

CHILDREN'S SERVICES COMMITTEE

AGENDA



Tuesday 8 November, 2016

at 4.00 pm

**in the Council Chamber,
Civic Centre, Hartlepool**

MEMBERS: CHILDREN'S SERVICES COMMITTEE

Councillors Beck, Clark, Hamilton, Harrison, James, Lauderdale and Moore.

Co-opted Members: Michael Lee (RC Diocesan representative) and Vacancy (C of E Diocesan representative).

School Heads Representatives: Mark Tilling (Secondary), David Turner (Primary)

Six Young Peoples Representatives

Observer: Councillor Thomas, Chair of Adult Services Committee

1. APOLOGIES FOR ABSENCE

2. TO RECEIVE ANY DECLARATIONS OF INTEREST BY MEMBERS

3. MINUTES

- 3.1 Minutes of the meeting held on date 13 September, 2016 (*previously circulated and published*).

4. BUDGET AND POLICY FRAMEWORK ITEMS

None.

5. KEY DECISIONS

None.



6. OTHER ITEMS REQUIRING DECISION

- 6.1 Deprivation Factor in the School Funding Formula 2017/18 – *Director of Child and Adult Services*
- 6.2 Amendment to Instrument of Government – Rift House Primary School – *Director of Child and Adult Services*
- 6.3 Annual Review of the Children Looked After Strategy 2014- 2017 – *Director of Child and Adult Services*
- 6.4 Safeguarding in Hartlepool (April 2015 – March 2016) – *Director of Child and Adult Services*

7. ITEMS FOR INFORMATION

- 7.1 A Better Childhood in Hartlepool – *Director of Child and Adult Services*
- 7.2 Annual Complaints Report - 1st April 2015 – 31st March 2016 – *Director of Child and Adult Services*
- 7.3 Service User Feedback – *Director of Child and Adult Services*

8. ANY OTHER BUSINESS WHICH THE CHAIR CONSIDERS URGENT

FOR INFORMATION

Date of next meeting – Tuesday 6 December, 2016 at 4.00pm in the Civic Centre, Hartlepool.



CHILDREN'S SERVICES COMMITTEE

8 November 2016



Report of: Director of Child and Adult Services

Subject: DEPRIVATION FACTOR IN THE SCHOOL FUNDING FORMULA 2017/18

1. TYPE OF DECISION/APPLICABLE CATEGORY

1.1 Non-key.

2. PURPOSE OF REPORT

2.1 The purpose of the report is to ask Children's Services Committee to determine the deprivation factor to be used for the local schools formula 2017/18.

3. BACKGROUND

3.1 The local authority (LA) receives funding for education via the Dedicated Schools Grant (DSG). This is split into three areas: the Schools Block, the Early Years Block and the High Needs Block. This report refers to the Schools Block funding only.

3.2 The level of funding allocated to the LA is based upon census returns submitted by the LA. The funding is then calculated based upon 2012/13 cash levels per pupil/child. Final allocations for the Schools and High Needs Blocks will follow in December on the basis of pupil numbers recorded in the October census.

3.3 The first stage of the consultation for a national funding formula has been completed. The outcome of this and the plans for the next stage have yet to be issued by the DfE. They have indicated that details will be provided in the New Year. They have, however, confirmed that the implementation of any changes has been deferred until 2018/19.

3.4 The DfE have now confirmed that no local authority will receive less in 2017/18 (adjusted to reflect updated baselines) on their Schools and High Needs Blocks than they did in 2016/17 and that the minimum funding guarantee (MFG) of -

1.5% per pupil for schools will be retained. The MFG in effect protects individual school budgets from large variations from one year to the next.

4. SCHOOLS FORMULA CONSULTATION 2017/18

- 4.1 The local schools formula has to be reviewed and agreed annually. This is then used as a basis for allocating individual school budgets to schools. The LA consults with the Schools Forum in order to agree the formula. Schools Forum has been consulted and the formula factors have been agreed with the exception of the deprivation factor.
- 4.2 Schools Forum could not agree the deprivation factor for the 2016/17 formula and referred the decision to the Children's Services Committee. There was a split vote between a factor of 15% and a factor of 12%. In October 2015 Children's Services Committee considered the national and local averages of deprivation used by schools and agreed a reduction in the deprivation factor of 1.5% from 15% to 13.5%, half way between the 15% and 12% factors that led to the split vote in Schools Forum.
- 4.3 Any change to the formula factors does not affect the overall level of funding allocated to the schools block but does affect the allocation of funding that individual schools receive. To mitigate the turbulence caused by such changes in the formula, the DfE allow the MFG. This means the per pupil funding cannot reduce year on year by more than 1.5%.
- 4.4 At the meeting of Schools Forum on 14 October 2016, eight options for the 2017/18 formula were considered. Four of the options included a reduction of the lumpsum from £175,000 per school to £129,000 (based upon the statistical neighbour) and changes to the deprivation factor. Schools Forum agreed to retain the lumpsum at the maximum allowable value of £175,000.
- 4.5 The four remaining options relating to the deprivation percentage were then discussed and voted on for 2017/18, as detailed below.
- i) deprivation factor remaining at 13.5%
 - ii) deprivation factor reduced to 8.8%
 - iii) deprivation factor reduced to 12%
 - iv) deprivation factor increased to 15%.
- 4.6 Forum members voted for each option. Option (i) and (ii) both received split votes of 6 for and 6 against. Options iii and iv were both rejected with votes of 2 for, 8 against and 2 abstentions. The decision has therefore been referred to Children's Services Committee. The anonymised school funding models for options (i) and (ii) above are attached at **Appendix 1** for information.
- 4.7 The national average for deprivation funding equates to 8.3%, compared to the average for our statistical neighbours of 8.8% and our North East neighbours of 11.1%. Where an authority has a low deprivation factor the funding is re-distributed via other formula factors, typically through the AWPU rate (averaged

weighted pupil unit) to ensure the total pupil led funding percentage meets the national requirement of a minimum of 80%.

5. RISK IMPLICATIONS

- 5.1 If the recommendations are not approved, the Council will be unable to submit the individual schools budgets for approval to the EFA within the required deadline.

6. FINANCIAL CONSIDERATIONS

- 6.1 The DSG is a ringfenced grant, and is required to be distributed in accordance with the regulations.

7. LEGAL CONSIDERATIONS

- 7.1 There are no legal considerations.

8. CHILD AND FAMILY POVERTY CONSIDERATIONS

- 8.1 There are no child and family poverty considerations.

9. EQUALITY AND DIVERSITY CONSIDERATIONS

- 9.1 There are no equality and diversity considerations.

10. STAFF CONSIDERATIONS

- 10.1 There are no staff considerations.

11. ASSET MANAGEMENT CONSIDERATIONS

- 11.1 There are no asset management considerations.

12. RECOMMENDATIONS

- 12.1 It is recommended that Members:
- (i) Agree a deprivation factor to be used in the 2017/18 formula following a split vote between a factor of 13.5% and one of 8.8%.

13. REASONS FOR RECOMMENDATIONS

- 13.1 The local formula consultation will be delayed until a decision is made in respect of the deprivation factor. Formal approval of the formula will be required prior to submission to the Education Funding Agency (EFA).

14. BACKGROUND PAPERS

- 14.1 Schools Forum Modelling – 7 October 2016
Schools Forum – Education Services Grant – 16 September 2016
Schools Forum – Schools Formula 2017-18 – 16 September 2016

15. CONTACT OFFICERS

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Appendix 1

Modelling: Option i – Deprivation 13.5%

School	2016/17 Budget Post MFG/Capping £	2017/18 Budget Post MFG/Capping £	Change in Cash Allocation increase/(decrease) £	MFG / (CAPPING) £
	1.96%	1.70%		
1	£793,527	£793,418	(109)	0
2	£923,558	£911,388	(12,170)	45,871
3	£482,341	£494,603	12,263	0
4	£1,396,679	£1,396,457	(221)	0
5	£436,677	£437,182	505	0
6	£1,582,878	£1,582,607	(272)	0
7	£1,060,612	£1,075,596	14,984	(15,129)
8	£1,423,375	£1,413,313	(10,063)	0
9	£687,033	£679,859	(7,174)	0
10	£1,581,126	£1,580,839	(287)	0
11	£1,306,959	£1,306,765	(194)	0
12	£1,374,402	£1,373,939	(463)	0
13	£1,394,804	£1,394,595	(209)	0
14	£1,291,487	£1,293,898	2,411	0
15	£886,406	£898,341	11,935	(30,790)
16	£1,534,203	£1,520,843	(13,360)	0
17	£862,861	£862,741	(119)	0
18	£1,612,536	£1,598,740	(13,796)	0
19	£998,319	£998,151	(167)	0
20	£1,472,164	£1,482,545	10,381	0
21	£1,522,302	£1,522,020	(282)	0
22	£806,756	£808,498	1,742	0
23	£1,182,143	£1,181,933	(210)	0
24	£1,456,268	£1,455,982	(286)	0
25	£440,463	£443,586	3,123	0
26	£1,352,923	£1,352,702	(221)	0
27	£1,252,263	£1,246,351	(5,912)	0
28	£1,311,786	£1,319,337	7,550	0
29	£677,957	£678,205	247	0
30	£629,076	£628,996	(79)	0
Primary	£33,733,884	£33,733,430	(454)	(48)
			0	
31	£6,209,512	£6,208,355	(1,158)	0
32	£6,215,497	£6,214,215	(1,282)	0
33	£3,916,140	£3,921,043	4,903	0
34	£5,895,661	£5,894,535	(1,126)	0
35	£4,714,347	£4,713,397	(949)	0
Secondary	£26,951,157	£26,951,545	389	0
Total *	£60,685,040	£60,684,975	(65)	(48)

