following is a brief summary of those complaints received in relation to this area.

Quarter 1

Parent complained that sibling of his child was not being kept with his child despite the courts order that this is maintained. Parent advised that they were not contacted around taking in both children and that there had been a lack of communication from the allocated Social Worker.

In response to this the complainant was advised that a viability assessment for the child's placement with the complainant was still on-going. It was also relayed to the complainant that the court findings referred to were 4.5 years ago and as such the siblings were more independent of each other with individual needs that needed to be met. There was no request for an escalation of this case.

Quarter 2

Complainant advised that they were unhappy around their siblings social worker discussing their personal history with other family members. It was explained to the complainant that the matters were raised were around the care provided to them by a grandmother and assessments were being undertaken to assess her ability to provide care for the complainants siblings. It was agreed that this would remain the sole area discussed in regards to the complainants history and remain in the context of suitable care for the child in question. This complaint was not escalated any further by the complainant.

Complaint raised by a foster carer around the lack of support offered to them and a child in their care following allegations made against them by another young person which had led them to wish to transfer to a private Fostering Agency.

In response to these concerns the complainant was advised that their transfer has been processed in accordance with the Fostering network protocol arrangements. It was explained that with all allegations appropriate procedures need to be completed to ensure the safety

of all involved. These procedures were followed appropriately and there were no further matters to investigate. No request for an escalation of this complaint was made.

No complaints were raised in relation to this area during the 3rd or 4th quarters.

10. Conclusion

Children in Care in Lincolnshire continue to have their health needs met and processes are in place to ensure that they can be safe, happy and healthy, enjoy life and realise their potential. There is a robust workforce in place and clear governance arrangements placing children and families at the heart of how we plan and deliver support for them, building on the family's strengths.

11. Recommendations for 2023-2024

- 1. LLA, Integrated Care Board and LCHS to continue to work together to improve the number of Initial Health Assessments completed within the statutory timeframe.
- 2. LCHS to continue to maintain the current GP workforce to complete IHA's.
- 3. The annual report to be shared with the IRO service to promote improvement in constructive challenge.
- 4. A review of the management of and support provided to children with above average SDQ scores to be completed.
- 5. Continued utilisation of the valuing care toolkit and expansion of our residential estates as part of our transformation programme in response to the shortage of local placements for Children in Care.
- 6. Work with the Oral Health Alliance Group to continue to support access to Dentistry for Children in Care.
- 7. Work on ensuring transition into Adulthood and Transitional safeguarding for Children in Care and Care Leavers is improved.

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Lincolnshire Community Health Services

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Agenda Item 7



Open Report on behalf of Lincolnshire Leaving Care Service

Report to:	Corporate Parenting Panel
Date:	18 January 2024
Subject:	Lincolnshire Leaving Care Service - Six Monthly Update Report

Summary:

This is the six monthly update report, provided by Barnardo's, demonstrating work undertaken within Lincolnshire Leaving Care Service. It covers the period from April 2023 to October 2023.

Actions Required:

The Corporate Parenting Panel is invited to review and endorse the Leaving Care Service six monthly update report.

1. Background / Summary

This is the biannual update report to Lincolnshire's Corporate Parenting Panel to demonstrate the performance and impact of the Lincolnshire Leaving Care Service regarding care experienced young people. Areas covered within this report include:

- 1. Accessing and maintaining suitable, safe accommodation
- 2. Accessing and maintaining appropriate Education, Employment and Training opportunities
- 3. Care Leavers Cohort and Location
- 4. Participation / Fundraising
- 5. Mental Health and Wellbeing
- 6. Care Leavers Transformation Board
- 7. Conclusion and New Opportunities

Lincolnshire County Council's Leaving Care Service is currently delivered by Barnardo's. The contract specification (since the 1 April 2020) is to deliver a Statutory Leaving Care Service for young people aged 18-25 and to start working with the Local Authority Children in Care / FAST Teams working with Children in Care aged 16-18. The contract is closely monitored via regular contract monitoring meetings which are attended by the Contract Monitoring Officer, the Corporate Parenting Manager, and the Head of Service (with lead responsibility for Leaving Care, Semi-Independent Living and Unaccompanied Children).

