



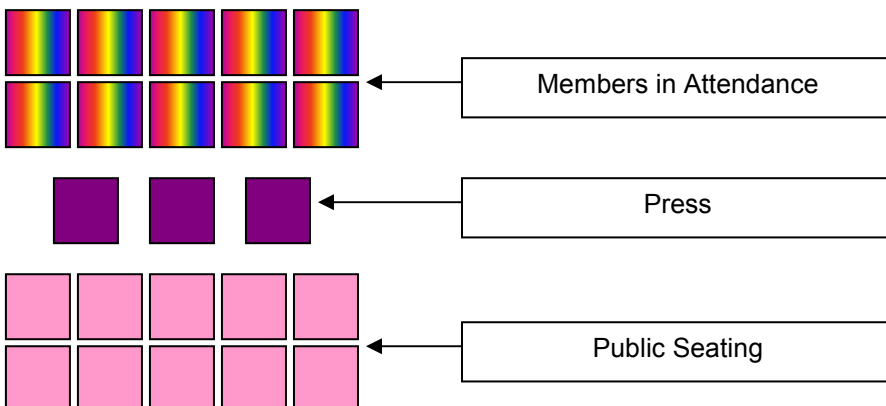
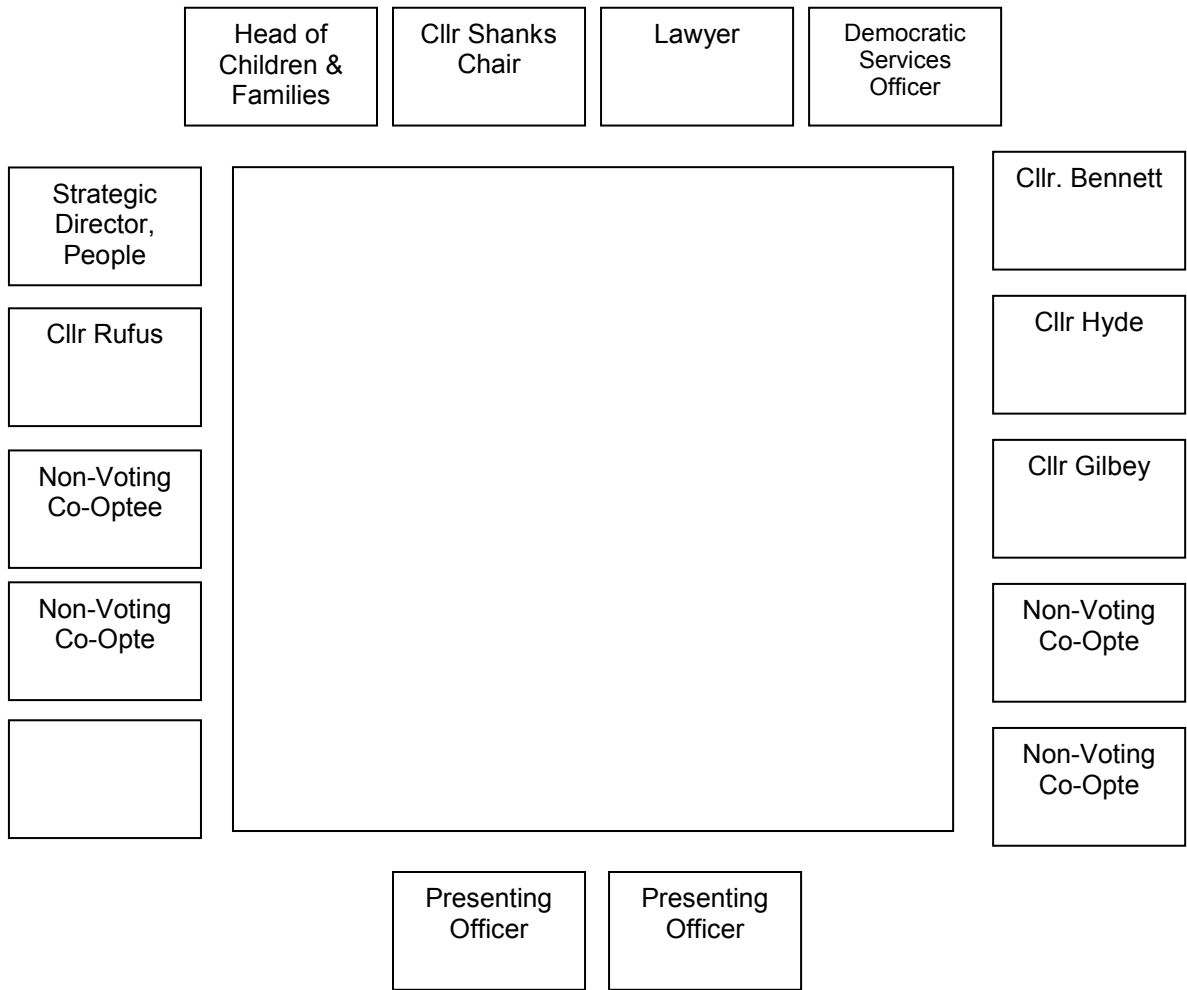
Brighton & Hove
City Council

Corporate Parenting Sub-Committee

Title:	Corporate Parenting Sub-Committee
Date:	4 July 2012
Time:	4.00pm
Venue	Committee Room 1, Hove Town Hall
Members:	Councillors: Shanks (Chair), Rufus (Deputy Chair), Bennett, Gilbey and Hyde
Contact:	Ross Keatley Democratic Services Officer 01273 291064 ross.keatley@brighton-hove.gov.uk

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Democratic Services: Corporate Parenting Sub-Committee



AGENDA

1. PROCEDURAL BUSINESS

(a) **Declaration of Substitutes** - Where Councillors are unable to attend a meeting, a substitute Member from the same Political Group may attend, speak and vote in their place for that meeting.

(b) **Declarations of Interest** – Statements by all Members present of any personal interests in matters on the agenda, outlining the nature of any interest and whether the Members regard the interest as prejudicial under the terms of the Code of Conduct.

(c) **Exclusion of Press and Public** - To consider whether, in view of the nature of the business to be transacted, or the nature of the proceedings, the press and public should be excluded from the meeting when any of the following items are under consideration.

***NOTE:** Any item appearing in Part Two of the Agenda states in its heading the category under which the information disclosed in the report is exempt from disclosure and therefore not available to the public.*

A list and description of the exempt categories is available for public inspection at Brighton and Hove Town Halls.

2. TERMS OF REFERENCE

1 - 2

Attached for noting.

3. APPOINTMENT OF CO-OPTEES

4. CHAIR'S COMMUNICATIONS

5. PUBLIC INVOLVEMENT

To consider the following matters raised by members of the public:

(a) **Petitions:** to receive any petitions presented to the full council or at the meeting itself;

(b) **Written Questions:** to receive any questions submitted by the due date of 12 noon on the 27 June 2012;

(c) **Deputations:** to receive any deputations submitted by the due date of 12 noon on the 27 June 2012.

CORPORATE PARENTING SUB-COMMITTEE

6. MEMBER INVOLVEMENT

To consider the following matters raised by councillors:

- (a) **Petitions:** to receive any petitions submitted to the full Council or at the meeting itself;
- (b) **Written Questions:** to consider any written questions;
- (c) **Letters:** to consider any letters;
- (d) **Notices of Motion:** to consider any Notices of Motion referred from Council or submitted directly to the Committee.

7. INTRODUCTION TO CORPORATE PARENTING 3 - 72

Report of the Strategic Director, People.

Contact Officer: James Dougan *Tel:* 295511
Ward Affected: All Wards

8. CORPORATE PARENTING SUB COMMITTEE WORKPLAN 73 - 94

Report of the Strategic Director, People.

Contact Officer: James Dougan *Tel:* 295511
Ward Affected: All Wards

PART 2 ITEMS

9. PLACEMENT TYPE - WHERE CHILDREN LIVE AND CHILDREN & YOUNG PEOPLE MISSING FROM CARE 95 - 104

Report of the Strategic Director, People

Contact Officer: James Dougan *Tel:* 295511
Ward Affected: All Wards

10. PART 2 PROCEEDINGS

To consider whether the items in Part Two of the agenda and decisions thereon should remain exempt from disclosure to the press and public.

The City Council actively welcomes members of the public and the press to attend its meetings and holds as many of its meetings as possible in public. Provision is also made on the agendas for public questions to committees and details of how questions can be raised can be found on the website and/or on agendas for the meetings.

The closing date for receipt of public questions and deputations for the next meeting is 12 noon on the fifth working day before the meeting.

Agendas and minutes are published on the council's website www.brighton-hove.gov.uk. Agendas are available to view five working days prior to the meeting date.

Meeting papers can be provided, on request, in large print, in Braille, on audio tape or on disc, or translated into any other language as requested.

CORPORATE PARENTING SUB-COMMITTEE

For further details and general enquiries about this meeting contact Ross Keatley, (01273 291064, email ross.keatley@brighton-hove.gov.uk)

Date of Publication - Tuesday, 26 June 2012

CORPORATE PARENTING SUB-COMMITTEE – TERMS OF REFERENCE

Explanatory Note

The Corporate Parenting Sub-Committee has the status of a Sub-Committee of the Policy and Resources Committee. It acts as an advisory committee to the Council, its partners and its Committees on matters related to the Council's looked after children. Its role is to ensure that the Council and its partner agencies have a joint commitment to:-

- (a) Achieving improved outcomes for children in care and care leavers;
- (b) Developing and overseeing implementation of the Corporate Parenting Strategy to drive improved outcomes;
- (c) Providing challenge to ensure that the Council's duties as Corporate Parent are carried out effectively and consistently.

Delegated Functions

1. To assist in the development, operation, monitoring and review of the Council's policies and strategies as they affect children in care and care leavers.
2. To develop, monitor and review a Corporate Parenting Strategy and work plan.
3. To promote a co-ordinated and partnership approach to the delivery of Council services as they affect children in care and care leavers and to challenge services where this is not evidenced or effective.
4. To advise the Council and its Committees on issues relevant to children in care and care leavers and to ensure that policies implemented by the Council which affect these children and young people are effective and appropriate.
5. To review and monitor outcomes for looked after children and care leavers, including data from the Corporate Parenting Report Card and feedback from the Standards & Complaints and Quality Assurance Framework officers in respect of children in care and care leavers.
6. To ensure that clear and accessible information is readily available to children in care and care leavers on the corporate parenting they can expect from the council.
7. To ensure that systems are in place which mean that the views of children and young people are represented in the development of services that affect them.

8. To report to the Council's Policy and Resources Committee and Council on a twice yearly basis.
9. To make recommendations to the relevant Committee where responsibility for a particular function rests with that Committee.
10. To appoint non voting Co-opted Members.
11. To ensure arrangements are made for the training and development of Councillors (and others as appropriate) on the Corporate Parenting role.
12. To receive reports on the discharge of the Council's functions regarding the provision of accommodation for looked after children and care leavers, and to make recommendations to the appropriate body of the Council.

Subject:	Introduction to Corporate Parenting		
Date of Meeting:	4th July 2012		
Report of:	Strategic Director, People		
Contact Officer:	Name:	James Dougan	Tel: 29-5511
	Email:	james.dougan@brighton-hove.gov.uk	
Key Decision:	Yes	Forward Plan No:	
Ward(s) affected:	All		

FOR GENERAL RELEASE

1. SUMMARY AND POLICY CONTEXT

The concept of corporate parenting was introduced with the launch of the Quality Protects Programme in 1998. The principle is that the local authority is the corporate parent for children in care and thus has the legal and moral duty to provide the kind of support that good parents would provide their own children. This includes enhancing the quality of life as well as simply keeping them safe. Although improvements in corporate parenting are children's services led, the concept applies to all functions of the local authority, as well as its city partners.

As an elected member you are responsible for making sure that the Council meets all of its statutory responsibilities. You have a right and duty to hold officers across the council functions to account, to challenge your local authority and demonstrate leadership within the council and within the community of Brighton & Hove.

1.1 WHAT IS A CORPORATE PARENT?

Corporate parenting means the formal and informal partnerships between all aspects of Brighton & Hove's in house services as well as the formal and informal partnerships with local agencies, both private and voluntary.

Corporate parenting operates at the strategic, operational and individual level. The three key elements are:

1. the statutory duty on all parts of a local authority to co-operate in promoting the welfare of children and young people who are Looked After by them, and a duty on other partners to co-operate with councils in fulfilling that duty.
2. co-ordinating the activities of the many different professionals and carers who are involved in a child or young person's life and taking a strategic, child-centred approach to service delivery.
3. shifting the emphasis from 'corporate' to 'parenting' as defined by Sonia Jackson in her seminal piece of work on Corporate Parenting 2003 as *'the performance of*

all actions necessary to promote and support the physical, emotional, social and cognitive development of a child from infancy to adulthood'. The local authority delegates this function to those providing day-to-day care for the child or young person.

Corporate parenting is not only a responsibility but a real opportunity to improve the futures of Looked After children and young people; recognising that all parts of the system have a contribution to make is critical to success. The concept of corporate parenting is, as we know inherently paradoxical; good parenting demands continuity and organisations by their nature are continuously changing. Staff move on, elected members change, structures change, procedures change. One challenge of being a good corporate parent is to manage these changes while giving each individual child or young person a sense of stability.

Being a good corporate parent means we should:

- accept responsibility for the council's Looked After children and young people;
- make their needs a priority; and
- seek for them the same outcomes any good parent would want for their own children.

Good parents make sure their children are well looked after, make progress at school, are healthy, have clear boundaries for their own and others' safety and wellbeing and enjoy activities and interests. As they grow older, they encourage them to become independent, and support them if they need it, to become part of the local community and access further or higher education, training and employment.

Corporate parents must do the same, albeit that many more individual people will be involved in the corporate family than some ordinary families. Every family is different and lifestyles across Brighton & Hove are becoming more and more diverse. Corporate parenting needs to be "the same but different" across different communities, while delivering the essential components that children need throughout childhood and young adulthood.

The Brighton & Hove Corporate Parenting Strategy (**Appendix 1**) meets a statutory duty placed on all parts of a local authority and detailed in the Children & Young Persons Act 2008 to co-operate in promoting the welfare of children and young people in care and care leavers and a duty on all partners to co-operate in fulfilling that duty.

This Strategy was agreed by the Children & Young People's Trust Partnership Board in November 2010 and by the Children & Young People Overview & Scrutiny Committee in March 2011.

Implications of the Corporate Parenting Strategy:

1. Corporate & Legal: Describes the collective responsibilities members and officers of BHCC and its partner organisations have towards children and young people in local authority care. The commissioning and delivery of services is underpinned by the Children Act 2004, the Care Matters Implementation Plan 2008 and the Children and Young Person Act 2008.

2. Equalities: It is critical to the implementation of BHCC's Equalities Policy and to the achievement of the priorities set out in the Children & Young People's Plan 2009-12
3. Crime & Disorder: It aims to support young people to engage in law abiding and socially acceptable activity and behaviour
4. Risk and Opportunity Management: It will assist partners of the Children, Youth & Families Service to meet its duties to children and young people in care and care leavers including the management of significant risks, including risk to self, others, reputation and financial risk.

1.2 WHAT HAPPENS WHEN A CHILD OR YOUNG PERSON STOPS BEING LOOKED AFTER?

Some children or young people will stop being Looked After to return successfully to their families, and some will be Looked After at various times throughout their childhood as their families struggle to cope in particular situations. If a young person is still Looked After at school leaving age, the council will put in place throughcare and aftercare services to support them into independent living. This transition to independence will be at a younger age than most young people leave the family home, and they will need significant support to help them to find somewhere suitable to live, take up further or higher education, training or work, and even to cope with the every day aspects of living independently.

Councils have a duty to provide advice and support to their young people up to age 21, and a power to do so up to the age of 25 if in full time education. They are encouraged to make sure that young people stay Looked After for as long as possible, preferably until they reach 18 if that is in the best interests of the young person. They should make sure that when young people do leave care they are equipped with the necessary life skills, and receive adequate financial and other support at what is a difficult time for all young people. Getting this package of support right is crucial to improving outcomes for care leavers to make sure they have the stability and support they require to fulfil their potential educationally and to develop the life skills to enable them to make a successful transition to independent living.

Research from Professor Mike Stein and his team from York University undertaken between 1984 – 2009 shows that from poor starting points, children and young people in care fall into 3 distinct categories:

- The 'Movers' – these are the young people who will successfully move on from a stable care experience with relatively low level but consistent support
- The 'Survivors' - these are the young people who will do well in adult life with skilled, intensive support
- The 'Strugglers'- these are the vulnerable minority of young people who will continue to need targeted support well into adulthood

It is useful to be mindful of these distinct groups when striving for improved outcomes for these children and young people

Corporate families are in a unique position to be able to support young people as they leave home in that they have their own housing, economic development, community

learning and development, welfare rights and health all of which will be helpful to ensuring young care leavers are not left to fend for themselves. In addition, councils and their community partners are often the largest employers in their local areas and are in a good position to be able to offer work experience, apprenticeships and employment to their young people.

1.3 WHAT ARE WE TRYING TO ACHIEVE?

We want all our children and young people to have successful, productive lives and we want to provide the services and supports that will help them succeed, particularly when they have problems to overcome.

It is suggested that as corporate parents we have an overarching outcome that we are collectively aiming for:

Children and young people who have experienced the care system will be successful learners, confident individuals, responsible citizens and effective contributors whose life outcomes mirror those of their peers.

The specific outcome relating to the function of corporate parenting is:

The Council and their city partners will fully understand and accept their responsibilities as corporate parents and governance arrangements will be in place to make sure that work within councils and their partner organisations is child-centred and focused on achieving the overarching outcome.

The ultimate aim of Brighton & Hove City Council's Corporate Parenting Strategy is that there is no discernible difference between the outcomes of children and young people who have been Looked After and their peers who have not. The aim of this guidance is to support councils and their city partners in closing the gap which has existed for decades between people who have experienced the care system and people who have not. We must improve educational achievement and attainment, achieving sustained positive post-school destinations, reduce Looked After children and young people and care leavers' involvement in the criminal justice system, their levels of homelessness, and help them to live full and healthy lives.

Corporate Parenting Scorecard – how do we know what we are achieving? (See Appendix 2)

The purpose of this document is to enable the monitoring of key aspects of provision affecting the life chances of children looked after. The document enables elected members to hold to account Officers for performance in key areas and enables trends to be identified and for data to be benchmarked against other comparator Authorities'.

The Summary Report Card is not just a technical document to be used strategically. It is designed so as to be accessible to all corporate parents and any professionals from other organisations and services that have, or potentially have a role in supporting our children and young people and promoting their life chances. Everyone who receives this report will have the opportunity to feed back on how to improve outcomes for our children.

This report produced by the Children's Services Performance Team provides regularly updated information on key activities and performance data about Looked After children and young people and care leavers. This report card:

- informs members and officers on trends, outcomes and achievements for Looked After children and young people
- highlights how Brighton & Hove is benchmarked against its statistical neighbour local authorities (Bath & NE Somerset, Bournemouth, Bristol, Plymouth, Portsmouth, Reading, Sheffield, Southampton, Southend and York) and with some data, against all English local authorities
- and by providing a narrative against each data set will evidence good outcomes and more importantly, identify areas where performance and outcomes must be improved

This data details the:

- demography of Looked After children and young people, including numbers, age, gender, ethnicity, ages they started and ceased to be Looked After, care applications to the family courts, their legal status and reasons why they are being Looked After
- the placement type and stability of Looked After children and young people, numbers planned and placed for adoption
- physical, emotional and behavioural health of Looked After children and young people,
- educational outcomes (at Key Stages 2 & 4, GCSE attainment) and school exclusions
- care planning and case reviewing
- accommodation, education and employment outcomes for young people who have left care

1.4 THE KEY QUESTION FOR YOU AS ELECTED MEMBERS IS "IS THIS GOOD ENOUGH FOR MY CHILD?"

You will want to:

- Know how many children and young people are Looked After by your council, why they are Looked After, that they safe at all times and how well they are doing.
- Make sure that your schools are inclusive, aspirational for all children and young people including those who are Looked After, and have in place strategies to ensure that Looked After children and young people are not disproportionately represented in poor attendance, exclusions, bullying and underachievement.
- Actively promote and support high standards of care for children and young people, and care leavers, taking account of their cultural needs.
- Actively seek high quality outcomes for your Looked After children and young people and care leavers and take responsibility for those outcomes.
- Remove barriers, where possible, which prevent your Looked After children and young people and care leavers achieving the desired outcomes.
- Challenge professionals to work in new ways which always promote inclusion.
- Make sure that the physical, mental and emotional well-being of your Looked After Children and young people and care leavers are being addressed at the earliest opportunity.

- Make sure that your Looked After children and young people are given the same opportunities that any good parents would provide for their child and that you have the same expectations and aspirations as you would for your own children.
- Champion the needs of, and be aspirational for, your Looked After children and young people and care leavers.
- Know who your care leavers are and make sure that there is support available to them.
- Be certain that the services your council provides or commissions for your Looked After children and young people and care leavers are meeting their needs to the highest possible standard, including when the child is placed outside your own services or geographical area.
- Make sure that you have effective scrutiny mechanisms in place to hold officers to account for local outcomes.
- Consider making a reference to improving outcomes for Looked After children and young people and care leavers in your Single Outcome Agreement, or at least make sure that their needs are recognised in your broader local outcomes and indicators and performance management system.
- Work with local health board members and other key partners to make sure that services are scrutinised across the community planning partnerships and this includes monitoring, integrated working, setting shared goals and values and continuous improvement.
- Make sure that all services in your authority are able to protect, support and encourage Looked After children and young people and care leavers, individually and collectively.
- Promote a positive view of Looked After children and young people and care leavers, and help to raise public awareness about the care system.
- Recognise and show pride in children or young person's achievements, build their confidence and defend them against unfair criticism.
- Make sure that the views of children and young people and care leavers are heard and listened to, and when decisions are being made that their views are being taken into account.

1.5 HOW WILL I KNOW AS AN ELECTED MEMBER THAT I'VE MADE A DIFFERENCE?

- When your Looked After children or young people or care leavers attend school regularly, pass exams, find and sustain jobs or a places at college or university on leaving school, find somewhere suitable to live and manage to sustain it.
- When families have been supported to enable them to look after their own children, where appropriate, and are able to enhance their parenting role.
- When your staff have job satisfaction, feel confident and competent in what they do, and your carers feel supported and valued.
- When your internal scrutiny and self-evaluation processes demonstrate that outcomes for Looked After children and young people and care leavers are improving, when your external inspection reports highlight good practice in your authority.
- When there is no discernible difference between the educational, health, employment and other life outcomes of Looked After children and young people, and care leavers, and those of their peers.

There is no single or simple answer to improving outcomes for all children and young people in care and care leavers and there is a need for thorough knowledge of the

characteristics of the care population and a range of appropriate strategies. Our aim must be to ensure improved outcomes for children and young people in care and care leavers become fully and permanently embedded in the culture of children's and all council services. There are few other specific issues of higher priority for the local authority than caring for the children and young people for which Brighton & Hove has a degree of parental responsibility.

2. RECOMMENDATIONS:

2.1 The specific outcome relating to children and young people in care is:

Children and young people who have experienced the care system will be successful learners, confident individuals, responsible citizens and effective contributors whose life outcomes mirror those of their peers.

2.2 The specific outcome relating to the function of corporate parenting is:

The Council and their city partners will fully understand and accept their responsibilities as corporate parents and governance arrangements will be in place to make sure that work within councils and their partner organisations is child-centred and focused on achieving the overarching outcome.

4. COMMUNITY ENGAGEMENT AND CONSULTATION

4.1

5. FINANCIAL & OTHER IMPLICATIONS:

Financial Implications:

5.1 There are no financial implications as a direct result of the recommendations of this report. However, the services highlighted within the report represent a significant level of expenditure within children's services and all new initiatives need to be fully costed and evaluated within the value for money context.

Finance Officer Consulted: Name David Ellis Date: 22.06.12

Legal Implications:

5.2 The term "corporate parent" is not one which has a formal legal definition. However, the term recognises that the local authority must have the same interest in the progress and attainments of looked after children as a reasonable parent would have for their own children. The responsibilities of being a corporate parent are relevant to all local authority staff. The Council has a legal duty to act as a 'corporate parent' for each and every child and young person that

is looked after, whether this is as a result of a voluntary agreement with their parents, or under a care order agreed by the court. In this respect the council is subject to statutory guidance, the requirements of the Leaving Care Act, and the duties to promote the well being of children under the Children Act 2004. Promoting the wellbeing, achievement and happiness of looked-after children and care leavers is a responsibility that must be shared and understood by all local services. Ultimately if a child receives a harmful experience in care they have the right to sue the authority for negligence. Under statutory guidance the Director of Children's Services and their senior staff, with the lead member for children's services, who are accountable for ensuring that looked after children are adequately safeguarded and that they are able to access effective services.

Lawyer Consulted: *Name* *Natasha Watson* *Date:* *22.06.12*

Equalities Implications:

5.3

Sustainability Implications:

5.4

Crime & Disorder Implications:

5.5

Risk and Opportunity Management Implications:

5.6

Public Health Implications:

5.7

Corporate / Citywide Implications:

5.8

6. EVALUATION OF ANY ALTERNATIVE OPTION(S):

6.1

7. REASONS FOR REPORT RECOMMENDATIONS

7.1

SUPPORTING DOCUMENTATION

Appendices:

1. Brighton & Hove Corporate Parenting Strategy
2. Corporate Parenting Summary Report
3. The care system – consumer's views

Documents in Members' Rooms

1.

Background Documents

1.

BRIGHTON & HOVE CITY COUNCIL

CORPORATE PARENTING POLICY and STRATEGY

1. Introduction

- 1.1 Corporate Parenting describes the collective responsibilities that members and officers of Brighton & Hove City Council and its partner organisations have towards children and young people in the care of the Local Authority. These include children accommodated by voluntary agreement with their parent/s, those on statutory orders, those in shared care arrangements, those remanded into care and unaccompanied asylum seeking children. These duties extend to those young people who have left care at 18 years up to the age of 21 (or 24 if remaining in higher education).
- 1.2 The children and young people for whom we are responsible as corporate parents are talented, resourceful, articulate, have huge potential and many will lead successful adult lives. However, as a result of their early life experiences, they are often less successful in attaining their full potential and this contributes to them being over-represented amongst:

- Adults with no formal educational qualifications
- People who are homeless
- The prison population
- Unemployed people
- Adults using mental health services
- Teenage parents
- Those involved in anti-social behaviour
- Those who are not, on leaving school engaged in employment, education or training.

Research from Professor Mike Stein and his team from York University undertaken between 1984 – 2009 shows that from poor starting points, children and young people in care fall into three distinct categories:

- The ‘Movers’ – these are the young people who will successfully move on from a stable care experience with relatively low level but consistent support
- The ‘Survivors’ - these are the young people who will do well in adult life with skilled, intensive support
- The ‘Strugglers’- these are the vulnerable minority of young people who will continue to need targeted support well into adulthood

It is useful to be mindful of these three distinct groups when commissioning and monitoring services to children in care and care leavers.

- 1.3 Effective corporate parenting needs a commitment from all council employees

1.

and elected members, in a council-wide approach. Corporate parenting involves the whole council and its partners acting as a good parent, committing resources and working together to improve the lives of all children and young people in care and care leavers. It is about prioritising their needs, caring about what they want to and supporting them to make the most of their lives.

As corporate parents, members, officers and partners need to ask two questions:

“If this was my child, would this be good enough for them?”

“If I was that child or young person, would this have been good enough for me?”

(DfES 2003 “If it were my child .A councillor’s guide to being a good corporate parent.”)

- 1.4 The purpose of this strategy is to outline a Council-wide vision of our role as corporate parents and to ensure that we are all working together to achieve common goals and ambitions for our children and young people in care and care leavers.

The Children and Families Delivery Unit is collectively accountable for Corporate Parenting duties but responsibility extends beyond it to include:

- All Brighton & Hove City Council services such as Housing, Culture & Enterprise and Environment and partner agencies
- The Surrey and Sussex Strategic Health Authority and Brighton and Hove City Primary Care Trust who should actively promote the health of Children in Care
- The Community Safety and Crime and Disorder Reduction Partnerships will need to consider whether Children in Care are being supported in avoiding offending behaviour
- Sussex Police
- Sussex Probation Service
- Governing bodies of maintained schools and Further Education colleges
- Voluntary, community and independent organisations

- 1.5 The Corporate Parenting Strategy builds on earlier work and intends to re-invigorate the way Brighton & Hove City Council meets the needs of its children and young people in care and care leavers. The commissioning and delivery of services for these groups of children and young people is underpinned by the Every Child Matters initiative and Children Act 2004 and more recently by the Care Matters Implementation plan 2008 and the Children and Young Person Act 2008.

- 1.6 Responsibility and accountability for the well-being and future prospects for children and young people in Brighton & Hove’s care and its care leavers rests with their corporate parents. A good corporate parent must offer everything that a good parent would offer and improving the role of the corporate parent is key to improving their children’s outcomes. This

improvement relies on addressing both the difficulties which children and young people in care experience and the challenges of parenting within a complex system of different services. Equally it is important that the children and young people themselves have the opportunity to shape and influence the parenting they receive.

- 1.7 The concept of corporate parenting is inherently paradoxical. Good parenting demands continuity and organisations by their nature are continuously changing. Officers and elected members move on, and structures, procedures and partnerships are modified, refined and transformed. One challenge of being a good corporate parent is to manage these changes while giving each individual child and young person a sense of stability.