*may not sum due to roundings

Modelling: Option ii – Deprivation 8.8%

Appendix 1

School	2016/17 Budget Post MFG/Capping £ 1.96%	2017/18 Budget Post MFG/Capping £ 1.71%	Change in Cash Allocation increase/(decrease) £	MFG / (CAPPING) £
1	£793,527	£784,412	(9,115)	6,843
2	£923,558	£911,388	(12,170)	25,514
3	£482,341	£497,055	14,714	(2,058)
4	£1,396,679	£1,378,669	(18,009)	6,215
5	£436,677	£441,232	4,555	(9,268)
6	£1,582,878	£1,589,406	6,528	0
7	£1,060,612	£1,075,684	15,072	(60,203)
8	£1,423,375	£1,403,771	(19,604)	29,650
9	£687,033	£681,588	(5,445)	0
10	£1,581,126	£1,596,383	15,258	0
11	£1,306,959	£1,290,376	(16,582)	21,942
12	£1,374,402	£1,357,258	(17,144)	2,350
13	£1,394,804	£1,376,580	(18,224)	22,756
14	£1,291,487	£1,277,577	(13,910)	0
15	£886,406	£898,411	12,006	(10,270)
16	£1,534,203	£1,514,163	(20,040)	32,177
17	£862,861	£852,579	(10,282)	16,606
18	£1,612,536	£1,591,053	(21,483)	46,724
19	£998,319	£1,010,168	11,849	0
20	£1,472,164	£1,491,620	19,456	(24,964)
21	£1,522,302	£1,544,862	22,560	(11,187)
22	£806,756	£817,513	10,758	(19,733)
23	£1,182,143	£1,199,322	17,179	(5,840)
24	£1,456,268	£1,478,118	21,850	(30,416)
25	£440,463	£444,979	4,515	(12,542)
26	£1,352,923	£1,339,620	(13,303)	0
27	£1,252,263	£1,236,343	(15,921)	10,857
28	£1,311,786	£1,330,889	19,103	(21,650)
29	£677,957	£677,294	(663)	0
30	£629,076	£622,282	(6,793)	7,367
Primary	£33,733,884	£33,710,599	(23,285)	20,869
			0	
31	£6,209,512	£6,126,843	(82,670)	0
32	£6,215,497	£6,318,096	102,598	(21,001)
33	£3,916,140	£3,874,642	(41,498)	0
34	£5,895,661	£5,869,034	(26,627)	0
35	£4,714,347	£4,785,679	71,332	0
Secondary	£26,951,157	£26,974,292	23,135	(21,001)
Total	£60,685,040	£60,684,891	(150)	(132)

*may not sum due to roundings

CHILDREN'S SERVICES COMMITTEE

8th November 2016



Report of: Director of Child and Adult Services

Subject: AMENDMENT TO INSTRUMENT OF GOVERNMENT
– RIFT HOUSE PRIMARY SCHOOL

1. TYPE OF DECISION/APPLICABLE CATEGORY

1.1 Non key.

2. PURPOSE OF REPORT

2.1 To seek approval of the Children's Services Committee to an amendment to the Instrument of Government of Rift House Primary School in accordance with the School Governance (Constitution) (England) Regulations 2012 as amended by the School Governance (Constitution and Federation) (England) (Amendment) Regulations 2014.

3. BACKGROUND

3.1 The school governance regulations referred to above establish the overall framework for the governance of maintained schools. In 2014 and 2015 all maintained schools in Hartlepool were re-constituted in line with changes introduced by these regulations.

3.2 Each school's constitution is set out in an Instrument of Government which establishes the size of the governing body and identifies the number of governors in each governor category. Governing bodies are encouraged from time to time to review their constitution to ensure that it is still fit for purpose and supports the effective governance of the school.

4. PROPOSALS

4.1 The governing body of Rift House Primary School has recently undertaken a review in response to a number of governor positions becoming vacant. One of the areas that they have discussed is around the term of office of Parent

Governors. The school has struggled to recruit and retain Parent Governors in recent years and in response to this they propose to reduce the term of office for Parent Governors from 4 years to 2 years. It is felt that some parents are unwilling to commit to a 4 year period of office, particularly if their child/children will be leaving the school within this period. If a Parent Governor wishes to continue beyond 2 years, provided they are still eligible, they could re-apply for election or the governing body could consider appointing them to vacancies in other governor categories. Having a 2 year period for Parent Governors would also allow the opportunity for new parents to apply to join the governing body and bring new impetus and ideas.

- 4.2 Changes to the term of office in a particular category of governor are required to be identified in the Instrument of Government. A revised Instrument of Government is attached as **APPENDIX 1** to this report.

5. RISK IMPLICATIONS

None.

6. FINANCIAL CONSIDERATIONS

None.

7. LEGAL CONSIDERATIONS

None.

8. CHILD AND FAMILY POVERTY CONSIDERATIONS

None.

9. EQUALITY AND DIVERSITY CONSIDERATIONS

None.

10. STAFF CONSIDERATIONS

None.

11. ASSET MANAGEMENT CONSIDERATIONS

None.

12. RECOMMENDATIONS

- 12.1 To approve the amended Instrument of Government for Rift House Primary School.

13. REASONS FOR RECOMMENDATIONS

- 13.1 To help improve the effectiveness of the governing body.

14. BACKGROUND PAPERS

None.

15. CONTACT OFFICER

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INSTRUMENT OF GOVERNMENT

RIFT HOUSE PRIMARY SCHOOL

1. The name of the school is: Rift House Primary School
2. The school is a community school.
3. The name of the governing body is "The governing body of Rift House Primary School".
4. The governing body shall consist of:
 - a. 2 Parent Governors
 - b. 1 Local Authority Governor
 - c. 1 Staff Governor
 - d. 1 Headteacher
 - e. 5 Co-opted Governors

Parent Governors shall be appointed for a period of 2 years.

5. Total number of governors (10).
6. This instrument of government comes into effect on 21st November 2016.
7. This instrument was made by order of Hartlepool Local Authority on 8th November 2016.
8. A copy of the instrument must be supplied to every member of the governing body (and the headteacher if not a governor).

CHILDREN'S SERVICES COMMITTEE

8th November 2016



Report of: Director of Child and Adult Services

Subject: ANNUAL REVIEW OF THE CHILDREN LOOKED AFTER STRATEGY 2014- 2017

1. TYPE OF DECISION/APPLICABLE CATEGORY

1.1 Non Key

2. PURPOSE OF REPORT

2.1 The purpose of this report is to update Children Services Committee of the progress in relation to the implementation of the Children Looked After strategy 2014/2017.

3. BACKGROUND

3.1 The Children Looked After Strategy was approved by Children's Services Committee in August 2014. The strategy sets out the development of services for Children Looked After and this report highlights the progress made against the strategy priorities and future actions needed

3.2 The strategy sets out the following priorities:

- Children in Need and Family Support
- Corporate Parenting
- Sufficiency
- Care Planning for Children and Young People in Care
- A First Class Education
- Promoting Health and Wellbeing
- Care Leavers

4. **PROGRESS AGAINST THE PRIORITIES**

4.1 Children in Need and Family Support

4.1.1 What we said we would do:

- To increase the use of the Family Group Conference Service by commissioning a new service to run this;
- Develop the Reunification Policy, which is about children coming into care and planning for their return home; and
- Monitor the arrangement for effective interventions service to ensure they are able to deliver intensive community support packages and explore opportunities to deliver these packages using the full resources across Children's Services.

4.1.2 Progress so far:

- The Family Group Conference Service has been recommissioned. The uptake and impact of family group conference work remains low however the practice of family meetings carried out by social workers have increased and are evidenced within care planning panel.
- The Reunification Policy has been drafted and requires approval from the Children in Care Council (CiCC) and the Department's Management Meeting.
- The early help service has been reconfigured. There are now four locality teams covering the early help work with professionals from health and this continues to be developed.
- The Children's hub has been developed and deals with Hartlepool and Stockton front door / enquiries and referrals.

4.1.3 Actions for 2016/17

- All staff to be trained and increase the use of the signs of safety model, graded care profile model and a range of outcome based interventions to support families.
- To monitor the arrangements for intensive response team to ensure outcomes are evidenced.
- Monitor and review the Better Childhood in Hartlepool and evaluate impact.

4.2 Corporate Parenting

4.2.1 What we said we would do:

- Undertake a review of the Looked After Review Arrangements
- Deliver on the recommendations with the Education Report.
- Further develop the Facebook page.

- Improve communication and participation of young people placed outside of Hartlepool.

4.2.2 Progress so far

- The CiCC produced a report for Corporate Parenting Forum in relation to the looked after process for children looked after and young people in care. The CiCC used innovative ways to ensure a representative voice from looked after children and young people including letters, surveys, emails, telephone interviews, and consultation events. The CiCC consulted with over 50 young people. The report incorporated the views of professionals, foster carers, and Independent reviewing officers. The report made several recommendations which were accepted by members of Corporate Parenting Forum in 2015 and are being actioned by the Head of Safeguarding and Reviewing;
- The recommendations from the Educational Report have been reviewed by Corporate Parent Forum and the CiCC;
- The participation team and the CiCC have been successful in developing a closed Facebook page. This will be linked to the youth support service page but will be a dedicated page for our young people. It will provide updates from the corporate parenting forum, CiCC and the Through Care Team. It will also include planned events and will hopefully improve access and contact for children and young people placed outside of Hartlepool. In the future they will also use this page to post short surveys to increase gaining young people's views;
- The fostering team also have a successful Facebook page and young people will contribute to certain items.
- The CiCC have developed a newsletter. This was distributed at the Summer BBQ. The CiCC are preparing to develop the newsletter to be sent out four times per year.
- CiCC have developed their action plan for 16/17 to support communicating with Children living outside of Hartlepool
- CiCC are attendees and present at the Corporate Parenting Forum to ensure that they all have links with corporate parents, have a say on issues that are presented, and make links with corporate parents;
- CiCC are members on the regional CiCC group. This ensures they have a voice in national projects, gain ideas and bring them back to our area.
- Our CiCC prepare, plan and run workshops. The CiCC have invited corporate parents to the regional event which had 5 workshops, what's the story, money money money, state of independence, lean on me and Wannabe, which are linked to life story work, money management, independent skills, lifelong support and being inspirational for our young people. The Regional CiCC event had national interest from the Children's commissioner.
- Young people have been part of the national bench marking forum, they have attended events in relation to 16+ accommodation issues, unaccompanied asylum seekers and also presented at the national bench marking forum to 78 managers from up and down the country.

This has involved meeting with Ofsted and members of the Department for Education to lobby changes in respect of care leavers issues. The young people also had their say about the new Keep on Caring strategy for care leavers which was launched in July 2016.

- Young people have been part of the recruitment and selection panels for senior staff and social workers.

4.2.3 Actions for 2016/17

- Undertake a review of Care Leavers services, rights and entitlements
- Deliver on the recommendations with the Education and Looked After Report.
- Prepare to challenge corporate parents about ongoing issues for children in and leaving care
- Continue to develop the Facebook page.
- Improve communication and participation of young people placed out of Hartlepool
- To prepare a regular newsletter.