Data contained within this report demonstrates performance from 1 April 2023 – 30 September 2023.

1 - Accessing and Maintaining Suitable, Safe Accommodation

Accessing and maintaining suitable, safe accommodation

Apr	May	Jun	Jul	Aug	Sep
2023	2023	2023	2023	2023	2023
248	248	248	218	213	296
96%	96%	96%	92%	91%	93%

Percentage of Care Leavers Living in Suitable Accommodation – Target 90%

Lincolnshire County Council, alongside a number of housing providers, offer a range of accommodation for Care Experienced Young People. As a service we aim to share information in relation to housing options available both within the County but also where the young person is currently residing. Within the service, we have a specialist post holder who specialises in housing provision for care experienced young people, and we also have the Leaving Care Workers and Team Managers who have knowledge on services available to young people. The specialist worker has worked alongside care experienced young people and their workers providing advice and support that has secured appropriate accommodation outcomes. For example, a young male who had been evicted from previous accommodations required a more specialist intervention to secure a tenancy in a supported and staffed environment. The specialist worker was able to stand alongside the young person providing practical assistance to support him to plan and prepare for his next move. The young person remains in their accommodation; we are pleased to report that this is the longest period of stability that he has experienced.

Barnardo's and the Local Authority monitor and review all young people in 'unsuitable' accommodation monthly, via contract monitoring reports to ensure appropriate plans are in place and support is offered in a timely way.

There are a number of housing options available for Children in Care and Care Experienced Young People who are open to Lincolnshire Leaving Care Service. Housing packages are tailored to meet individual needs (it is never a one size fits all approach). The Leaving Care Service has excellent links with a number of housing providers who work with Lincolnshire young people. We have developed some good links with District Council Housing Teams and the Corporate Parenting Manager and Head of Service continue to offer the District Councils advice, support and assistance in relation to developing the housing offer for Care Experienced Young People. We have welcomed the joint work we have been able to undertake with the NEST Team (Care Leavers Homeless Prevention Service).

Barnardo's Supported Lodgings Scheme

Members may be aware that new legislation came into effect this year that saw the regulation of supported housing options for young people aged 16 and 17 years of age. Any housing provider wishing to offer supported housing options (including Supported Lodgings) had to apply for registration with Ofsted and nominate a Registered Manager for the service.

Lincolnshire Leaving Care Supported Lodgings Service is now regulated to offer supported lodgings placements for 16- and 17-year-olds and will continue to offer placements for 18–21-year-olds.

This scheme gives young people the opportunity to develop independence skills whilst living in a home environment. Advice and guidance are offered in relation to cooking, undertaking household tasks and maintaining education / employment. We have had some excellent outcomes for several young people who have accessed this scheme. An example of service impact relates to a young person whose trauma responses were in danger of being criminalised as he was frequently arrested. He was supported by his Leaving Care Worker and the Specialist Wellbeing Worker to move into a Supported Lodging Placement for seven months, whereby he received assistance from the provider in a nurturing environment that prepared him further for independent living. The Specialist Wellbeing Worker has worked with the young person by supporting him into the workplace alongside introducing him to other specialist workers within the service, such as the Accommodation Worker. He is currently living and maintaining a tenancy in his own one-bedroomed property and has recently been promoted to Crew Trainer working for McDonald's.

Young people live with providers as lodgers – paying rent and a contribution towards utilities and food. Children's Services pay a support fee dependent upon the level of support required; housing benefit /universal credit is also claimed (where appropriate). The scheme caters for Care Experienced Young People - Looked after Children over 16-and 16/17-year-olds who are homeless and require an 'assessment bed'.

Within Lincolnshire (in October 2023), we were working with 12 providers who could offer 21 lodgings across the County (some full-time and some respite). The team provide vacancy information over to the Local Authority monthly but have officers available to deal with referral enquiries five days / week.

Barnardo's has continued to run its supported lodgings panel throughout 2023 and have representatives both from the Local Authority and Barnardo's. This panel not only reviews current providers but also considers new applications.

