

NOTICE OF MEETING

Meeting	Corporate Parenting Board
Date and Time	Wednesday 12th June 2019 at 10.00 am
Place	Chute Room, Ell South, Winchester
Enquiries to	members.services@hants.gov.uk

John Coughlan CBE
Chief Executive
The Castle, Winchester SO23 8UJ

FILMING AND BROADCAST NOTIFICATION

This meeting may be recorded and broadcast live on the County Council's website. The meeting may also be recorded and broadcast by the press and members of the public – please see the Filming Protocol available on the County Council's website.

AGENDA

1. APOLOGIES FOR ABSENCE

To receive any apologies for absence received.

2. DECLARATIONS OF INTEREST

All Members who believe they have a Disclosable Pecuniary Interest in any matter to be considered at the meeting must declare that interest and, having regard to the circumstances described in Part 3 Paragraph 1.5 of the County Council's Members' Code of Conduct, leave the meeting while the matter is discussed, save for exercising any right to speak in accordance with Paragraph 1.6 of the Code. Furthermore all Members with a Non-Pecuniary interest in a matter being considered at the meeting should consider whether such interest should be declared, and having regard to Part 5, Paragraph 2 of the Code, consider whether it is appropriate to leave the meeting while the matter is discussed, save for exercising any right to speak in accordance with the Code.

3. MINUTES OF PREVIOUS MEETING (Pages 3 - 6)

To confirm the minutes of the previous meeting.

4. DEPUTATIONS

To receive any deputations notified under Standing Order 12.

5. CHAIRMAN'S ANNOUNCEMENTS

To receive any announcements the Chairman may wish to make.

6. CHILDREN IN CARE PARTICIPATION UPDATE (Pages 7 - 14)

To receive a report from the Director of Children's Services providing an update in relation to participation of Hampshire's Children in Care.

**7. UPDATES ON CHILDREN IN CARE - HEALTH ASSESSMENTS
(Pages 15 - 26)**

To receive a report from the Director of Children's Services providing an update on the current working practices in relation to Health Assessments for Hampshire's Children in Care.

8. CHILDREN IN CARE EDUCATION UPDATE

To receive a presentation from the Director of Children's Services providing an overview of educational attainment for Hampshire's Children in Care.

9. JOINT HOUSING PROTOCOL (Pages 27 - 32)

To receive a report from the Director of Children's Services in relation to the protocol established for homeless individuals aged 16 & 17.

ABOUT THIS AGENDA:

On request, this agenda can be provided in alternative versions (such as large print, Braille or audio) and in alternative languages.

ABOUT THIS MEETING:

The press and public are welcome to attend the public sessions of the meeting. If you have any particular requirements, for example if you require wheelchair access, please contact members.services@hants.gov.uk for assistance.

County Councillors attending as appointed members of this Committee or by virtue of Standing Order 18.5; or with the concurrence of the Chairman in connection with their duties as members of the Council or as a local County Councillor qualify for travelling expenses.

Agenda Item 3

AT A MEETING of the Corporate Parenting Board of HAMPSHIRE COUNTY
COUNCIL held at the Castle, Winchester on Monday 25th March 2019

Chairman:
Councillor Roz Chadd

p Councillor Ann Briggs

p Councillor Malcolm Wade

Co-opted members

Dan Busby, Care Ambassador
Shannon Nichols, Care Ambassador
a Carla Wright, Care Ambassador

49. APOLOGIES FOR ABSENCE

Apologies were received from Cllr Chadd, therefore Cllr Briggs chaired the Board. Cllr Carpenter was in attendance as the Conservative Deputy.

Apologies were also received from Carla Wright.

50. DECLARATIONS OF INTEREST

All Members who believe they have a Disclosable Pecuniary Interest in any matter to be considered at the meeting must declare that interest and, having regard to the circumstances described in Part 3 Paragraph 1.5 of the County Council's Members' Code of Conduct, leave the meeting while the matter is discussed, save for exercising any right to speak in accordance with Paragraph 1.6 of the Code. Furthermore all Members with a Non-Pecuniary interest in a matter being considered at the meeting should consider whether such interest should be declared, and having regard to Part 5, Paragraph 2 of the Code, consider whether it is appropriate to leave the meeting while the matter is discussed, save for exercising any right to speak in accordance with the Code.

There were no declarations of interest.

51. MINUTES OF PREVIOUS MEETING

The minutes of the previous meeting were agreed and signed.

52. DEPUTATIONS

None received.

53. CHAIRMAN'S ANNOUNCEMENTS

In light of the Agenda item providing an update on the Corporate Parenting Board's engagement with Young People, the Chairman had no further announcements to make.

54. **UPDATE ON THE CORPORATE PARENTING BOARD'S ENGAGEMENT WITH YOUNG PEOPLE**

The Panel provided a verbal update on the Corporate Parenting Board's engagement with Young People. Since the last Panel meeting members had visited Croft House, which was described as a positive and educational experience.

Members expressed satisfaction in how warm the environment was and how much it felt like a home, while noting the fantastic work of the employees there. The Panel discussed the 'Staying Close' policy which keeps contact between care settings and care leavers and allows for return visits to emulate the family environment. This was noted as a possible area for improvement and for a future agenda.

Resolved: That the Corporate Parenting Board note the update on their engagement with Young People.