2. Our Vision, Key Principles and Underlying Values

- 2.1 The Brighton & Hove vision will mirror that of “Care Matters: Time to deliver for children in care” DCSF 2008:

“Our aspirations for children being cared for reflect those aspirations we would have for them as if they were our own. We know that children in care are often in much greater need than other children and we must ensure they obtain all the help they require. We aim to create a home and community environment that provides every child with a safe, happy, healthy, secure and loving childhood, nurturing their aspirations and enabling them to fulfil their full potential”

- 2.2 Our vision and priorities for children and young people in care and care leavers are based around the five national outcomes of Every Child Matters and drive our Corporate Parenting Strategy. These five outcomes are universal ambitions for every child and young person whatever their background or circumstances. They build upon the broad vision detailed in the Children & Young People’s Plan 2009-12 that has been agreed with partners and with children and young people themselves through their consultative forums. This vision is that:

“Brighton & Hove should be the best place in the country for children and young people to grow up. We want to ensure all children and young people have the best possible start in life, so that everyone has the opportunity to fulfil their potential, what ever that may be”

- 2.3 “A key commitment of Care Matters was to put the voice of the child in care at the heart of the care system. All parents take children’s wishes and feelings into account when making day to day decisions about their lives and corporate parents need to do so too. Research also shows that when children are involved in the development and operation of services, provision is more likely to be what children want and need, leading to more placement stability and better outcomes for children”
Care Matters Ministerial Stocktake Report 2009

3.

2.4 The United Nations Convention on the Rights of the Child became international law in 1990. It provides an internationally agreed framework of minimum standards necessary for the well being of all children and young people. These principles need to apply to children in care and care leavers but will also need to be championed by their Corporate Parent.

3. **Aims and Objectives of the Strategy**

3.1 Corporate Parenting operates at strategic, operational and individual levels and the 3 key elements are:

- A statutory duty detailed in the Children and Young Persons Act 2008 on all parts of a local authority to co-operate in promoting the welfare of looked after children and young people and a duty on other partners and agencies to co-operate in fulfilling that duty
- Co-ordinating the activities of the many different professionals and carers who are involved in a child or young person's life and taking a strategic, child-centred approach to the delivery of services
- Shifting the emphasis from 'corporate' to 'parenting' which means doing what a good parent would do to promote and support the physical, emotional, social and cognitive development of a child from infancy to adulthood

3.2 The specific objective of this Strategy is to ensure the Corporate Parenting responsibilities for all elected members and council employees are clearly outlined in order that:

- Elected members have a clear understanding and awareness of the needs of Brighton & Hove's Children in Care and care leavers and ensure their responsibilities as corporate parents are reflected in all aspects of the Council's work;
- All services improve their ability to deliver to the Corporate Parenting agenda, and have mechanisms in place to continually monitor and review the means by which their services contribute to positive outcomes for Children in Care and care leavers.
- The corporate parenting commitment leads to measurable improvement in the life chances of Children in Care and care leavers, enabling them to succeed in line with their peers.
- Communication between elected members and Children in Care and care leavers enables participation and inclusion, ensuring children and young people have a say in how decisions are made about services affecting them and are able to influence those decisions.
- Partnership working and joint planning and commissioning is promoted as a pre-requisite to delivering effective services to Children in Care and care leavers.
- Effective monitoring and accountability of corporate parenting duties is in place.

4.

3.3 Responsibilities as corporate parents require everyone working with or on behalf of our children and young people in care and care leavers to ensure that the five Every Child Matters outcomes are addressed either directly and indirectly.

3.3.1 **Being Healthy**

While promoting physical and sexual health and emotional well-being are obvious priorities, preventative strategies including education to encourage healthy lifestyle choices and leisure interests are key elements of our work. Children and young people in care may have additional health needs caused by earlier abuse or neglect and these must be taken into account under the key aim of ensuring their life chances are improved by promoting their of health and well being.

To ensure the life chances of children and young people in care and care leavers are improved by promoting of health and well being, corporate parents will:

- Promote their health and well being and leisure activities
- Ensure every child and young person is registered with a GP and dentist and optician (if appropriate)
- Monitor and challenge to improve performance in relation to health and well being eg Statutory Health Assessments, emotional and behavioural well being, Sex and Relationship Education
- Ensure a dedicated access pathway for mental health, substance misuse and teenage parent services
- Advocate across health agencies on the needs of children and young people in care and care leavers and ensure all health agencies and partners understand and deliver services promptly and effectively
- Encourage and support all children and young people to access leisure, play, sports, educational and cultural activities

3.3.2 **Staying Safe**

Most children and young people who come into care do so as a result of not being safe from physical and sexual harm and neglect while living at home. Robust arrangements need to be in place therefore to ensure that they live in safe, secure and nurturing placements that provide continuity and stability. As they move towards adulthood we must ensure that they have access to safe, secure and affordable permanent accommodation.

To ensure the life chances of children and young people in care and care leavers are improved by ensuring they live in safe, stable homes that provide stability, corporate parents will:

- Ensure a Care Plan is in place for every child and young person that is regularly reviewed by their Independent Reviewing Officer

- Monitor performance on placement stability and distance placed from home
- Monitor the quality of care of in-house foster care and agency foster and residential homes providers and how they meet diversity needs
- Ensure that 'unregulated' placements are governed by robust service level agreements
- Ensure robust arrangements are in place for children and young people who are missing from care
- Ensure formal arrangements are in place to meet the housing and support needs of care leavers

3.3.3 **Enjoying and Achieving**

The main focus is on improving the educational attainment of children and young people in care. This is the single most important contribution those involved in corporate parenting can make because it is about investing in their future. It must be acknowledged that children and young people in care have significantly poorer educational outcomes than their peers. However, we must move away from the assumption that this is an inevitable consequence of their often disadvantaged and disadvantaged backgrounds. What it does mean is that we need to invest in specific and targeted additional support to improve these outcomes.

To enable children and young people in care and care leavers to access and achieve educational opportunities, corporate parents will:

- Monitor performance of educational attainment at Key Stages 2, 4 and 5 to the completion of university education and completion of Personal Education Plans
- Monitor School Attendance, Exclusions (fixed term and permanent) Special Educational Needs and admissions
- Ensure that Designated Teachers are established in all schools
- Ensure pathways are in place to key initiatives such as early years and extended services, out of school activities, Integrated Youth Support and 14-19 providers
- Ensure appropriate support is in place to ensure smooth transition to Further and Higher Education

3.3.4 **Making a Positive Contribution**

Participation and engagement of children and young people in care is key to the success of any corporate parenting strategy. This outcome area is about more than just involving them in the development of services. We must support them to: engage in law abiding and socially acceptable activity and

behaviour; develop positive relationships by choosing not to bully or discriminate; develop self-confidence and learning to deal successfully with significant life changes and challenges.

The key aim is to ensure that all children and young people in care have the opportunity to be listened to and heard, are involved and participate in the planning and development of services they receive.

To ensure all children and young people in care and care leavers have the opportunity to be listened to and heard and are involved and participate in the planning and development of services they receive, corporate parents will:

- Monitor the participation of children and young people in their statutory reviews
- Encourage the development of the Listen Up Care Council and 16 Plus Advisory Board
- Ensure that the views and opinions of children and young people are gathered and that it can be evidenced that these have an impact on and influence the development of service delivery
- Ensure that children and young people know how to make a complaint and are able to easily access an Advocate
- Ensure that the promises in the Pledge are delivered

3.3.5 Achieving Economic Wellbeing

Children and young people in care find it more difficult than their peers to attain a good standard of living when they become adult and independent. We must promote and provide work experience, taster days, training and employment opportunities with all employers and employer organisations in the city and to continue to ensure that these care leavers are fully supported to move positively into adulthood.

To ensure all children and young people in care and care leavers receive appropriate support to be able to move positively into adulthood, corporate parents will:

- Monitor the performance of education, employment and training status and suitability of housing of 19 year old care leavers
- Develop partnerships to improve access to and support in Further and Higher Education
- Advocate for and provide work experience and employment opportunities within Brighton & Hove City Council and its partner agencies
- Promote the needs of care leavers for work experience, training and job opportunities with employers and employer organisations in the city
- Ensure that care leavers have access to safe, secure and affordable accommodation

7.

4. **Getting it Right – How we will take the Strategy forward**

4.1 Responsibility for ensuring that the Corporate Parenting Strategy will be implemented and be effective in its aims and objectives has six key elements:

The role of the Cabinet Member for Children and Young People and the Head of Children and Families who will provide leadership across the authority in safeguarding and in monitoring the welfare of children in care and care leavers

The role of the Corporate Parenting Panel in terms of accountability and governance. The Panel consists of the Cabinet Member for Children and Young People, elected members from the Conservative, Labour and Green groups, the Head of Children and Families, children and young people representatives, Service Manager, Children in Care & Young People's Services, representatives of Brighton & Hove Foster Carers Association, and Officers from Health, Housing, Environment, Culture on a need to attend basis.

The Panel acts as the advisory consultation body to the council to enable the effective discharge of the duty of corporate parent. The role of the Panel is to monitor and review services and establish the objectives and priorities for looked after children by council departments and partner agencies. The central role is to achieve continuing improvements for looked after children and care leavers. The Panel will oversee the implementation of the strategy.

Children & Young People's Participation ie the Listen Up Care Council for children in care up to age of 16 and the 16 Plus Advisory Board for young people in care and care leavers aged 16-21 years. These groups will develop mechanisms by which views and opinions from a wide range of children and young people can be gathered. The Corporate Parenting Panel has agreed that elected members would meet with these participation groups at regular intervals throughout the year.

The Brighton & Hove Pledge This set of promises that set out the support and care we will provide to children and young people in care has been hand delivered to all Brighton & Hove children in care and care leavers with an accompanying letter from 'Clive' and 'Stacey' from the participation groups. It has also been distributed to all Brighton & Hove foster carers, independent fostering agencies and residential children's homes providers, partner statutory agencies and voluntary sector partners. Social work staff have also been briefed on its purpose and how we must be held accountable to the promises we have given. The Pledge was communicated to a wider audience in Brighton & Hove as it was featured in a special Corporate Parenting edition of 'Children First' magazine in July 2010.

The Corporate Parenting Working Group and Report Card The working group, chaired by the Service Manager Children in Care & Young People's Services consists of senior managers from Children & Families operational teams, Fostering & Adoption Team, Agency Placements Team, Youth Offending Service, Virtual School for Children in Care, Nurse Consultant for Children in Care, Independent Reviewing Officer and Performance Management Team representatives.

In developing the new strategy a comprehensive audit and self assessment has been undertaken using the Ofsted Framework for Inspection. This has been benchmarked against inspections that have taken place in other local authorities under the new framework and has highlighted very good and outstanding areas of practice as well as identifying areas for development and will help shape and strengthen the next phase of the strategy.

The group has also examined management information from the Performance Team which evidences how Brighton & Hove is performing against its local authority statistical neighbours as well as all authorities in England on the National Indicators for outcomes for children in care and care leavers., Actions to improve performance, summaries of initiatives eg participation.

The Report Card is not intended just to be a technical document to be used strategically. It is designed so as to be accessible to all corporate parents and any professionals from other organisations and services that have, or potentially have a role in supporting our children and promoting their life chances. Everyone who receives this report will have the opportunity to feed back on how to improve outcomes for our children.

Council-wide responsibilities. The offers made by the corporate parenting champions of Brighton & Hove Council will be followed up by the designated leads as detailed.

4.2 **Shared Responsibilities**

Responsibilities for ensuring improved outcomes for children in care and care leavers are wide ranging amongst elected members, officers and carers.

Elected members council-wide have to ensure that public services used or needed by children in care are of a high quality, integrated and take account of their needs. They will ensure that they are fully informed of the issues facing children in care by understanding the characteristics of children in care and by knowing how well services are performing in meeting their assessed needs. This requires an awareness and understanding of the:

- Care and placement arrangements
- Child protection and safety policies and procedures
- Education performance and achievements
- Responsiveness of health services
- Preparation for leaving care arrangements and housing needs

- Arrangements to prevent children in care from getting into trouble.

Elected members will be supported in meeting their responsibilities by Brighton & Hove officers. They will provide leadership that will encourage and support partnership and joined-up working. This will ensure that funding, commissioning and priority setting deliver the best combination of services for children and young people in care and care leavers.

Foster Carers will be assessed, approved, supervised and supported in the following:

- Providing a safe and comfortable home for children and young people in their care
- Giving children and young people time and attention and clear boundaries
- Providing encouragement and motivation to help the child or young person meet their potential
- Working positively with birth parents and other family members.
- Working as part of a team with others who share responsibility for the child or young person's care, welfare and development
- Providing care that support and promotes the child or young person's culture, race, religion, language, disability and sexual orientation.

Social Workers and other social work staff have responsibilities in the following areas:

- Ensuring that the child and young person's needs are properly assessed and that these are properly represented in their Care or Pathway Plans.
- Having the key role in setting and establishing plans for children and young people in care and care leavers. First consideration will be given to returning the child or young person to their parent's care where this is safe to do so, or other family members. Where this is not achievable efforts will be made to secure the child's placement within an alternative family setting such as adoption or foster care. Where a child or young person remains in care, plans will also address leaving care arrangements.
- In care planning social work staff will listen to the views and wishes of the child or young person and those of their family members. The views of others engaged in providing services to children in care will also be sought.
- Ensuring the child or young person is healthy and their health needs are appropriately assessed and met.
- Ensuring the child or young person is safely and securely accommodated within family situations or in other appropriate caring environments

- Ensure they have access to and are supported in a full range of educational services, whether this is in schools, colleges or other specialist alternative provision
- Ensure they have access to leisure and sporting facilities which enable their interests, skills confidence and self esteem to develop.
- Ensure that they make a smooth and successful transition from living in care to independent adulthood.

The Virtual School for Children in Care The Virtual School Headteacher in Brighton & Hove is responsible for developing and establishing a “Virtual School”, providing strategic direction and securing successful educational outcomes for all children and young people in care. The headteacher will lead and manage the work of the members of the former Children in Care Education Team consisting of Education Support Workers, an Information and Support Officer, an Educational Psychologist and Education Welfare Assistant.

The Virtual School will:

- Support children and young people in care in school Years 1-11 which will include working with Carers, Social Workers, Schools, SEN Team, Children in Care Contracts, other Council teams and external agencies
- Facilitate and monitor Personal Education Plan (PEP) meetings
- monitor attendance
- commission home tuition
- provide transitional support over school summer holidays for those children moving from primary to secondary school
- provide training for Carers and for Designated Teachers
- and above all, improve the attainment of children and young people in care.

Teachers and Education Staff All staff working in education, whether based in schools or local authority services have responsibilities towards looked after children and young people in care. These responsibilities are clearly defined within ‘The Education of Young People in Public Care (DoH/DfES, 2000) and Statutory Guidance on the Duty on Local Authorities to Promote the Education of Looked After Children under Section 52 of the Children Act 2004’ (DfES 2005). These responsibilities cover the following range of activities:

- Admissions to schools
- School transport
- Special Educational Needs and Inclusion
- School Improvement
- School Exclusions
- Education Welfare
- Educational Psychology

- Educational Support to Schools

The statutory duty does not directly apply to schools and their staff. However, there is an expectation, clearly stated within the duty, that schools and their staff will ‘take a proactive approach to co-operating with and supporting local authorities in discharging this duty’ (DfES 2005). All Brighton & Hove schools have an allocated Designated Teacher for Children in Care and a Headteacher, Virtual School for Children in Care is now in post.

Health Sector Managers and Clinicians

The Department of Health in ‘Promoting the Health of Looked After Children’ (2002) sets out the particular responsibilities health workers have towards looked after children and young people in care.

Chief Executives of Primary Care Trusts (PCT’s) are charged with ensuring that health sector children’s services are planned, commissioned and delivered in collaboration with other partner agencies, taking account of the particular health needs of children and young people in care and that priority is given to them.

5. Conclusion

There is no single or simple answer to improving outcomes for all children and young people in care and care leavers and there is a need for thorough knowledge of the characteristics of the care population and a range of appropriate strategies. The aim should be to ensure concern for children and young people in care and care leavers becomes fully and permanently embedded in the culture of children’s services. There are few other specific issues of higher priority for the local authority than caring for the children and young people for which Brighton & Hove has a degree of parental responsibility.

6. Evaluation and Review of the Strategy

This strategy will be evaluated and reviewed by the Corporate Parenting Panel and Corporate Parenting Working Group with the participation of children and young people in care and care leavers. The strategy will be monitored over the next 12 months and a progress report will be made to the Corporate Parenting Panel.

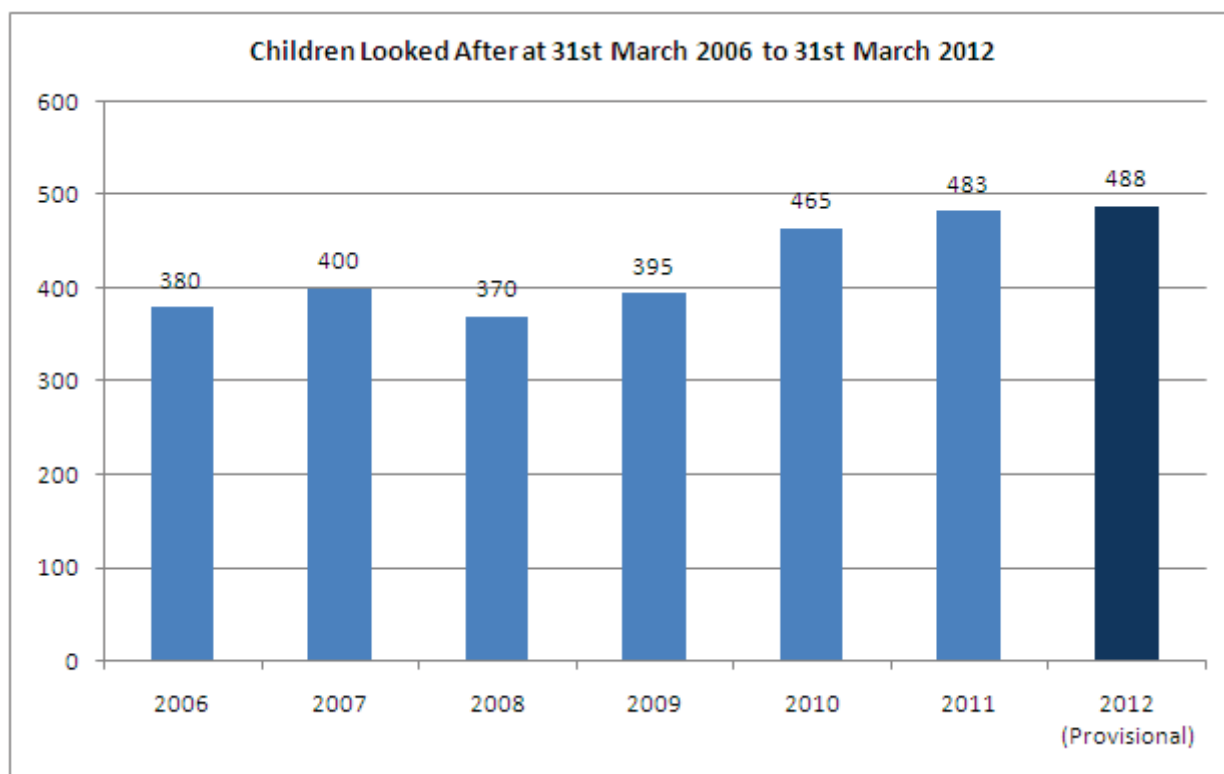
Corporate Parenting Summary Report

June 2012 – Internal Version

Please note that this report contains individual child level data and is for internal use only.

Looked After Children (Excluding Respite) as at 31st March 2012

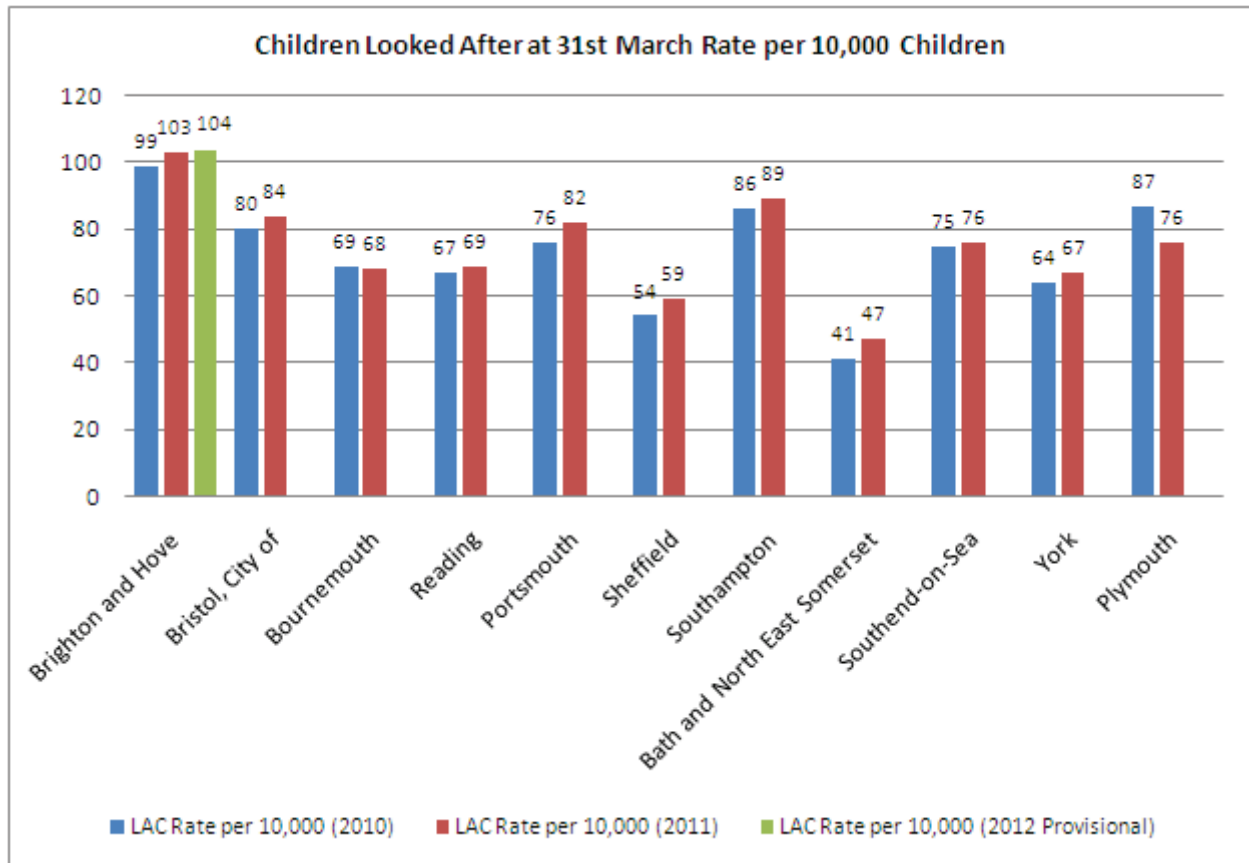
Figure 1: Number of Looked After Children (excluding Respite) at 31st March 2006 to 2012



Sources: SSDA903 years 2006 to 2011 and Monthly Monitoring for year 2012

The number of Looked after Children at 31st March 2012 is 488, a 1% increase from 2011 and a 22% increase from 2007. Please note that the 2012 figures are provisional and may differ to the final figures published by DfE.

Figure 2a: Children looked after at 31st March 2010 to 2012. Rates per 10,000 Children aged under 18 years¹



Sources: SSDA903 for years 2010 to 2011 and Monthly Monitoring for 2012

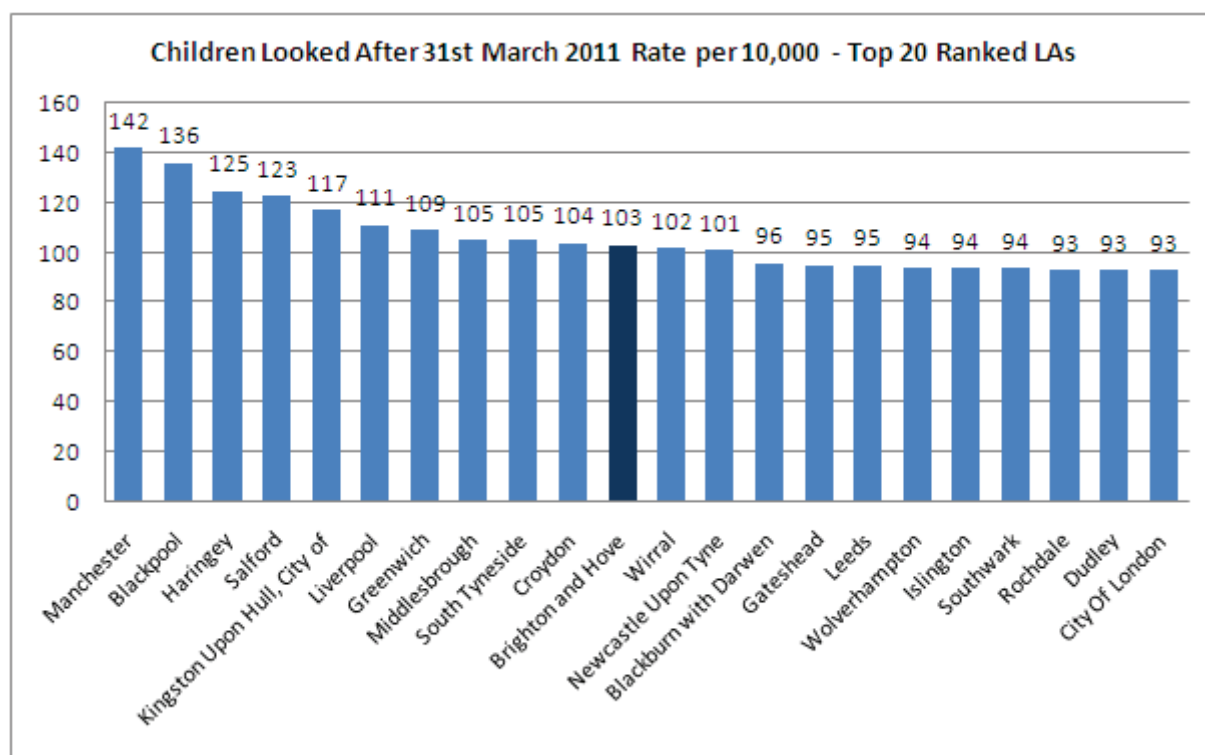
The rate of children looked after per 10,000 children aged under 18 has increased from 103 as at 31 March 2011 to 104 as at March 2012. The rate for 2012 is higher than the 2011 national average (59 per 10,000) and the average for our statistical neighbours (71.7 per 10,000).

¹ The rates per 10,000 children under 18 years have been derived using the mid-year population estimates for 2009 provided by the Office for National Statistics.

Table 1: Percentage Change in LAC Rate 31st March 2010 to 31st March 2012

Local Authority	LAC at 31 March 2010	LAC Rate per 10,000 (2010)	LAC at 31 March 2011	LAC Rate per 10,000 (2011)	% change LAC Rate 2010 to 2011	LAC Rate per 10,000 (2012 Provisional)	% change LAC Rate 2011 to 2012
Brighton and Hove	465	99	485	103	3.9%	104	1.0%
Bristol, City of	645	80	680	84	4.8%		
Bournemouth	205	69	200	68	-1.5%		
Reading	205	67	215	69	2.9%		
Portsmouth	290	76	315	82	7.3%		
Sheffield	580	54	625	59	8.5%		
Southampton	375	86	385	89	3.4%		
Bath and North East Somerset	140	41	160	47	12.8%		
Southend-on-Sea	265	75	270	76	1.3%		
York	225	64	235	67	4.5%		
Plymouth	435	87	375	76	-14.5%		
ENGLAND	64410	58	65520	59	1.7%		

Figure 2b: Children looked after at 31st March 2011. Rates per 10,000 Children aged under 18 years²

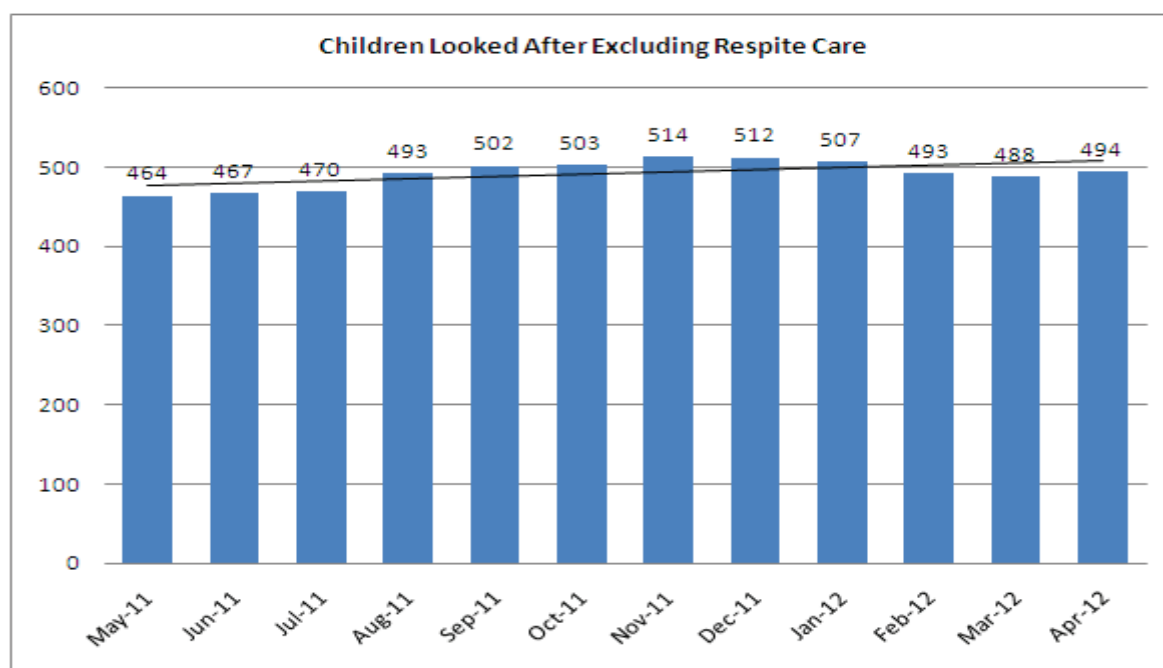


Source: SSDA903

Figure 2b reveals that the 2010/11 LAC Rate per 10,000 for Brighton and Hove Children is ranked 11th highest out of 152 Local Authorities in England. The LAC rate as at 30th April 2012 is per 10,000 is 105 which would place Brighton and Hove joint 8^h highest with Middlesbrough and South Tyneside.