New Initiatives in relation to housing options for Lincolnshire Care Leavers:

Lincolnshire County Council and a number of partners have been successful in applying for Government Funding through the 'Staying Close Bid'. Within Barnardo's, this sees the introduction of a new Team Manager and two new practitioners. These new post holders will work alongside the Local Authority Social Workers and Leaving Care Workers to either assist Lincolnshire Young People to seek housing options within the County or help ensure their Leaving Care offer is as good as they would receive if living within the County. Whilst this funding stream is in its infancy, we have similar posts in the service that have benefitted the young people we are working with.

<u>2</u> - Accessing and Maintaining Appropriate Education, Employment and Training <u>Opportunities</u>

Apr	May	Jun	Jul	Aug	Sep
2023	2023	2023	2023	2023	2023
109	109	109	134	129	131
53%	53%	53%	57%	38%	56%

Open Allocated Cases – Target 65 %

Within the service, we continue to target Lincolnshire Care Leavers who are not accessing education, employment or training (EET) opportunities. In March 2022, Barnardo's commissioned some work whereby we have reviewed all Care Experienced Young People who fit into this category and explored alongside the allocated Leaving Care Worker the reasons why this cohort are finding it difficult to access opportunities. Data was presented at the Corporate Parenting Panel meeting in July 2022.

We have a team of practitioners who work alongside the Leaving Care Workers where they target young people not accessing education, employment or training opportunities. The team structure is noted below:

- 1 FTE EET Coordinator
- 2 x 0.5 EET Workers
- 1 FTE Mental Health Specialist funded through health partnerships / staying close funding
- 1 0.8 Well-Being Worker

It is unfortunate that since April 2023 there has been a full-time vacancy in the Mental Health Specialist post and whilst interviews took place in October 2023, the new team member will not be starting their induction until January 2024. We are hoping with the

addition of the two new Staying Close / Staying Connected Workers, the Well-Being Worker and the Mental Health Specialist, we can offer an extended wellbeing service that will target those young people in need of some additional intensive support.

Our Well-Being Worker has been involved in providing Wellness Recovery Action Plan [WRAP] training to care experienced young people. It is hoped that this programme will equip care experienced young people to devise a recovery plan that they can use when experiencing heightened anxiety because of their individual lived experiences of childhood trauma.

Our Project Worker 1 [PW1] post holder has been working with care experienced young people that have received warnings from their colleges, meaning that their courses have been placed at risk. For example, a young person received a warning related to time management and was informed that without improvement, they would be suspended from their course. The PW1 was able to identify that the young person was not confident when accessing public transport and was able to accompany them to catch the college buses, working with them over a few days to build their confidence.

Lincolnshire also benefits from having the Virtual School; however, the majority of Care Experienced Young People can only access the support of this service up to the age of 18. Over the next six months we are going to be reviewing how we can work together with the resources we have to support care experienced young people with their education, employment and training aspirations. The Virtual school is advertising for a post to support with job coach skills for young people.

"Care Leavers in England are over ten times more likely than their peers to be not in education, employment, or training (NEET) in their 21st year, major new analysis shows. Overall, nearly one-third were NEET compared to just 2.4 per cent in the general population and 13 per cent of 21-year-olds."

The study was funded by the <u>Nuffield Foundation</u> and based at the Rees Centre at the University of Oxford. It was led by Dr Neil Harrison (now at the University of Exeter) and Jo Dixon (University of York).

Care leavers' transition into the labour market in England - Nuffield Foundation

Barnardo's has a common mission of 'Increasing Aspiration and Outcomes for Children in Care and Care Experienced Young People'. Employment and Training continues to be a challenging concept not only in Lincolnshire but nationally. We have developed some excellent partnerships with DWP and Job Centres to help target our Care Experienced Young People. Within Lincolnshire Leaving Care Service, we have developed a new programme called 'Success in Six' that helps young people who are wishing to seek employment (rather than expand their educational knowledge). We also offered some tailored individual sessions to help young people prepare for the workplace; this traditionally was delivered for some groups of young people but is now more tailored to the individual. These courses are now run more frequently, to small groups of up to two care experienced young people at a time; these are run at a venue in their local community. We have found that this has encouraged and enabled greater participation.