55. **PARTICIPATION UPDATE - PROGRESS ON RELAUNCH OF CARE AMBASSADORS**

The Panel received a verbal update from the Director of Children's Services on the participation and the progress on the relaunch of Care Ambassadors.

The first part of the update concerned reunification, and the Panel heard that of 67 young people who left care in January 34.3% returned home and of 45 in February, 40% returned home. Other outcomes for leaving care included; adoption, living independently, Special Guardianship Orders or being re-assessed to be over 18 (in the case of Unaccompanied Asylum Seekers).

In relation to the Care Ambassador role, Members heard that the role profile has been revised and updated and recruitment is taking place between April & May.

In response to questions members heard that;

- The majority of reunifications were successful but there are some which are not. The focus on the return home is embedded within the service but this is assessed carefully.
- Visits continue when a child returns home, although these decrease in frequency over time while their situation settles.
- Participation is being looked at in both a 'top-down' and 'bottom up' approach in an attempt to ensure success.

Resolved: That the Corporate Parenting Board note the update on participation and the progress of the relaunch of Care Ambassadors.

56. **THE BIG ACTIVITY WEEK**

The Panel received a presentation from the Director of Children's Services on The Big Activity Week.

The Panel heard how four activity centres around Hampshire were offering an activity week for children in care in years 5-8. These spaces were allocated

following referrals from social workers and a management committee considers child combinations etc. The purpose of this week was to provide children in care with an opportunity to develop self belief, resilience, team work etc.

Resolved: That the Corporate Parenting Board note the overview of the Big Activity Week.

57. UPDATE ON FOSTERING

The Panel received a presentation from the Director of Children's Services providing an update on Fostering.

The Panel heard that Hampshire County Council's fostering households have declined from 372 in March 2016 to 364 households in March 2019 (2% decline) which mirrors the position nationally.

The Panel found that whilst Hampshire has historically been a strong competitor in the market for support and finances, this is no longer the position. This, alongside a national decline in fostering households, has led to a review of the current recruitment and retention strategies.

The panel also received an overview of recruitment events that had taken place and details of actions that had been taken by the service in response to feedback received.

Resolved: That the Corporate Parenting Board note the update on Fostering.

58. UPDATE ON THE IMPLEMENTATION OF LGBT+ POLICY

The Panel received a presentation from the Director of Children's Services providing an update on the implementation of LGBT+ Policy. The panel heard how this policy ties into 'Every Child Matters' and is about identity rather than sexual relationships which can be the assumption. Members were told how guidance had recently been published and it is hoped that all young people will have a safe place to learn and grow.

The Panel heard how Hampshire's Children's Services is leading in this area and trying to remove professional's nervousness about getting it wrong.

Resolved: That the Corporate Parenting Board note the update in relation to the implementation of LGBT+ Policy.

Chairman, Corporate Parenting Board

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HAMPSHIRE COUNTY COUNCIL

Report

Committee/Panel:	Corporate Parenting Board
Date:	12 June 2019
Title:	Children in Care Participation Update
Report From:	Director of Children's Services

Contact name: Tim Sandle, Commissioning Officer

Tel: 01962 845453

Email: tim.sandle@hants.gov.uk

1. Recommendation(s)

- 1.1 That the Corporate Parenting Board note the update on the current focus of working practices for Officers working with Children in Care.

2. Summary

- 2.1 This report focuses on the period since 01 January 2019 and provides a brief overview of the Participation Officer progression of work over the last six months.

3. Future Direction

- 3.1. Children's Social Care will continue to work to improve outcomes for Children in Care.
- 3.2 This report provides an update on the progress of Participation across Hampshire Children's Services. The progress is being measured against the Participation Strategy which has been in place since 2017. The Participation agenda is embedded within practice across the teams and districts and a culture of creating an inclusive "You Said, We Did" is developing.
- 3.3 The Participation Officer continues to support the districts across the county with the participation agenda. The Participation Officer has scheduled district participation meetings for the year combining two

districts within four areas (quadrants) of Hampshire these are the North West, North East, South East, South West (working title Quads). There will be four meetings per quarter. In addition, The Participation Officer will meet with District Participation leads following district peer inspections. Inter team and inter district collaboration for participation is being encouraged. These meetings will provide an opportunity to share good practice and ensure that 'you said- we did' remains in focus and that there is a clear direction regarding participation in all its forms.

4. Care Ambassadors

- 4.1 There is a plan to recruit at least four care ambassadors from each quadrant, this will work out about two Care Ambassadors per district. Each quadrant will be led by a Care Leaver Personal Advisor and a Child in Care social worker. At this time the South East and the North East Care Ambassador groups are set to meet for the first time during the May half-term. The North West quadrant is due to have it's opening meeting on the 27 June 2019 an unfortunate delay due to unforeseen circumstances. Care Ambassadors should be inclusive, and the Participation Officer is committed to representation from Unaccompanied Asylum-Seeking Children, Disabled Children and Children in care in Residential home.
- 4.2 The Participation Officer has met with a group of unaccompanied asylum-seeking children (UASC) is currently meeting in Croydon. This group supported by Kay Castonguay Personal Advisor, South East Care Leavers Team is supported by two Social Workers from the South East Children in Care Team and South West Children in Care Team respectively. The Participation Officer has potentially recruited three young people who are interested in representing UASC as Care Ambassadors.
- 4.3 The Participation Officer is particularly keen to have Young People with Disabilities representatives as Care Ambassadors. The Participation Officer has sent the Care Ambassador profile to the Service Lead for Disabled Children's Teams and sent a direct request to Team Managers for Disabled Young People representatives to be put forward as Care Ambassadors across the districts.