4.3 Sufficiency

4.3.1 What we said we would do:

- Increase our pool of adopters for older children and sibling groups.
- Maintain performance in relation to finding permanent families for children without delay.
- Mainstream Family Finder Post.
- Implement Adoption Support Services.
- Increase our pool of foster carers who are able to take sibling groups of 3 or more and teenagers

4.3.2 Progress so far:

- Hartlepool and the Tees Valley local authorities were successful in their bid to the Department of Education to support the creation of a regional adoption agency. The aim is to create more choice and better matched placements across the area for our children. Hartlepool is currently the local authority leading this piece of work.
- The family finder post is in place to monitor timelessness of placements
- The family finding post was agreed for a further year through grant funding.
- Adoption support services are under review in respect of the creation of the Regional Adoption Agency.
- We are working with Tees Valley authorities on specific recruitment campaigns to increase foster placements choice for sibling groups and teenagers, this has not generated as much interest as envisaged.
- Stockton Road Children's Home opened in January 2014 which provides placement for four young people who would otherwise be in

residential care of the area. They recently received an overall Outstanding inspection from Ofsted.

- Exmoor Grove continues to provide high quality care. The unit has recently been extended to ensure they provide the privacy and space for those who live there permanently. They recently received an overall Outstanding inspection from Ofsted.
- Hartlepool has developed a residential framework with the twelve North East authorities. This is a framework for the commissioning of education and specialist residential provision for children with complex needs. This work concluded April 2016.

4.3.3 Actions for 2016/17

- Project manage the work around the Regional Adoption Agency ensuring close working relationships with adopters, adoptees and the Voluntary Adoption Agencies.
- Increase our pool of adopters for older children and sibling groups.
- Maintain performance in relation to finding permanent families for children without delay.
- Review the Family Finder Pos within Regional Adoption Work
- Provide good quality Adoption Support Services.
- Increase the number of in house foster carers who are able to take sibling groups of three or more and teenagers

4.4 Care Planning for Children and Young People in Care

4.4.1 What we said we would do:

- Work with the CiCC to improve the looked after review arrangement for children and young people.
- Further develop the Therapeutic Service to ensure we have a highly skilled future workforce.
- Continue to monitor and improve care plans to ensure they are child and young person friendly, they are based on a thorough assessment of need and evidence young people involvement.
- Review support provided with Special Guardianship and Child Arrangement Orders to ensure they are meeting the needs of children and their carers whilst being managed with the current financial the constraints.

4.4.2 Progress so far:

- The LAC review has been addressed as in 4.2.2
- The therapeutic team has seen an internal member of staff successfully move up a grade to allow her to oversee and supervise the new Therapeutic Social Worker. The new Therapeutic Social Worker is in her second year of studies relating to Play Therapy. Since August 2015 we have seen consistency in our workers relating to

CAMHS, Psychologist and Assistant Psychologist which has provided consistency to our children who are in care or moving to adopted placement. therapeutic team.

- Assessment progress records and Pathway Plans have taken priority. Training and development days have been rolled out to focus on best practice.
- Special Guardianship and Child Arrangement Orders review took place in 2015. There will be an annual review.
- The Advocacy service is currently being re-commissioned;
- Work is progressing with CiCC and a survey is being undertaken with all care leavers to ascertain their views in relation to their rights and entitlements and preparation for independence to inform service development and delivery.
- Placement Support Team run parent and toddler groups, art group, preparation for independence and support events.
- A variety of work has been undertaken in relation to improving pathway plans including training, reviewing the electronic system, developing a new format with guidance and team development sessions.
- Placement support team is working effectively and is evidencing impact and positive outcomes.
- Foster Carers have received training from our commissioned Psychologist regarding child development, trauma and attachment training to support a better understanding of our children's needs and improve placement stability.
- CAMHS, Fostering Team and Through Care delivered a foster care conference. This included four workshops: Staying Put, Attachment, Self Harm and an update from CiCC. This day was evaluated as a success and will be an annual event.

4.4.3 Actions for 2016/17

- Work with the CiCC to improve care leavers preparation for independence and knowing their rights and entitlements
- CiCC to post information on face book and the fostering Facebook page
- Therapeutic Service to be monitored and reviewed
- To embed the new assessment and pathway planning process ensuing these are completed with young people, their plan is provided in a young person friendly way, they are based on a thorough assessment of need and evidence young people's involvement.
- To review the Children's Looked After Strategy with young people and key stake holders in 2017 which will create a 2017-2020 strategy;
- To commission 16+ accommodation options for young people; and
- To be part of the voluntary scheme in the dispersal of unaccompanied minors into Hartlepool Through Care team / area.

4.5 A First Class Education

4.5.1 What we said we would do:

- Implement strategy of the use of Pupil Premium Plus to include an 'offer' of support for all young people and identifying dedicated support from an Educational Psychologist
- Tracking of pupils once the current National attainment levels have been removed (from Sep 2015).
- Targeted reading/phonics support in Y1 and 2.
- Additional tutoring for GCSE students especially in mathematics.

4.5.2 Progress so far:

- All individual's Pupil Premium Plus offer is within the child's individual Personal Educational Plan. We have not appointed an individual Educational Psychologist as all children have access to the EP via their school.
- There is a new tracking system in place which monitors all progress of our pupils.
- If children require target phonic support this will be identified within their PEP if required.
- All GCSE students 2015/16 received tuition if they wanted it

4.5.3 Actions for 2016/17

- Pupils to be tracked within the Fromcare2work meetings
- Pupils progress are monitored in the Virtual School meetings
- Tutoring is offered to GCSE pupils 2016/17

4.6 Promoting Health and Wellbeing

4.6.1 What we said we would do:

- Review the services provided by the Therapeutic team to ensure there is capacity to meet future demand particularly in relations to meeting the needs of adopted children and young people.
- Maintain performance in relation to young people accessing initial and review health assessments and ensure the health plans are of appropriate quality.
- Continue to engage with the small number of young people who decline health assessment to ensure there is a holistic assessment and plan to meet their needs.

4.6.2 Progress so far:

- An update has been provided on the Therapeutic team early in this report.

- Health has created an action plan to support the timelessness and quality of Health assessments.
- Any child who is difficult to engage is seen by the specialist nurse who will make several attempts and use creative methods to ensure the child's health needs are reviewed.
- There has been significant improvements in the timeliness of initial health assessment for looked after children

4.6.3 Actions for 2016/17

- A review of Therapeutic support available for children and young people over 18's is taking place October 2016.
- To support the Therapeutic worker to gain her play therapy qualification.
- To up skill workers in Theraplay training and roll this out to Foster Carers, Social and Residential workers;
- To devise a form for social workers to complete with the young person to ensure they are contributing to their health assessment, should the young person be declining the health nurses visits.

4.7 Care leavers

4.7.1 What we said we would do;

- Improve the quality of the ICS (Integrated Children's System) Pathway plan by working with young people and the system provider to ensure the document is more user friendly and ensure social workers are actively engaging children and young people in the development and review of the plans.
- Continue to facilitate a care leavers group.
- Continue to encourage, support and facilitate young people to access further and higher education.
- Work with housing providers to ensure young people have access to permanent housing in an area of their choice and close to their support networks.
- Complete interviews with young people at key stages through their transition to adulthood. And use the information provided to inform and shape service development.

4.7.2 Progress so far

- The pathway plan process, document and guidance has been developed and is currently being tested by social care staff and young people.
- The fromCare2Work meetings tracks and progresses all care leavers and includes monitoring further and higher education, along with training and other forms of study.

- 16+ accommodation options are currently under review and are being commissioned to provide a menu of choice for our care leavers.
- Housing pathways continue to be developed.
- This year the CICC ran a consultation café. This drop in style of consultation saw 20 care leavers access the café in one day. The feedback was positive. This different model was seen as a success and another way to gain young people's views and shape services rather than individual interviews which has seen no up take over the past year.

4.7.3 Priorities for 2016/17

- To set up a care leavers group.
- Continue to encourage, support and facilitate young people to access further and higher education, apprentices and training.
- To monitor and track our young people not in education, training and employment and support the young people who can to carry out pre preparation for training or education.
- Work with housing providers and Housing heroes to ensure young people have access to permanent housing in an area of their choice and close to their support networks.
- Run another consultation cafe to gain young people's views.
- To review the Keep On Caring July 2016 and ensure Hartlepool's future work with looked after children and care leavers encompasses the recommendations from DFE.
- Care leavers to search for an app so they have better access to their rights and entitlements.

5. RISK IMPLICATIONS

- 5.1 The number of children looked after has increased over the last year and there is a risk that resources will become stretched and not respond as timely and effectively as needed. Support for children looked after is regularly reviewed to ensure support is effective.

6. FINANCIAL CONSIDERATIONS

6.1 Financial Considerations (paragraph to be deleted if not required)

- In considering the issues outlined in this report Members are reminded that significant additional Government Grant cuts will be made over the period 2016/17 to 2018/19. As a result the Council faces a budget deficit for the next three years of between £16.3m and £18.3m, depending on the level of Council Tax increases approved by Members over this period. The recommended strategy for managing the 2016/17 budget position is predicated on the use of significant one-off resources to provide a longer lead time to make permanent budget reductions and

the following table summarises the annual budget deficits. Detailed proposals for achieving 2017/18 and 2018/19 budget reductions will need to be developed. Any additional budget pressures will increase the budget cuts which will need to be made and will need to be referred to the Finance and Policy Committee for consideration.

	Revised Forecast based on actual grant cut and 1.9% Council Tax increase £'m	Revised Forecast based on actual grant cut and 1.9% Council Tax increase and 2% Social Care Precept £'m
2016/17	4.749	4.179
2017/18	9.638	8.663
2018/19	3.945	3.443
Total	18.332	16.285
Cut as %age 15/16 budget	21%	19%

- 6.2 The number of looked after children has increased significantly over the last year and this is creating a budget pressure for children's services. This is being reviewed regularly however there is no sign at this stage that this will decrease in the immediate future thus placing continuing pressure on budgets.

7. LEGAL CONSIDERATIONS

- 7.1 There are no legal considerations with this report.

8. CHILD AND FAMILY POVERTY CONSIDERATIONS

- 8.1 All looked after children are supported to reach their full potential which includes educational attainment. It is hoped that through their education these young people can enter employment and have fulfilled adult lives.

9. EQUALITY AND DIVERSITY CONSIDERATIONS

- 9.1 All children looked after are supported and workers ensure that they are meeting their needs.

10. STAFF CONSIDERATIONS

- 10.1 There are no staff considerations within this report.

11. ASSET MANAGEMENT CONSIDERATIONS

- 11.1 There are no asset management considerations within this report.