We have embarked on a review of the services we offer to our Care Experienced Young People in relation to our Education, Employment and Training offer. We want to review the education, employment and training pathway from 16-25 years of age and consider what gaps we have and how to improve partnership working for Care Experienced Young People so to improve outcomes and aspirations. We have noted a significant difference in the emotional wellbeing of Children in Care as they transition into our service and we already recognise that work has to be more targeted and individualised to encourage some young people to be 'work ready'. We are seeing significant personal achievements in some of our young people after they have benefited from individual work from specialist well-being workers. For example, a care experienced young person frequently attempted to end her life resulting in regular presentation at hospital for emergency treatment. She was referred to our Specialist Wellbeing Worker by her Leaving Care Worker and during the last six months, has been supported to complete the Wellness Recovery Action Plan programme and self-confidence training. As a result of this, she has reported a huge improvement in her emotional wellbeing and has expressed her desire to gain employment. She has been supported by the Education, Employment, and Training Team to apply for her dream job working as cabin crew with a well-known airline and is waiting to hear whether her application has been successful.

A further example relates to a young person who reported that she was unable to attend work preparation training owing to the sizes of the groups run. As mentioned earlier within this report, the Education, Employment and Training Team has adjusted the delivery of this course and are now providing locality based, targeted training. The impact of this training resulted in the young person successfully gaining employment in a hospitality setting and as such, they are now working.

<u>3 – Care Leavers Cohort</u>

Lincolnshire Leaving Care Service is working with approximately 470 young people. Over the last financial year, alongside the Local Authority, we have seen a significant increase in the number of Unaccompanied Young People allocated to Lincolnshire because of the 'National Transfer Scheme'. Working with young people who are unaccompanied and seeking asylum requires staff to have a good working knowledge of the Leaving Care Act and Immigration processes and procedures, adding an additional complexity to the role.

Current figures indicate:

- There are 90 Unaccompanied Asylum-Seeking young people aged 18 25 years of age in the service, all of whom have a named Leaving Care Worker.
- There are an additional 72 Unaccompanied young people aged 16 and 17 who have an allocated Social Worker within the Local Authority and a named Leaving Care Worker.
- 24 young people are still awaiting decisions on their Immigration Status:

- \circ 13 in the appeal process.
- 10 awaiting a decision.
- 1 trying to establish whether a decision has been made and served.
- 18 is the average age that a young person is receiving their asylum decisions.

Where Do Our Care Leavers Live? (figures correct as of December 2023)

CEYP AGE	DISTRICT	COUNTY	NUMBER OF YP	
16	Out of County	Cambridgeshire (MAJORITY PETERBOROUGH)	6	
		Nottinghamshire	2	
		Leicestershire	1	TOTAL 9
17	East Lindsey	Lincolnshire	1	
	Out of County	Cambridgeshire (MAJORITY PETERBOROUGH)	8	
		Nottinghamshire	3	TOTAL 12
18	Boston	Lincolnshire	11	
	East Lindsey	Lincolnshire	9	
	Lincoln	Lincolnshire	18	
	North Kesteven	Lincolnshire	7	
	South Holland	Lincolnshire	8	
	South Kesteven	Lincolnshire	7	
	West Lindsey	Lincolnshire	6	
	Out of County	Cambridgeshire (MAJORITY PETERBOROUGH)	26	
		Derbyshire	3	
		Greater London	1	
		Leicestershire	4	
		North East Lincolnshire	3	
		Northamptonshire	1	
		Nottinghamshire	8	
		Scotland	1	
		South Yorkshire	1	
		Sussex	1	
		Wales	1	

		Warwickshire	1	
		West Midlands	2	
		West Yorkshire	4	
		Wiltshire	1	TOTAL 132
19	Boston	Lincolnshire	5	
	East Lindsey	Lincolnshire	11	
	Lincoln	Lincolnshire	33	
	North Kesteven	Lincolnshire	4	
	South Holland	Lincolnshire	3	
	South Kesteven	Lincolnshire	5	
	West Lindsey	Lincolnshire	6	
	Out of County	Cambridgeshire (MAJORITY PETERBOROUGH)	15	
		Derbyshire	1	
		Greater London	1	
		Humberside	2	
		Leicestershire	2	
		North East Lincolnshire	5	
		Nottinghamshire	2	
		South Yorkshire	2	
		West Midlands	1	
		West Yorkshire	1	TOTAL 99
			1	
20	Boston	Lincolnshire	7	
	East Lindsey	Lincolnshire	7	
	Lincoln	Lincolnshire	18	
	North Kesteven	Lincolnshire	1	
	South Holland	Lincolnshire	3	
	South Kesteven	Lincolnshire	9	
	West Lindsey	Lincolnshire	3	
	Out of County	Cambridgeshire (MAJORITY PETERBOROUGH)	9	
		Greater Manchester	1	
		Greater London	1	
		Hampshire	1	
		Kent	1	
		Leicestershire	2	
		North Yorkshire	1	
				1