5. Introduction to care leaflets and video

- 5.1 Feedback has been received from some young people regarding the 'Introduction to care' leaflet. The leaflet is now with the designers and is due to be completed in June. Once the leaflet is approved it will be available to Social Workers who can use it as an additional resource to inform and support children who may be coming into care. An 'Introduction to care' video will also be produced to provide further support to children coming into care. The Participation Officer is currently liaising with video companies prior to commissioning the production of the video with children, young people and Social Workers.
- 5.2 The UASC group have already completed a Welcome to Hampshire leaflet which has been approved by senior managers. This leaflet is currently being completed by the design team. The leaflet will be assessable to Social Workers in five languages identified as the most commonly spoken languages for UASC in Hampshire. This will be a valuable resource for Social Workers working with separated young people who will have recently arrived in Hampshire and seeking asylum.

6. Peer Inspections

- 6.1 The Participation Officer will attend all Peer Inspections and has taken part in inspections for Basingstoke, Fareham and Gosport, New Forest, East Hants and the Isle of Wight.
- 6.2 The Participation Officer has met with all the teams that have been inspected this year. These meetings have included District Managers, and Participation leads and provided an opportunity for sharing participation practice and learning.

7. Participation Events

- 7.2 All eight districts have recorded eighteen events from 01 January 2018 to date with 254 children and young people and 31 parents and carers taking part. The main themes over that past six month regarding 'you said' and 'we did' are:

You Said	We did
There are positive relationships with parents and children and children's services staff;	
There are positive relationships with parents and children and children's services staff;	

There is a strong sense of being well supported by staff and the department;	
Working relationships between staff and children and their families are viewed as authentic	
More regular contact with siblings;	
More notice of any changes such as a new Social Worker;	
Make meeting rooms more child friendly	
I would rather answer this via email as I don't like talking on the phone.	We E-mailed it to you
We would like more participation events and activities like this;	
I like the opportunity to meet with other families with children with Disabilities;	
We really appreciate the support and relationships with Childrens Services;	
Could we tighten up on cover for Social Worker absences;	We reviewed duty rota system to ensure Social Worker absences are covered.
Direct payments not always paid on time.	If there is an issue regarding direct payments the allocated worker will discuss this during visits and will resolve the problem.
You would like toys in meeting and contact rooms, more colourful, paper and pens in rooms, photos of the rooms prior to the meetings.	We contacted Facilities Management to make the changes requested by the children and young people using in the meeting rooms.
More information about my social worker, photos of the managers so that children know who they are talking about.	

8. Engagement Events

Engagement events are projects that demand a level of commitment from the young people involved. These events can be stepping stones to groups or other committed roles for the young people. In the first half of this year we have had two significant Events

8.1 **The Havant ICE Project**

Seven young people and two social workers spent ten evenings together in Havant developing and preparing a performance piece that explored what it is like to be rendered voiceless. It also explored the relationship between young person and social worker from both the child and the social workers point of view. They performed their piece to an audience of around 200 people at the Point Theatre in Eastleigh. The piece was well received and appreciated on the night. The young people gained a level one arts award as part of the project

8.2 **Changing Schools Video**

Four young people (one from the Isle of Wight) took part in a video project that explains what school can be like for a child in care. It describes what life might be like for a child in care that the child may have travelled an hour to get to school, that the placement can sometimes be unsettled and that relationships with other young people can be difficult when you feel ashamed to say you are in care. The video was presented to the designated teachers conference in March with the young people introducing a workshop around the video these workshops were the big highlight of the day.

9. **Next Steps**

9.1 **The language that we use**

The language that we use is a key theme from participation. We recognise that the use of language is important, this links to the relationship's workers build with young people. Our children and young people have also asked us if we can change the language we use for example can:

- Re-unification be changed to *'my journey home' or 'return to family.*
- Looked After being changed to *Care for,*
- Core group meeting be changed to *About me meeting,*
- Participation Groups be changed to *'a talk that could improve',*
- Contact be changed to *Family time,*
- Social worker changed to *A person who helps with problems.*

9.2 We do need to consider changes to our language within review documents, care plans, visit records and our verbal dialog with children and their families. Such information crosses many aspects of the department for example within our guidance, policies and procedures so we need to identify and streamline a way to fully achieve this. The language we use is currently being developed and the Participation Officer is coordinating

feedback from the districts regarding what language our children and young people would like us to use.

10. Difficult Conversations

- 10.1 The Restorative Practice deep dive Hampshire Approach Training is being developed. Current consideration is to offer a session directly focusing on the engagement of children and young people and enabling practitioners to be confident and skilled to work in an open and honest way, having the difficult conversations, particularly when talking about entry to care as part of this training.

The Participation Officer is exploring the idea for opportunities for children in care living out of county to be in touch as a group virtually using Skype or Facebook.

- 10.2 The Participation Officer would like to develop a Care Ambassador alumnus. Previous Care Ambassadors supporting and role modelling current care ambassadors.

11. Conclusion

- 11.1 Participation is embedded across the districts. We know our children well and their voice is evident. The “You Said, We Did” is continuing to develop with more work to evidence how feedback has influenced our service delivery.

- 11.2 District events are progressing, and feedback is positive.