² The rates per 10,000 children under 18 years have been derived using the mid-year population estimates for 2009 provided by the Office for National Statistics.

Figure 3: Children looked after year ending 30th April 2012



Source: Monthly Monitoring April 2012

The number of Looked after Children (excluding respite) has risen slightly from 488 last month to 494 as at 30th April 2012. The tables below provide a breakdown of children who started to be looked after by legal status at the LAC episode start and children who ceased to be looked after by legal status at the LAC episode end in April by age band. There are 28 children looked after aged under 1 as at 30th April 2012 which represents 6% of the cohort (6% nationally) and 87 children aged 16 and over as at which represents 18% of the LAC cohort (21% nationally). Of the 3 LAC starters aged 16 and over in April, 2 were Southwark cases.

Table 2: LAC Starters by Legal Status at LAC Episode Start

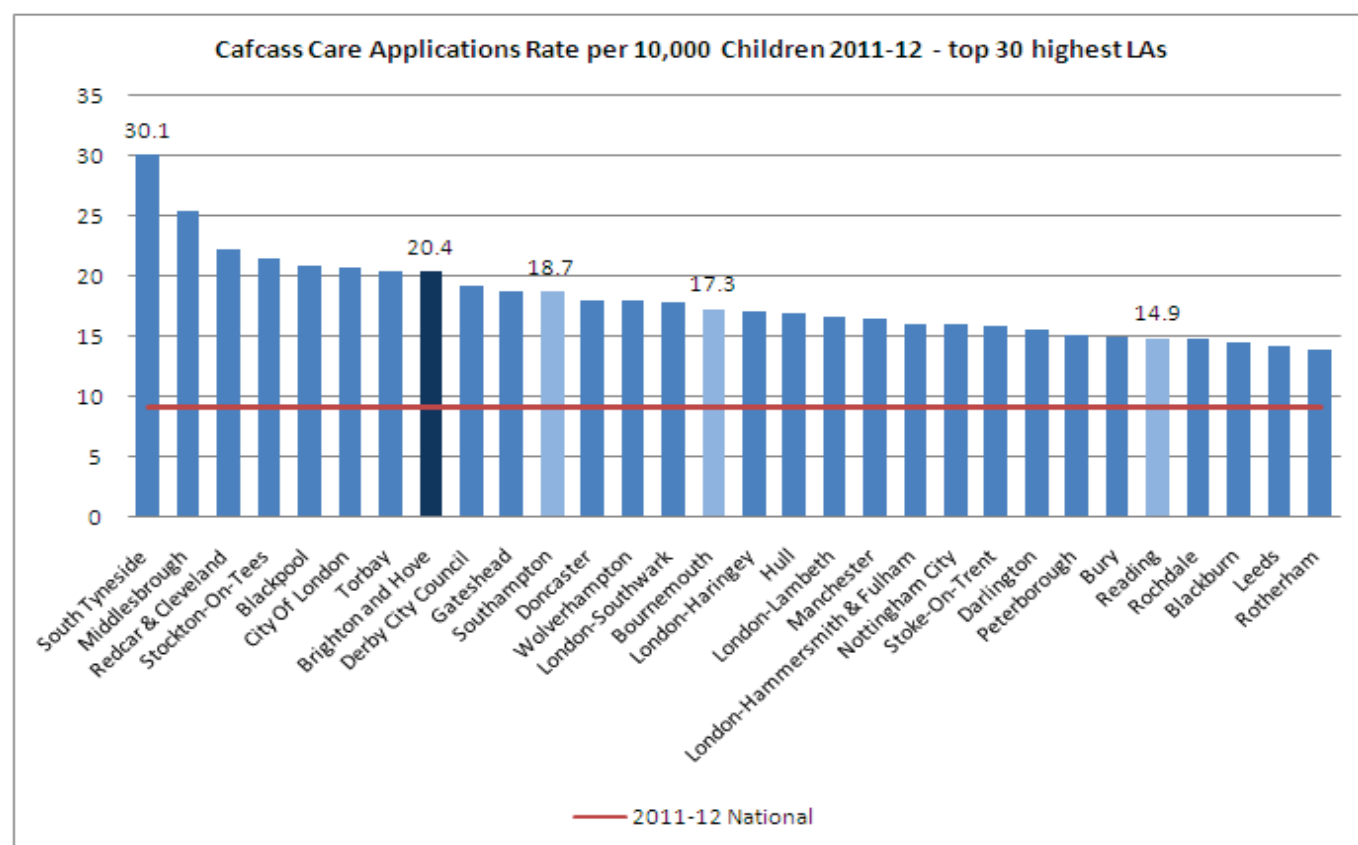
LAC Starters by Legal Status at LAC Episode Start						
Legal Status	Under 1	1 to 4	5 to 9	10 to 15	16 and over	Total
Accomm under S20 (single period of accommodation)	2	1	2	6	3	14
Interim Care Order	1					1
Under police protection in LA accommodation	2	2	1			5
In LA on remand or committed for trial/sentence				1		1
Total	5	3	3	7	3	21

Table 3: LAC Leavers by Legal Status at LAC Episode End

LAC Leavers by Legal Status at LAC Episode End						
Legal Status	Under 1	1 to 4	5 to 9	10 to 15	16 and over	Total
Full Care Order					1	1
Accomm under S20 (single period of accommodation)	1			1	4	6
Interim Care Order	3	1			1	5
Under police protection in LA accommodation	1	1	1			3
Total	5	2	1	1	6	15

The Children in Need Team is in place from 17th January and one of the primary objectives is to reduce the number of LAC and keep children safe in their families. Processes have been developed in the CIN Team to discuss cases for children on the edge of care in both Team Manager's supervision and CIN management meetings.

Figure 4: Cafcass Care Applications Rate per 10,000 Children 2011-12 - top 30 highest LAs



Source: Cafcass

Please note that the unit of measurement is a Care application, upon its receipt by Cafcass from the Court and its entry into CMS. An application can involve multiple children.

Cafcass has recently published local authority level data on the number of Care Applications received in the years 2007-08 to 2011-12. Figure 4 illustrates the number of care applications received in 2011-12 as a rate per 10,000 children for the top 30 highest local authorities in England and reveals that Brighton and Hove is ranked 8th highest out of 152 local authorities in England. The rate for Brighton and Hove for 2011-12 is 20.4, above the national average of 9.2 and 12.3 for our statistical neighbours. Our statistical neighbours who are among the top 30 highest LAs have been shaded in light blue.

Table 4: Cafcass Care Applications 2007-08 to 2011-12

	2007-08	2008-09	2009-10	2010-11	2011-12
Total care applications received (England)	6,323	6,488	8,832	9,204	10,218
Care applications received from Brighton & Hove	46	55	110	105	96
% increase from 2007-08 base (England)	-	2.6%	39.7%	45.6%	61.6%
% increase from 2007-08 base (Brighton and Hove)	-	20%	139%	128%	109%
% increase from previous year (England)	-	2.6%	36.1%	4.2%	11.0%
% increase from previous year (Brighton and Hove)	-	19.6%	100.0%	-4.5%	-8.6%
Rate of care applications per 10,000 children (England)	5.8	5.9	8	8.3	9.2
Rate of care applications per 10,000 children (Brighton and Hove)	10.0	11.9	23.5	22.4	20.4

Source: Cafcass

The data in Table 4 reveals that Brighton and Hove has experienced a 109% increase in 2011-12 from the 2007-08 base compared to a 61.6% increase nationally. However, the number of care applications has fallen in 2010-11 and 2011-12 in Brighton and Hove whereas the number of care applications has continued to rise nationally.

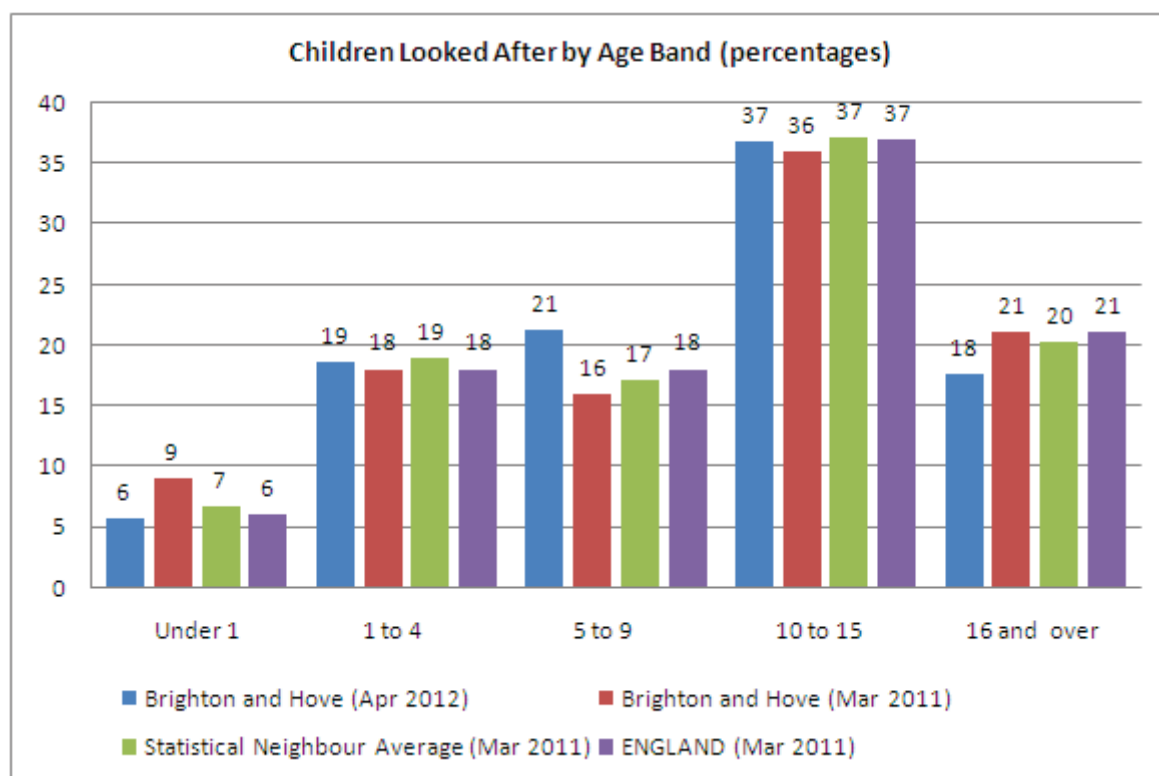
Children Looked After Year Ending 31 March 2011

An analysis of the Children Looked After Statistical First Release (SFR), which provides information about looked after children in England for the year ending 31 March 2011, has been provided in this section of the report to illustrate how the profile of Looked After Children in Brighton and Hove compares with the national average and our statistical neighbours. The figures are based on data from the SSDA903 return collected from all local authorities.

Please note that:

- Numbers have been rounded to the nearest 5
- Figures exclude children looked after under an agreed series of short term placements.
- Historical data may differ from older publications. This is mainly due to the implementation of amendments and corrections sent by some local authorities after the publication date of previous materials.
- The Statistical Neighbour³ Average (SN Average) has been calculated by averaging the percentages for the 10 local authorities in our statistical neighbour group.

Figure 5: Children Looked After by Age Band (Percentages)



Source: SSDA903 and Monthly Monitoring for April 2012 figures

Figure 5 compares the percentage of children looked after by age band as at 30th April 2012 with the percentages as at 31st March 2011. The percentage of children aged under 1 has fallen from 9% in March 2011 to 6% in April 2012 and is now in line with the England and Statistical Neighbour averages. The percentage of children aged between 5 and 9 has risen from 16% in March 2011 to 21% in April 2012 and is now above the England and Statistical Neighbour Average.

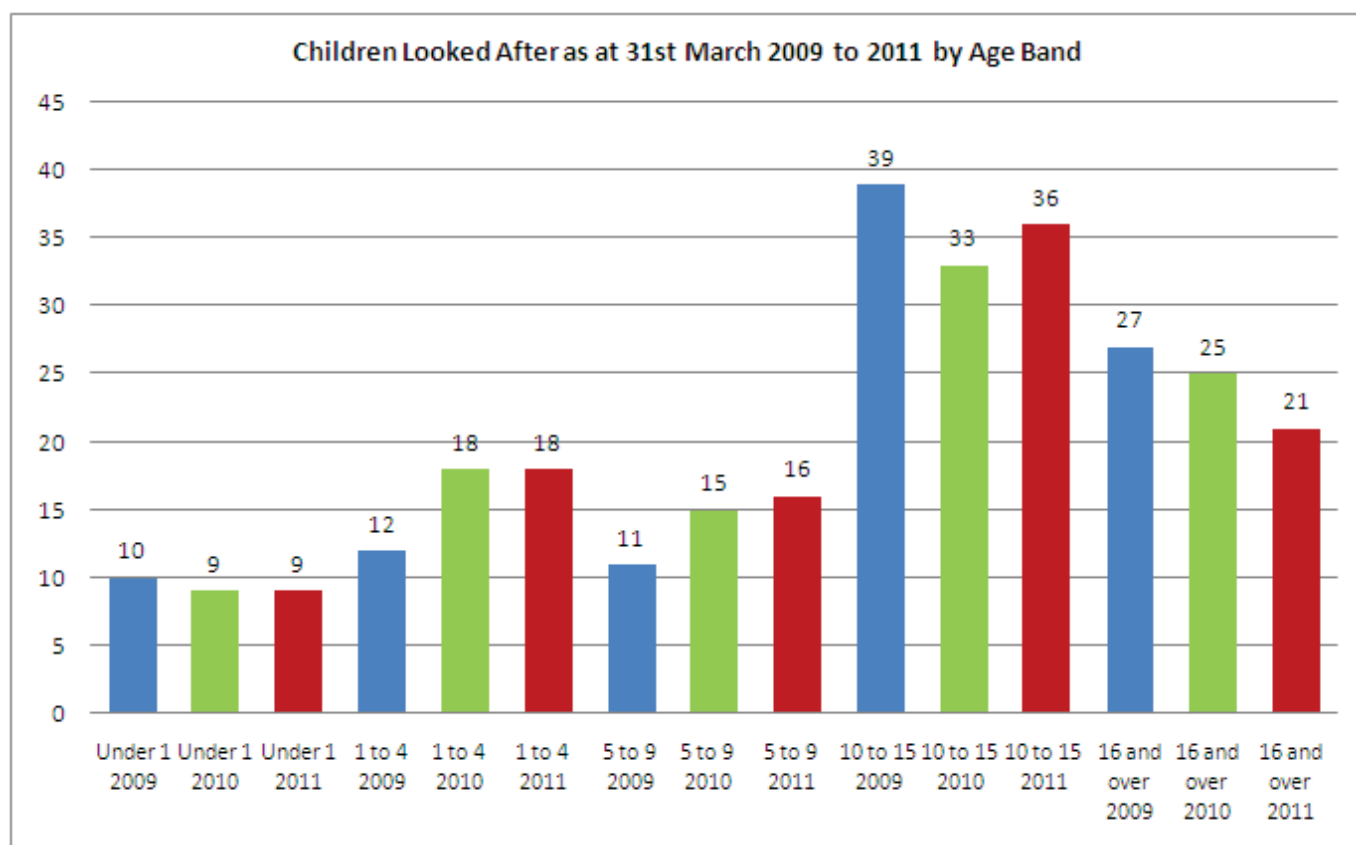
³ Statistical Neighbours (SN) are ranked in order of statistical closeness, with the top SN being closest: Bristol, Bournemouth, Portsmouth, Reading, Sheffield, Southampton, Bath and North East Somerset, Southend-on-Sea, York and Plymouth
Corporate Parenting Summary Report - Jun 2012 v2

Table 5: Children Looked After at 31st March 2011 and 30th April 2012 by Age Band (Numbers)

Age Band	Mar-11	Apr-12
Under 1	43	28
1 to 4	85	92
5 to 9	77	105
10 to 15	176	182
16 and over	102	87
Total	483	494

Source: Monthly Monitoring April 2012

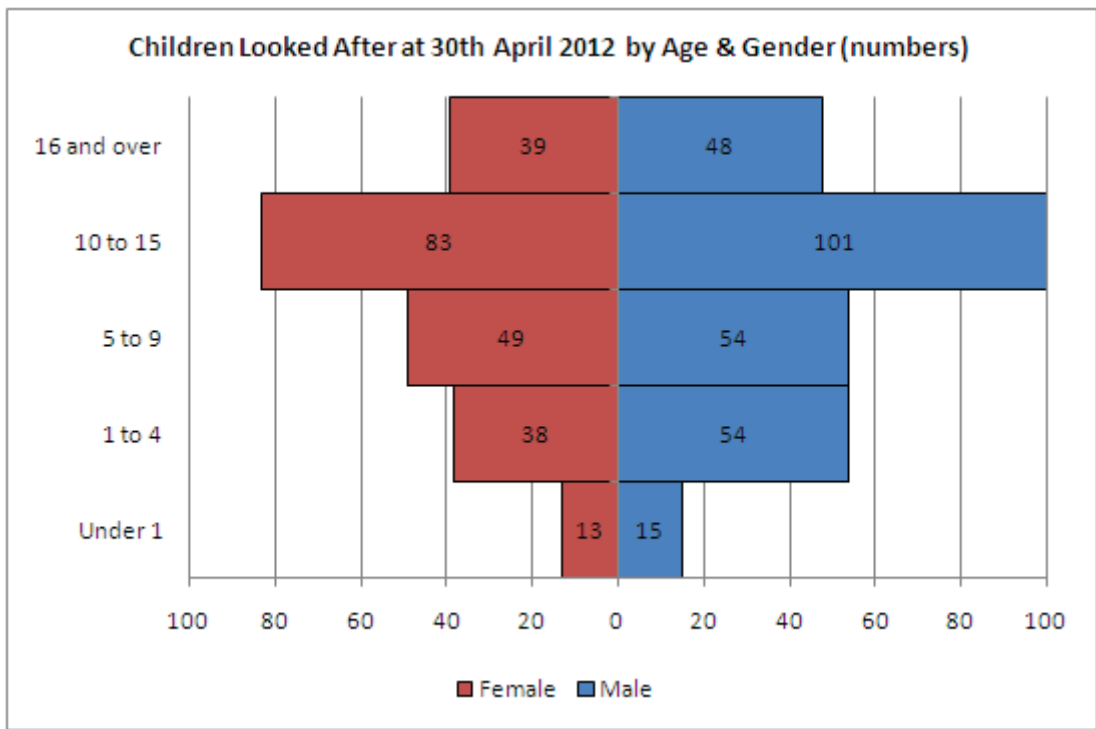
Figure 6 Children Looked After as at 31st March 2009 to 2011 by Age Band



Source: SSDA903

Figure 6 illustrates the percentage of children looked after by Brighton and Hove as at 31st March from 2009 to 2011 and reveals that the percentage of children aged 16 and over has fallen year-on-year from 27% in 2009 to 21% in 2011 whereas the percentage of children aged 5 to 9 has risen from 11% in 2009 to 16% in 2011. The decrease in the number of children looked after aged 16 and over is due in part to a fall in the number of Unaccompanied Asylum Seeking Children which is a trend shared both nationally and with our statistical neighbours.

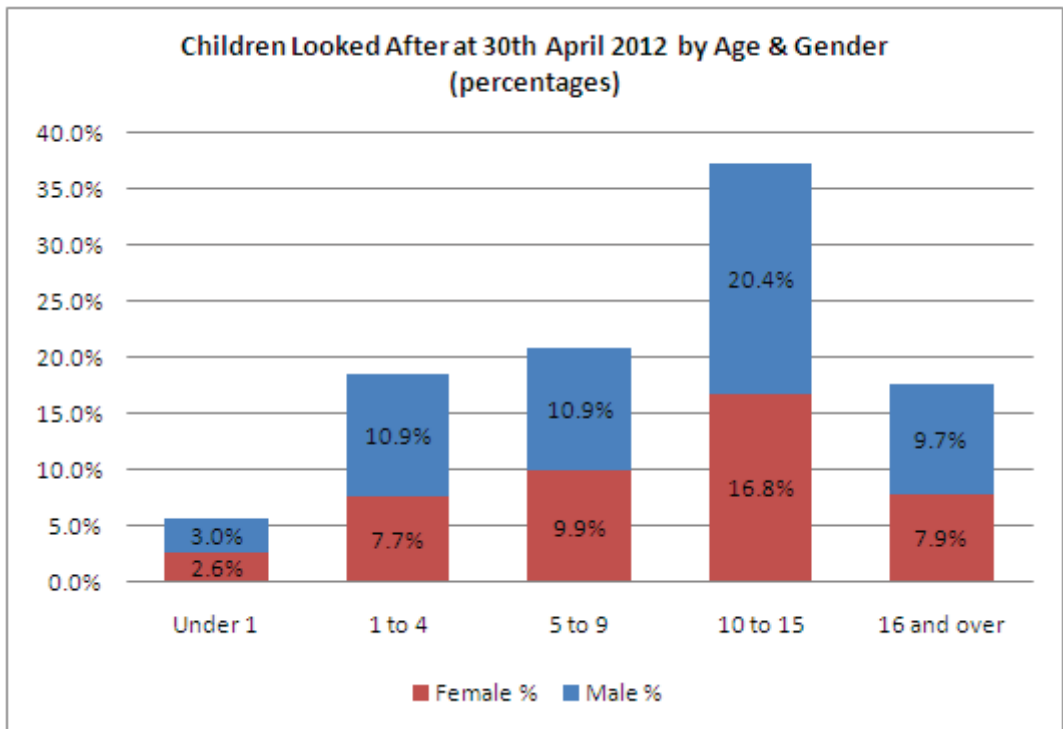
Figure 7a: Children Looked After at 30th April 2012 by Age & Gender (Numbers)



Source: Monthly Monitoring April 2012

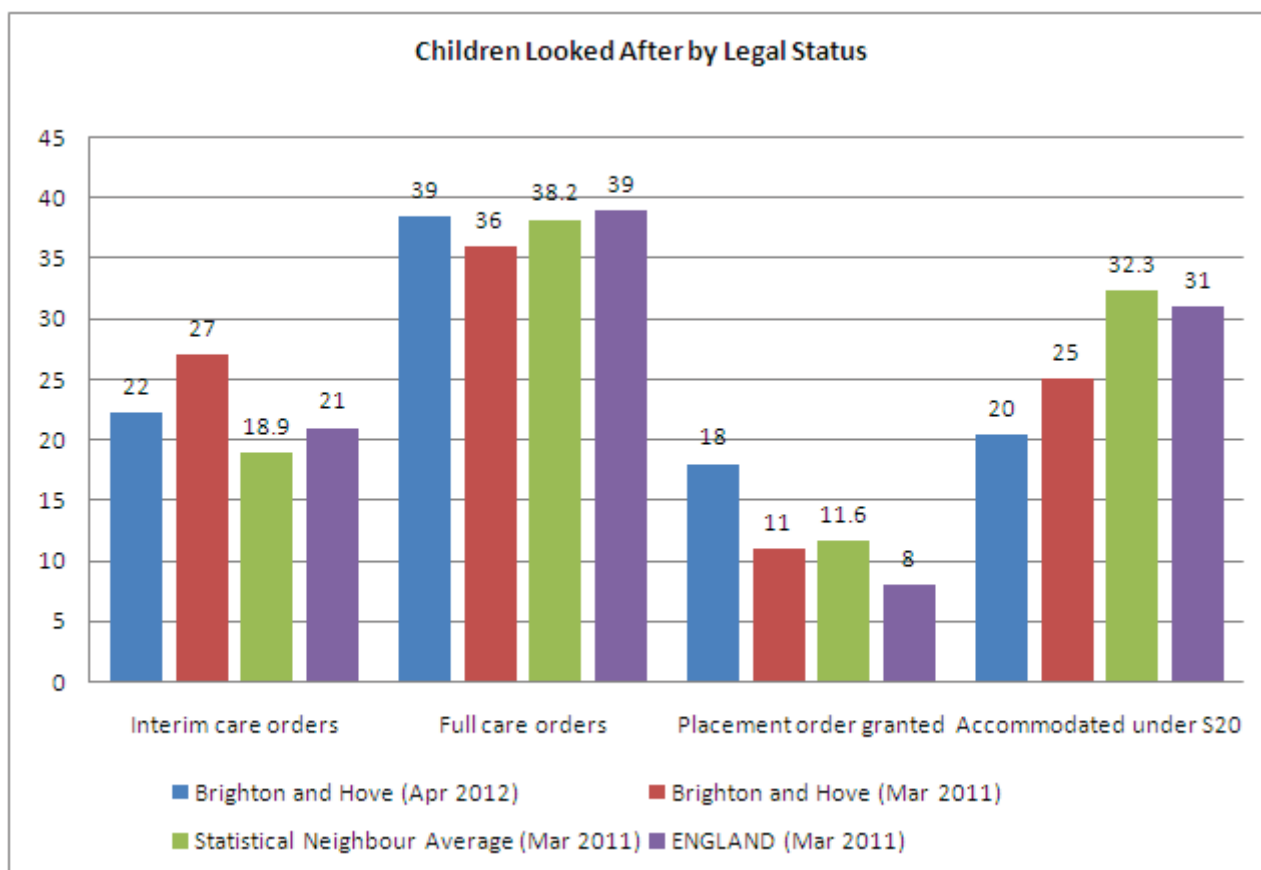
There are 272 male children (55%) and 222 female children (45%). Nationally, 56% of Looked after children are male. There are more male children in all of the age bands with the biggest differences in the 10 to 15 and 1 to 4 age bands.

Figure 7b: Children Looked After at 30th April 2012 by Age & Gender (Percentages)



Source: Monthly Monitoring April 2012

Figure 8: Children Looked After at 30th April 2012 by Legal Status (Percentages)



Sources: SSDA903 and Monthly Monitoring for April 2012 figures

Please note that other legal statuses have not been included in Figure 8 as the data has been suppressed for many local authorities due to the low numbers involved.

Figure 8 compares the percentage of children looked after at 31st March 2011 and 30th April 2012 by legal status and reveals that the percentage of children on a Placement Order has increased from 11% in March to 18% in April, above the England Average of 8% and 11.6% for our statistical neighbours. The number of children on a placement order has increased from 59 in May 2011 to 89 in April 2012. This is an area that is being looked at as part of the Value for Money Programme, with two additional workers being recruited to reduce both the timescales and the numbers of children on a placement order. Although the percentage of children on an Interim Care Order has fallen slightly from 27% in March to 22% in April, the percentage remains above the England Average (21%) and statistical neighbour average (18.9%). The percentage of children looked after on Section 20 has fallen from 25% in March to 20% in April, below the England Average (31%) and statistical neighbour average (32.3%)

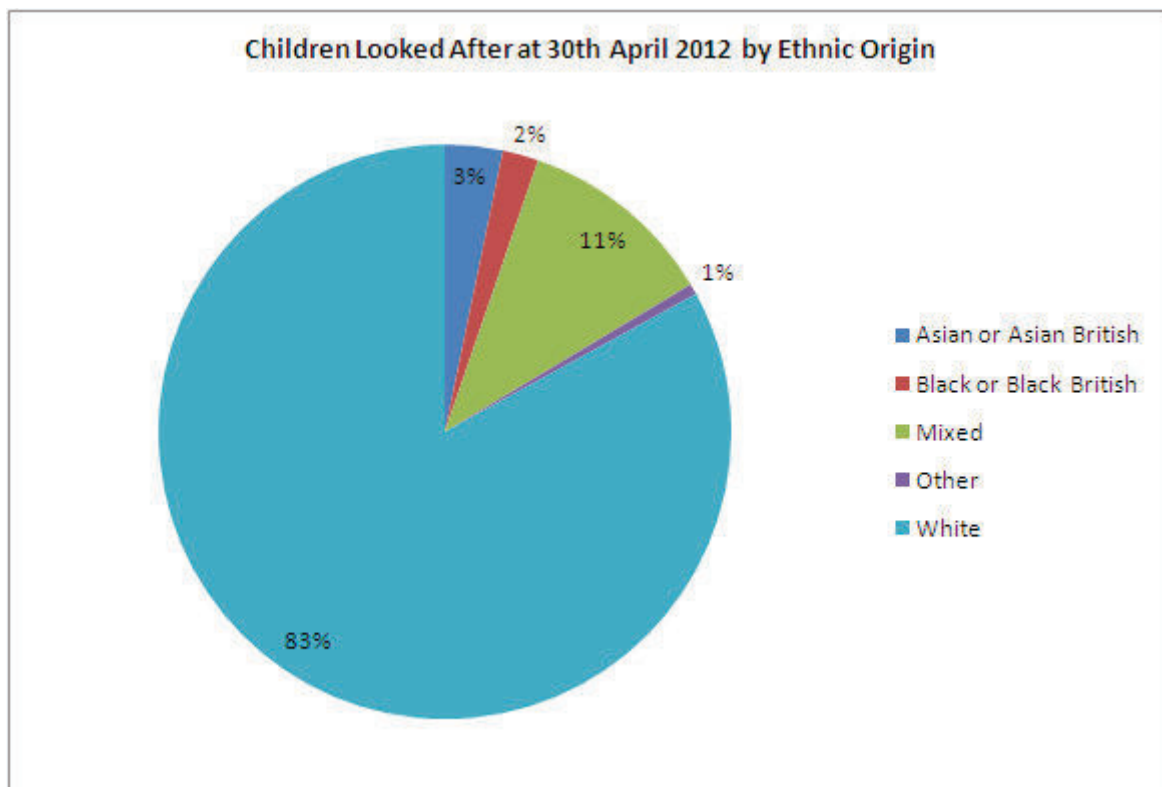
Table 6: Figure 8: Children Looked After at 30th April 2012 by Legal Status for Statistical Neighbours (Percentages)

	All children looked after at 31 March 2011	Interim care orders	Full care orders	Placement order granted	Accommodated under S20
Brighton and Hove (Apr 2012)	494	22	39	18	20
Brighton and Hove (Mar 2011)	485	27	36	11	25
Bristol, City of	680	16	46	11	27
Bournemouth	200	10	26	x	56
Reading	215	26	37	12	26
Portsmouth	315	24	40	x	30
Sheffield	625	23	37	13	23
Southampton	385	25	23	10	42
Bath and North East Somerset	160	11	43	8	39
Southend-on-Sea	270	15	42	12	31
York	235	20	47	x	25
Plymouth	375	19	41	15	24
Statistical Neighbour Avg (Mar 2011)	346.0	18.9	38.2	11.6	32.3
ENGLAND (Mar 2011)	65520	21	39	8	31

Sources: SSDA903 and Monthly Monitoring for April 2012 figures
X figures suppressed to protect confidentiality

Table 6 provides a breakdown of the children looked after by legal status for our statistical neighbours as at 31st March 2011 and reveals that Brighton and Hove has the highest percentage of children on a placement order and the lowest percentage of children accommodated under section 20 in our statistical neighbour group.