		South Yorkshire	2	
		Tyne and Wear	1	
		Wales	1	
		West Midlands	1	
		Wiltshire	1	TOTAL 71
				101/12/1
21	Boston	Lincolnshire	2	
21	East Lindsey	Lincolnshire	4	
	Lincoln	Lincolnshire	9	
	North Kesteven	Lincolnshire	2	
	South Holland	Lincolnshire	3	
	South Kesteven	Lincolnshire	3	
		Lincolnshire	2	
	West Lindsey		8	
	Out of County	Cambridgeshire (MAJORITY	ŏ	
		PETERBOROUGH)		
		-	1	
		Derbyshire		
		Devon	1	
		Greater Manchester	3	
		Greater London	4	
		Northamptonshire	2	
		Nottinghamshire	3	
		Scotland	1	
		South Yorkshire	1	
		Tyne and Wear	1	
		Wales	1	
		West Midlands	1	
		Wiltshire	1	TOTAL 53
		_		
22	Boston	Lincolnshire	2	
	East Lindsey	Lincolnshire	7	
	Lincoln	Lincolnshire	6	
	North Kesteven	Lincolnshire	3	
	South Holland	Lincolnshire	1	
	South Kesteven	Lincolnshire	4	
	Out of County	Cambridgeshire	5	
		(MAJORITY		
		PETERBOROUGH)		
		Buckinghamshire	1	
		Greater Manchester	1	
		Greater London	2	
		Leicestershire	1	

		North East Lincolnshire	1	
		North Yorkshire	1	
		Nottinghamshire	5	
		Sussex	1	
		Wiltshire	3	TOTAL 45
23	East Lindsey	Lincolnshire	2	
25	Lincoln	Lincolnshire	3	
	North Kesteven	Lincolnshire	1	
	South Kesteven	Lincolnshire	2	
	West Lindsey	Lincolnshire	3	
	Out of County	Cambridgeshire (MAJORITY PETERBOROUGH)	4	
		Avon and Somerset	1	
		Belgium	1	
		Devon	1	
		Essex	1	
		Greater Manchester	2	
		Greater London	1	
		NE LINCS	1	
		North Yorkshire	1	
		Nottinghamshire	2	
		Tyne and Wear	1	
		West Midlands	1	TOTAL 27
24	Boston	Lincolnshire	1	
	East Lindsey	Lincolnshire	1	
	Lincoln	Lincolnshire	3	
	South Holland	Lincolnshire	2	
	South Holland South Kesteven	Lincolnshire Lincolnshire		
	South Kesteven	Lincolnshire	2	
	South Kesteven West Lindsey	Lincolnshire Lincolnshire Cambridgeshire (MAJORITY	2 4	
	South Kesteven West Lindsey	Lincolnshire Lincolnshire Cambridgeshire (MAJORITY PETERBOROUGH) Avon and Somerset	2 4 1	
	South Kesteven West Lindsey	Lincolnshire Lincolnshire Cambridgeshire (MAJORITY PETERBOROUGH)	2 4 1 1	
	South Kesteven West Lindsey	LincolnshireLincolnshireCambridgeshire(MAJORITYPETERBOROUGH)Avon and SomersetBuckinghamshireGreater Manchester	2 4 1 1 1 1 1	
	South Kesteven West Lindsey	LincolnshireLincolnshireCambridgeshire(MAJORITYPETERBOROUGH)Avon and SomersetBuckinghamshireGreater ManchesterGreater London	2 4 1 1 1 1 2	
	South Kesteven West Lindsey	LincolnshireLincolnshireCambridgeshire(MAJORITYPETERBOROUGH)Avon and SomersetBuckinghamshireGreater Manchester	2 4 1 1 1 1 2 2 2	