- 11.3 The recruitment and maintenance of the Care Ambassadors is crucial to progress, whilst many of the time limited one off requests for young people should be open to all, it is about the representative voice of children in care and care leavers that the Care Ambassadors need to be obtaining and then advocating for.

CORPORATE OR LEGAL INFORMATION:**Links to the Strategic Plan**

Hampshire maintains strong and sustainable economic growth and prosperity:	No
People in Hampshire live safe, healthy and independent lives:	Yes
People in Hampshire enjoy a rich and diverse environment:	No
People in Hampshire enjoy being part of strong, inclusive communities:	Yes
OR	
This proposal does not link to the Strategic Plan but, nevertheless, requires a decision because:	

Other Significant Links

Links to previous Member decisions:	
<u>Title</u>	<u>Date</u>
Direct links to specific legislation or Government Directives	
<u>Title</u>	<u>Date</u>

Section 100 D - Local Government Act 1972 - background documents

The following documents discuss facts or matters on which this report, or an important part of it, is based and have been relied upon to a material extent in the preparation of this report. (NB: the list excludes published works and any documents which disclose exempt or confidential information as defined in the Act.)

<u>Document</u>	<u>Location</u>
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None	
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IMPACT ASSESSMENTS:

1. Equality Duty

1.1. The County Council has a duty under Section 149 of the Equality Act 2010 ('the Act') to have due regard in the exercise of its functions to the need to:

- Eliminate discrimination, harassment and victimisation and any other conduct prohibited under the Act;
- Advance equality of opportunity between persons who share a relevant protected characteristic (age, disability, gender reassignment, pregnancy and maternity, race, religion or belief, gender and sexual orientation) and those who do not share it;
- Foster good relations between persons who share a relevant protected characteristic and persons who do not share it.

Due regard in this context involves having due regard in particular to:

- a) The need to remove or minimise disadvantages suffered by persons sharing a relevant characteristic connected to that characteristic;
- b) Take steps to meet the needs of persons sharing a relevant protected characteristic different from the needs of persons who do not share it;
- c) Encourage persons sharing a relevant protected characteristic to participate in public life or in any other activity which participation by such persons is disproportionately low.

1.2. Equalities Impact Assessment:

N/A

2. Impact on Crime and Disorder:

N/A

3. Climate Change:

- a) How does what is being proposed impact on our carbon footprint / energy consumption?

N/A

- b) How does what is being proposed consider the need to adapt to climate change, and be resilient to its longer term impacts?

N/A

HAMPSHIRE COUNTY COUNCIL

Report

Committee/Panel:	Corporate Parenting Board
Date:	12 June 2019
Title:	Updates on Children in Care – Health Assessments
Report From:	Director of Children's Services

Contact name: Laura Mallinson, District Manager

Tel: 023 92 364781

Email: Laura.mallinson@hants.gov.uk

1. Recommendation(s)

- 1.1. That the Corporate Parenting Board note the report and the update on the current focus of working practices for Officers working with Children in Care.

2. Summary

- 2.1. The report provides a brief overview of the current progression of work with Children in Care, specifically Health Assessments.
- 2.2. The report is attached to this cover report as Appendix 1.

3. Future direction

- 3.1. Children's Social Care will continue to work to improve outcomes for Children in Care.

CORPORATE OR LEGAL INFORMATION:

Links to the Strategic Plan

Hampshire maintains strong and sustainable economic growth and prosperity:	Yes
People in Hampshire live safe, healthy and independent lives:	Yes
People in Hampshire enjoy a rich and diverse environment:	Yes
People in Hampshire enjoy being part of strong, inclusive communities:	Yes
OR	
This proposal does not link to the Strategic Plan but, nevertheless, requires a decision because:	

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Document

Location

None

IMPACT ASSESSMENTS:

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- Eliminate discrimination, harassment and victimisation and any other conduct prohibited under the Act;
- Advance equality of opportunity between persons who share a relevant protected characteristic (age, disability, gender reassignment, pregnancy and maternity, race, religion or belief, gender and sexual orientation) and those who do not share it;
- Foster good relations between persons who share a relevant protected characteristic and persons who do not share it.

Due regard in this context involves having due regard to:

- a) The need to remove or minimise disadvantages suffered by persons sharing a relevant characteristic connected to that characteristic;
- b) Take steps to meet the needs of persons sharing a relevant protected characteristic different from the needs of persons who do not share it;
- c) Encourage persons sharing a relevant protected characteristic to participate in public life or in any other activity which participation by such persons is disproportionately low.

1.2. Equalities Impact Assessment:

N/a

2. Impact on Crime and Disorder:

N/a

3. Climate Change:

- a) How does what is being proposed impact on our carbon footprint / energy consumption?

N/a

- b) How does what is being proposed consider the need to adapt to climate change, and be resilient to its longer term impacts?

N/a

Position Statement for the Health of Children in Care

This position statement provides an overview of the status of health and dental assessments for Children Looked After by Hampshire. Detail of the work currently being completed and the plans for 2019/2020.

At the end of March 2019 Hampshire had 1195 children who has been in care for more than 12 months.

Health Assessments

The Health of Children in Care has been an area where there has been significant focus on improving the quality and timeliness of health assessments for CIC. It must be noted that all children have had their day to day health needs met through the universal provision of GP when needed.

60.6% of CIC have had a health assessment completed within the last 12 months.