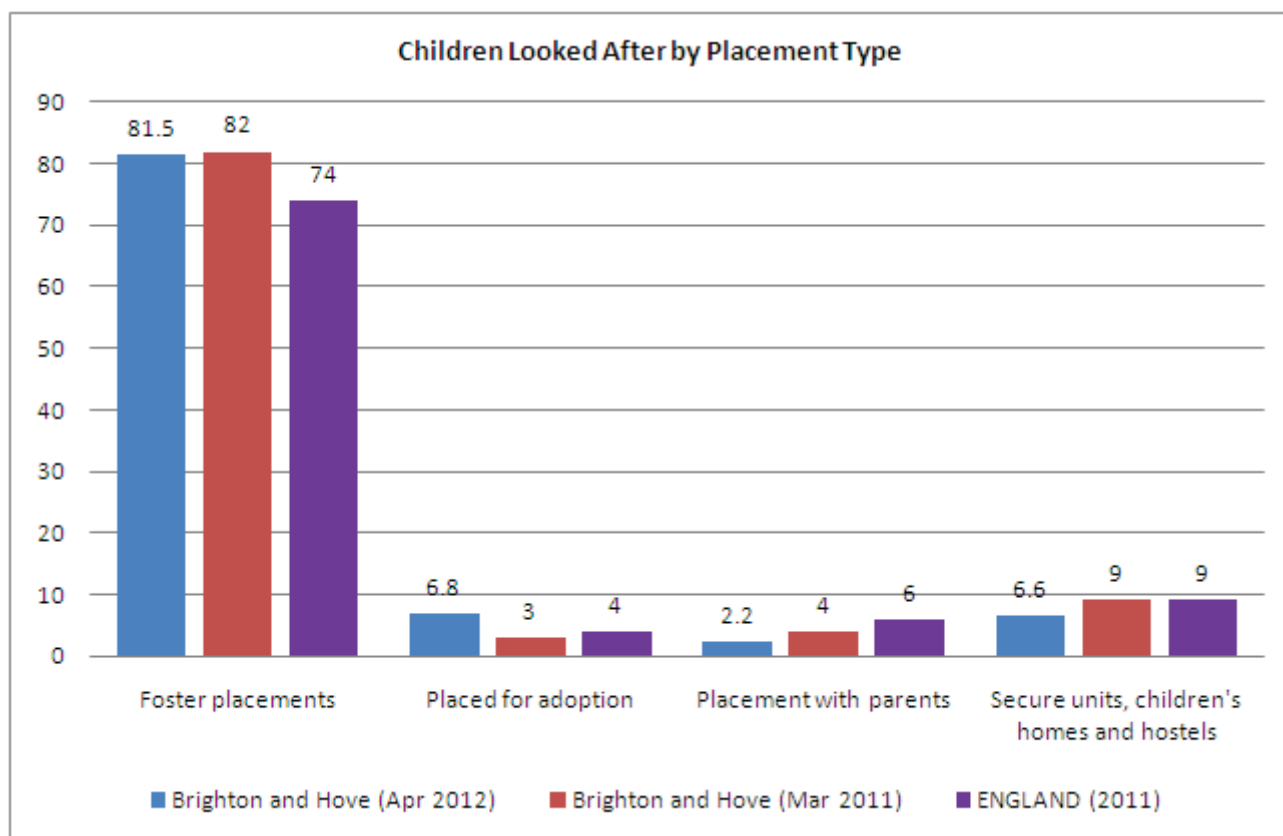
Figure 9: Children Looked After at 30th April 2012 by Ethnic Origin



Source: Monthly Monitoring April 2012

83% of Looked After Children in Brighton and Hove have a recorded ethnicity in the White Ethnic Origin category compared to 77% nationally, with 11% under Mixed (9% nationally), 3% under Asian or Asian British (5% nationally) and 2% under Black or Black British (7% nationally).

Figure 10: Children Looked After at by Placement Type

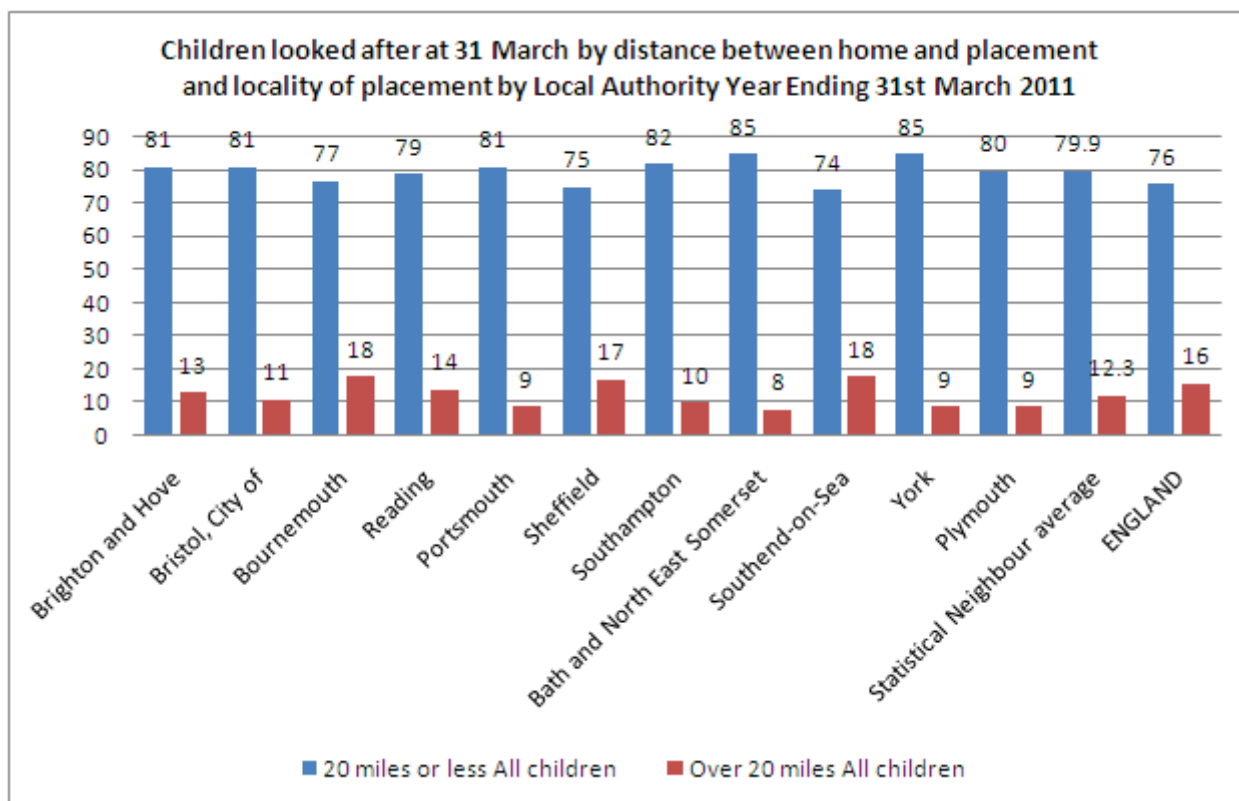


Sources: SSDA903 and Monthly Monitoring for April 2012 figures

Please note that other placement types have not been included in Figure 10 as the data has been suppressed for many local authorities due to the low numbers involved.

Figure 10 illustrates that 81.5% of children looked after in Brighton were placed in foster placements as at 30th April 2012 compared to 74% nationally. Of the 408 children placed in foster care, 149 (29.7% of the LAC cohort) are placed with in house carers, 203 (40.5% of the LAC cohort) are placed with agency carers and 56 (11.2% of the LAC cohort) are placed with relatives or friends. Nearly 7% of children were placed for adoption as at 30th April 2012, up from 3% in March 2011 and above the national average of 4%.

Figure 11: Children looked after at 31 March by distance between home and placement by Local Authority Year Ending 31 March 2011



Source: SSDA903

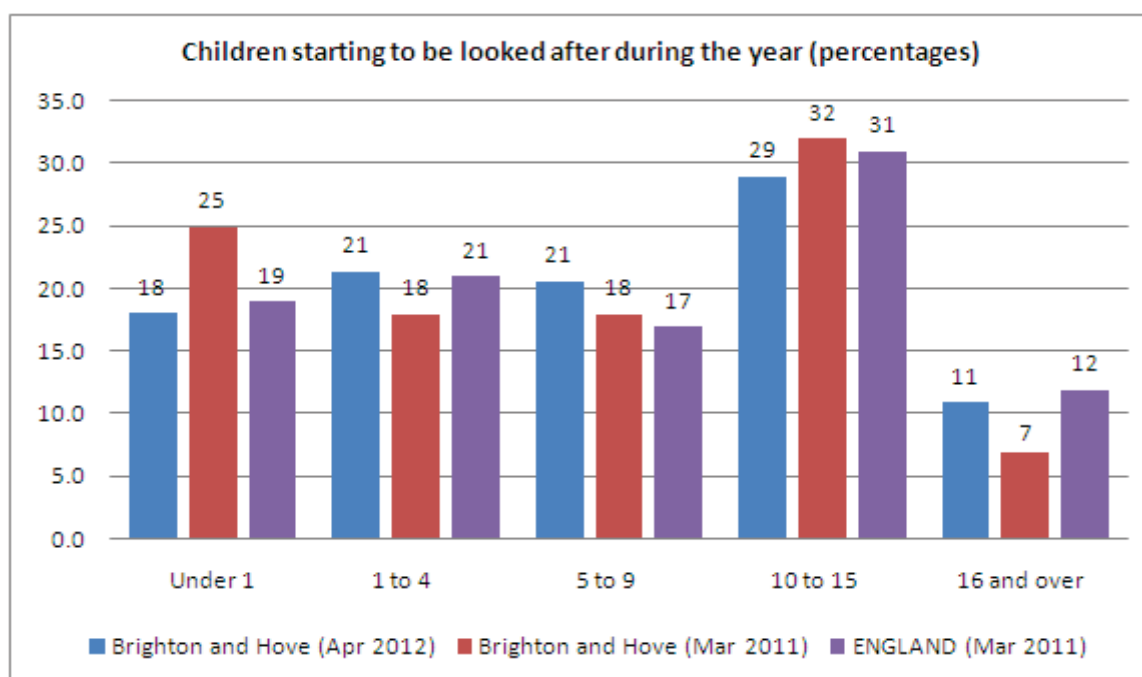
Figure 11 reveals that 81% of children looked after in Brighton and Hove at 31st March 2011 were placed 20 miles or less from their home address, an improvement from 76% last year, with 13% placed over 20 miles (3% were not known and 3% were not recorded). The percentage of children looked after placed within 20 miles is higher than the England Average (76%) and the average for our statistical neighbours (79.9%). Many of the placements that are more than 20 miles from home are appropriate and can be positive for the child or young person. In Brighton and Hove, 39% of children were placed inside the local authority boundary and 55% were placed outside of the boundary. Nationally, 59% of children were placed inside the local authority boundary and 33% were placed outside with 5% not known and 4% not recorded. The percentages for Brighton and Hove are likely to be skewed given the size of the geographical area.

"Home" address unknown or unavailable may occur with Unaccompanied Asylum Seeking Children or children missing from main placement.

For reasons of confidentiality distance is not recorded for children who were placed for adoption.

Placement locality denotes whether or not the placement at 31 March is within the geographical boundary of the responsible local authority.

Figure 12: Children who started to be looked after during the year (percentages)



Sources: SSDA903 and Monthly Monitoring for April 2012 figures

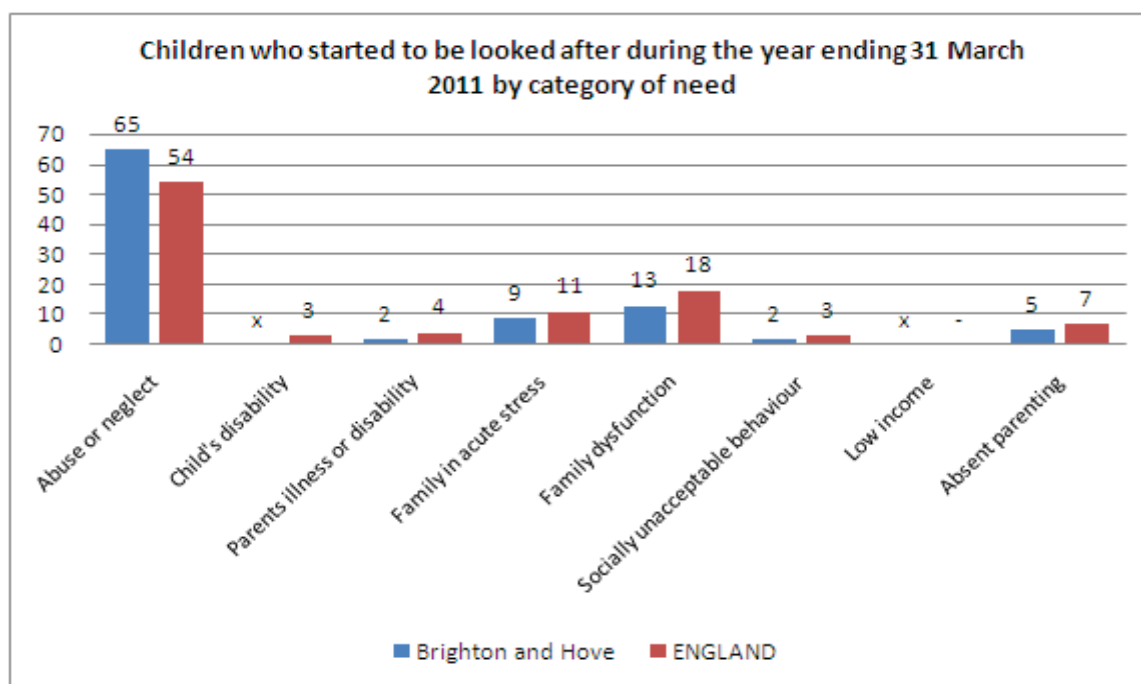
Figure 12 compares the percentage of children starting to be looked after during the year ending 31st March 2011 and the year ending 30th April 2012 by their age on starting⁴. The data reveals that the percentage of children starting to be looked after during the year aged under 1 has fallen from 25% in March 2011 to 18% in April 2012, bringing the percentage below the 2011 national average of 19%. The percentage of children aged 16 and over has increased from 7% in March to 11% in April and is broadly in-line with the national average (12%). It is not possible to calculate a statistical neighbour average as the percentages for some local authorities have been suppressed due to the small numbers involved but a breakdown of our statistical neighbours has been provided in table 6 below.

Table 7: Children who started to be looked after during the year ending 31st March 2011 (percentages)

Local Authority	All Children who started to be looked after	Male	Female	Under 1	1 to 4	5 to 9	10 to 15	16 and over
Brighton and Hove	220	53	47	25	18	18	32	7
Bristol, City of	270	51	49	19	17	16	29	19
Bournemouth	100	42	58	28	26	22	17	7
Reading	100	56	44	25	29	15	22	9
Portsmouth	165	57	43	19	32	16	28	5
Sheffield	260	56	44	24	24	16	28	8
Southampton	175	58	42	26	27	13	29	4
Bath and North East Somerset	55	55	45	14	13	18	36	20
Southend-on-Sea	90	48	52	21	33	x	24	x
York	80	50	50	19	25	16	26	14
Plymouth	165	56	44	20	20	12	22	25
ENGLAND	27310	53	47	19	21	17	31	12
East Sussex	225	50	50	24	24	22	29	x
West Sussex	330	53	47	19	18	16	30	17

⁴ Only the first occasion on which a child started to be looked after in the year has been counted.

Figure 13: Children who started to be looked after during the year ending 31 March 2011 by Category of Need (Percentages)



Source: SSSA903

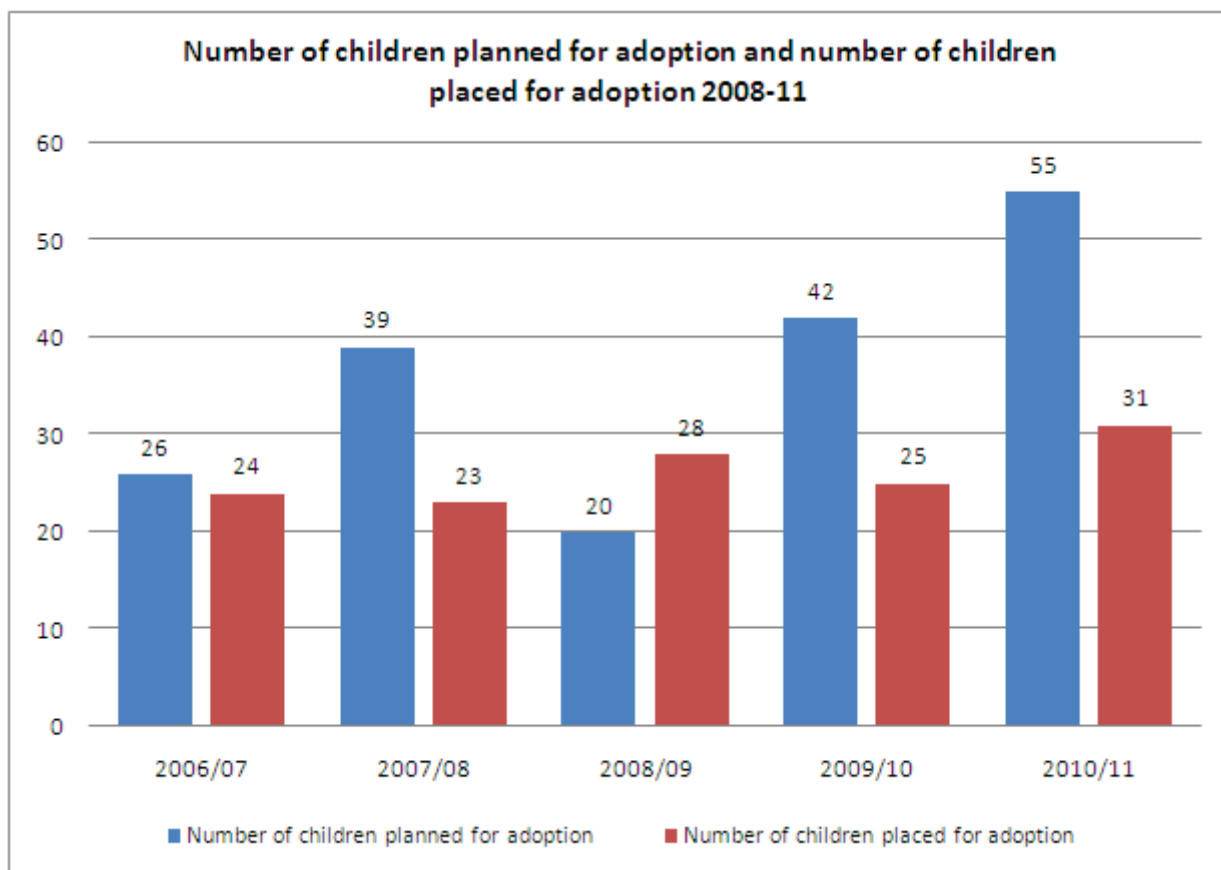
Figure 13 provides an analysis of the Category of Need for children who started to be looked after during the year ending 31st March 2011. Category of Need codes ‘record the main reason why a child is being provided with services’ and ‘provides a further insight as to why a particular child is being looked after’.⁵ The data shows that 65% of children who started to be looked after in Brighton and Hove had a Category of Need code of Abuse or Neglect, compared to 54% nationally. However, this data should be viewed with caution as there is anecdotal evidence of data quality and reliability of recording issues associated with Category of Need codes.

Table 8: Children who started to be looked after during the year ending 31 March 2011 by Category of Need (Percentages)

Local Authority	Abuse or neglect	Child's disability	Parents illness or disability	Family in acute stress	Family dysfunction	Socially unacceptable behaviour	Low income	Absent parenting
Brighton and Hove	65	x	2	9	13	2	x	5
Bristol, City of	53	x	4	4	25	6	x	3
Bournemouth	52	7	x	9	19	x	0	x
Reading	75	x	x	x	9	x	0	7
Portsmouth	62	x	x	7	15	4	0	9
Sheffield	48	3	x	13	26	4	x	3
Southampton	65	x	5	13	11	x	0	5
Bath and North East Somerset	20	x	9	16	45	x	0	x
Southend-on-Sea	84	0	0	x	8	x	0	x
York	59	x	x	15	18	x	0	0
Plymouth	42	x	18	4	9	x	16	4
Statistical Neighbour average	56.0	3.3	7.2	10.1	18.5	4.7	2.0	4.4
ENGLAND	54	3	4	11	18	3	-	7
East Sussex	50	4	x	13	22	5	0	x
West Sussex	52	x	x	11	14	4	0	17

⁵<http://media.education.gov.uk/assets/files/pdf/g/guidance%20notes%20for%20the%20completion%20of%20ssda903%20records%202010-11.pdf> p33

Figure 14: Number of children planned for adoption and number of children placed for adoption 2008-11



Source: Fostering and Adoption Service

Adoption activity has continued to rise in Brighton & Hove in line with the rise in numbers of children in care and reflects the high number of children under 5 in the care system. In Brighton and Hove, the percentage of children who ceased to be looked after during 2010/11 who were adopted is 13% compared to the England average of 11%. Figure 15 provides information on the numbers of children with plans for adoption and children that have been matched with adopters from 2006/07 to 2010/11.

Of the 55 children planned for adoption in 2010/11, 48% were aged 0 to 2, 39% were aged 2 to 5 and 13% were aged 5 and over. The 55 children planned for adoption included 8 sibling groups of two or more children. Of the 31 children placed for adoption, 55% were aged 0 to 2, 29% were aged 2 to 5 and 16% were aged 5 and over. The 31 children placed for adoption included five sibling groups of two children.

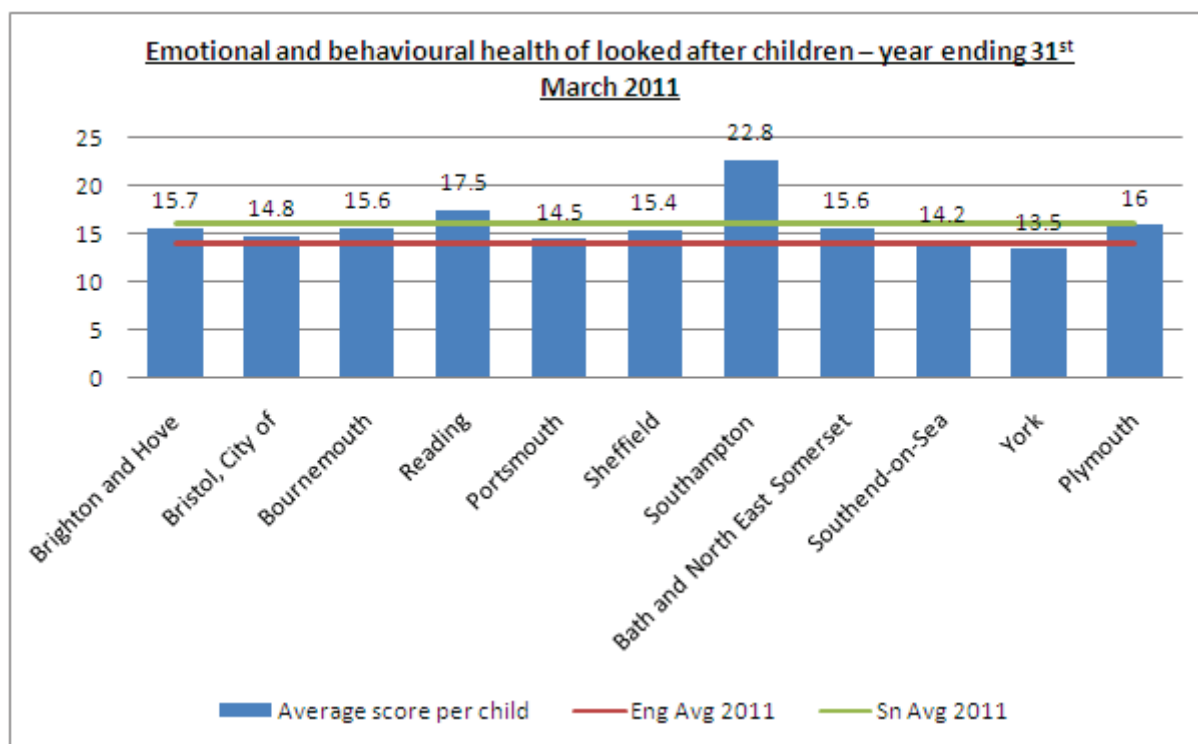
Of the 87 children currently on a placement order, 61% are aged under 4, 37% are aged 5 to 9 and 2% are aged 10 to 15.

Health of Children Looked After

Emotional and behavioural health of looked after children

Definition: Since 2008, central government have required each local authority to ask carers to complete a 'Strength & Difficulties' Questionnaire for every child looked after at 31st March who has been in care continuously for one year or more and who is aged 4-16 years. The questionnaire produces a score from 10 (no indicators of difficulty or stress) to 40 (extremely high indicators of stress & difficulty) and good performance is indicated by a low number.

Figure 15: Emotional and behavioural health of looked after children – year ending 31st March 2011.



Source: SSDA903

Summary

Please note that provisional figures for this indicator for 2012 are not available.

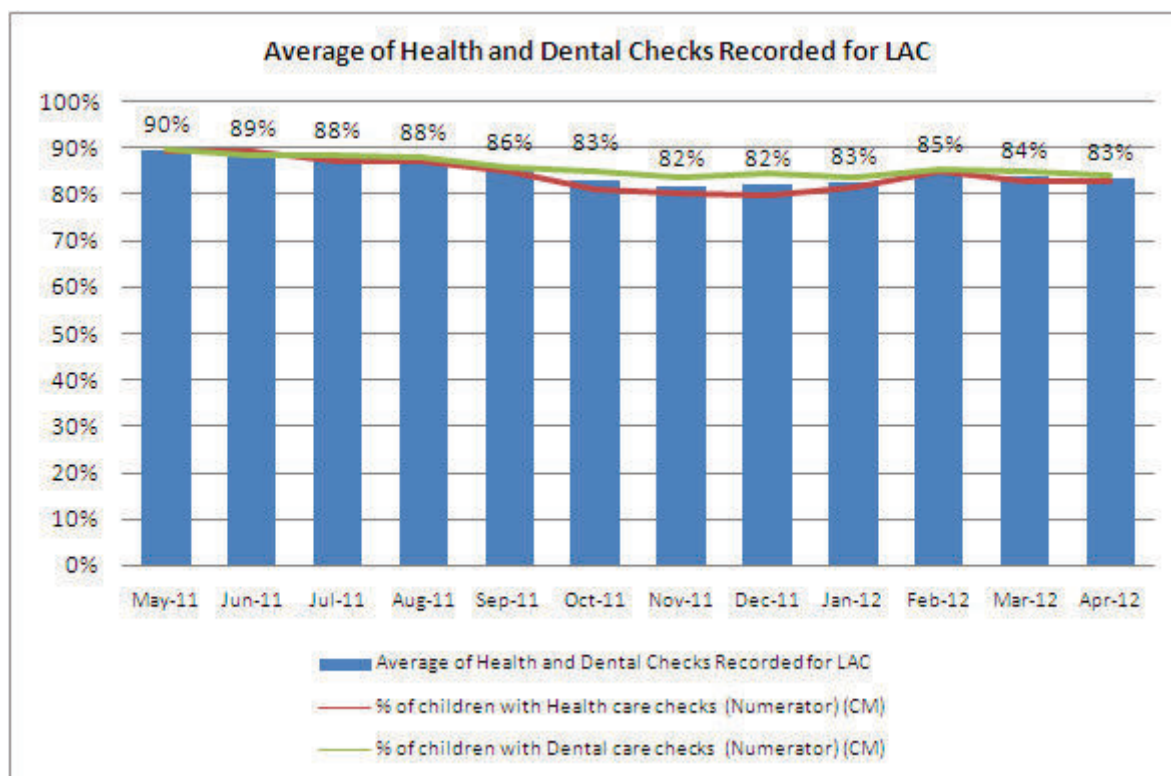
In Brighton & Hove, the Strengths and Difficulties Questionnaire is administered by the LAC Health team and a 79% return was achieved for 2010/11, compared to a national average of 65.7%. Children with Disability can be excluded and so we would not expect to achieve 100% return.

The average score gained by Brighton and Hove children and young people in care for 2010/11 is 15.7. This is a slight increase from 15.5 last year and above the national average for 2010/11 (13.9), although this is below our statistical neighbour average of 16. Furthermore, there are multiple factors involved in the emotional state of children and the cohort of children from year to year is not exactly the same, and these factors should be considered when making year-on-year comparisons.

The LAC Health Team follow all high scores up with carers, young people, the Virtual School for Children in Care and Social Workers to ensure that they are receiving the right support. If the child or young person is not receiving the right level of support, the LAC Health would make or suggest a new referral to CAMHS or other agency.

Health and Dental Checks for Children Looked After

Figure 16: Average of Health and Dental Checks Recorded for LAC



Source: Monthly Monitoring Social Care Data April 2012

Summary

Timely health and dental checks recorded for LAC is 83% as at April 2012, down from 90% in May 2011, with the Children in Care Team at 90%, and the Children in Need Team at 93%. The Post 16 Support Team is currently at 57% and the Children in Care Service Manager will scrutinise the health and dental data for the Post 16 Support team. The indicator is an average of health and dental with health checks at 83% and dental checks at 84%. The Children in Care Team and the LAC Health Team have had a drive to increase the number of health and dental checks recorded and current performance is now in-line with the national average of 83.3% for the year ending 31st March 2011.