12. RECOMMENDATIONS

- 12.1 Children Services Committee to note progress of the Children's Looked After Strategy and note the actions for 2016/17 contained within the report.

13. REASONS FOR RECOMMENDATIONS

- 13.1 The Children looked after strategy is a key document which provides the vision, and actions necessary to continue to achieve positive outcomes for children and young people looked after. This strategy will provide a framework for continuous improvement in this area of our statutory work.

14. BACKGROUND PAPERS

- 14.1 Children Looked After Strategy 2014/2017

15. CONTACT OFFICER

- 15.1 Karen Douglas-Weir Head of Services for Looked After Children and Care Leavers, 01429 495588: Karen. Douglas-Weir@hartlepool.gov.uk

Danielle Swainston, Assistant Director, Children's Services, 01429 523732;
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CHILDREN'S SERVICES COMMITTEE

8th November 2016



Report of: Director of Child and Adult Services

Subject: SAFEGUARDING IN HARTLEPOOL (APRIL 2015 – MARCH 2016)

1. TYPE OF DECISION/APPLICABLE CATEGORY

1.1 Non key

2.1 PURPOSE OF REPORT

2.1 There is an expectation that members are regularly informed of safeguarding activity within their area. The purpose of this report is to provide Children's Services Committee with information relating to safeguarding in Hartlepool to ensure they are fully informed.

3. BACKGROUND

3.1 The information presented within this report will address the volume of safeguarding work undertaken, compliance with the child protection procedures, the effectiveness of work being carried out to promote the safety and wellbeing of children within the Borough and volume in relation to Children Looked After.

3.2 Safeguarding and promoting the welfare of children is defined as:

- Protecting children from maltreatment;
- Preventing impairment of children's health or development;
- Ensuring children grow up in circumstances consistent with the provision of effective care; and
- Taking action to enable all children to have the best outcomes.

3.3 The legislative framework for safeguarding sits within the Children Act 1989 (as amended by Children Act 2004) and Section 47 of this Act details the duties placed upon local authorities to make decisions to protect children as

well as providing the authority with the remit for compulsory intervention into family life if a child is felt to be at risk of significant harm.

- 3.4 The council also needs to have regard to Care planning regulations and guidance (June 2015) which encompasses all relevant legislation for looked after children.

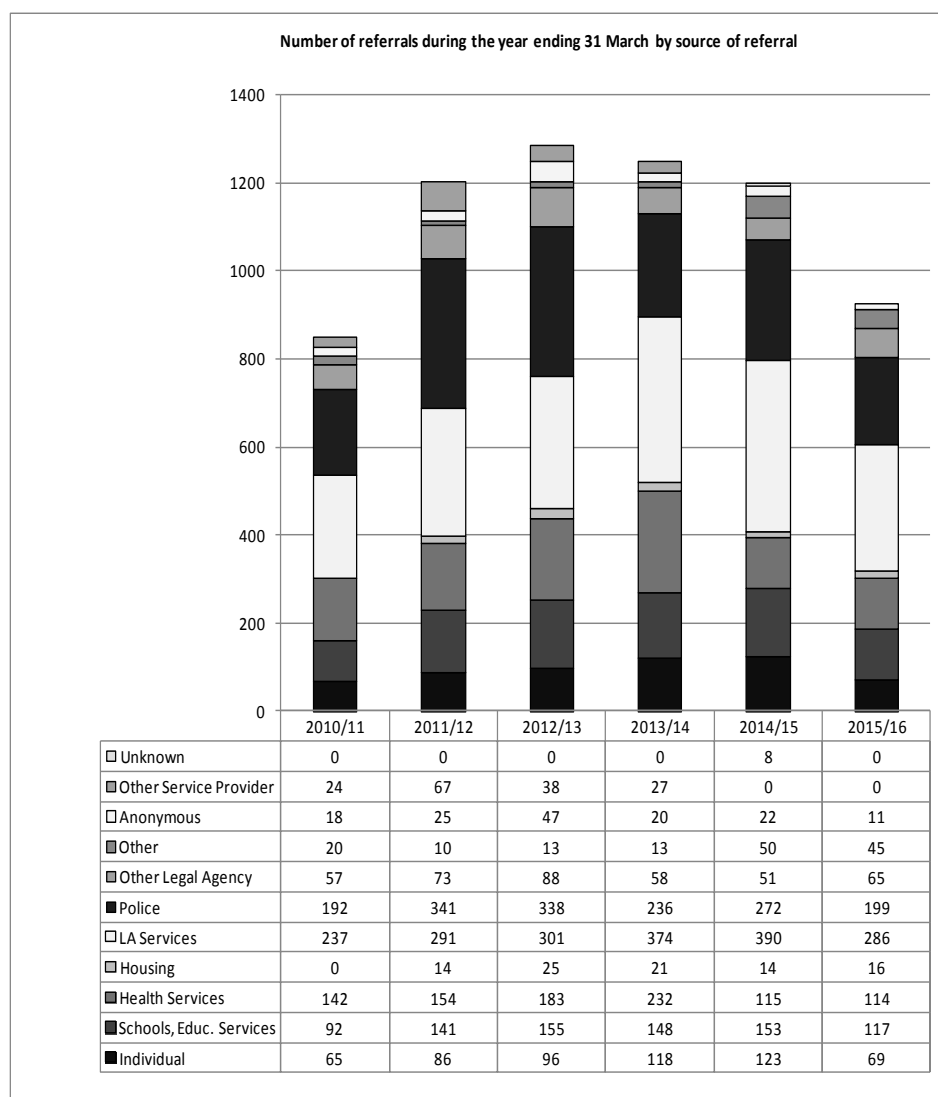
4. EARLY HELP

- 4.1 Providing early help is more effective in promoting the welfare of children than reacting later. Early help means providing support as soon as a problem emerges, at any point in a child's life. Effective early help relies upon local agencies working together to:
- identify children and families who would benefit from early help;
 - undertake an assessment of the need for early help; and
 - provide targeted early help services to address the assessed needs of a child and their family which focuses on activity to significantly improve the outcomes for the child.
- 4.2 Working Together 2015 stipulates that local agencies should work together to put processes in place for the effective assessment of the needs of individual children who may benefit from early help services. Where children and families require coordinated support from more than one agency (e.g. education, health, housing, police) there should be an inter-agency assessment to determine the unmet needs for the child and a coordinated plan put in place to determine how these needs will be met.
- 4.3 In 2015/16, 437 common assessments were completed, of which, 256 were completed on the Early Help module of the children's system. This compares with 481 CAFs completed in 2014/15 and is therefore a reduction although this data only relates to those CAFs reported to the local authority to be included on either the electronic or paper database. Work is ongoing to roll out the use of the Early help module so that all early help work can be captured on one system. School Nursing and Health Visiting have signed up to the use of the system and four schools have agreed to pilot the system. This would then allow more sophisticated reporting on early help work across partners.
- 4.4 With the development of the Early Intervention Strategy for Hartlepool, a needs analysis was undertaken which identified 5 'hotspot' areas of the town where data indicated that children were the most vulnerable to poor outcomes. 67% of CAFs completed in 2015/16 were for children living in those 'hotspot' areas (compared with 69% for 2014/15 and 74% for 2012/13). Work is ongoing to monitor this to understand if this a downward trend and whether there is a need to review the "hotspots".

- 4.5 As committee is aware extensive work has been undertaken in Hartlepool by the partner agencies in collaboration with consultants from iMPower to re-design the early help offer. This has led to the establishment of four integrated locality teams and the introduction of a revised early help assessment which was implemented in June 2016 to replace common assessment. A performance management framework has been developed and it is hoped that reports will be available in January 2017.

5. **CONTACTS AND REFERRALS**

- 5.1 In Hartlepool the First Contact and Support Hub during 2015/16 provided the “front door” to children’s services and dealt with all information received with regard to children. There are various pathways information can follow once received by the Hub including signposting to other services, adding risks, notifications and information to the database, as well as processing requests for a service from early help locality teams and social care. From 1st April 2015 to the 31st March 2016 **5243** contacts were received with regard to children which is 840 less than 2014/15. 1202 contacts progressed to referral for social care services. A significant proportion of contacts do not lead to a social work assessment. Information is ‘sifted and sorted’ within the First Contact and Support Hub (FCSH) to determine the best way to proceed. If information is received that would lead the team to believe that an assessment is appropriate, officers will make a judgement based on the information as to where the referral should be sent. This can include the local authority prevention locality teams; another identified professional requesting a Common Assessment or Team Around the Child meeting; or referral to the social work team.



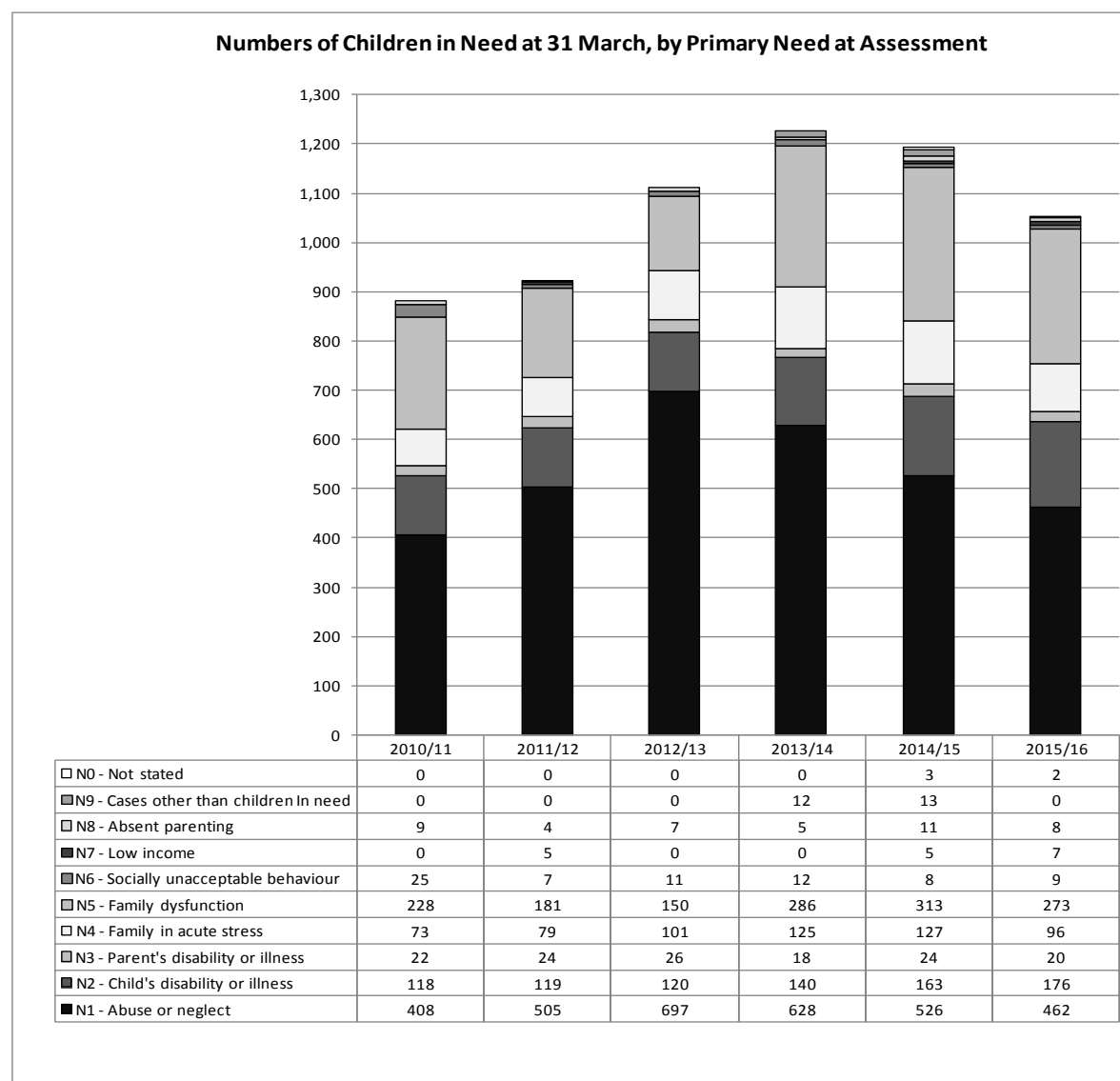
(Graph 1)