Whilst this accounts for 724 children, the department believe that this could improve through close working with health colleagues.

a : the number of CLA for 12+ months as at the specified month end date.

b : of the above, the number that have had a **Health** check during the year to the specified date.

% : (b / a) the percentage of CLA for 12+ months that have had a **Health** check during the year to the specified date.

Jan 19 - March 19

		Jan-19			Feb-19			Mar-19		
KT Area	Key Team	b	a	%	b	a	%	b	a	%
East Total		362	572	63.3%	353	571	61.8%	354	558	63.4%
West Total		362	570	63.5%	335	577	58.1%	320	574	55.7%
Adoption Total		46	62	74.2%	55	69	79.7%	50	62	80.6%
Non-specific Total					0	0		0	1	0.0%
Grand Total		770	1204	64.0%	743	1217	61.1%	724	1195	60.6%

The data provided is a collective against initial assessment and review assessment and collective for those children placed within Hampshire and those placed outside of Hampshire

Initial Health Assessments

Following feedback from a CQC inspection in 2011 where there was a recommendation that the quality and timeliness of Initial Health Assessment for Children in Care needed to improve. A review of the process took place and in 2017 there was the implementation of a new locally commissioned service of specialist GP's to under take Initial Health Assessments for Hampshire CIC placed within Hampshire, this except for those children who were placed in the Basingstoke area.

There is an expectation that upon entry to care a child or young person would receive their IHA within 20 working days. To co-ordinate and improve quality with the introduction of the specialist GP's, there was also the creation of a Hub.

This is a health-based team who receive the IHA paperwork and ensure the required consents are provided, they forward this to the specialist GP who has 15 working days to complete the assessment and return a completed report with clear and thorough health care plan. The Hub will then quality assure this care plan.

To date the quality by the specialist GP's has been 100% (this also comes with a payment on performance). The timescales are difficult to achieve, the social work team has three days to submit paperwork, this at the busiest time for the social work team having to accommodate children, possibly preparing Court statements or care plans. It is a timescale that we continue to aim towards. Positively, once The Hub receive the paperwork, 71% of the children have had their IHA within the 15 working day requirement and these are assessments that are of a good quality with clear health care plans identified from the assessment.

There has been a requirement that in addition to the CORAM BAAF health assessment form a social worker report is provided to enable the specialist GP to have a better understanding, in advance of the children / young person's circumstances, this enables a greater dialog of conversation and quality assessment.

Basingstoke has a slightly different approach, they hold their assessments in the hospital as they have a LAC team. Funding for Basingstoke assessments comes from Hampshire Hospital Foundation Trust opposed to Southern Health. They are also of high quality, but timeframes are also difficult to be achieved.

Review Health Assessments

Hampshire currently have two providers for Health Assessments, Basingstoke HHFT and Southern Health Foundation Trust SHFT. Due to changes in commissioning in June 2018 there was a back log of 170 children requiring a RHA by SHFT, this backlog saw the implementation of a Task and Finish Group in October 2018 to understand the issues, create a plan going forward to ensure that all CIC received a quality health assessment in good time. SHFT managed to get on top of the waiting list so that in February 2019 there were 11 waiting appointments

To achieve this progress, there was an action that all under 5year olds were prioritised on the waiting list as there was a potential that they could miss x2 assessments (as every x6 months). CCG looked for another provider to support with

the waiting list, but this wasn't required as an outcome of the Task and Finish group was resolution to the waiting list issue and this resulted in:

- Children under the age of 10 years can be removed from school for their annual health assessment
- Any child not in full time education and those that are in part time education are invited to attend a NEW clinic service across Hampshire
- Appointments were moved from a home visit to clinic attendance

This increased capacity having the clinic model as x3 young people can turn up in a day opposed to the previous model of home visits where x1 RHA would be completed per day. (complex children would still be entitled to a home visit – this is exception and TM agreement is required with the health provider)

The plan included a text message reminder service to the carers to avoid missed appointments and all appointments for the clinics are booked at least x3 weeks in advance.

Clinics are offered across Hampshire with venues being offered by Children's Centre's and Health Centres.

This implementation was supported by Matthew Richardson, Deputy Director for West CCG and oversees the safeguarding for CLA on behalf of the 5CCG's in Hampshire. He has been supportive of the revision and implementation of service for children in care. (Line manager for Designated Nurse) This support has been replicated by Senior Managers in Social Care with the Head of Strategy and Operations being part of the Task and Finish Group.

Out of County Placements

Out of Area RHA continue to pose a problem. Work is being completed to understand at a greater depth the proportion of CIC who are placed within Hampshire and those placed Out of County. Ideally we would like to have the opportunity to place children, if out of county, in authorities where health assessments can be accessed without delay. We know that Kent has a x6 month wait.

UASC

Hampshire have several UASC placed out of Hampshire with a proportion of those placed in the Croydon area. Having reviewed this there is currently work underway for those UASC placed in Croydon to have an IHA and RHA by one of our designated Dr's, holding the assessments in Croydon. (when data collated there were 21 young people placed in Croydon)

Looking at this as a model to replicate the same model of IHA being referred to The Hub. There is a high cost of up to £400 per assessment, but it will mean that the young people will be offered a good quality IHA at entry to care. This is the plan for 2019/2020. RHA will be considered in the next phase of planning and will follow current process at this time – request locally and then we pay.