Performance Issues

The Children in Care Team and the LAC Health Team have had a drive to increase the number of health and dental checks recorded and current performance is now in-line with the national average of 83.3% for the year ending 31st March 2011. The capacity of the health team has been under pressure due to the increase in the number of children looked after which is taking up most of the LAC Health Team's resources. There is a statutory requirement to assess all children newly looked after which is not reflected in the performance indicator as it is not reported to DfE. The majority of outstanding assessments are for children placed outside of Brighton & Hove, and this has been affected by the difficulties with other providers as the funding the LAC Health team received to help with this has ceased. There are very few children who have not had their assessment completed on time by our Brighton & Hove health professionals. There has also been a period of sick leave which has affected performance in the Post 16 Support and YPAS teams. There have also been a number of 16 & 17 year old young people who despite much encouragement have refused to have their health and dental checks.

Sexual Health and Substance Misuse

Sexual Health Definition Young women engaged in the service will be screened for vulnerability to conception using the 'you and sex' tool annually

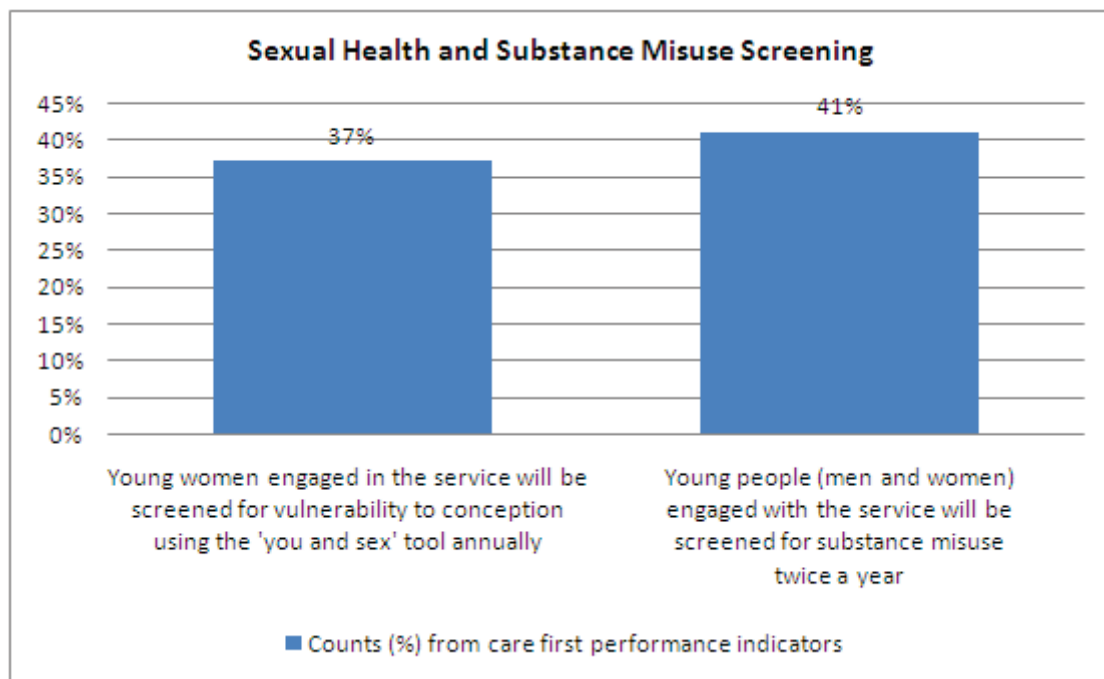
Target: –100% of young women on the caseload

Substance Misuse Definition: Young people (men and women) engaged with the service will be screened for substance misuse twice a year

Target: 100% of young men and women on the caseload

In the social care teams there are 86 young women aged 13-17 years and 182 young people aged 13-17 years.

Figure 17: Sexual Health and Substance Misuse Screening



Source: Snap shot of screening activity levels taken April 2012 from Care first

Overall: 37% of young women engaged in the service were screened for vulnerability to conception and of these 75% received an intervention and 9% were referred. 32% of young people were identified as not having a substance misuse problem; 41% of young people were screened for substance misuse and 38% (6) of these who were in need of information or brief interventions received this while the remaining 63% (10) refused. Sexual health screening levels continue to vary by team as follows: 34% for 16 Plus/Asylum, 44% for Children in Care and 29% for Children in Need. Substance misuse screening levels also vary by team as follows: 47% for 16 Plus/Asylum, 42% for Children in Care team and 17% for Children in Need.

Comparing screening levels in October-December 2011 to January-March 2012 shows a large reduction in activity. It is felt that this is due to data entry issues rather than a real reduction in the number of screens being carried out. This is being explored by the Information Officer. Team managers also have a plan in place to automatically flag up screening need with social workers as young people turn 13, and to continue to follow-up cases where a screen has not occurred with those who are eligible.

Improving Educational Outcomes

This data in this report has yet to be validated against the National Indicators (as reported by the DfE in Jan 2012). This report should therefore be considered as an update. While we are confident that some indicators will not change considerably once all the information has been collated, it is important to note that the indicators have yet to be fully verified.

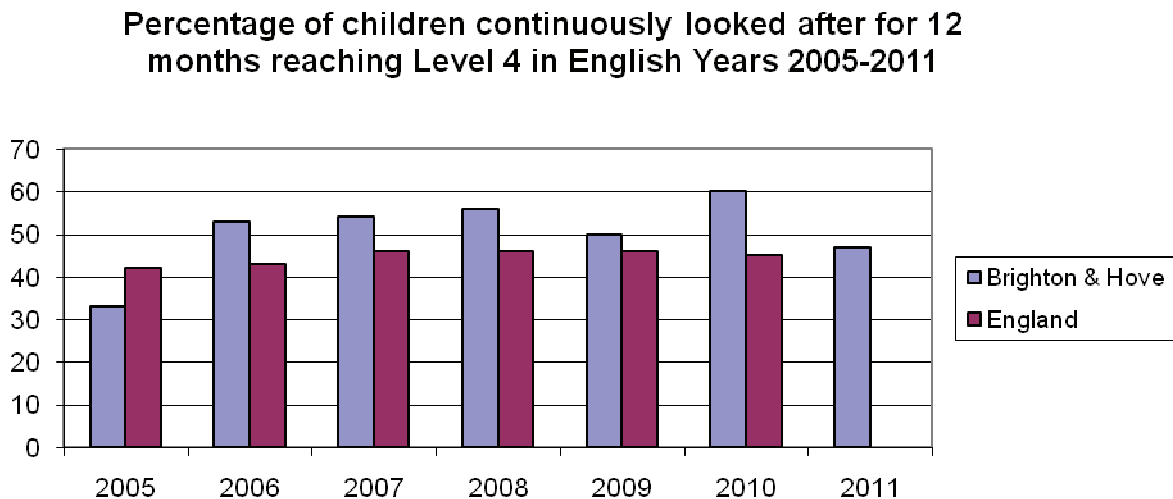
It must be noted that with comparatively small cohorts in Brighton & Hove, individual pupil outcomes will have a demonstrably bigger impact on the overall indicators, particularly for Ni099, Ni100 & Ni101

Percentage of Children in Care reaching level 4 English at Key Stage 2

Definition: – Children are expected to make two levels of progress between Key Stage 1 and 2. Nationally 81% of all children will achieve this bench mark and for children in care this figure is 50%.

Summary

Figure 18: Percentage of Children continuously looked after for 12 months reaching Level 4 in English Years 2005-2011



There were 18 year 6 pupils in care this year, 12 boys and 6 girls. Of these three were not entered for SAT tests due to their special educational needs. Of the remaining 15 pupils, 7 (47%) reached level four in English.

This figure is slightly below the 2011 national average of 50% achieving level 4 in English and is down on the previous year's figure for Brighton and Hove.

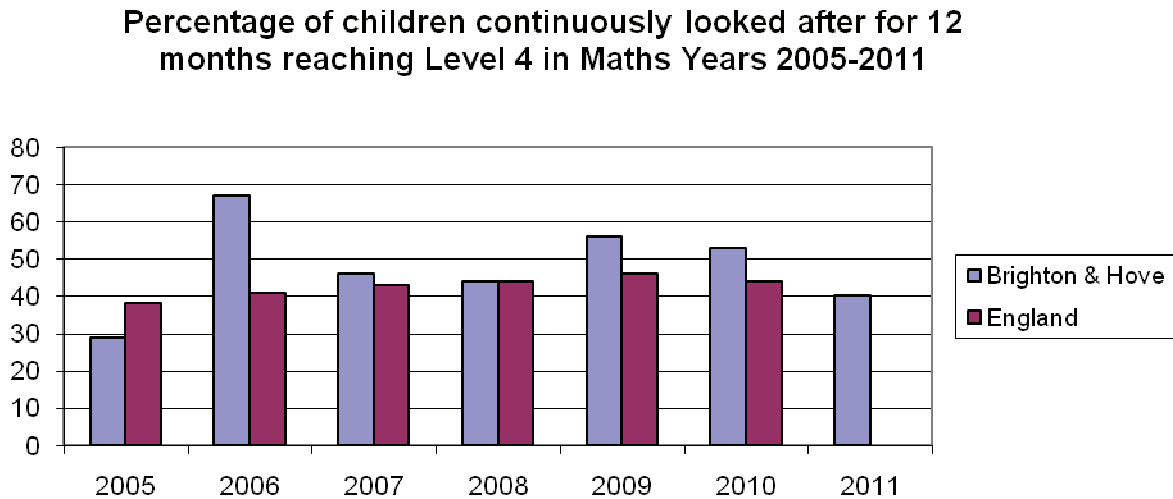
The prior attainment information for the children in this cohort did indicate that a dip in performance in Key Stage 2 English was to be anticipated.

Percentage of Children in Care reaching level 4 Maths at Key Stage 2

Definition: Children are expected to make two levels of progress between Key Stage 1 and 2. Nationally 80% of all children will achieve this bench mark and for children in care this figure is 48%.

Summary

Figure 19: Percentage of children continuously looked after for 12 months reaching level 4 in Maths Years 2005-2011



There were 18 year 6 pupils in care this year, 12 boys and 6 girls. Of these 3 pupils were not entered for SAT tests due to their special educational needs. Of the remaining 15 pupils, 6 (40%) reached level four in English.

This figure is below the national average for children in care when compared against last year's data which showed 48% of children in care reaching this level. It is also below on the previous year's figure for Brighton and Hove.

The prior attainment information for the children in this cohort did indicate that a dip in performance in Key Stage 2 Maths was to be anticipated.

Performance improvement activity

The Virtual School runs a summer catch up programme with the aim of supporting transition to secondary school for all year 6 pupils working below expected national curriculum levels (in both English & Maths). This summer 11 pupils joined the programme. As a proportion of the cohort in year 6, this is the highest number of pupils who have engaged in this programme and we are extending the support available to them until the October half term.

The Virtual School prioritises year 6 pupils for additional support including 1-2-1 support. We would like to introduce this earlier, in year 5 and are reviewing our resources and working with school colleagues to consider how this could be achieved.

The letter box club will continue to run next year. This scheme by the Book Trust provides monthly packages that are delivered between May and October to year 3 and year 5 children in care. Each package contains age appropriate reading materials and Maths activities to support children to improve their literacy and numeracy skills.

Percentage of Children in Care achieving 5 A* - C GCSE at KS4 including English & Maths.

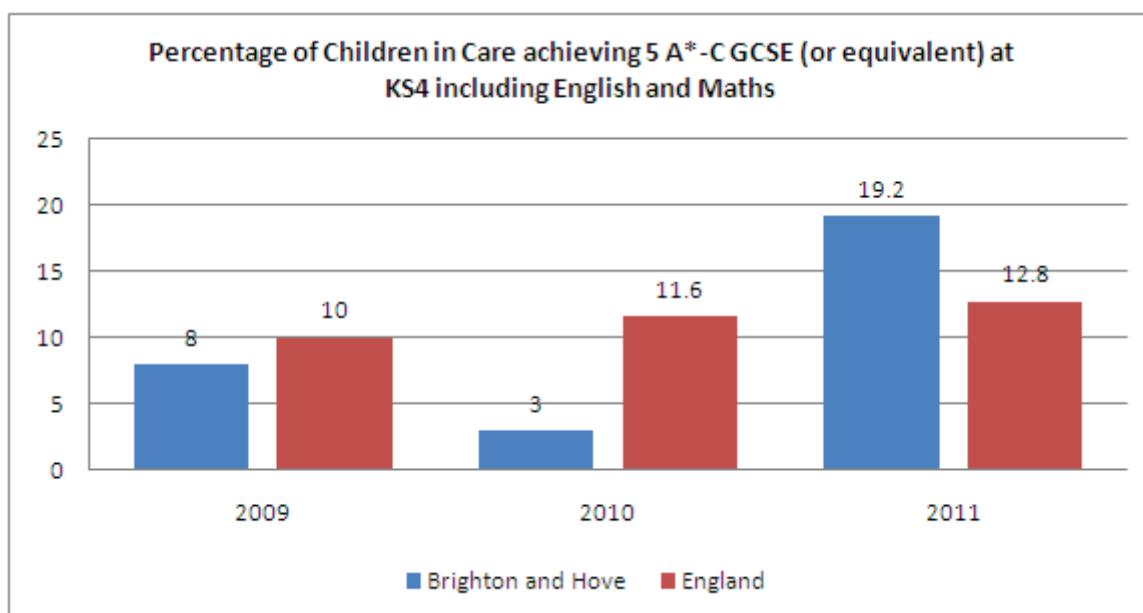
Definition: The number of looked after children who were in care for at least one year who were in year 11 and achieved the equivalent of at least 5 A*-C GCSEs, including English and mathematics (or equivalent) as a percentage of the total number of looked after children who were in care for at least one year who were in year 11.

Summary

Of the 42 Year 11 pupils in the Virtual School at the end of the last academic year, 26 will be formally reported on to the DfE with regard to their GCSE or equivalent results. These children have been in the care of Brighton and Hove continuously for a year on the 31st March 2011.

Nationally 53.4% of children achieved five good GCSEs including English and Maths, for children in care this was just 12.8% (2011).

Figure 20: Percentage of Children in Care achieving 5 A*-C GCSE (or equivalent) at KS4 including English and Maths



In Brighton & Hove 5 pupils achieved five A*- C GCSEs including English and Maths – this equates to 19.2%. This demonstrates notable improvement when compared to last year's validated figures and is above the 2011 national average of 12.8%.

1 student has had their English Language GCSE remarked from a D to a C and 1 student re-sat their Maths exam, taking their grade from a D to a C. 1 student missed this target by one grade in Maths by a very slim margin. Opportunities available to these students have dramatically improved by achieving this bench mark of five good GCSEs including both Maths and English.

These figures demonstrate a notable improvement against last year's figures, which once validated showed that only 3% (1 student) achieved this bench mark. In terms of the overall number of GCSEs achieved in all subjects, grade C and above the improvement was significant.

2011 - 26 pupils achieved 57 GCSE passes, grade C and above

2010 - 36 pupils achieved 27 GCSE passes, grade C and above

We do not expect the outstanding data to significantly impact on the figures in the table above; however it may impact on the indicators below. We are awaiting confirmation of results for six students. Of the 26 students 7 (27%) achieved 5A* - C at GCSE. (This is currently below the national average of 31.2%)

Of the 26 students 15 (58%) achieved 5 A* - G at GCSE. (This is currently higher than the national average of 50.6%)

Of the 26 students, 19 (70%), achieved 1 A* - G at GCSE. (This is currently lower than the national average of 73%)

12 students (46%) within the cohort of 26 have special educational needs. Of these 12 students, 8 were educated in special school provision.

Performance improvement activity

- Encourage a greater number of pupils to take up the offer of individual tuition at an earlier point in Key Stage 4

Local indicator – Percentage of Children in Care with an up-to date Personal Education Plan (PEP)

Definition: Personal Education Plans (PEPs) are a statutory requirement for all school age children in care. A PEP is a personalised plan for each child that records any specific learning needs and identifies strategies and support to enable them to make progress in line with their peers. The PEP meeting also provides the opportunity to identify successes in all aspects relating to school performance as well as any other areas that may be causing concern. They are reviewed every six months. There are no national indicators for this target; however other LAs do use this indicator, including some of our statistical neighbours.

Summary and Issues

65% of children on the register of the Virtual school have an up to date PEP in place as at March 2012, a fall from 83% in May 2011. It is likely that the change in regulations will have had an impact upon this performance indicator. Up until this year the initial PEP had to be completed within 20 days of a child coming into care. Under the new regulations the time frame has been reduced to 10 days.

Ensuring an up-to-date PEPs is in place is a priority for the Virtual School Team who undertake a audit three times a year in September, January and May. The team prioritises attendance at PEP meetings where a child is new into care, has had a change of placement or has been allocated a new social worker.

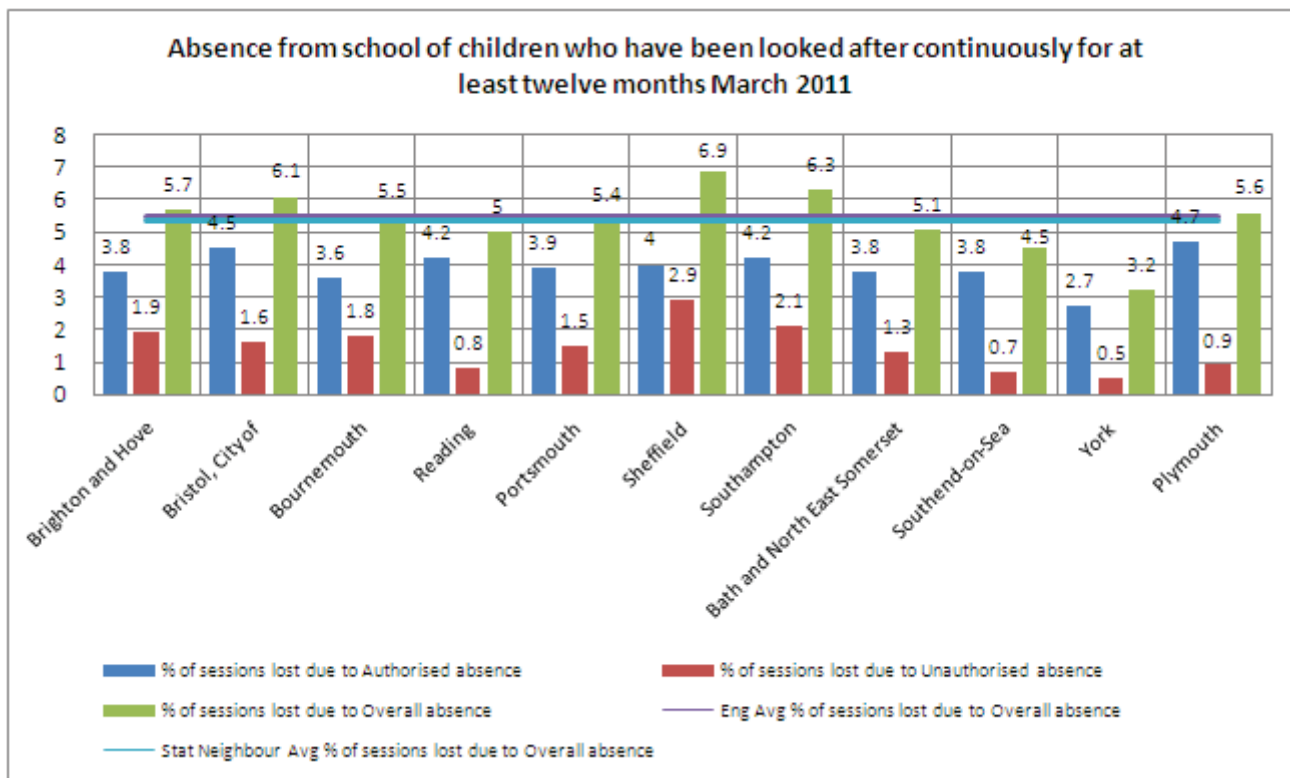
Performance improvement activity

Where the PEP audit identifies missing or out of date PEPs, the Virtual School team contacts the child's social worker to advise them of this and prompt them to schedule a meeting.

A detailed audit is being undertaken this year to review the quality of the PEPs with a particular focus on ensuring agreed actions are carried out within the recorded time frames.

Continue to deliver training and support to develop the knowledge and skills of social workers to enable them to coordinate/manage PEPs that are of high quality.

Figure 21: Absence from school of children who have been looked after continuously for at least twelve months March 2011⁶



Source: CLA-NPD matched data

Figure 21 illustrates absence for children looked after continuously for at least 12 months as at 31st March 2011 and reveals that 5.7% of sessions were lost due to overall absence⁷ in Brighton and Hove (3.8% authorised, 1.9% unauthorised), slightly above the national average of 5.5% (4% authorised, 1.5% unauthorised) and 5.4% for our statistical neighbours. The 2011 figure is an improvement from 6.7% in 2010 where 5% of sessions were lost due to authorised absence and 1.7% lost due to unauthorised absence.

5% of children looked after in Brighton and Hove were classed as persistent absentees under the old definition (64 or more sessions of absence authorised and unauthorised during the year, around 20 per cent overall absence rate) which is above the national average of 4.2%. However, 5.5% of children looked after in Brighton and Hove were classed as persistent absentees using the new definition (overall absence rate of 15%) which is below the England average of 6.7%. Future publications will only use the new definition.

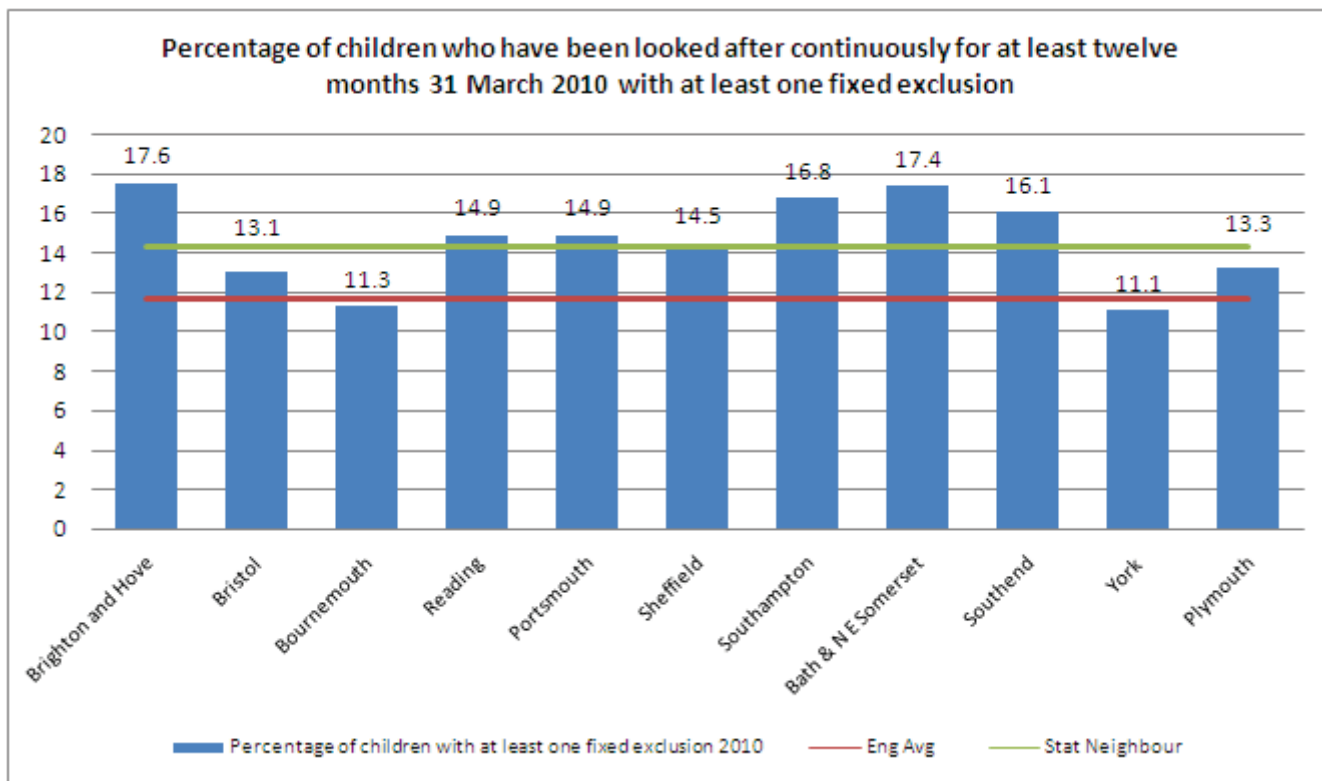
⁶ Includes children looked after who attend primary, secondary and special schools. Includes pupils attending CTCs or academies. Absence information is collected from primary and secondary schools, CTCs and academies, maintained and non-maintained special schools. This is then matched via the NPD.

All children looked after continuously for at least 12 months at 31 March 2011 regardless of age, including those for whom it was not possible to match school census data.

The number of children aged 5 to 15 looked after continuously for at least 12 months at 31 March 2011, including those for whom it was not possible to match school census data.

⁷ Absence percentages are based on the number of sessions lost out of all possible sessions, rather than the number of children looked after.

Figure 22: Percentage of children who have been looked after continuously for at least twelve months with at least one fixed exclusion 2010⁸



Source: CLA-NPD matched data

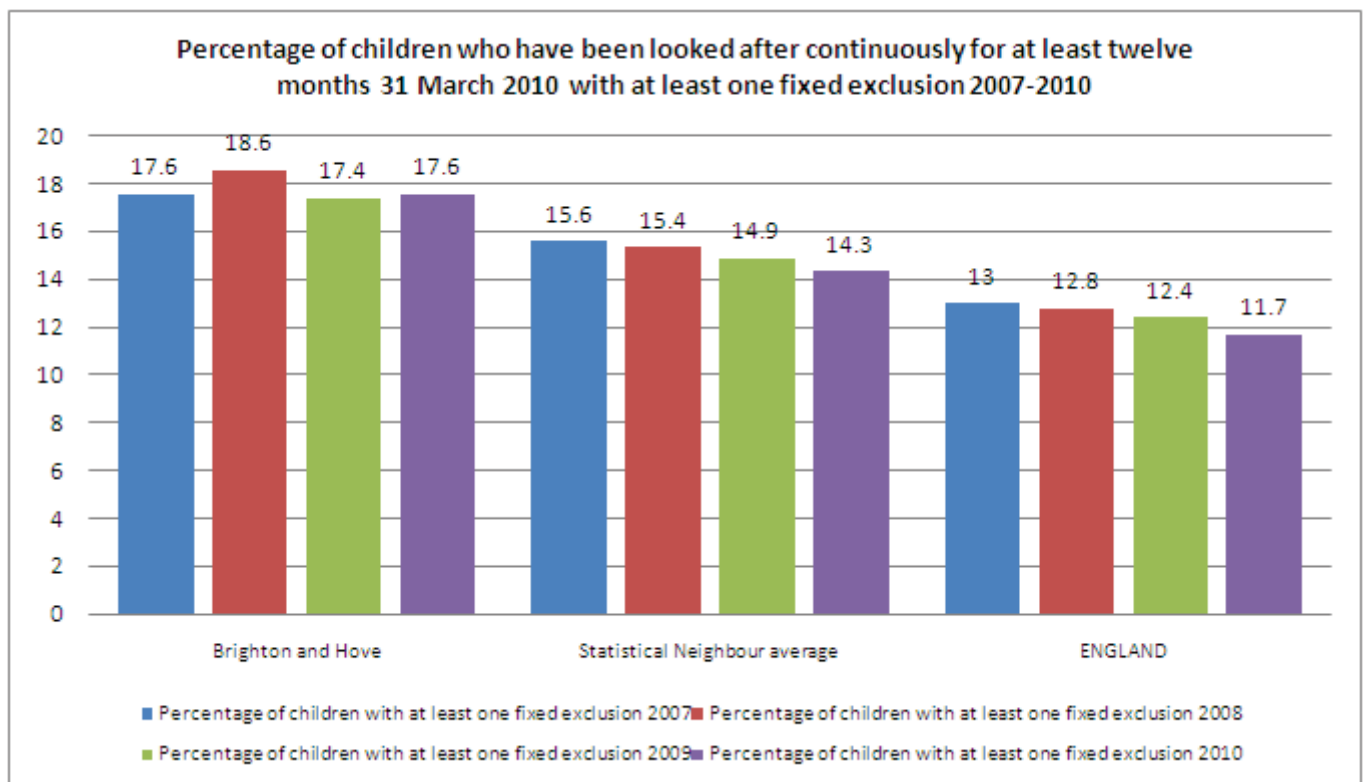
Figure 22 illustrates the percentage of children who had been looked after continuously for at least 12 months at 31st March 2010 who had received at least one fixed exclusion and shows that 17.6% of children looked after in Brighton and Hove received at least one fixed exclusion, above the national average of 11.7% and 14.3% for our statistical neighbours. Furthermore, the percentage for Brighton and Hove is highest among its statistical neighbours, followed by Bath and North East Somerset with 17.4%. It should be noted that the rate of exclusions for all children in Brighton and Hove is high compared to our statistical neighbours.

⁸ Exclusion information is collected from primary and secondary schools, CTCs and academies, maintained and non-maintained special schools.

The total number of children looked after continuously for at least twelve months as at 31 March regardless of age, including those for whom it was not possible to match school census data.

The number of children looked after continuously for at least twelve months as at 31 March aged between 5 and 15, including those for whom it was not possible to match school census data.