5.2 Graph 1 shows the breakdown of referrals to children's social care by referring agency and a reduction in referral rate is noted. To better understand the reason behind this trend it is intended to examine the movement of cases between early help and specialist services in both directions to ensure the correct application of thresholds are in play. There are currently a large proportion of enquiries/ contacts that do not become referrals. This is being reviewed but initial indications show a large proportion of these relate to separated parents who are asking for support with separation issues. Reports in relation to the Children's Hub activity are expected at the end of 2016 and the number of contacts vs referrals will continue to be monitored.

5.3 As members are aware a joint Multi Agency Childrens Hub has been established with Stockton Council based in Hartlepool. The aim of the Children's Hub is to facilitate and enable multi agency working to achieve better and swifter information sharing and thereby more effective outcomes in terms of safeguarding, and service provision for children and their families. During the course of the unannounced inspection of safeguarding services in

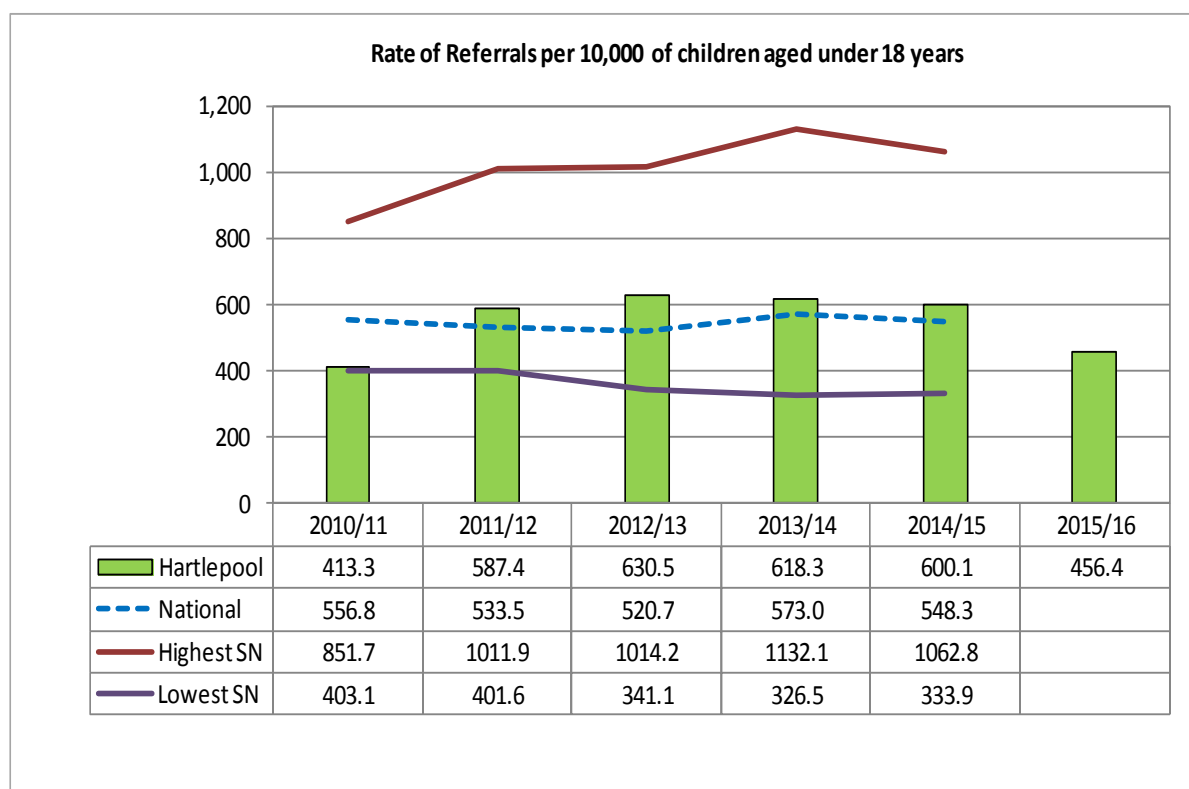
Stockton carried out by Ofsted during May and June 2016 a visit was made by inspectors to the Childrens Hub. The following is an extract from the report on their findings;

“The children’s hub benefits from partner agencies being co-located. This is already leading to earlier and more effective identification of risk, improved information sharing and joint decision-making.”



(Graph 2)

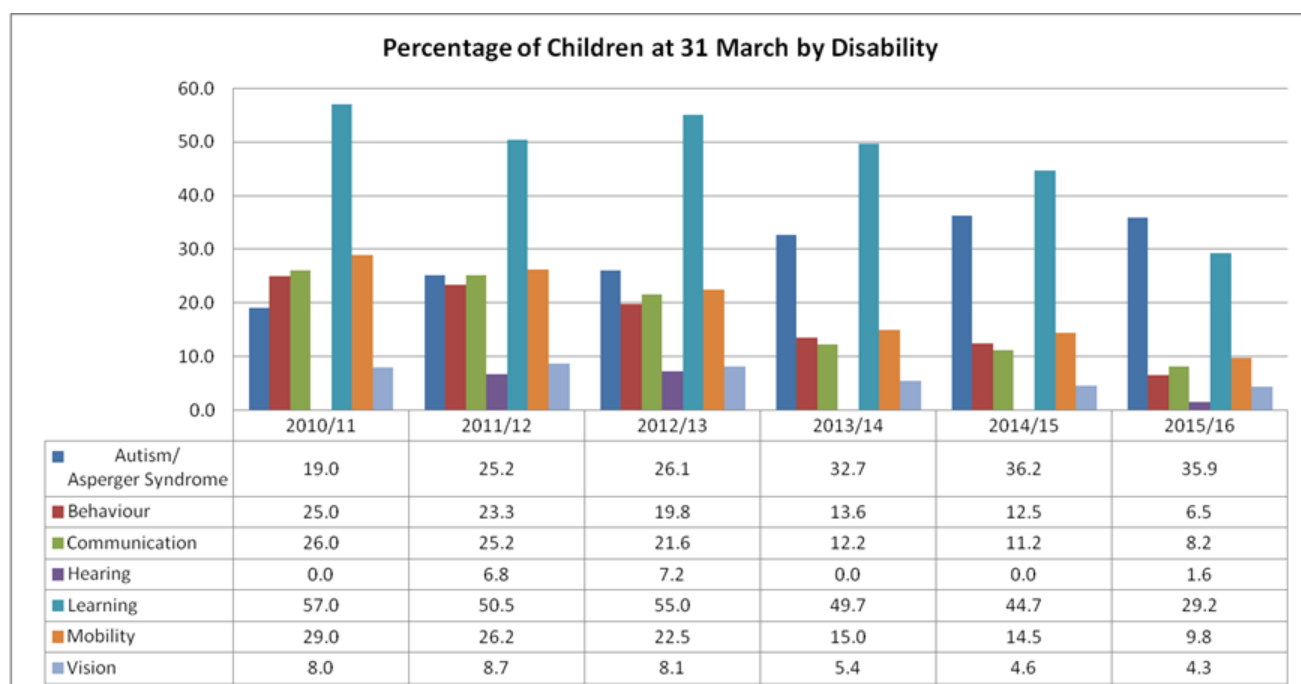
- 5.4 Graph 3 provides data with regard to the rates of referrals per 10,000 children in Hartlepool. As yet information from national and statistical neighbours is not available for comparison. This shows a significant decrease from 2013/14 and 2014/15. There has been no specific analysis to understand what the story is behind these figures however it could be argued that there has been an increase in Early Help services. Officers are currently working to set up a system to track progress of children accessing Early Help. It is then hoped that the story behind these figures can be explained.



(Graph 3)

5.5 The following table provides data on the number of children with disabilities in receipt of services.

	2010/11	2011/12	2012/13	2013/14	2014/15	2015/16
Number of children in need at 31 March	883	926	1,112	1,226	1,191	1,048
Number of whom have a disability recorded	100	103	111	147	152	184
% Children with a disability recorded	11.3%	11.1%	10.0%	12.0%	12.8%	17.6%



(Graph 4)

Graph 4 provides details of the number of children with a disability, and type of disability, who are receiving a social care service. This has remained relatively steady but there has been a further increase in the number of children with autism/aspergers syndrome. These children often have complex and acute needs and over recent years there have been significant improvements in recognition, awareness of and pathways for children with autism. As a consequence diagnosis levels have increased leading to a coordinated response from health, education and social care.

- 5.6 Feedback from parents and workers is telling us that the current pathways for children with special educational needs and disabilities are very complicated. In response to this a SEND review is being carried out to understand what these pathways look like and how we can simplify to ensure that children are supported at the earliest opportunity. A recent SEND inspection took place in October 2016. A final letter will not be received until November 2016. The findings from the inspection will be included within the SEND Strategy implementation plan.
- 5.7 There were 1444 child and family assessments undertaken in 2014/15 with a decrease in 2015/16 to 1172.