In addition to this work, the UASC designated Dr is completing an audit of the UASC being screened for infectious diseases such as TB / Heb B / HIV she will formulate a document to go alongside the request for the IHA to ensure that the IHA follows up the screening that occurs on entry to the county.

Immunisations

Data is collected on a rolling year and children need to have received all their immunisations in timescales over their life, data is broken down through internal tracking to exclude the flu immunisation as there are several children who have not received this. Issues are discrepancies in the data produced this is around flu vaccine and non flu vaccine – miss one in your childhood, then would never catch up – without flu county for March was 81.3% opposed to 59%

Excluding flu

	Mar-19			Feb - 2019			Mar - 2019		
Team Responsible District	Up to date	CLA Cohort	%	Up to date	CLA Cohort	%	Up to date	CLA Cohort	%
East Total	460	544	84.6 %	459	544	84.4 %	451	534	84.5%
West Total	427	531	80.4 %	429	538	79.7 %	428	534	80.1%
Adoption	37	62	59.7 %	44	69	63.8 %	39	62	62.9%
Non specific			0.0%			0.0%	1	1	100.0 %
Hampshire	924	1137	81.3 %	932	1151	81.0 %	919	1131	81.3%

Including flu

	Jan-19			Feb -19			Mar -19		
KT Area	up to date	CLA	%	up to date	CLA	%	up to date	CLA	%
East Total	361	572	63.1 %	360	571	63.0 %	349	558	62.5%
West Total	346	570	60.7 %	347	577	60.1 %	343	574	59.8%
Adoption Total	14	62	22.6 %	18	69	26.1 %	12	62	19.4%

Non-specific Total							1	1	100.0 %
Grand Total	721	1204	59.9 %	725	1217	59.6 %	705	1195	59.0%

The data is currently for the county, recording does appear to be impairing the stats issue opposed to children not having been immunised.

The process is as follows

- child enters care through the tracking of the newly accommodated children, Social Care send the names of the children to the NHS provider who then interrogates the health systems (Rio / GP's systems) lists the immunisations received and against the national programme identify if the child has a complete schedule or not, identifying what is needed.
- Report is completed within 15 working days, re sent to the originating social worker for inclusion into the child's ICS record. This is added to Immunisation tab on ICS and the email is added to ESCR.
- Immunisations are recorded within the IHA and RHA documents so this is a second place where the information can be located and ensure that children are up to date, if not this is part of the health care plan
- Immunisations are part of the discussion with the CLA reviews to ensure children are adequately immunised.

Some children will never have all their immunisations up to date and those children entering care under 8 weeks old would not have had any immunisations due to being too young. UASC would enter the system not having participated in the UK programme from start (national programme commences at 8 weeks old) so again, would never have an up to date immunisation programme.

DCT – due to medical reason there may be a reason why some children shouldn't have the full immunisation programme – this is the exception not the norm.

Issues are discrepancies in the data produced this is around flu vaccine and non flu vaccine – miss one in your childhood, then would never catch up – without flu county for Feb was 84.4%, 59.6%

Moving forward with improving the immunisation data

There is a need for a refresh to all carers – in house, external, residential NCP, IFA with support from HFN about what immunisations are due and when specifically including the flu vaccination.

The possibility to explore working with education and the virtual school about an alternative communication method to inform carers of the flu vaccination as these take place in school and carers may not be aware of this.

Designation of authority – emphasis on the medical carer and delegation of authority System – review of the process and data entry and the pull through to the performance reports (eg742045 should as incomplete by swift is 100% complete)

Dental

Hampshire children should be able to access an NHS dentist in Hampshire within a 25 mile radius of their home address. Children outside of Hampshire we can not guarantee this to be the case, but we have asked the data team to split the children living in Hampshire and out of Hampshire to identify if this is a problem for children placed out of county.

There is an updated guidance on accessing NHS dentist in Hampshire and the programme of dental care from 0-18 years which can be found on the Toolkit.

a : the number of CLA for 12+ months as at the specified month end date.

b : of the above, the number that have had a **Dental** check during the year to the specified date.

% : (b / a) the percentage of CLA for 12+ months that have had a **Dental** check during the year to the specified date.

		Jan-19			Feb-19			Mar-19		
KT Area	Key Team	b	a	%	b	a	%	b	a	%
East Total		455	572	79.5%	426	571	74.6%	406	558	72.8%
West Total		442	570	77.5%	445	577	77.1%	404	574	70.4%
Adoption Total		39	62	62.9%	45	69	65.2%	45	62	72.6%
Non-specific Total					0	0		0	1	0.0%
Grand Total		936	1204	77.7%	916	1217	75.3%	855	1195	71.5%

Similarly to the immunisations, dental checks are taking place, children are accessing the dentist, the issue is around the recording of this onto the system. It is recorded on the IHA if the child is registered with a dentist and when last attended, if not registered it will be an action on the care plan to register. RHA it will have date of attendance and if not an action to attend, it is the expectation that children attend each year if they are over 5 years old and every x6 months under 5yrs

Admin contact foster carers direct to obtain the date for the last dental check it is also part of the CLA review discussion to ensure the overall needs of CIC are being met.

DCT children particularly those in residential education / school provision follow usual process, but due to need there is the option of being referred to the community dentist.