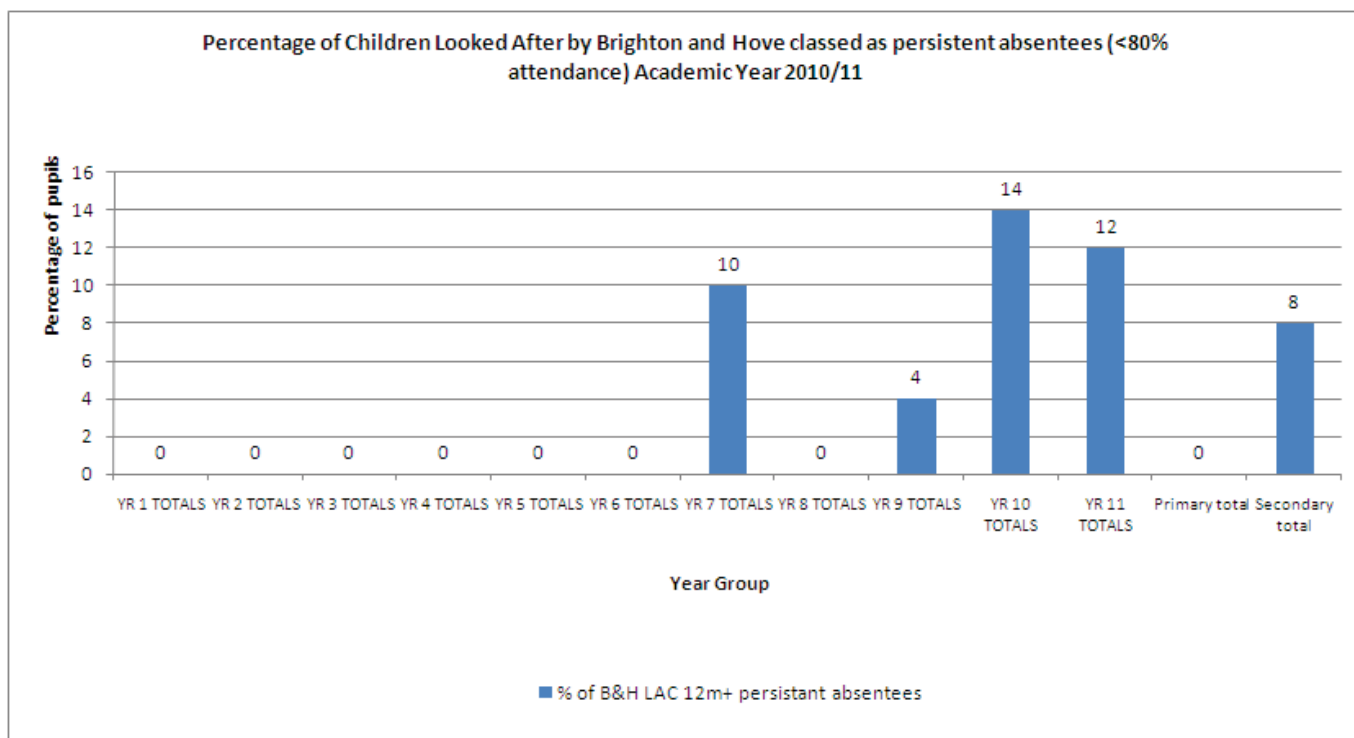
Figure 23: Percentage of children with at least one fixed exclusion 2007-2010



Source: CLA-NPD matched data

Figure 23 provides the exclusion data for children looked after for 2007 to 2010 and reveals that the percentage of children looked after continuously for at least 12 months has been consistently above the national and statistical neighbour averages. It is interesting to note that whilst the national and statistical neighbour averages have fallen year-on-year since 2007, the percentage of children looked after receiving at least one fixed exclusion has remained high.

Figure 24: Percentage of Children Looked After by Brighton and Hove classed as persistent absentees (<80% attendance) Academic Year 2010/11



Source: Virtual School

Persistent absence refers to below 80% attendance

Figure 24 provides a breakdown percent of children looked after continuously for at least 12 months by Brighton and Hove were classed as persistent absentees (less than 80% attendance) during the academic year 2010/11 by school year and reveals that 14% of children in year 10, 12% of children in year 11 and 10% of children in year 7 were persistent absentees.

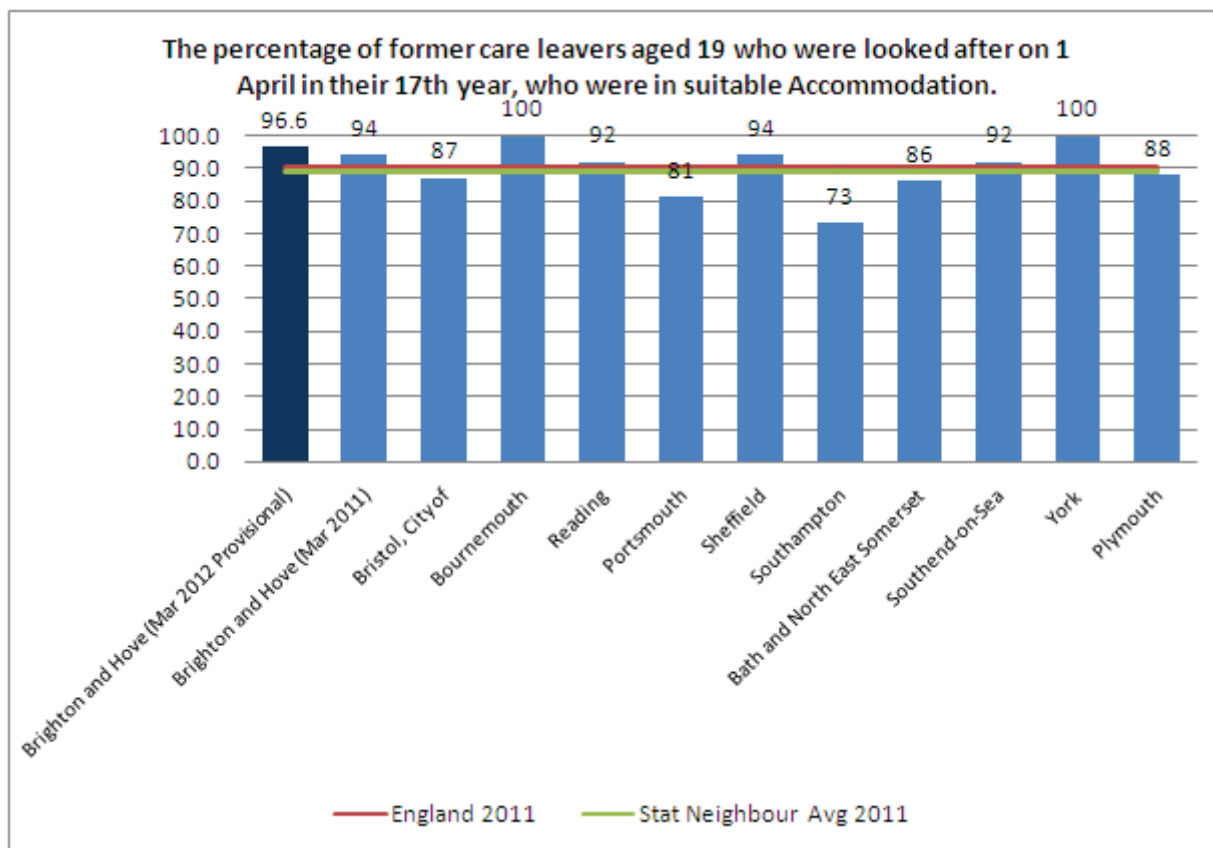
Increasing the number of care leavers in 'settled, safe accommodation'

Care leavers at 19 - Suitable accommodation

Definition: The percentage of former care leavers aged 19 who were looked after under any legal status (other than V3 or V4) on 1 April in their 17th year, who were in suitable accommodation.

Summary

Figure 25: The percentage of former care leavers aged 19 who were looked after on 1 April in their 17th year, who were in suitable Accommodation.



Source: SSDA903

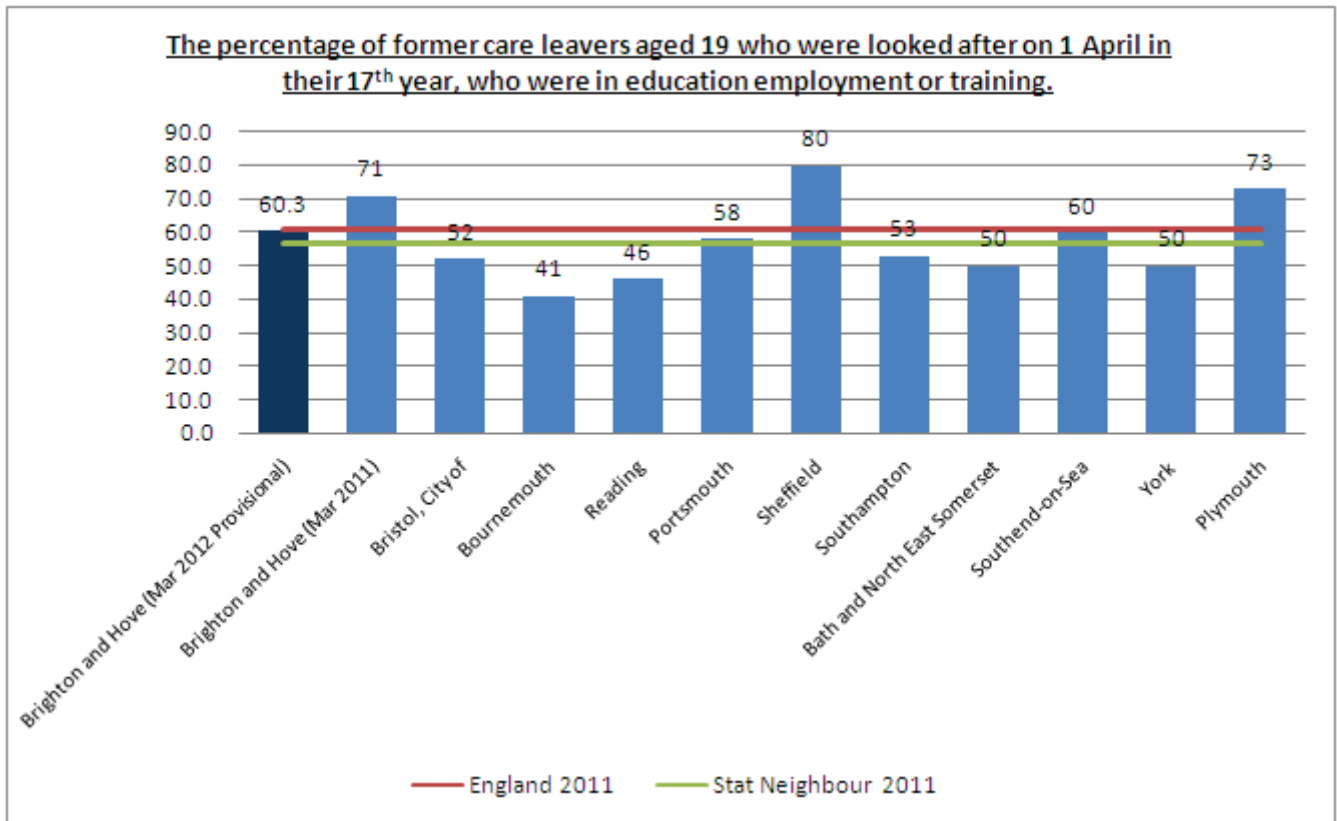
The provisional outturn figure for 2011/12 is 96.6% which is an improvement from 93.8% in 2010/11; and above the 2010/11 England average (90%) and statistical neighbour average (89.3%). The 3 year average (2009, to 2011) for this indicator is 91% which ranks Brighton and Hove joint 80th out of 152 LAs. Of the 2 (3.5%) in 'unsuitable accommodation', 1 was in custody and 1 in unsuitable temporary accommodation.

Care leavers at 19 - in education, employment and training

Definition: The percentage of former care leavers aged 19 who were looked after under any legal status on 1 April in their 17th year (other than V3 or V4), who were in education, employment or training.

Summary

Figure 26: The percentage of former care leavers aged 19 who were looked after on 1 April in their 17th year, who were in education employment or training.



Source: SSDA903

Summary

The provisional outturn figure for 2011/12 is 60.3%, a fall from 70.8% last year and slightly below the 2011 national average of 61%. The 3 year average (2009 to 2011) for this indicator is 91% which ranks Brighton and Hove joint 52nd out of 152 LAs.

Performance Issues

23 out of a cohort of 58 were NEET in 2011/12 where 66.6% care leavers were in Education Employment and Training in 2010/11. Information from the Brighton & Hove Youth Employability Service shows that of the 377 young people aged 19 years on its database, 213 (**56.5%**) are in Education, Training & Employment and 164 (**43.5%**) are NEET. There are several factors which have affected the increase of NEET young people for this period:

- Vacancies listed at B&H Job Centres have reduced by 300 compared to same period last year
- current notified vacancies (March '12) at 1,109 and total claimants over 6000

- within this cohort, the number of 16–24 year olds currently claiming JSA (March '12) are Brighton (1397) and Hove (635), a ratio of 6 people for every job vacancy
- Job Centres are also struggling to find work experience placements for 16–24 year olds particularly in the retail sector due to major employers in the city refusing to offer these opportunities after negative press reports”

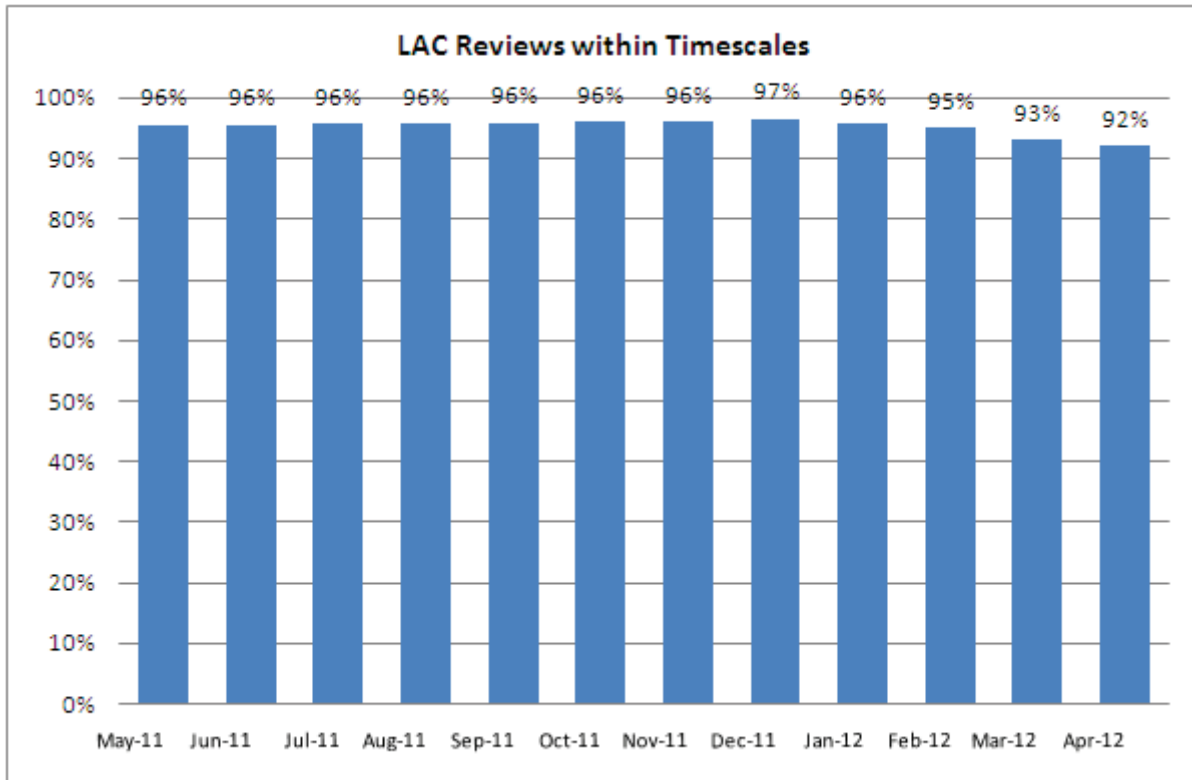
Corporate Parenting Processes

Looked after children cases which were reviewed within required timescales (%)

Definition: The percentage of children looked after cases which should have been reviewed during the year ending 31 March that were reviewed on time during the year.

Summary

Figure 27: The percentage of children looked after cases which should have been reviewed during the year that were reviewed on time during the year



Source: Monthly Monitoring April 2012

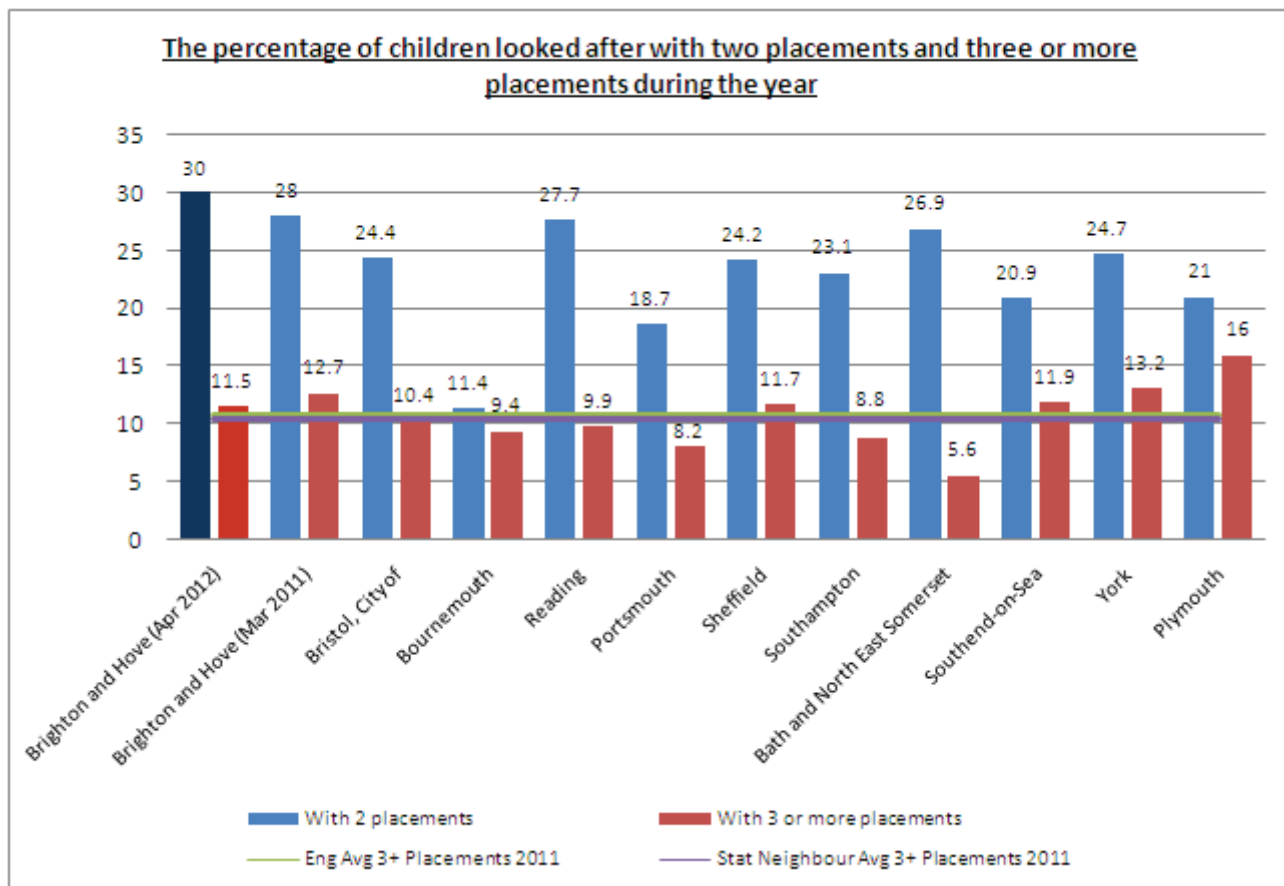
The percentage of Looked after children cases which were reviewed within required timescales has been consistently good over the last 12 months with 92% of reviews completed within timescales as at April 2012, above the 2009/10 national average (90.5%) and statistical neighbour average of 87%. Please note that the national figures for 2010/11 have not been published by DfE.

Stability of placements of looked after children: number of placements

Definition: The percentage of children looked after at 31 March with three or more placements during the year.

Summary

Figure 28: The percentage of children looked after at 31 March with three or more placements during the year ending 31 March



Sources: SSDA903 and Monthly Monitoring for April 2012 figures

The percentage of children placed three or more times during the year has improved from 13.9% in September to 11.5% in April. However, performance remains above the national average for 2010/11 (10.7%) and 10.5% for our statistical neighbours. 30% of children have been placed 2 times as at April, above the national average of 22% as at 31st March 2011.

Performance Issues

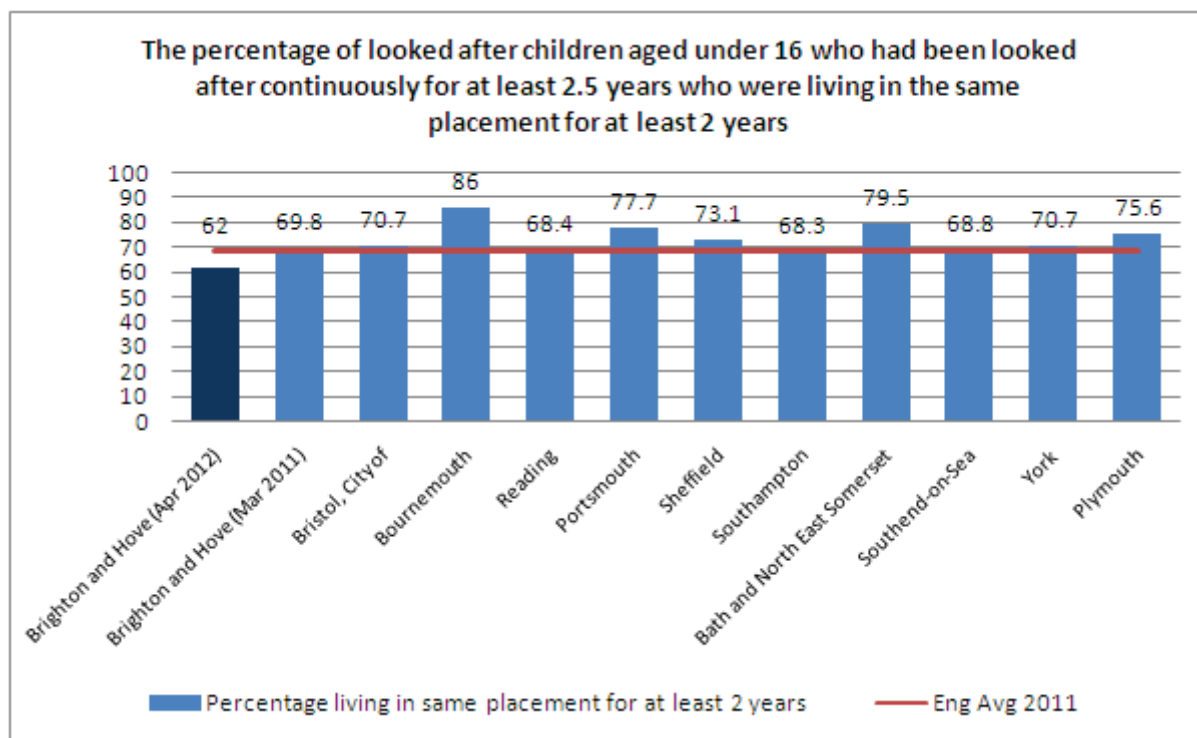
Commentary from the Children in Care Service Manager states that the majority of the cohort are children held in the CIN service and the placement moves were associated with unresolved care planning, such as parent and baby placements, failed rehabs, failed Family and Friends placements and emergency placements. There were a number of young people absconding but returning to the same placement and a relatively small number of difficult to place teenagers moving round the system. Two children were in permanent placements (placed for adoption) including 1 concurrency placement where the placement had not changed but the status had.

Stability of placements of looked after children: length of placement.

Definition: The percentage of looked after children aged under 16 at 31 March who had been looked after continuously for at least 2.5 years who were living in the same placement for at least 2 years, or are placed for adoption and their adoptive placement together with their previous placement together last for at least 2 years.

Summary

Figure 29: Stability of placements of looked after children



Sources: SSDA903 and Monthly Monitoring for April 2012 figures

Performance has fallen from 67% in September 2011 to 62%, which is below the England average of 68.6% as at 31st March 2011.

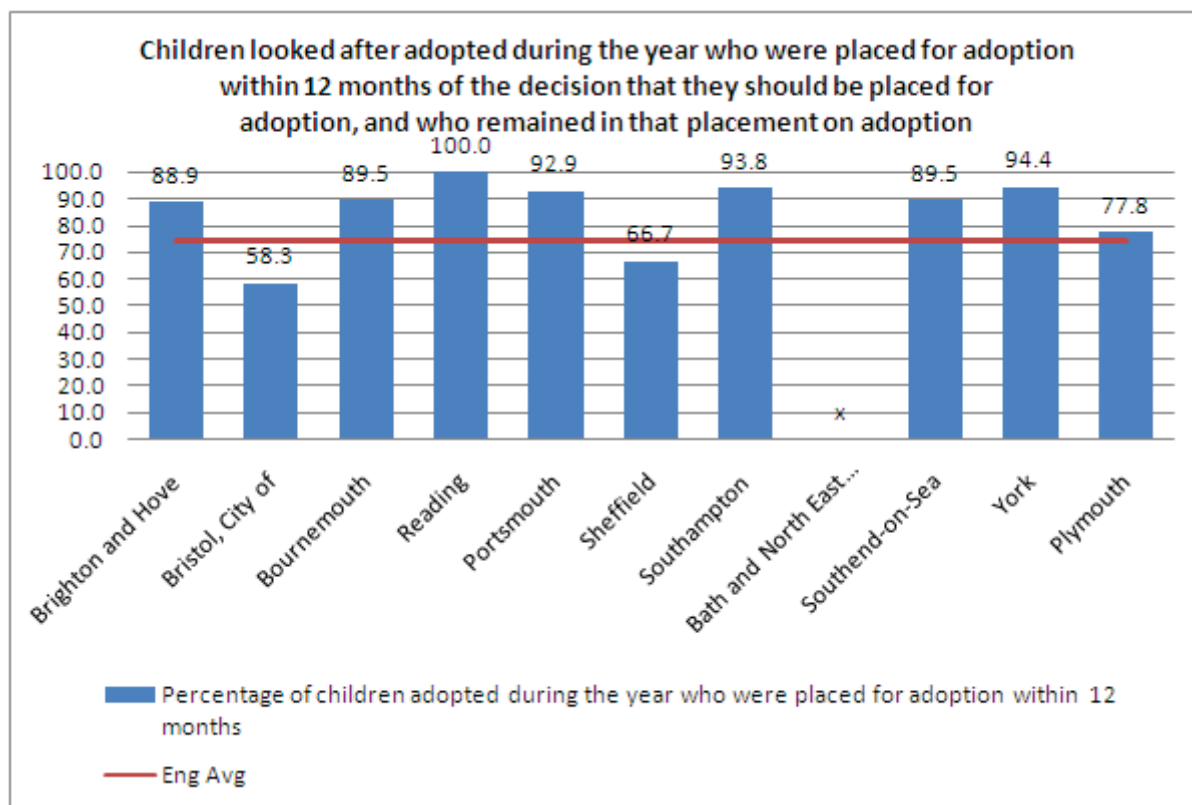
There has been further consideration of the children that are not included in the numerator group to provide some additional information behind this performance indicator. Children that are permanently placed with foster carers but may have moved house with their carer. For example, if the carers move to another local authority (i.e. from Brighton to East Sussex) this would count as a placement move. However if the carers had moved house but remained within Brighton & Hove this would not count as a placement move. There are other anomalies that need to be highlighted as many of the children in the group are now settled with permanent foster carers but have not been in that placement for the last 2 years or they may have moved to permanent family and friends foster carers with a care plan of special guardianship or moved to foster carers that are being assessed as adoptive parents. This indicator is also affected by children in hospital placements as this will be counted as a placement move. An analysis of the cohort of children who have not been in the same placement for two years by the Children in Care Service Manager revealed that this included 2 children who were in a long term placement whose carers had relocated out of the area. The majority of the children were in stable placements but had not been in the placement for 2 years and there were a small minority of children whose situation was unstable; not all were teenagers.

The percentage of looked after children adopted during the year who were placed for adoption within 12 months of the decision

Definition: Children looked after adopted during the year who were placed for adoption within 12 months of the decision that they should be placed for adoption, and who remained in that placement on adoption

Summary

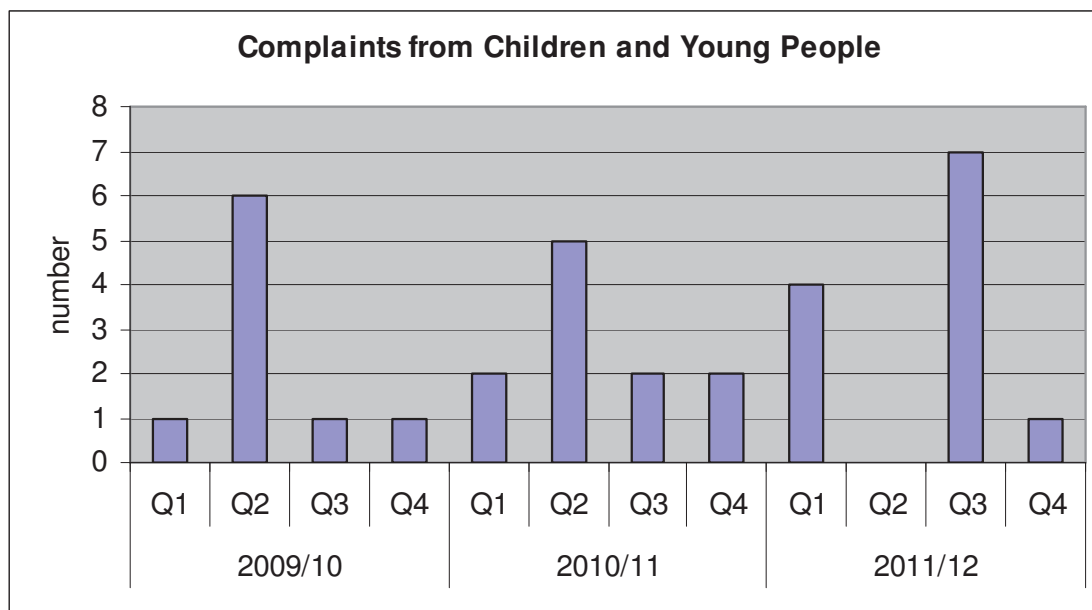
Figure 30: Children looked after adopted during the year who were placed for adoption within 12 months of the decision that they should be placed for adoption, and who remained in that placement on adoption



Source: SSDA903

88.9% of children adopted during the year in Brighton and Hove were placed for adoption within 12 months, above the national average of 74%. The 3 year average for this indicator (2009-2011) is 88%, which ranks Brighton and Hove joint 15th out of 152 Local Authorities.