		West Yorkshire	1	TOTAL 24
25	Boston	Lincolnshire	1	
	Lincoln	Lincolnshire	1	
	North Kesteven	Lincolnshire	1	
	West Lindsey	Lincolnshire	1	
	Out of County	Cambridgeshire (MAJORITY PETERBOROUGH)	1	
		Nottinghamshire	1	
		South Yorkshire	1	TOTAL 7
Unknown Address, Confidential Address				TOTAL 25

4 – Participation/ Fundraising

Barardo's participation offer is good. We not only offer the support and guidance of an allocated Leaving Care Worker but we also have a dedicated Participation Worker who has developed a number of forums and opportunities for Lincolnshire Care Experienced Young People to participate in. Below is a list of some of the events Lincolnshire Care Experienced Young People have taken part in over the reporting period.

- The Big Conversation
- FAB Awards
- LBTQ Group
- Cooking Lessons (Louth, Lincoln and Peterborough)
- These cookery lessons focussed on providing cheap, nutritional, and easy to cook recipes. Attendees were able to take home the food that they had made and in some instances, through local partnerships such as the Community Initiative in Louth, they were provided with cookery equipment such as slow-cooker that would help them to manage and maintain their independence.
- Triangles Project (a group of Care Leavers have worked with Barnardo's to create a presentation / event for representatives from the Leaving Care Service, Barnardo's, and Local Authority Commissioners).
- Football Sessions at Peterborough.
- Bank of England Event where a number of Lincolnshire Care Experienced Young People attended a round table event at the Bank Of England and met the Governor of the Bank of England.
- Consultation of transformation workstreams.

We have secured some additional funds and gifts for Lincolnshire Care Leavers, these have included:

- Mobile phones courtesy of Vodafone and Tesco.
- Food Donations from Tesco Lincoln we created a great partnership with Tesco's; we had regular food donations that were distributed across the County. Whilst this partnership has now ceased, we have secured hampers for Christmas distribution.
- We were able to distribute additional Christmas Gifts to all Care Leavers who are parents (and their children).
- We have continued to expand our community presence in Louth that has led to food and cash donations. Barnardo's has also been nominated as Eastgate Union's Chosen Charity for the year. This again will lead to cash donations over a 12-month period. Other donations from our Louth Community have included: £1700 from Eastgate Union Church; £300 from a fundraiser quiz; £2000 from Platform Housing; £600 from the Louisa Dickinson Trust; approximately £20 / month from church donations; and regular food donations from Lighthouse and Trinity.
- The Orthodox Church in Lincoln continues to be an avid supporter of Barnardo's and has donated money and gifts for distribution.
- We have had cash donations from individual sponsors and St Hughs Catholic Primary School.
- Hand knitted goods for Care Experienced Young People who have had babies.
- Barnardo's Young People's Grant Team gave a 21+ Care Experienced Young Person a grant for £5,700 to pay for her post graduate degree.

5 – Mental Health and Wellbeing

Trauma informed practice

The whole Lincolnshire Leaving Care Service has completed a trauma informed training by Beacon House to support staff to:

- Gain confidence in their ability to identify and understand how repeated trauma affects children and adolescents.
- Understand the breadth and complexity of Developmental Trauma and associated difficulties.
- Develop their empathic understanding through ideas for experiential learning.
- Understand the principles of a trauma-informed approach to supporting traumatised children and adolescents.
- Learn a range of practical strategies to help regulate distressed children.

WRAP (Wellness Recovery Action Plan)

To allow the staff to give their best to care experienced young people, Barnardo's believes we need to create an open culture and culture of wellness – the roles that leaving care workers complete can be complex and trauma reducing or a stressor or triggering for staff and impact their own wellbeing. All members of the Leaving Care Service and the Head of Service for Leaving Care have completed their level one WRAP programme, and some

have gone on to complete level two WRAP – so within the service we can now deliver WRAP programmes to Care Experienced Young People.

Specialist Post Holders

As mentioned earlier in this report, as a service we have recognised the need for a new type of worker in the service who, alongside the allocated Leaving Care Worker, can offer some intensive support to improve mental and physical wellbeing. Leaving Care Workers have a duty to visit Care Experienced Young People once every eight weeks, which for some Lincolnshire Care Leavers does not provide the type of support required to help them achieve their goals and ambitions.