Moving forward with improving the recording of dental checks

CLA stat visiting form to be amended to reflect when dental taken place and then due

David Cook looking at HCC children vs NCP

Addition work being completed to promote the health of Children in Care

Our Designated Dr has identified a London charity who issue sleep packs for UASC (evidence from Kent that these work very well) they contains a T-shirt big enough for night shirt, night light, eye mask and ear plugs, tissues, stress ball and bag of lavender. They are currently given out by any of the Specialist GP's at IHA's and will continue to be issued at RHA's for those that are having sleep issues.

In addition, the same charity provide individual clothing packs for UASC – tracksuit bottoms, T shirt, rain coat, jumper, hat, gloves, hat, scarf, note pad, socks, pants and personal toiletries, towel, work is being explored about Hampshire issuing this clothing pack as an initial started kit and these could be provided at the first meeting with social care prior to placement.

The Voice of the Child

On the back of a serious case review of systemic child sexual abuse within care, it was identified that the voice of a child was not heard. All assessments undertaken enable the child to have the opportunity to talk to the health professional without carer present. This is then recorded on the health assessment.

GP responsibility to inform Social Care of issues raised about foster carers

Each foster carer is required to have an initial medical and then review health assessments, until recently the role of the GP was limited to completing such assessments, work has been completed that following the approval of any foster carer, a notification letter is sent back to the GP stating that they have been approved as carers and she the carers attend the GP for themselves with any presenting issues of concern around caring for other children, then the GP needs to alter Children's Services.

Improving the standards of Health Care in Secure Accommodation

The Designated Nurse for CLA has been involved in the refresh of the DoH Health Care Standards for Children and Young People in Secure Accommodation due to be published spring 2019 and has offered to become a critical friend on the board of Swanwick Lodge Secure Children's Home.

SDQ's

SDQ's process is in place to triangulate to identify any interventions that may support the young person, carer or school around five areas of development.

Over the next year, 2019/2020 Helen Dove from CAMHS Sussex Partnership is doing a year long focus on improving the emotional health and wellbeing of LAC supported through their service. This will be evaluated to identify areas for development going forward.

Participation – You Said, We Did

Care Leavers

Following feedback from some young people about not wishing to repeat their story time and time again, a letter has been sent to all Hampshire GP's to have the option for an added "read code" on the Care Leavers records. This flags them on the GP system as being a Care Leaver to avoid the need for them to repeat their story. A consultation went out to care leavers who were very much 50:50 about their wish to have this "read code" so the outcome is that the GP is to have the conversation with the Care Leaver about if they would like a "read code" on their record or not. This empowers the Care Leaver to make an informed choice about what information is discussed / known and pattern / vulnerable areas.

Access to Adult Mental Health Services (raised at the Participation Conference 2017)

It was raised that Care Leavers who were not working with CAMHS at the point they turned 18 years struggled to access support from Adult Mental Health. There is work being completed with GP's about the Care Leaver having priority to referral into adult mental health services.

Increased understanding of professionals around CIC and Care Leavers (raised at the Participation Conference 2018)

Young People have requested an improved understanding specifically of reception staff in primary health care around CIC and Care Leavers. Training is being completed with all receptionists in GP practices to raise awareness and understanding through Hampshire. This being taken forward in 2019/2020.

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HAMPSHIRE COUNTY COUNCIL

Report

Committee/Panel:	Corporate Parenting Board
Date:	12 June 2019
Title:	Hampshire Joint Working Housing Protocol
Report From:	Director of Children's Services

Contact name: Tim Sandle, Commissioning Officer

Tel: 01962 845453

Email: tim.sandle@hants.gov.uk

1 Recommendations

- 1.1 That the Corporate Parenting Board;
 - a. Note the contents of the report.
 - b. Agree that the key challenges are to be considered by the Corporate Parenting Board.

2 Executive Summary

- 2.1 The Hampshire joint working protocol and guidance between housing & Hampshire Children's Services Department for 16 & 17 year olds in housing need has been reviewed and has the following updates and amendments:
- 2.2 Current legislation has been reviewed and practice updated.
- 2.3 The duty for the local authority under the homelessness Act 2017 has been explained. The Act specifies public bodies in England, including Children's Services, are under a duty to refer any person including a young person (with consent) to a housing authority for further guidance if threatened with homelessness.
- 2.4 The duty means that the local authority must undertake the same enquiries for someone where there is reason to believe they may be threatened with homelessness as it would for someone who is homeless. The timescale for this is now 56 days.
- 2.5 Accommodation provided for young people will be suitable to meet their needs.

- 2.6 There is no situation in which bed and breakfast accommodation can be considered suitable for 16 and 17-year-old applicants, even on an emergency basis.

3 Introduction

- 3.1 The judgement in the House of Lords case, *G v Southwark*, clarified the responsibility of Children's Services for accommodating homeless young people aged 16 /17 years of age under the Children Act 1989. The 'Southwark judgment' clearly affirmed the responsibility of Children's Social Care to assess young people who present themselves as being homeless or at risk of homelessness. The ruling highlights that the needs of these young people are likely to be so complex that, as a rule, the outcome of the assessment should be that these young people should be looked after under section 20.
- 3.2 The Homelessness Reduction Act 2017 has made significant changes to part 7 of the Housing Act 1996. Its main effect is to place increased duties on local authorities to assess an applicant's needs and to prevent and relieve homelessness. The Hampshire Joint Working Housing Protocol promotes information sharing, planning and a joined up response in supporting young people who at risk or are homeless. The revised joint working housing protocol will ensure that there is a collaborative approach in supporting young people from Children's Social care and District Housing Authorities.