	2014/2015	2015/2016
Within 10 days	206	149
11 – 20 days	192	120
21 – 45 days	894	770
46+ days	152	133
Total	1444	1172
% completed within 45 days	89.5%	88.7%

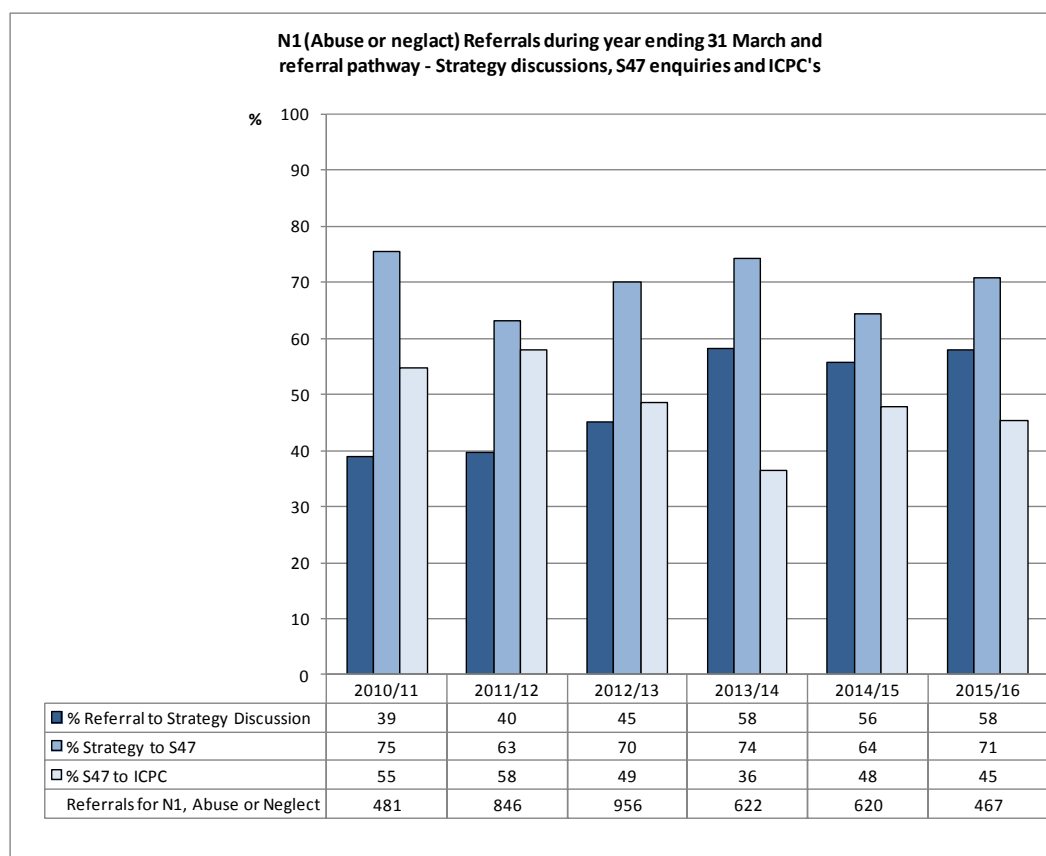
- 5.7 There were 1172 children and family assessments carried out between April 2015 and March 2016. The main factors identified in assessments include:

Factors identified at end of the assessment	Number of completed assessments with factors identified
Domestic Violence (parent/ carer)	351
Drug misuse (parent/ carer)	261
Alcohol misuse (parent/ carer)	185
Learning or physical disability: child	156
Mental health (parent/ carer)	285
Domestic Violence (child subject)	164
Mental health: child	105
Learning or physical disability: parent	135
Sexual abuse	95
Self harm	60
Physical abuse	120
Child Sexual Exploitation	21
Missing	26

- 5.8 The above factors reflect the research carried out within the Better Childhood Programme. Better Childhood identified Domestic Violence, Substance Misuse as the main reasons for children being taken into care. Work is ongoing to improve the skills within the children's services workforce to support families with the above issues.

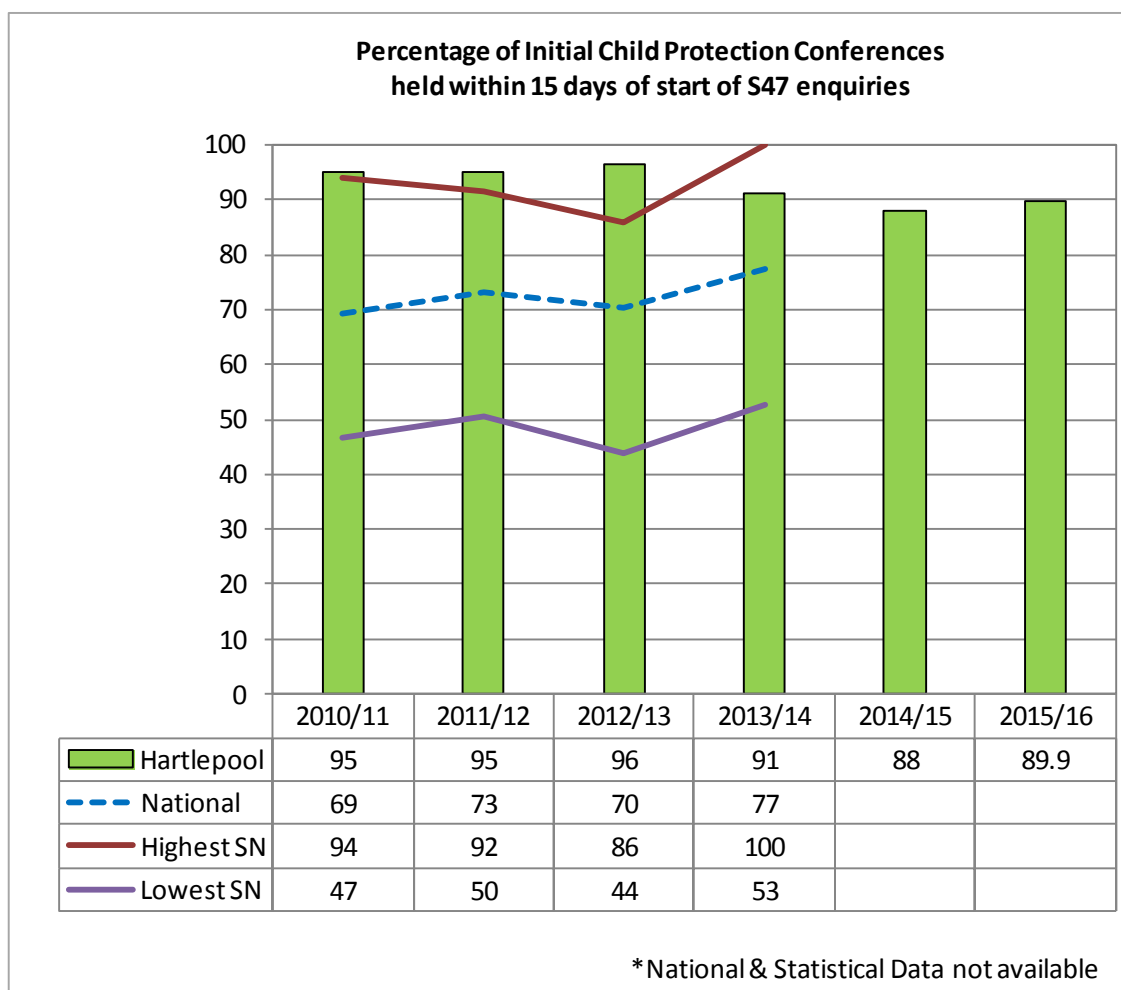
6. **CHILD PROTECTION**

- 6.1 This section explores referrals received under the category of N1, Abuse and Neglect. During 2015/16, social care received 467 referrals which were coded to the N1 category which is at a reduced level from last year. Graph 5 shows the pathway these referrals subsequently followed in relation to a response under the child protection procedures.

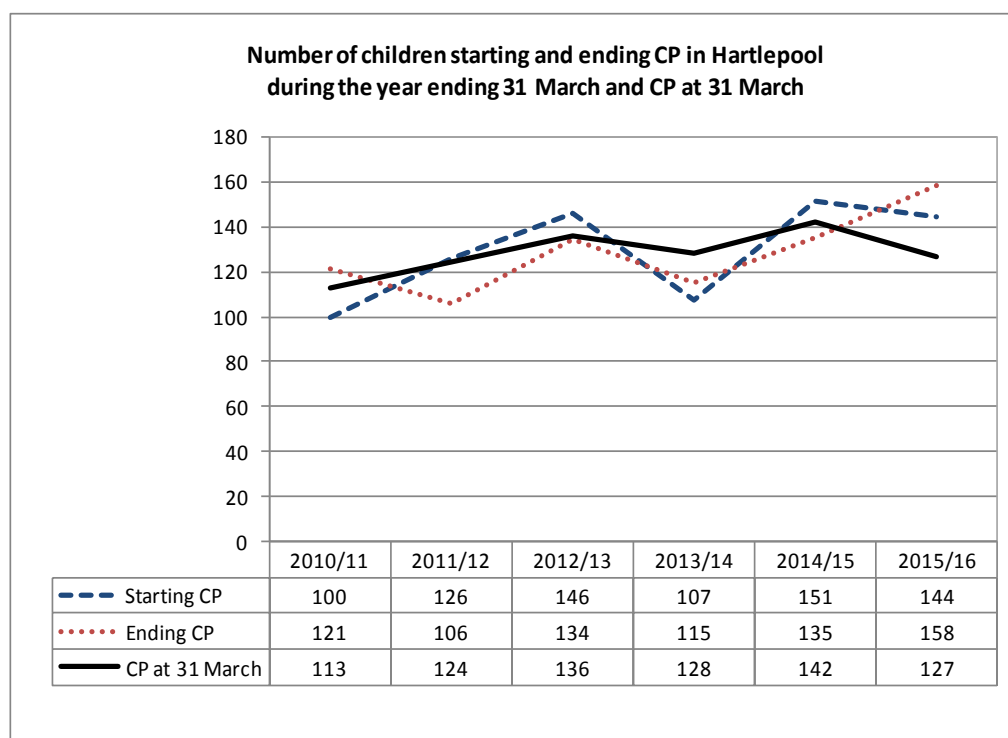


(Graph 5)

- 6.2 The conversion rates to section 47 enquiries and initial conference previously remain fairly consistent over the last five years.
- 6.3 Following a Section 47 enquiry if it is determined that the concerns are substantiated and the child is at continued risk of significant harm then an Initial Child Protection Conference will be held. Working Together stipulates that an initial conference should be held within 15 working days of the strategy meeting/discussion. Graph 6 shows performance over the last four years in relation to this standard. The information within the graph shows the number of children this equates to which is 89.9%. However when analysed in terms of number of meetings the performance equates to 95% in 2015/16.
- 6.4 Every effort is made to ensure that conferences are held in a timely way but at the same time are meaningful and have the right people in attendance. On occasion, the decision will be taken to hold a meeting outside of timescales to ensure the attendance of a key person, such as a parent. The decision to hold a meeting outside of timescales will be made by the independent chair in consultation with the team manager. The Safeguarding and Review Unit maintains records of the reasons for all conferences held outside of timescales and scrutiny of this data reveals that there are a number of reasons that have included the family not being available at short notice, the necessary reports not being available and conferences not being quorate. This remains an area of performance that will continue to be closely monitored within the Safeguarding and Review Unit.