Within Lincolnshire Leaving Care, we currently have the Specialist Mental Health Worker, the Wellbeing Worker and the new Staying Close, Staying Connected Workers who are all able to undertake more complex interventions with young people.

6 - Care Leavers Transformation Board

Following the Ofsted Inspection in April 2023, some recommendations were made in relation to the offer made to Lincolnshire Care Experienced Young People. The Local Authority and Barnardo's have been working together to establish a Care Leavers Transformation Board. The Board has created a number of work streams to hopefully improve the Leaving Care Offer and experience for Lincolnshire Care Experienced Young People.

The Transformation Board is working on the following practice areas:

- Leaving Care Offer
- 21+ Offer
- Transition
- Pathway Plan Improvement
- Training
- Records
- Quality Assurance Processes
- Management Oversight

April to October saw the establishment of the workstreams and November onwards was when the developmental work progressed.

The Leaving Care Service is already seeing a closer alignment to teams based within the Local Authority including the Quality Assurance Team. A named Practice Advisor has been linked to the service and Barnardo's is looking to strengthen working arrangements with the new Corporate Parenting Manager who has management oversight of all groups within the transformation project.

7 - Conclusion and New Opportunities

This report reflects the progress and achievements during a six-month period for the

Lincolnshire Leaving Care Service.

The current staffing establishment (as of the 30 September 2023) is noted below:

- 1 Programme Manager
- Children's Services Manager (new post post holder started work 4 December 2023)
- 4.2 FTE Team Managers
- 1 Senior Administrator
- 6.1 FTE Administrators
- 1 Project Worker 3 Specialising in Unaccompanied Asylum Seekers
- 1 Project Worker 3 Specialising in Education, Employment and Training opportunities
- 1 Project Worker 2 Specialising in Participation
- 1 Specialist Accommodation Worker
- 2 Supported Lodgings Workers
- 2 Education, Employment and Training Specialist Workers
- 1 Well-Being Worker
- 1 Specialist Mental Health Worker
- 26.6 FTE Leaving Care Workers

Barnardo's has been working with the Local Authority prior to this review period and more recently since the Ofsted Inspection reviewing the staffing establishment in the service and looking to develop a stronger offer for Care Experienced Young People aged 21+. Over the summer period and into October, the management capacity was temporarily reduced, however as we move forward into winter, we can see a stable and expanded management team. The Local Authority have enabled the service to increase the senior management capacity by adding a Children's Services Manager and we have also benefitted from a new Team Manager who will oversee the Staying Close / Staying Connected initiatives.

This report was written by Lisa Adams, Programme Manager - Barnardo's who can be contacted on <u>lisa.adams@barnardos.org.uk</u> or 01522 575 955



Open Report on behalf of Andrew Crookham, Deputy Chief Executive and Executive Director – Resources

Report to:	Corporate Parenting Panel
Date:	18 January 2024
Subject:	Corporate Parenting Panel Work Programme

Summary:

This item enables the Panel to consider and comment on the content of its work programme for the coming year to ensure that scrutiny activity is focused where it can be of greatest benefit. The work programme will be reviewed at each meeting of the Corporate Parenting Panel to ensure that its contents are still relevant and will add value to the work of the Council and partners.

Actions Required:

Members of the Corporate Parenting Panel are invited to:

- (1) Review and approve the work programme; and,
- (2) Highlight any additional activity which could be included for consideration in the work programme.

1. Background

Current Items

For reference, the Panel's items for this meeting are set out below: -

	18 JANUARY 2024			
	Item	Contributor		
1.	Children in Care Performance Measures Quarter 2	Tara Jones, Assistant Director – Children's Safeguarding		
2.	Children in Care Joint Annual Health Report 2022/23	Rachel Freeman, Head of Service - Children in Care and Residential Estates		

	18 JANUARY 2024				
	Item	Contributor			
		Rebecca Pinder, Head of Safeguarding Children, NHS Lincolnshire ICB			
3.	Lincolnshire Leaving Care Service - Six Monthly Update Report	Lisa Adams, Service Manager, Barnardo's			