Figure 31: Number of Formal Complaints made by Looked After Children and Young People



Source: Standards and Complaints Manager

The number of looked after children and young people who raise a formal complaint under the Children Act averages out to about one per calendar month. Nearly all complaints receive support from an advocate from YAP.

The reason there are so few formal complaints from Young People are reasonably well understood. In the main young people simply want to get the issue sorted and do not want to engage in formal processes. We are aware that the advocates in YAP do much good work to help young people to make representations and have those issues either resolved or provide explanations why they cannot be.

However, it is essential that Looked After Children are fully aware they can make formal complaints and that they understand how they can do so. Social Workers and IROs can play a significant role in ensuring children and young people and their carers know what options are available if they are unhappy with the services they are provided.

Some of the key issues raised by Looked after Children are related to Access to Records, Confidentiality, Contact Arrangements, and Placement Decisions.

During the period recorded four complaints were the subject of Stage Two Investigations. None of these progressed to Stage Three Review Panel. The Ombudsman has carried investigations into complaints on behalf of four looked after children.

10

The care system – consumer's views

The final section of the questionnaire was headed 'In your own words', and invited respondents to describe the best and worst things about being looked after in care, also giving them an opportunity to highlight three things about the care system that they would change if they were in charge.

"Every young girl or boy should be allowed their own room. I share a room with a 13 year-old and we have different bed-times."

Not surprisingly, a vast range of responses were elicited to these questions. Some were extremely specific and personal, some addressed wide-ranging policy issues, others cropped up again and again, virtually word for word. In order to make sense of such large quantities of varied data, it was inevitably necessary to lose some of the fine detail and reference to personal situations. However, at the same time every attempt has been made to ensure both that the main themes have been captured and the most frequently recurring specific items retained.

The best thing about being looked after in care

List 10.1 shows the most frequently occurring responses to the question 'What is the best thing about being *looked after* in care?' for the whole sample together. 'Having someone who cares' was by far the most common answer, given by 21 per cent of all respondents (433 individuals). The other most frequently occurring items on the list concentrate on emotional and social benefits of being *looked after*, although 8 per cent of the sample suggested that there was 'nothing' good about being in care.

List 10.1

Best thing about being in care – all respondents

Specific items mentioned by more than 5 per cent of sample

1	Having someone who cares	433	21%
2	Sense of security	176	8%
3	Someone to talk to	173	8%
4	Nothing	169	8%
5	Help with problems	149	7%
6	Meeting more people	129	6%
7	Independence	128	6%
	Base	2,073	

"I don't like this idea of everything I do getting written down. It makes me feel like a science project."

The responses broken down by type of placement (**Lists 10.2 to 10.4**) show that while 'having someone who cares' is the most frequently occurring item for each type of placement, it is far more likely to be mentioned by children in foster care (28 per cent) than elsewhere. It is also worth noting that 'nothing' is the second most frequently occurring item for children and young people in both children's homes and all other types of placement, commanding 11 per cent and 12 per cent of responses respectively, whilst it is of relatively minor significance as a response for those in foster care (just 5 per cent).

List 10.2 Best thing about being in care – children in foster care

Specific items mentioned by more than 5 per cent of sample

1	Having someone who cares	307	28%
2	Sense of security	118	11%
3	Someone to talk to	90	8%
4	Being like one of the family	79	7%
5	Help with problems	77	7%
6=	Independence	62	6%
6=	Meeting more people	62	6%
8	Nothing	60	5%
Base		1,112	

"We all get treated like 5 year olds and everybody in here hates it."

List 10.3 Best thing about being in care – children in residential homes

Specific items mentioned by more than 5 per cent of sample

1	Having someone who cares	81	12%
2	Nothing	74	11%
3	Someone to talk to	65	10%
4	Help with problems	48	7%
5=	Independence	45	7%
5=	Meeting more people	45	7%
7=	Sense of security	40	6%
7=	Visiting different places	40	6%
9	Lots of activities	37	6%
10	Not being ill-treated	33	5%
Base		649	

The focus so far in this chapter has been on the most frequently occurring responses. However, this approach to the analysis does not account for the responses of all respondents, in particular those who referred to a very specific aspect of life in care. It is

The care system – consumer's views

List 10.4

Best thing about being in care – children and young people in other placements (including secure units)

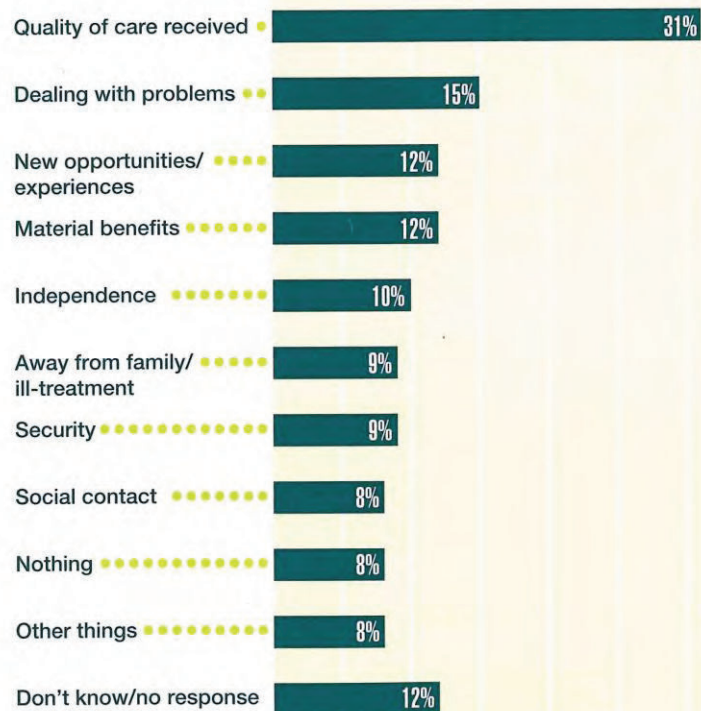
Specific items mentioned by more than 5 per cent of sample

1	Having someone who cares	49	16%
2	Nothing	37	12%
3	Help with problems	26	8%
4	Meeting more people	24	8%
5	Someone to talk to	22	7%
6	Independence	19	6%
7	Sense of security	16	5%
Base		309	

"When a sensible young person asks to sleep over at a friend's house, there shouldn't be so many procedures to follow. It can be really frustrating."

important not to overlook such responses. Therefore, in **Figure 10.1**, all responses to the question have been grouped together under broad themes.

Figure 10.1 Best thing about being in care (themes)



Base = 2,073 Some respondents gave more than one response

Examples of the types of comments comprising themes in Figure 10.1

Quality of care received

Having someone who cares; being spoiled; treated like one of the family; being looked after; the staff; treated with respect

Dealing with problems

Help with problems; someone to talk to; better relationship with my family; not in trouble with the police

New opportunities/experiences

Visiting different places; lots of activities; better chance of education; more opportunities; holidays

Material benefits

Having pocket money; the food; more money; better clothes/clothing allowance; new things; having a roof over my head

Independence

Own room; independence; space and time to think; privacy; having a say

Away from family/ill-treatment

Not being ill-treated; away from family; less arguments

Security

Sense of security; knowing the boundaries

Social contact

Meet more people; living with people the same age; not being isolated; allowed to see friends

"I'm very happy with my present placement, even though I have filled the 'worst things' box – I'm just a teenager and I love to complain!"

A positive comment relating to the quality of care received was by far the most common type of response. 12 per cent of the sample either left the question blank or wrote 'don't know'. Taken together with those who responded 'nothing', this suggests that around one in five children in care are unable, or unwilling, to report anything positive about their experience of being *looked after*.

The care system – consumer's views

The worst thing about being looked after in care

There was a substantial body of agreement about the worst aspects of being *looked after*. **List 10.5** shows the three most frequently recurring specific answers given to the question 'What is the worst thing about being *looked after* in care?'. Separation from family was the most common response, mentioned by *20 per cent* of the sample, whilst *11 per cent* referred to rules and restrictions affecting their lives. *15 per cent* responded 'nothing', suggesting that for this fairly substantial minority, being *looked after* is a considerable improvement on their previous life. These three items account for almost half of all responses to the question. Other responses were very diverse, each being mentioned by fewer than *5 per cent* of respondents in each case.

List 10.5 Worst thing about being in care – all respondents

Specific items mentioned by more than 5 per cent of sample

1	Being away from family	400	20%
2	Nothing	300	15%
3	Rules and restrictions	220	11%
	Base	2,073	

These same three items (as in List 10.5) dominate the replies from respondents in every type of placement, simply occurring in slightly different proportions. For children in foster care, no other aspect of life in care is mentioned by more than *5 per cent* of respondents. However, *6 per cent* of those respondents not in foster care referred to bullying as being the worst thing about being looked after.

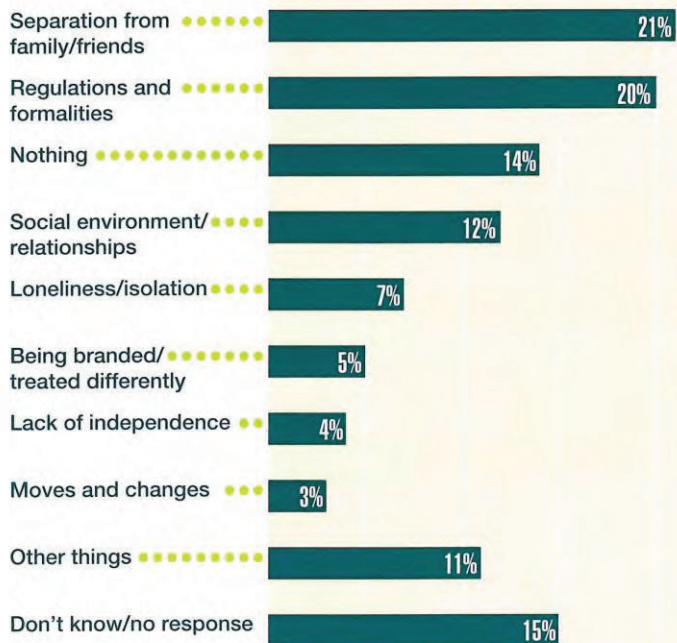
Figure 10.2 gathers together the totality of responses under broad themes, in order to include and represent the views of all respondents.

There are some differences in response according to type of placement. For example, those in children's homes or other placements (including secure units) were more than twice as likely as those in foster homes to highlight aspects of the social environment as being the worst thing about being in care (*16 per cent* compared

"My foster parents have treated me differently to their own children, which I don't think is fair."

"There should be more money available for school outings and family holidays."

Figure 10.2 Worst things about being in care (themes)



Base = 2,073 Some respondents gave more than one response

with 7 per cent). By contrast young people in foster care were almost twice as likely to write 'nothing' in answer to the question, 19 per cent doing so, compared with 10 per cent of all other looked after children and young people.

Examples of the types of comments comprising themes in Figure 10.2

Separation from family/friends

Being away from one's family; being away from friends

Regulations and formalities

Rules and restrictions; reviews; social workers; not sleeping at friends; police checks on friends; bedtime; can't stay out in the evenings; meetings; chores

Social environment/relationships

Bullying; being shouted at; attitude of staff; other children/residents; being picked on; fights/arguments; abuse; racism; mixing with wrong people; don't like foster parents; being treated like a child

The care system – consumer's views

Examples of the types of comments comprising themes in Figure 10.2 continued

Loneliness/isolation

Being lonely; not being loved; feeling insecure; not being understood; not listened to; being left out; living with strangers

Being branded/treated differently

Being branded; treated differently at school

Lack of independence

No privacy; no say; not knowing what is happening

Moves and changes

Moving frequently; the thought of moving; meeting new people

"Give everyone the same amount of Christmas money."

Things to change about the care system

Respondents were invited to write down three things that they would change if they were in charge of the care system. No order of priority was suggested, so all responses have been given equal weight in analysis. Again, as with the best and worst things about being in care, the range of responses provided was extremely broad. However, a number of specific items were repeatedly mentioned. The most prevalent of these are listed in **List 10.6**.

List 10.6 What would you change about the care system? – all respondents

Specific items mentioned by more than 5 per cent of sample

1	More pocket money/allowance	518	25%
2	Bedtimes	271	13%
3	More freedom to be out	245	12%
4	More say in arrangements	170	8%
5	See family more often	148	7%
6	Nothing	132	6%
7	More visits from social worker	129	6%
8	Better social workers	107	5%
	Base	2,073	

The most frequently occurring individual item on these wish-lists was 'more pocket money', listed by one in four of all respondents. 'Bedtimes' and 'freedom to be out' were each listed by one in

List 10.7 What would you change about the care system?
– children in foster care

Specific items mentioned by more than 5 per cent of sample

1	More pocket money/allowance	196	18%
2	More say in arrangements	106	10%
3	See family more often	104	9%
4	Nothing	95	9%
5	More freedom to be out	94	8%
6	More visits from social worker	91	8%
7	Better social workers	75	7%
8	Sleeping out	63	6%
Base		1,112	

"No support is given. It's like, 'She's in a foster home – forget her'."

List 10.8 What would you change about the care system?
– children in residential homes

Specific items mentioned by more than 5 per cent of sample

1	More pocket money/allowance	270	42%
2	Bedtimes	190	29%
3	More freedom to be out	117	18%
4	More activities/outings	57	9%
5	Better accommodation	44	7%
6	More say in arrangements	33	5%
Base		649	

List 10.9 What would you change about the care system? – children and young people in other placements (including secure units)

Specific items mentioned by more than 5 per cent of sample

1	More pocket money/allowance	62	20%
2	Bedtimes	39	13%
3	More freedom to be out	33	11%
4	More say in arrangements	29	9%
5=	Better social workers	20	6%
5=	More visits from social worker	20	6%
7=	More understanding	16	5%
7=	Permit smoking	16	5%
Base		309	

The care system – consumer's views

"Young people in care should have their own room and the facilities they need to keep them occupied on things other than vandalism."

eight of the sample. These are long-standing grievances for children in care, also featuring prominently in *Not Just a Name*, and clearly continue to be strongly felt. Looking at the wish-lists for children and young people in different types of placement (**Lists 10.7 to 10.9**), it is apparent that these three issues are of enormous concern to children and young people, particularly to those living in children's homes. Children and young people in foster care or other types of placement reveal more diversity in their wishes.

Gathering individual wish-list items together into broad themes was much more difficult than for the best and worst things in care, responses ranging, as they did, from a very specific detail of an individual's experience to broad generalities relating to the running of social service departments. (**Figure 10.3**)

Figure 10.3 What would you change about the care system? (themes)



Base = 2,073 Some respondents gave more than one response

"I think social services need to spend more money on important things e.g. keeping children in care after they are 16."

Examples of the types of comments comprising themes in Figure 10.3

Allowances

More pocket money; more clothing allowance; transport allowance

Care system – practicalities

More/less visits from social worker; less waiting for decisions; more support for carers; choose own accommodation; meet carers before moving in; better checks on foster parents; less moving; less staff changes

More freedom/independence

More freedom to be out; more privacy; more say

Particular rules/restrictions

Bedtimes; sleeping out; permit smoking; no restraints

Care system – policy issues

Better social workers; less budget cuts; more foster homes; no reviews; better staff; no police checks on friends; less children in care; social services; try not to split families; ban children's homes; change public view of care

Quality of life

Better food; more activities/outings; better accommodation; more holidays

Emotional/support issues

Make sure people are happy; more support for care-leavers; support groups; counselling/advice service

Contact with family/friends

See family more often; having to see family; let friends stay; more time with friends

Quality of social environment

More discipline; less bullying; treat everyone equally; more family atmosphere

The care system – consumer's views

"Social services should seriously think about the life of young people after care. Most of them are left alone and social services should not forget that those young people don't have anything or anyone..."

Figure 10.3 gives some idea of the types of changes *looked after* children and young people would like to see in the way in which the care system affects their lives. Some themes cover the immediate and personal, such as allowances and the impact of particular rules and restrictions. Others have more general application, such as those which touch upon aspects of policy and implementation of the entire care system.

10

Key points

- 'Having someone who cares' was the most frequent response to the question, 'What is the best thing about being in care?'
- One in five respondents did not report anything positive about being in care.
- Being separated from their family was the most common response to the question, 'What is the worst thing about being in care?'
- 15 per cent of the sample responded 'Nothing' when asked the worst thing about being in care.
- Large numbers of respondents (particularly those in children's homes) expressed grievances about pocket money, bedtimes and freedom to be out.

CORPORATE PARENTING SUB COMMITTEE

Agenda Item 8

Brighton & Hove City Council

Subject:	Corporate Parenting Sub Committee Workplan		
Date of Meeting:	4th July 2012		
Report of:	Strategic Director, People		
Contact Officer:	Name:	James Dougan	Tel: 29-5511
	Email:	james.dougan@brighton-hove.gov.uk	
Key Decision:	Yes	Forward Plan No:	
Ward(s) affected:	All		

FOR GENERAL RELEASE

1. SUMMARY AND POLICY CONTEXT

As corporate parents local authorities have a challenging role and acting like good corporate parents and being aware of the needs of the children and young people must be a key priority.

Looked after children are not a homogenous group, they are individual children with their own personalities, needs and experiences. However, they share one significant characteristic in that their outcomes are generally poorer than their peers within the general population.

The following report is aimed at providing some guidance to the committee for a future thematic work plan that will enable the members to discharge some of their corporate parenting responsibilities, giving a summary of national and local context.

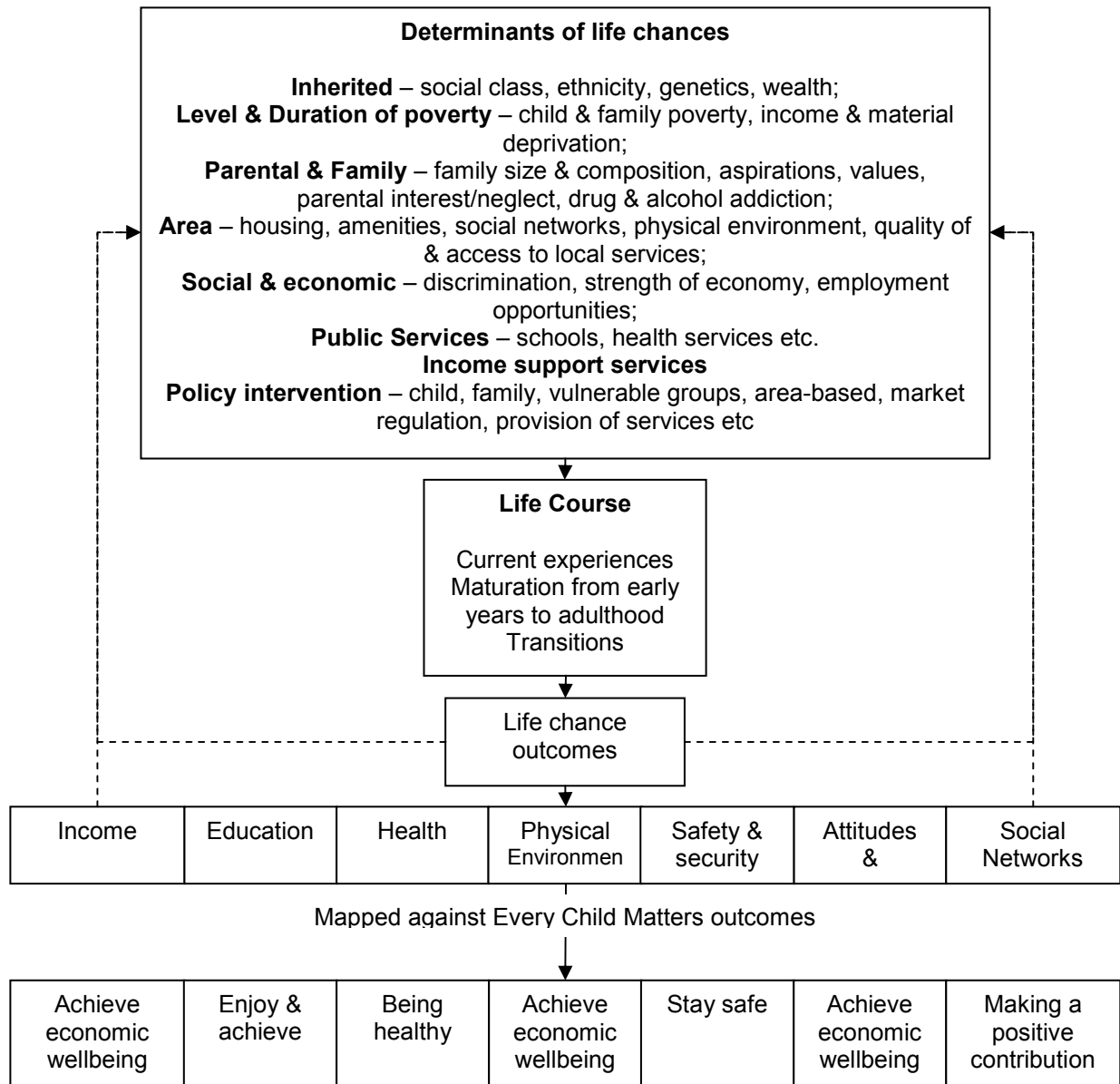
1.1 Life chances

In England, childhood origins shape adult destinations, and the multiple disadvantages associated with poverty and inequalities of various kinds permeate different aspects of childhood. As a consequence, there are marked continuities in socio-economic circumstances both inter-generationally and across the life-course from parent to child, and from childhood to adulthood.

Figure 1 Shows key variables that reinforce outcomes across generations and over the life course.

It follows that while intervention in the early years is crucial for reducing inequalities, people also require support at all stages of their lives to alleviate the inter-linked effects of poverty. Longitudinal research has demonstrated that the most pervasive childhood antecedents to disadvantage in young adulthood are educational outcomes, childhood poverty, frequent school absences, contact with the police and low parental interest. In addition, children who grow up in poverty are more likely to have lower self-esteem, believe that health is a matter of luck, play truant and expect to leave school at the age of 16.

Figure 1: The determinants of life chances across the life-course & inter-generationally.



1.2 Every Child Matters Outcomes & Domains

Enjoy & achieve

- ready for school
- attend school
- enjoy school
- achieve @ primary school
- achieve personal and local development
- enjoy recreation
- achieve @ secondary
- Access to transport and material goods
- Live in households free from low income

Making a positive contribution

- Engage in community
- Support environment
- Engage in decision making that affects your life
- Develop positive relationships
- Develop confidence
- Develop enterprising behaviour

Being Healthy

- Physically
- Mentally
- Emotionally
- Sexually
- Healthy lifestyles
- Substance misuse and alcohol

Stay Safe

- Safe from neglect
- Safe from accidental harm
- Safe from bullying
- Safe from crime
- Have security, stability and cared for

Achieve economic well being

- Engage in further education or training
- Ready for employment
- Live in decent home

1.3 There are 7 thematic areas which have a major part to play in achieving better outcomes and life chances for looked after children.

Thematic areas are:

- Fostering, placement stability and care planning
- Educational
- Health
- Crime and substance misuse
- Social Exclusion
- Resilience of looked after children
- Adoption

2. RECOMMENDATIONS:

2.1 Members to agree the priority and sequence for the future workplan for the committee from the suggested 7 thematic areas in 1.3 .

It is suggested that members have no more than 1 or 2 thematic areas per committee. This will allow full exploration of each theme and time for any current issues to be addressed within the committee that affects looked after children.

2.2 The committee needs to be able to identify how the whole of the local authority will contribute to better outcomes for children who are looked after. Therefore each Strategic Director across the local authority will be asked to complete an audit of council wide contributions to corporate parenting within their service areas, to inform members of their contribution.

3. RELEVANT BACKGROUND INFORMATION/CHRONOLOGY OF KEY EVENTS:

The suggested 7 thematic areas for exploration by the sub committee are:

3.1.1 Theme 1: Fostering, placement stability and care planning

a. Placement Stability

Children and young people entering care are likely to have been abused or neglected. Their experiences are also likely to have included one or more of the following: domestic violence, substance misusing parent(s), poverty, homelessness, the loss of a parent, or inadequate parenting. Attachment experiences with carers may have been disturbed, and these experiences can underpin the subsequent limited or confliction pattern of connections that many children and young people make with care staff and substitute carers. Research in this area has identified that children and young people who go on to experience high levels of placement instability within the care system are likely to be those who already displayed multiple problem behaviours prior to becoming looked

after. Challenging and aggressive behaviour is a key reason for placement breakdown, but placements can also cease for other reasons unrelated to the child or young person, for example: rivalry difficulties between foster children and the family's own children; contact with the birth family, attempts at rehabilitation, and events within the foster family. Children who do not have significant behaviour problems on entering care are particularly vulnerable to 'internalising behaviour' if their placement breaks down, for example being withdrawn and isolated.

What a good outcome would look like for our children

The factors associated with placement stability include good care planning, assessment of the child's needs, matching with the carer and placement choice, support to the child and carers including therapeutic and educational support. This would lead to reduced placement moves. Improved placement stability enables children to develop more secure attachments and develop greater resilience. This will result in improved outcomes across the board for children in care including health and education outcomes and able to develop more secure attachments and relationships in adult life.

Brighton & Hove Context

Placement moves locally are associated with early stage care planning, when the long term plans have not yet been finalised. Children are placed for example in parent and baby placements and attempts are made at rehabilitation to parents; placements with family members which are unsuccessful; or placements made in an emergency which are not matched to the child's needs. There are a number of difficult to place teenagers who have had problems settling in placement. There are also a number of young people who abscond from their placements but return to the same placement. For children who have been in care for more than 2.5 years, the majority are in stable placements. The department is about to re-launch its Placement Stability procedures giving guidance to social workers and managers in avoiding placement breakdown.

The Intensive Placement Team located within the Fostering Service works directly with children in care aged 7-16 and their carers to help improve placement stability. They work with children and carers to help improve children's self esteem, to understand their behaviour and provide life story work which can help stabilise placements at risk of disruption. They also run holiday activity programmes for children in care to give carers respite which can help sustain placements. The Fostering Service also operates the Intensive Placement Scheme providing high levels of support to foster carers and children who are regarded as 'hard to place' or likely to have placement instability. Placement choice and matching of children with carers who have the skills and ability to look after them is of key importance. There has been a sustained increase in the number of children requiring placements which has not been matched by equivalent numbers of new foster carers. This is both a local and national concern. Brighton and Hove will match children with 'in-house' foster carers first. These carers live locally which is a factor associated with placement stability. However if this is not possible Brighton and Hove will commission placements from independent fostering agencies to ensure children are placed with carers who can meet their needs. Brighton and Hove continues to try and increase the numbers of foster carers to 'match' children with and has recently formed a new foster carer recruitment team to this end.

b. Placement choice

It is widely accepted, both in research and statutory guidance, that placement choice maximises the potential to find the most suitable placement for a child and thus promote

stability. There is substantial evidence that placement stability builds resilience in children and maximises their potential to attain positive outcomes. Research illustrates that two of the most critical factors that influence placement stability is timely and robust care planning and choice. This choice will involve good matching between the individual child and any available placements which can meet the child's needs. Placement choice refers to different types of placements as well as the number of potential carers or placements available

A range of choice of placements is fundamental to safeguarding Looked After Children. Local placements are generally best when they can be recruited. It is normally much better to place children within or close to their local community. Better outcomes are achieved by children placed locally. This may be a result of a combination of factors, such as the proximity to family and friends, easier co-ordination by social workers at a local level, better contact between the social worker and child.

Where possible, kinship care should be the first to be explored. These placements are undoubtedly popular both with the child, their parents and their families. Research would indicate that they are more stable and last longer but sometimes require as much support as stranger fostering.

Foster care is usually preferable to residential care. While a very small group of children may require residential care, most children in care, particularly younger children, should be looked after in foster care. There is always a role for good quality residential care for those exceptional young people who require it.

National context

The requirement for local authorities to commission placements that meet the individual needs of children within a value for money context is outlined in the Every Child Matters suite of papers and subsequent statutory guidance. Research has indicated that:

- Where possible, kinship care should be explored first.
- Local placements are generally best.
- Although foster care is usually preferable to residential care there is a continuing role for good quality children's homes.
- Adoption affords the greatest placement stability and outcomes and is the placement of choice for our youngest children.

Local authorities have a statutory duty to secure, 'so far as reasonably practicable, sufficient accommodation within the authority's area which meets the needs of children that the local authority are looking after....'.

Brighton and Hove context

Brighton & Hove covers a small geographical area where 81% of all LAC children are placed within 20 miles of the boundary of Brighton and Hove. A placement outside of the local area is considered appropriate for some children who may be placed further way (for example if it provides necessary safety or facilitates a placement with family and friends or prospective adopters).

The BHCC LAC Commissioning Strategy sets out the arrangements in place to ensure that a sufficient number of placements and services are provided within the local area for children and young people who are, or are at risk of being, in the care of the local authority. BHCC has a policy of placing Children in Care (CiC), who cannot be cared for by a kinship carer or live more independently, with in-house foster carers whenever possible. A dedicated in-house foster carer recruitment team has been created, funded by the VFM programme, to increase the number of in-house foster placements.

Although recruitment of new foster carers is key, the retention of foster carers is an important part of placement choice. Foster carers frequently need to care for damaged and traumatised children. It is important that foster carers are trained and supported to enable them to do the task assigned to them. The Brighton and Hove Fostering Service has developed a comprehensive foster carer support package and training programme for foster carers.