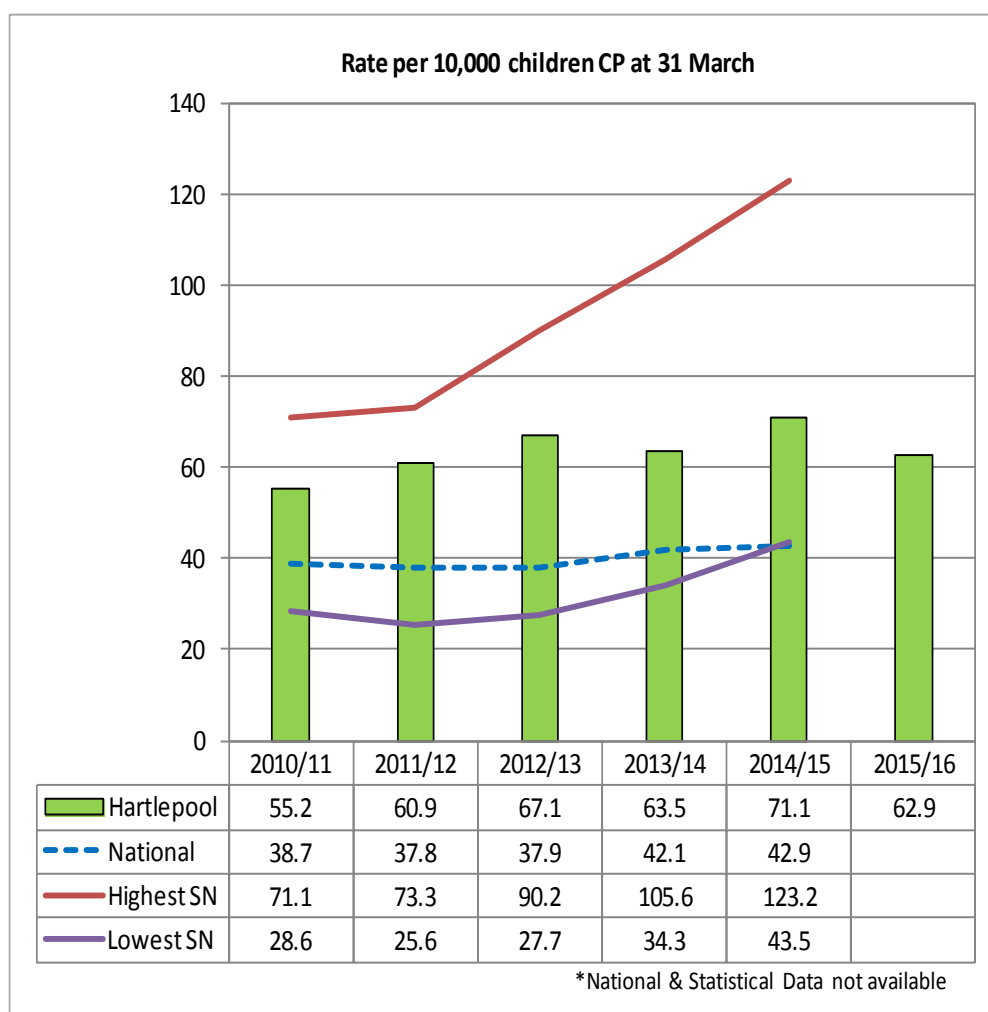


(Graph 6)



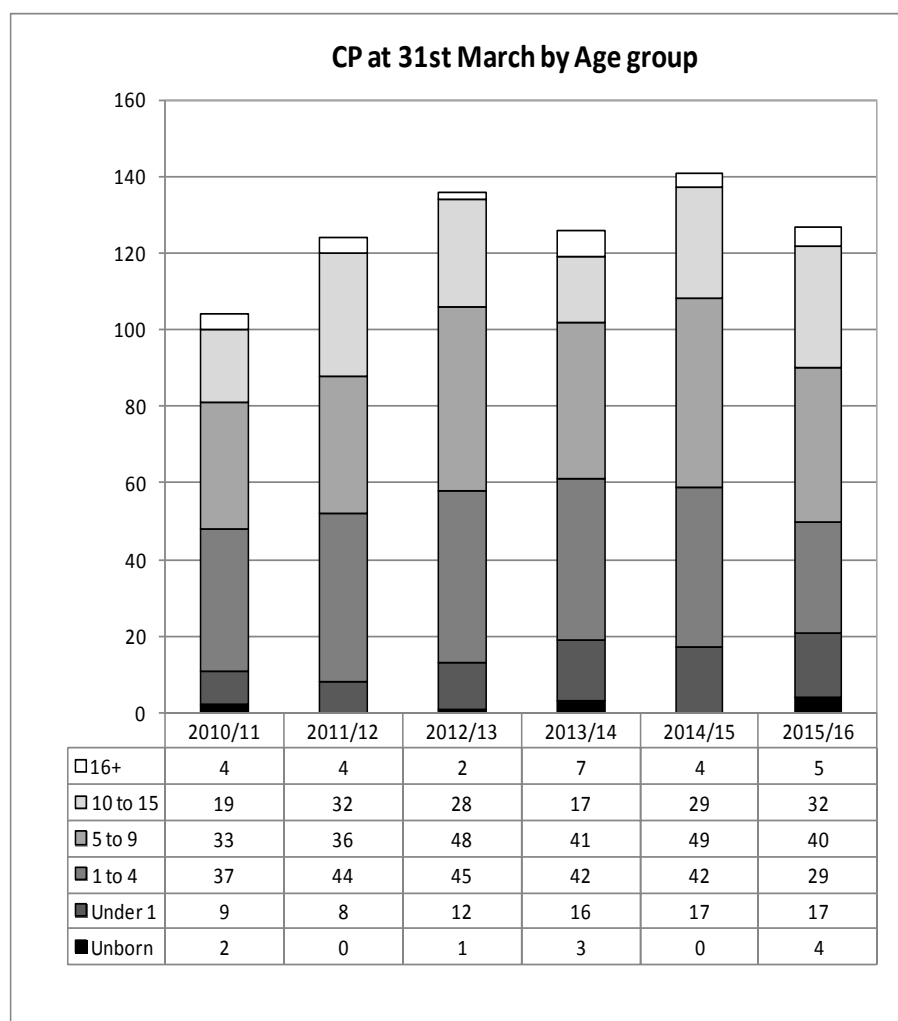
(Graph 7)

- 6.5 Graph 7 shows the trend over the past four years in relation to children subject to a child protection plan. During 2015/16 127 were subject to protection plans at year end which is a return to the position in 2011/12. Work is progressing with our social work and early help teams to ensure that all workers are equipped with the skills to develop effective relationships with families to support their ability and motivation to change. It is hoped that these interventions with families at an earlier point can reduce the number of children needing to be supported through child protection.
- 6.6 Graph 8 shows the rates per 10,000 of the child population who are subject to a child protection plan in Hartlepool.



(Graph 8)

- 6.7 Graph 9 shows the breakdown of children subject to a child protection plan by age. Almost 50% are within the 0 – 4 years age group reflecting the vulnerability of very small children and the need for robust protection arrangements. This also shows that there is a large number of older children aged 10-15 which is an area that has been highlighted within the Better Childhood Programme as an area of focus.



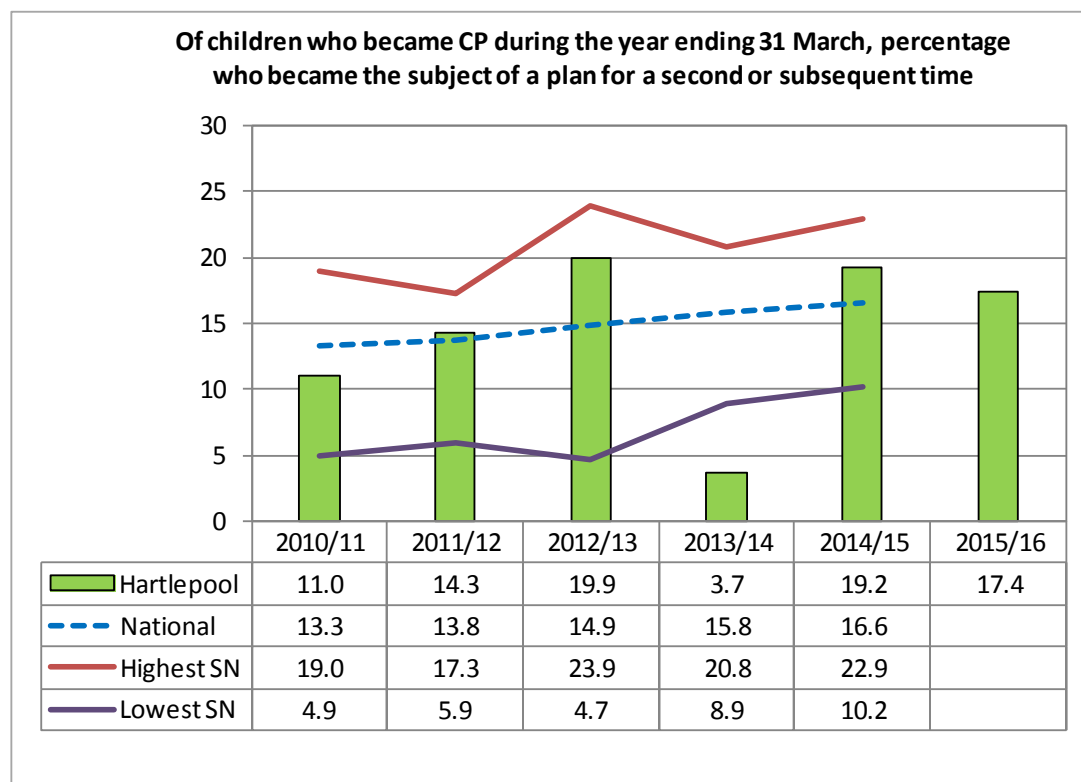
(Graph 9)

6.8 Neglect continues to be the main category under which children become subject to a child protection plan. At the end of March 2016 of the 127 children subject to a protection plan 99 were under the category neglect. The Hartlepool Children's Safeguarding Board has, for the past four years, identified neglect as a priority area for oversight and scrutiny and work has been undertaken to develop initiatives to address the prevalence of neglect in Hartlepool including the introduction of the Graded Care Profile as a tool to support the assessment of families where neglect is a feature. The research phase of the Better Childhood in Hartlepool showed that the root causes of neglect were primarily domestic violence, substance misuse and loss/ bereavement. The Better Childhood workforce programme is focusing on these areas to ensure that we have a workforce able to identify these issues and support families to change. We are also reviewing all commissioned services to ensure that they are focusing on these areas.