Planned Items

The Panel's planned items are listed below:

	14 MARCH 2024			
	ltem	Contributor		
1.	LCC Virtual School Report Academic Year 2022-23	Sarah Lane, Virtual School Head		
2.	Children in Care Performance Measures Quarter 3	Tara Jones, Assistant Director – Children's Safeguarding		
3.	Fostering Quarterly Performance Report – Quarter 3	Deborah Crawford, Head of Service - Fostering and Adoption		

	09 MAY 2024			
Item		Contributor		
1.	Voices for Choices (V4C) Update Report	Ben Lilley, Practice Supervisor - Children's Services (Quality and Standards)		
2.	Children in Care Sufficiency Strategy 2023-2027 - Annual Update on Action Plan	Bridie Fletcher, Senior Commissioning Officer – Children's Commissioning Amy Allcock, Commissioning Manager- Commercial		

l	25 JULY 2024			
Item		Contributor		
1.	Election of the Chairman	Democratic Services Officer		
2.	Election of the Vice Chairman	Democratic Services Officer		
3.	Children in Care Performance Measures Quarter 4	Tara Jones, Assistant Director – Children's Safeguarding		

	25 JULY 2024			
Item		Contributor		
4.	Fostering Quarterly Performance Report - Quarter 4	Deborah Crawford, Head of Service - Fostering and Adoption		
5.	Lincolnshire Leaving Care - Six Monthly Update Report by Barnardo's	Lisa Adams, Service Manager, Barnardo's		
6.	Independent Reviewing Service Annual Report	Carolyn Knight, Head of Service - Quality and Standards and Principal Social Worker		
7.	Regulation 44 Independent Visitors Annual Report	Carolyn Knight, Head of Service - Quality and Standards and Principal Social Worker		

	12 SEPTEMBER 2024			
Item		Contributor		
1.	Children in Care Performance Measures Quarter 1	Tara Jones, Assistant Director – Children's Safeguarding		
2.	Fostering Quarterly Performance Report Quarter 1	Deborah Crawford, Head of Service - Fostering and Adoption		
3.	Adoption Annual Report 2023-2024	Sharon Clarke, Interim Team Manager, Adoption		
4.	Adoption Statement of Purpose 2023- 2024	Sharon Clarke, Interim Team Manager, Adoption		
5.	Fostering Annual Report 2023-2024	Emily McAllister, Fostering Team Manager Nicola Brangam, Fostering Team Manager South		
6.	Fostering Statement of Purpose 2023- 2024	Emily McAllister, Fostering Team Manager Nicola Brangam, Fostering Team Manager South		

	14 NOVEMBER 2024			
Item		Contributor		
1.	Independent Reviewing Service Update Report 1 April 2024 - 30 September 2024	Carolyn Knight, Head of Service - Quality and Standards and Principal Social Worker		
2.	Regulation 44 Independent Visitors Report	Carolyn Knight, Head of Service - Quality and Standards and Principal Social Worker		
3.	Fostering Quarterly Performance Report Quarter 2	Deborah Crawford, Head of Service - Fostering and Adoption		

14 NOVEMBER 2024				
Item		Contributor		
4.	Private Fostering Annual Report and	Deborah Crawford, Head of Service -		
	Statement of Purpose	Fostering and Adoption		
5.	Annual Report of the Regional Adoption	John Harris, Head of Regional Adoption		
	Agency	Agency		
6.	Voices for Choices (V4C) Update Report	Ben Lilley, Practice Supervisor - Children's		
		Services (Quality and Standards)		

2. Items to be programmed

Report Title	Est Date
School attendance	TBC 2024
Prevalence of emotional health and our response	TBC 2024
CAMHS Annual Report (Caroline Sanders LPFT)	TBC 2024

3. Conclusion

Members of the Panel are invited to review and comment on the work programme and highlight any additional activity which could be included for consideration in the work programme.

4. Consultation

a) Risks and Impact Analysis

N/A

5. Background Papers

No background papers within Section 100D of the Local Government Act 1972 were used in the preparation of this report.

This report was written by Tracy Johnson, Senior Scrutiny Officer, who can be contacted on 07552 253814 or by e-mail at <u>Tracy.Johnson@lincolnshire.gov.uk</u>.