4 Background, context and key facts

- 4.1 The Hampshire Joint Working Housing Protocol clarifies the process and procedure for managing young people who are at risk or are homeless. A fundamental principle of the Hampshire Joint Working Housing Protocol is that all 16 and 17 year olds who approach either the local Housing Authority or the Children's Services Department, and where there is a reason to believe they may be homeless, should be assessed by Children's Services under the Children Act 1989 to determine whether they are a child in need and, if so, whether a duty exists to offer accommodation under section 20 of that Act.
- 4.2 This protocol recognises that homelessness is damaging to young people's personal, social and economic development and well-being. Where possible, homelessness should be prevented, and young people supported to remain at home (where it is safe to do so) or leave in a planned and supported manner. The primary objective of agencies is to respond to all young people's enquiries with the aim of preventing homelessness and supporting the young person to remain in the parental home, where it is safe and reasonable to do so.
- 4.3 Children's Services is the lead agency regarding assessing and meeting the needs of 16/17 year olds who seek help because of homelessness. Although

the Children Act 1989 is the primary legislation over the Housing Act 1996, Part 7 (as amended), both services are responsible for meeting the needs of these young people. Current legislation and practice requirements are included in the joint working housing protocol and emphasises the complementary roles of Children's Services and the District Housing Authorities.

- 4.4 The joint working housing protocol has been completed with advice from Kim Davis, Youth Homelessness Advisor, Homelessness Advice and Support Team, Homelessness and Rough Sleeping Directorate Ministry of Housing, Communities and Local Government.
- 4.5 Members of the Strategic Housing Group, the Housing and Local Welfare Assistance Lead and the Commissioning Service have checked that the procedure is correct. The revised joint working housing protocol has been checked for current terminology and current practice; this includes an updated flow chart to support professionals in ensuring that their roles and responsibilities are clearly understood.

5 Analysis

- 5.1 The revised joint working housing protocol clarifies the roles and responsibilities as well as including up to date legislation, process and procedure for supporting young people who are at risk or are homeless.

6 Conclusion

- 6.1 The joint working housing protocol has been reviewed and updated in respect of legislation, knowledge and process in line with current requirements and practice. The revised joint working housing protocol promotes information sharing planning and a joined-up response in supporting young people who are at risk or who are homeless. The revised protocol will ensure that there is a collaborative approach between Children's Services and District Housing Authorities and partner agencies in supporting young people. The joint working housing protocol clarifies organisational roles, responsibilities and process in support of young people at risk of, or are, homeless. The Hampshire Joint Working Housing Protocol will be reviewed at least annually to ensure any change in legislation and/or training safeguards are fully incorporated.

7 Useful links:

- 7.1 In developing this protocol consideration has been given to relevant legislation and case law. This includes the [Children Act 1989](#), the [Children \(Leaving Care\) Act 2000](#) the [Children and Social Work Act 2017](#) and the [Housing Act 1996](#) (as amended including by the [Homelessness Act 2002](#) and the [Homelessness Reduction Act 2017](#)).

CORPORATE OR LEGAL INFORMATION:

Links to the Strategic Plan

Hampshire maintains strong and sustainable economic growth and prosperity:	Yes
People in Hampshire live safe, healthy and independent lives:	Yes
People in Hampshire enjoy a rich and diverse environment:	Yes
People in Hampshire enjoy being part of strong, inclusive communities:	Yes
OR	
This proposal does not link to the Strategic Plan but, nevertheless, requires a decision because:	

Other Significant Links

Links to previous Member decisions:	
<u>Title</u>	<u>Date</u>
Direct links to specific legislation or Government Directives	
<u>Title</u>	<u>Date</u>

Section 100 D - Local Government Act 1972 - background documents

The following documents discuss facts or matters on which this report, or an important part of it, is based and have been relied upon to a material extent in the preparation of this report. (NB: the list excludes published works and any documents which disclose exempt or confidential information as defined in the Act.)

Document

Location

None

IMPACT ASSESSMENTS:

1. Equality Duty

The County Council has a duty under Section 149 of the Equality Act 2010 ('the Act') to have due regard in the exercise of its functions to the need to:

- Eliminate discrimination, harassment and victimisation and any other conduct prohibited under the Act;
- Advance equality of opportunity between persons who share a relevant protected characteristic (age, disability, gender reassignment, pregnancy and maternity, race, religion or belief, gender and sexual orientation) and those who do not share it;
- Foster good relations between persons who share a relevant protected characteristic and persons who do not share it.

Due regard in this context involves having due regard to:

- 6.1.1 The need to remove or minimise disadvantages suffered by persons sharing a relevant characteristic connected to that characteristic;
- 6.1.2 Take steps to meet the needs of persons sharing a relevant protected characteristic different from the needs of persons who do not share it;
- 6.1.3 Encourage persons sharing a relevant protected characteristic to participate in public life or in any other activity which participation by such persons is disproportionately low.

Equalities Impact Assessment:

- (a) *why you consider that the project/proposal will have a low or no impact on groups with protected characteristics or*
- (b) *will give details of the identified impacts and potential mitigating actions*

Impact on Crime and Disorder:

Climate Change:

- 6.1.4 How does what is being proposed impact on our carbon footprint / energy consumption?
- 6.1.5 How does what is being proposed consider the need to adapt to climate change, and be resilient to its longer-term impacts?

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