BHCC has a specialist Family and Friends team responsible for assessing kinship carers or 'connected persons' (people known but not necessarily related to the child) either as foster carers or Special Guardians for Children in Care. This team is managed within the Adoption and Permanence Service. Where the care plan for a child is long term fostering the Family and Friends team provides a supervising social worker for the Family and Friends Foster Carer to ensure carers are supported in their caring task and in meeting the minimum national standards for Fostering. Family and Friends carers can access the full range of foster carer training. The team also provides a range of support to carers holding a Residence Order, and Special Guardians including a monthly support group, individual support plans, Training Workshops and support with managing contact with birth parents and siblings.

If a child's needs cannot be met by in-house services a placement will be sought in the independent sector.

Brighton and Hove City Council has established, jointly with West Sussex County Council, a framework of approved and preferred independent providers of children's residential and foster care placements. This framework has been effective in ensuring that children in the care of BHCC receive the highest quality of care within a value for money context. Individual placement tendering is used to ensure that the child's needs remain at the centre of the placement procurement process. Individual placement tendering promotes individualised, creative and flexible packages of care for children with a wide range of often complex needs

In common with the national situation there continues to be limited choice of placements for sibling groups, children with complex (physical or learning) needs and those who present extremely challenging behaviour (e.g. arson, sexually abusive). There is also a need for more placements within the city boundaries. This is the subject of further market development.

The Adoption team is managed within the Adoption and Permanence Service and is responsible for finding adoptive families for children with an adoption care plan. Adoption provides the greatest possible placement stability and affords vulnerable children the best hope of recovery from early trauma or attachment deficits, thereby maximising their life chances. A Recruitment Strategy informs adoption family finding and recruitment activity to ensure sufficient numbers of adopters (BHCC, other Local

Authority, and Voluntary Adoption Agency adopters) are available to offer permanent, secure homes for our children.

Outcome: Children will be supported to remain in the care of their birth families or other kinship carers whenever this is possible. For those children where this is not possible, and who become looked after by the local authority, there will be a range of placement options available.

c. Care planning

Good care planning is fundamental to improved outcomes for looked after children and young people. It facilitates an appropriate response of services and decision making processes to the individual needs of each child or young person, and avoids drift. This includes regular contact for the child or young person with a trusted key worker (usually a social worker) and effective co-working with other key professionals and carers. Care planning should be informed by a comprehensive, multi-agency assessment.

National Context

Recent research highlights the on-going need for better quality decision making by social workers, and champions a blurring of the lines between the care system and community-based care to ensure that young people in particular can return home after brief spells in care. Care plans should summarise the child's needs and how these needs will be met.

Brighton and Hove Context

The department has recently reorganised and created a dedicated Children in Care Team. The team works with children in care once a final order (care order or placement order) has been made. This enables robust and timely decision making to take place.

Outcome: Every child will have a care plan that details the support they will receive to maximise their life opportunities and be safe from harm.

At present a new care planning and permanency policy is under development to take into consideration the new Government agenda around Adoption.

3.1.2 Theme 2: Educational

Many children in care have insecure attachment due to their experience of trauma and/or neglect; for some this will result in cognitive and developmental delay which may manifest itself as poor social skills, memory loss, withdrawal, fear, poor organisation skills, hyper vigilance, and difficulties in absorbing new information. Children who are in this 'state' cannot optimise the learning opportunities made available to them. For most, the optimum state for learning is one that is relaxed and alert.

Difficulties in managing the demands of the school day and maintaining peer relationships result in many children in care moving through their school career with increasing difficulties that ultimately result in poor educational outcomes and isolation.

Schools who have a secure understanding of attachment, know how poor attachment can present and who work within an attachment framework are more likely to experience greater success in supporting Children in Care to achieve the best possible personal outcomes.

National Context

It is well researched that achieving a secure education is a highly protected factor for all children as they move through to adulthood. Unfortunately many Children in Care have poor educational experiences and leave compulsory education with few qualifications.

- In 2010 over a third of Young People in Care (aged 19) were not in Education, Employment or Training.
- Nationally (2011) 60% of all children achieved 5 A* - C GCSE's including English and Maths.
- For Children in Care this figure was just 13%.
- Nationally at Key Stage 2, 82% of children achieved Level 4 in English and 80% of children achieved Level 4 in Maths
- For Children in Care at Key Stage 2, 53% achieved Level 4 in English and 42% achieved Level 4 in Maths

For Children in Care leaving school with few or no qualifications, their transition to adulthood is marked by limited life opportunities and a greater dependence on health, social care and other community services.

Where Children in Care experience educational success, it is known that stability in the care placement and school provision have a strong influence. Other factors include:-

- Stability the child's allocated social worker
- The age at which the child is taken into care (and length of time in care)
- The value and support for education in the home environment (high aspirations)
- Key adults (especially school staff) having an understanding of how neglect and trauma affects children and how they can be supported
- Early identification and high quality intervention to address specific learning, social, behaviour and learning needs

The gap in attainment for Children in Care widens as they move through from Key Stage 1 to Key Stage 4. Many children find the transition from primary to secondary school a challenge, and for Children in Care this can be overwhelming. Secure transition and on-going support is vital to enable children to cope with such significant change.

Children in Care experience higher rates of fixed term exclusions than their peers. Boys are four times more likely to be permanently excluded and three time more likely to be fixed term excluded than girls. Children with special educational needs are eight times more likely to be excluded than those not identified as having special educational needs.

Brighton & Hove Context

The role of the Virtual School in Brighton & Hove is to support Children in Care of statutory school age to achieve the best possible education outcomes. The Virtual School monitors individual targets and outcomes for all Children in Care, allocates additional resources to support children to close gaps in their learning and offers training, support and advice to professionals to support them in their work with Children in Care; The Virtual School advocates on behalf of Children in Care and will challenge poor practice.

Brighton has 300 school aged Children in Care of these approximately 35% are placed in out of authority care and school placements. There are a high numbers who have special education needs. 27% of children in the care of Brighton and Hove have a statement of special educational needs (SEN). This compares with about 3% of children nationally.

Key Stage 2 outcomes

The Virtual School has to present data on achievement and outcomes at the end of Key Stage 2. This includes national curriculum levels in Literacy and Numeracy, children at the end of Key Stage 2 will be expected to achieve Level 4 in these subjects. Schools in Brighton & Hove have consistently performed above the national average for Children in Care achieving level 4 in Literacy and Numeracy at the end of Key Stage 2. However the gap between Children in Care and all children nationally remains significant

Key Stage 4 outcomes

Outcomes at the end of KS4, for Children in Care achieving 5 GCSEs A* - C, including English and Maths, improved significantly last year (from 3 to 19%) and we anticipate further improvement in the summer 2012. While there are similar issues presenting at KS4 and KS2 there are additional factors that impact attainment. These include disengagement, school and placement breakdown and greater incidence of risk taking behaviours by young people.

Attendance

Attendance for Children in Care at primary is above average (96%) and at secondary is average (92%). The definition of persistent absence has recently been revised, now any child missing 15% of school, over any half term, would be considered as a persistent absentee. The profile of Children in Care who commonly fall into this category includes:-

- Children moving into KS4
- Children receiving fixed term exclusions
- Children with a history of school moves
- Children with a history of placement moves
- Children who arrive late to care
- Children identified as having special educational needs

While many schools in Brighton & Hove work extremely hard to support Children in Care to maintain their school place, we do have a high rate of fixed term exclusions when we compare our data to our statistical neighbours. (This reflects the data for exclusions for all children in B & H). Permanent exclusions for Children in Care have been avoided in the last couple of years; a conclusion may be that schools are using fixed term exclusions more frequently as a tool to avoid permanent exclusion. Secondary schools account for the vast majority of exclusions.

Co-location of the Virtual School Team with the Children in Care Team is a development that should enable professionals to work more collaboratively and secure improved outcomes for Children in Care. Some local authorities, with the best outcomes for Children in Care, have well established multi-disciplinary teams working together around the child in care. These teams include a range of professional with skills and expertise, working holistically with the child and their network to address educational, care, social, behaviour and mental health needs.

3.1.3 Theme 3 - Health needs of looked after children

Children and young people who are looked after have the same core health needs as other young people, but their backgrounds and experiences are likely to make them particularly vulnerable to poorer health outcomes.

our key areas of focus for this year include:

- To promote better understanding of the importance of attachment and the development of strategies to support parents and carers to support children develop more secure attachment improving outcomes for children and young people.
- To build on existing specialist sexual health support for young people making it available to young people under 16 with identified sexual health needs.
- To improve the quality and timing of health reviews for LAC placed outside Brighton and Hove.
- To support LA colleagues to improve recording of health data required for reporting to DOE.

National Context

The NHS has a legal responsibility (Children Act 1989/ 2004/2008) to support the Local Authority to carry out its function to safeguard and promote the welfare of, looked after children (LAC) and their parents and carers. This includes cooperation at strategic and service levels, including statutory responsibility to carry out health assessment for Looked after children and young people and to review their progress at regular intervals (Promoting the Health of Looked after Children DOH/DFE2009, Nice Guidance 2010, and Children Act Care Planning Regulations 2010). LAC have the same core health needs as other young people but their backgrounds and experience make them more

vulnerable to poor health outcomes (Promoting the health of looked after children DOH/DFE 2009), along with these changes in placement and schools can result in health needs being overlooked. The needs of unaccompanied asylum seeking young people overlaps that of other young people but they also have specific physical and mental health issues; coupled with the effect of going through the asylum process, these issues put them at the risk of inequalities in accessing health services.

The UK has the highest teenage pregnancy conception rates in Western Europe (FPA 2011) teenagers who become pregnant have greater education, health, social and economic difficulties (Independent Teenage Pregnancy Advisory Group 2009). It is reported that 12.5 % of looked after young people under age 16 years old, become parents and 32% by the age of 18 years (Department of Health 2009). The rates of sexually transmitted infection are on the increase throughout the UK.

National Institute of Clinical Excellence (NICE) produced a summary of research into mental health of LAC in the UK, the available data on mental health and behavioural disorders consistently showed that LAC had poorer mental health than their peer group and where a comparison was made outcomes for those in residential care was poorer than those in foster care. There is an increasing recognition that children under 5 years can show signs of poor mental health, behavioural and emotional distress affecting about 25% of the UK's under 5 LAC population. Studies of Brain development and Attachment have looked at the structural and neuropsychological changes which follow abuse and neglect. It is recognised that the brain passes through critical stages and that lack of appropriate stimulation can result in poor or insecure attachment which can persist into later childhood. There is a growing understanding of the importance of early intervention to promote secure attachment (Mehta et al 2009). There are a significant number of babies who become looked after as a result of maternal drug and/or alcohol misuse. This group is very vulnerable, and at risk of early consequences such as withdrawal from drugs, and later learning and behavioural problems. Some of these babies may be diagnosed with fetal alcohol problems, which may have a life long impact, affecting learning and development.

Brighton & Hove Context

In Brighton and Hove (B&H) Initial health assessment is carried out by the LAC health Team which is a skilled multidisciplinary team of experienced nurses and community paediatricians with dedicated administrative support. The team have provided a high quality service and joint CQC/Ofsted inspection graded the service outstanding in April 2011. There has been a sustained increase in the numbers of children coming into care and so requiring health assessment from an average of 8 per month in November 2009, to between 15 and 20 in December 2011. This has resulted in an increased pressure on the existing resource and has led to delay in timely completion of initial Health Assessment and a fall in the completion of review assessments to below the required performance level. For children placed outside of Brighton and Hove health assessments are completed by local LAC health team and paid for by Brighton and Hove PCT using the 2006 DOH guidance 'Establishing the Responsible Commissioner'. The introduction of the payment process combined with shortage of resources in other areas has resulted in delays for some children and poorly affected performance and outcomes on health reviews. In response Sussex Community Trust commissioned a service review leading to a restructuring of the nursing and administrative component of the team, which will now consist of nurse consultant, two specialist LAC nurse and 2

nurses for LAC, these latter 2 posts are secondments for a year funded by CQuin , plus an administrator full time. The team's targets are to raise the numbers of initial health assessments and health reviews being done in a timely way and to a continuing high standard and to take bring in house health review for children and young people in placements across borders in East and West Sussex and to develop best practice around information collected in relation to emotional health via Strength and difficulties questionnaires.

In 2009 Brighton and Hove were ranked the highest rate for sexually transmitted infection outside London. Health assessment and review for young people 16 plus and unaccompanied asylum seekers is provided by a specialist nurse who offers specialist support for sexual health. Her high quality affective intervention has significantly reduced the teenage pregnancy rate within the LAC population and improved links and services for sexual health screening and treatment have been developed and a fast track service has been developed within the Genito-Urinary Medicine service. Once in place one of the seconded nurses will support this specialist nurse's role, enabling this level of specialist intervention to be available to support vulnerable young people under 16 with identified sexual health needs.

The importance of promoting the development of secure attachment has been recognised both within in the LAC team, early years service, education and Child and Adolescent Mental Health (CAMH) services. There has been the development of multiagency forum which has enhanced joint working together with promoting quality and practice for early year's children in care. CAMHS have developed an attachment care pathway and a multiagency working group is looking at developing practice to support the mental health needs of LAC including those younger than 5 years. For children where there are developmental concerns fast tracking is available for paediatric assessment via Seaside View child Development Centre.

3.1.4 Theme 4: Involvement in crime and substance misuse

Looked after children are over represented in the youth justice system, commit more offences, are at risk of staying in the youth justice system longer and receiving higher level penalties

- To reduce the number of LAC young people offending and the number of offences they commit.

From April 2013 all young people who are remanded to custody will become LAC leading to increased demands and costs to the LA.

- To reduce the number of young people remanded to custody and thereby becoming LAC.

Studies indicated that LAC are more likely to drink, smoke and take illicit substances and are at higher risk of more frequent drug use

- To reduce substance misuse amongst LAC

National Context

Whilst the majority of LAC do not offend, for those that do the outcomes can be poorer than those of offenders who are not looked after.

Research by NACRO has found that LAC are significantly over represented throughout the youth justice system. Department of Health (DoH) figures for 2001 show that looked after children have treble the offending rate of other children. Home Office figures record that 50% of children in young offender institutions have been, or still are, in local authority care. Further, they suffer worse outcomes across most indicators (e.g. in health, and education achievement) when compared with children in the general population.

NACRO Youth Crime Briefing June 2003

From April 2013, under the Legal Aid, Sentencing and Punishment of Offenders Act young people remanded into custody will automatically become classed as LAC and the costs will fall to the LA (currently the Youth Justice Board pays two thirds). With this change to legislation there will be additional monies coming to LAs, however it is not yet clear how much and whether it will cover the full costs. It is also likely that payment by results to LAs will be linked to the reduction in remands and custody. All of this is likely to increase the numbers of adolescents in the care of local authorities.

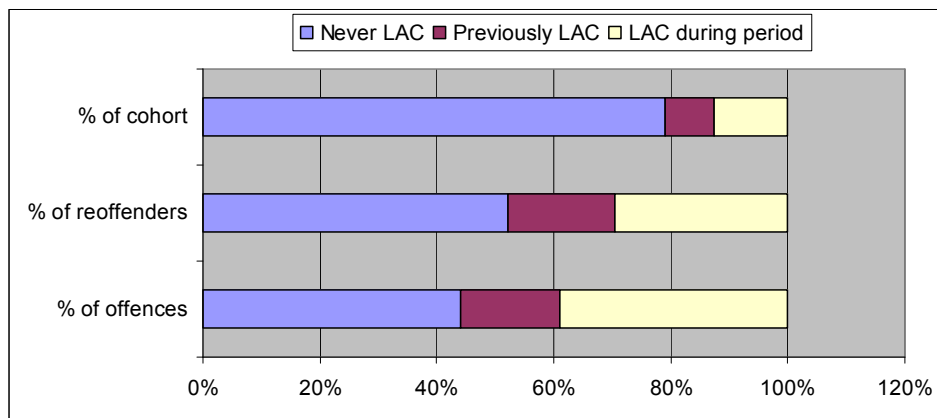
The Home Office has identified 5 vulnerable groups of young people who are likely to have a higher proportion than other young people to use and or misuse drugs, Looked after children are one of these vulnerable groups. Of young people in the 17-24 age groups who have in the past or are at present within one of the vulnerable groups 49% will go on to use any drug use, 30% will develop frequent drug use while 25% will have Class A use. While among the general population of 17-24 year olds 27% will use any drug use, 8% will have frequent drug use and 7% will have Class A use.

Some studies illustrate that looked after young people are four times more likely than those living in private households to smoke, drink and take drugs (Meltzer and others 2003, Williams and others 2001). Looked after children and young people tend to start using drugs at an earlier age, at higher levels and more regularly than their peers who are not in care, leading to concerns that their drug use may become more established and dangerous (Big Step Partnership 2002, Newburn and Pearson 2002, Ward 1998, Save the Children 1995).

Brighton & Hove Context

Re-offending data for 2010/11 found that 13% of the cohort were LAC, 30% of these re-offended and were responsible for 39% of re-offences (shown in the graph over the page in yellow). Locally therefore it was found that LAC are more likely to re-offend and offend at a higher rate. It was also found that LAC were more likely to receive a high tariff sentence such as custody.

At the current date (March 2012) there were 18 LAC open to the YOT, 15 of these were Brighton & Hove and 3 the responsibility of another LA. This is 24% of the YOT cohort and the number of LAC offenders has increased over the last year.



Remand data from 2011/12 found that 14 young people were remanded in the period. The estimated additional future cost to the LA is around £65,000 per annum in relation to placements at a secure establishment (372 bed nights).

5 of these young people were LAC at the time of being remanded, meaning nine were not but would become so under the new legislation. One of these young people was remanded for over 13 weeks making them eligible to receive a longer term service.

There are currently low numbers of LAC accessing the ru-ok? service.

Current activity

A joint protocol has been developed and agreed by Sussex Criminal Justice Board aimed at reducing the prosecution of looked after children, this is being adopted by Sussex police and Brighton and Hove YOT.

LAC re-offending data will be added to the relevant performance indicator report cards for next quarter to ensure improved monitoring. Data will be provided to the YOT Management Board and the Brighton & Hove Corporate Parenting Board.

Family Functional Therapy is in use to prevent young people from becoming LAC and to work with 10 YOT families over the next two years.

Change in remand funding and LAC status on risk register and escalated to the Value for Money Board.

An ru-ok? worker is regularly liaising with the 16 plus team to ensure that LAC young people are being referred

3.1.5 Theme 5: Social exclusion

The Cabinet Office, Social Exclusion Task Force focuses on four client groups who are particularly vulnerable to multiple forms of disadvantage and who may be negotiating difficult transitions to social inclusion. These groups are identified as young people leaving local authority care, offenders under probation supervision, adults in contact with secondary mental health services and adults with moderate to severe learning disabilities. Care leavers are disproportionately represented in these three categories and well as being a clearly identified group.

Effective inter-agency partnerships and corporate parenting responsibilities are therefore crucial in ensuring a coherent and personalised response to their wider needs. In order to tackle disadvantage and minimise the risk of falling into persistent exclusion we must as corporate parents:

- Narrow the gap in educational attainment between children and young people in care and care leavers and their peers
- Ensure they are prepared for independent living and adulthood
- Improve their health and well being
- Promote greater independence and wellbeing in later life
- Reduce the harm caused by illegal drugs, smoking and alcohol and encourage healthy lifestyles
- Reduce crime and anti-social behaviour
- Maximise employment opportunity”

National Context

(summary of research by Mike Stein etc, York University; Sonia Jackson etc, Thomas Coram Research Unit, University of London; Centre for Child & Family Research, Loughborough University; Roger Morgan, Children’s Rights Director, Ofsted)

For most young people today, moving in to their own safe, secure and affordable accommodation, entering further or higher education, finding satisfying employment and achieving good health and a positive sense of wellbeing represent important landmarks during their journey to adulthood. They are also the significant factors in avoiding social exclusion.

As a group, care leavers are more disadvantaged than other young people in achieving these landmarks and more at risk of social exclusion. While many successfully move on from care, others just get by or struggle. It is the responsibility of corporate parents to ensure that all their young people fulfil their potential. This requires comprehensive responses across their care pathway, including their time whilst in care, the time of leaving care and on their journey to adulthood.

Many care leavers have to cope with major changes in their lives, in leaving foster care or residential care and setting-up home, in leaving school and entering the world of work, or post-16 education or training at a younger age than other young people.

Studies show that those young people who have more gradual, extended and supported transitions from care have better outcomes than those who leave care early.

Most young people today receive practical and emotional support well into adulthood. This highlights the importance of the corporate parenting role from care into adulthood, not just at the time of 'leaving care'. Research studies show that young people's pathways to adulthood, those of accommodation, education and employment, health and wellbeing, are closely connected and reinforcing and that they can be assisted by different forms of support, inter and joint agency working and partnerships with carers and positive family and kinship networks.

Since the introduction of the Children (Leaving Care) Act 2000, reinforced by the Transitions Guidance introduced in 2011, the present organisation of leaving care service has resulted in more clearly defined structures, roles and responsibilities and more formalised multi-agency partnerships. However, Government information and research findings, including those based on young people's views, show variations in the range and quality of services.

A major challenge for corporate parenting is how to 'level up' services, especially in the context of 'localism'. There need to be agreed processes to make this happen, for example ensuring formal links between 'good' and 'poor services' with similar levels of need and developing and reviewing 'action plans' to bring about improvements. This process should also include benchmarking best practice in relation to groups of care leavers, including those with additional needs such as black and minority ethnic young people, disabled young people and care leavers in the youth justice system, where there is evidence of service variation.

Brighton & Hove Context

Preparation for adulthood and leaving care must not be a one off event, but a process that supports care leavers to make a successful transition to independent living. Good support and care planning for the future while in care is the basis for good support, positive outcomes and social inclusion when they leave care.

Brighton & Hove City Council's 16 Plus Support Team takes the lead in ensuring that the local authority and its partners as corporate parents exercise the statutory duty to assist young people achieve to their ability, hopes and aspirations whilst in care and to continue to support the care leavers it looked after as children.

The decisions a young person makes between the ages of 16 and 21 during the first few years after leaving compulsory education have a huge impact on their future prospects in particular on their ability to fulfil their potential and is a key area if we are to improve social mobility and social inclusion. As one of the most important interventions to provide, we are committed to improving the opportunities, guidance, support and incentives to enable 16+ young people achieve greater educational outcomes to enable a successful transition from education into work.

3.1.6 Theme 6: Resilience in looked after children

Resilience has been defined as 'normal development under difficult conditions' or 'the quality that enables some young people to find fulfilment in their lives despite their

disadvantaged backgrounds, the problems or adversity they may have undergone, or the pressures they may experience'. Research shows that shifting attention away from a focus purely on problems, towards a focus on developmental strengths of looked after children and young people enables them to better cope with adversity. Professionals can play an important role by supporting caring relationships, ensuring that school is a positive experience, and promoting the self-esteem of these children and young people.

Robbie Gilligan Professor of Social Work and Social Policy at Trinity College Dublin has identified that children in the care system are likely to be more resilient to adverse circumstances if they have the following

- Supportive relationships with at least one adult.
- Supportive relationships with siblings and grandparents
- A committed adult other than a parent who takes a strong interest in the young person and serves as a long-term mentor and role model.
- A capacity to develop and reflect on a coherent story about what has happened and is happening to them.
- Talents and interests.
- Positive experiences in school.
- Positive friendships.
- A capacity to think ahead and plan in their lives.

Gilligan's research clearly identifies the importance of relationships. Local authorities, Social Workers and the Bureaucracy around children looked after do not, on their own, provide relationships. This is where the importance of good foster parenting and permanency in a child's life are crucial. Our practice and our challenge is to ensure that children and young people can build good relationships with significant adults and peers that are comforting, enduring, responsive and empowering. Secondary attachments with people outside the immediate caring environment are also important; teachers, neighbours etc. Gilligan's seminal research also emphasises the importance of having valued social roles; being in work, being a member of a club, participating in sport, community and leisure activities.

The Gilligan research has gone on to suggest ways in which key workers, such as social Workers, carers, or teachers can promote resilience in looked-after children and young People, including

- Ensuring that these key individuals have an understanding of the impact of attachment and resilience factors on children's development, and thus commit themselves to being the child's champion, acting as good parents would, ensuring the child feels cherished and secure, and making a point of celebrating the child's achievements.

- Good quality direct work and case coordination, to enable looked after children and young people to manage loss and change.
- Attention to strengthening the role of and tasks associated with corporate parenting.

Brighton & Hove Context

In Brighton and Hove the Children in Care Team is leading on the development of a new Children in Care Practice policy which will contribute to the embedding of the lessons above. This will sit alongside the professional capabilities framework for social work, but it is not just children's services that need to play a significant part in the above. It is the whole range of services across the council and across our city partners if we are to deliver on the above.

Resilience is a factor which is taken into account in terms of care planning for Children in Care and should be addressed in all aspects of care planning.

As part of the health assessment a Strength/Difficulties Questionnaire is completed, and if particular emotional difficulties are identified and then an action plan is completed which is kept under constant review. A specific agreement is in place with CAMHS to ensure that Children in Care receive a timely response.

A crucial question is what services/experiences are necessary to support this child/young person's experience? This needs to be addressed by all aspects of the young person's Care Plan and we know the three biggest factors affecting resilience for Children in Care are education, placement stability and identity.

The Fostering Service is piloting a support group (time limited for foster carers) on the model of resilience therapy for looked after children to enhance their care of looked after children and young people as a means to increasing the resilience of the children they are caring for. Financed by VFM

3.1.7 Theme 7: Adoption

The early years of a child's life provide experiences that are critical for the child's later development and ability to make relationships. Early attachment relationships influence how the child relates to other people and how they feel about themselves. These first relationships provide the foundation for the child's subsequent development. When children experience warm, sensitive and responsive parenting they will develop a secure attachment and develop positive expectations about future relationships, trust in others and will approach the world with confidence. Where children experience insensitive, neglecting or rejecting parenting an insecure attachment develops where the child can't rely on adults to feel safe and secure. Where the state has removed children from situations of abuse and neglect it has a responsibility to secure the best possible care that maximises a secure attachment relationship affording the child stability, security and love throughout childhood and beyond. Whilst there is a range of

permanent care options for children - family and friends care either via fostering or special guardianship/ residence order, long term foster care, and adoption; adoption provides the greatest possible legal and placement stability and affords vulnerable children the best hope of recovery from early trauma or attachment deficits, thereby maximising their life chances.

National Context

The Government commissioned a review of the operation of adoption in England following a well publicised public debate about the effectiveness of adoption services. Its concerns being that too few children are available for adoption and for those who are the process takes too long; the application and assessment process for prospective adopters is considered too long, overly intrusive and bureaucratic and there are inconsistencies between the performance of adoption agencies, and inadequate post adoption support to adopters. Whilst the review acknowledged excellence in some areas it noted poor performance in others so developed an Action Plan to address concerns. The Action Plan seeks to introduce a National Adoption Gateway for prospective adopters to access information about adoption and adoption agencies in their area. It seeks to redesign the adoption application process into 2 stages: Initial training and self assessment, with basic checks to be completed in 2 months, then a more detailed adopter assessment to be completed in 4 months. Referral of all children with an adoption plan and approved adopters to the National Adoption Register 3 months after approval and a substantial improvement to post adoption support including an 'Adoption Passport' to access Camhs and therapeutic services. It also established an Adoption Score Card detailing the performance of every Local Authority Adoption Agency across a range of adoption performance measures including the time taken from a child becoming looked after to placement with their adoptive family.

Brighton & Hove Context

BHCC Adoption Service is currently performing well across all performance measures despite a substantial and sustained increase in children with an adoption plan. The Adoption Scorecard placed the service in the Top 10 Local Authorities for time taken from children becoming looked after to placement with their adoptive families. BHCC takes a robust approach to adoption family finding as it recognises that a child's age is one of the strongest predictors of whether or not they will be adopted. For every year of delay a child's chance of adoption reduces by almost 20%. BHCC Adoption Service's recent Ofsted inspection judged the service to be good overall with outstanding areas of practice in helping children to enjoy their lives and achieve, helping them to make a positive contribution, and promotion of equality and diversity.

4. COMMUNITY ENGAGEMENT AND CONSULTATION

4.1

5. FINANCIAL & OTHER IMPLICATIONS:

Financial Implications:

- 5.1 There are no financial implications as a direct result of the recommendations of this report. However, the services highlighted within the report represent a significant level of expenditure within children's services and all new initiatives need to be fully costed and evaluated within the value for money context.

Finance Officer Consulted: Name David Ellis Date: 22.06.12

Legal Implications:

- 5.2 The term "corporate parent" is not one which has a formal legal definition. However, the term recognises that the local authority must have the same interest in the progress and attainments of looked after children as a reasonable parent would have for their own children. The responsibilities of being a corporate parent are relevant to all local authority staff. The Council has a legal duty to act as a 'corporate parent' for each and every child and young person that is looked after, whether this is as a result of a voluntary agreement with their parents, or under a care order agreed by the court. In this respect the council is subject to statutory guidance, the requirements of the Leaving Care Act, and the duties to promote the well being of children under the Children Act 2004. Promoting the wellbeing, achievement and happiness of looked-after children and care leavers is a responsibility that must be shared and understood by all local services. Ultimately if a child receives a harmful experience in care they have the right to sue the authority for negligence. Under statutory guidance the Director of Children's Services and their senior staff, with the lead member for children's services, who are accountable for ensuring that looked after children are adequately safeguarded and that they are able to access effective services.

Lawyer Consulted: Name Natasha Watson Date: 22.06.12

Equalities Implications:

5.3

Sustainability Implications:

5.4

Crime & Disorder Implications:

5.5

Risk and Opportunity Management Implications:

5.6

Public Health Implications:

5.7

Corporate / Citywide Implications:

5.8

6. EVALUATION OF ANY ALTERNATIVE OPTION(S):

6.1

7. REASONS FOR REPORT RECOMMENDATIONS

7.1

SUPPORTING DOCUMENTATION

Appendices:

1.

Documents in Members' Rooms

1.

Background Documents

1.

Document is Restricted