6.9 Many children subject to child protection plans are part of larger families with three or more children, often born close together and still of primary age. Examination of case records during audits has highlighted the vulnerability of children within large families, some children became invisible within their sibling group and parents experienced significant difficulties in meeting the

needs of their children. These cases highlight the challenges professionals face when working with large families and the need to undertake meaningful and effective work to support families rather than episodic interventions that achieve little.

6.10

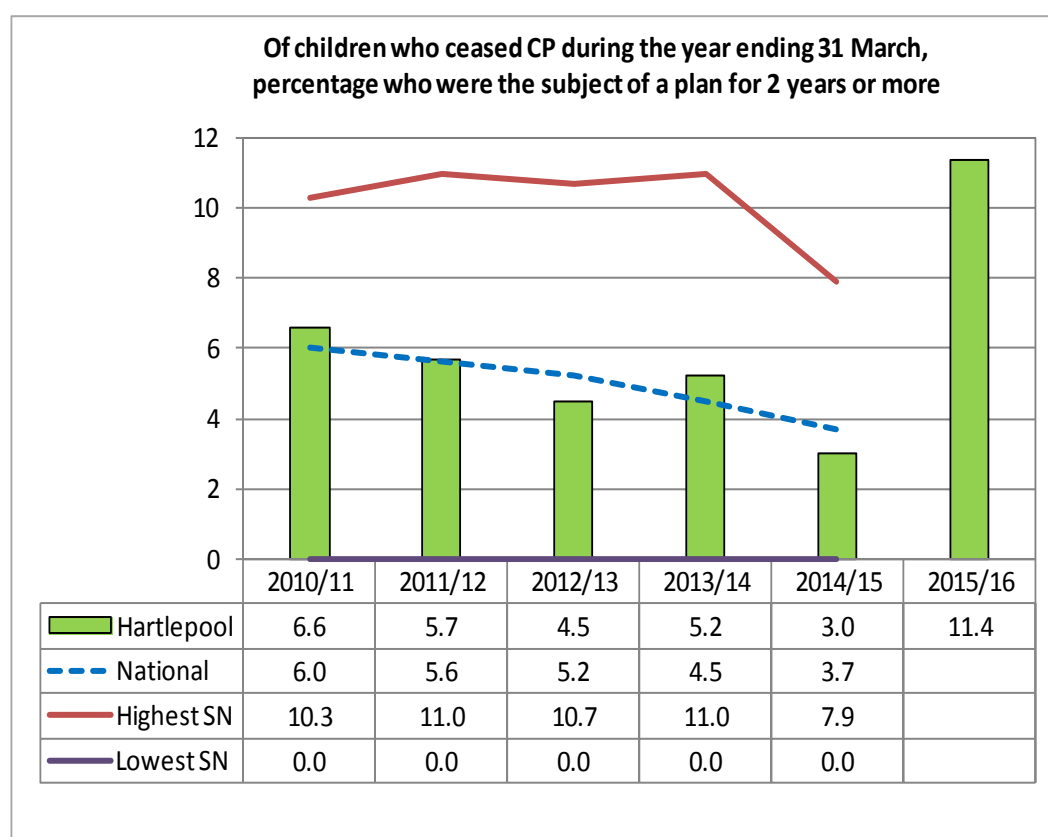


(Graph 10)

- 6.11 Graph 10 shows the number of children who became subject to a protection plan for a second or subsequent time in 2015/16 is 17.4% which is a small decrease compared to the figures for last year. The percentage of children becoming subject to a child protection plan for a second or subsequent time and the length of time the child has been subject to a plan (Graph 11) are important indicators of the effectiveness of interventions to safeguard children.
- 6.12 Where a child does become subject to a protection plan for a second time, arrangements are in place for the conference chair to prepare a case analysis to ensure that any learning is identified to improve practice. Similarly, independent chairs are routinely provided with performance information about children where protection plans have been in place for 15 months. This allows the independent chair to scrutinise the plan and intervention to ensure effective and appropriate work is being undertaken with the child and the family and to avoid any potential drift or delay in securing positive outcomes for the child. Findings from audits of these cases has evidenced sound decision making and strong multi agency engagement in the child protection process. An emerging issue, however, has been the challenge of providing the right sort of support / service to families outside of the child protection process to sustain the progress achieved and prevent a

return to specialist services particularly where chronic neglect has existed exacerbated by issues of parental substance misuse and domestic violence. The challenge of both understanding the underlying causes of neglect and providing effective responses has already been highlighted within this report and remains an area under discussion by through the Better Childhood in Hartlepool to determine what planning for the future is necessary to improve safeguarding practice for children who are experiencing neglect.

- 6.13 As can be seen from Graph 11 there has been a rise in the number of children who have been subject to a protection plan for longer than two years. All of these cases involve chronic neglect and include two large sibling groups but these remain cases where tighter oversight needs to be maintained and this will be included in the improvement plan for the Safeguarding and Review Unit.

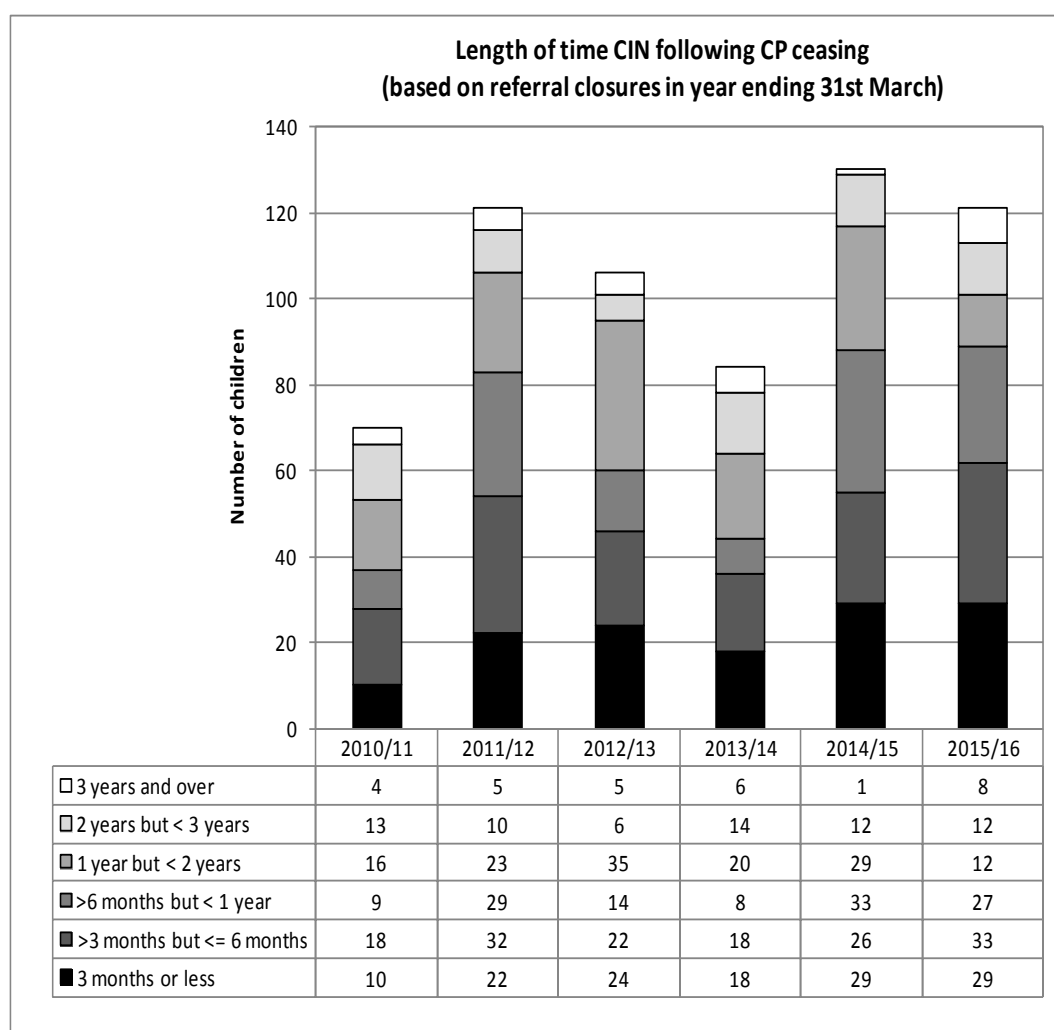


(Graph 11)

- 6.14 Where children are considered to no longer meet the threshold for a child protection plan, this does not necessarily mean that they no longer have unmet needs for which they require support. Given the high number of children in Hartlepool subject to a protection plan due to neglect, it would be expected that the majority of children will continue to receive services as children in need to enable the family to sustain improvements in the child's circumstances. Graph 12 provides data on the length of time a child continues to receive a social work service following being subject to a child protection plan based on cases that were closed during 2015/16. As can

be seen from the graph cases are staying open on a child in need basis, often for considerable periods of time.

- 6.15 Ensuring families get effective support whilst not creating dependency is a balancing act for organisations. From a social care perspective, the service is looking at the effectiveness of its interventions with families to ensure that where there is an active case to the service, the family is receiving targeted support aimed at achieving a specific outcome and interventions are meaningful. This should lead to shorter but more effective periods of intervention leading to improved outcomes for children.



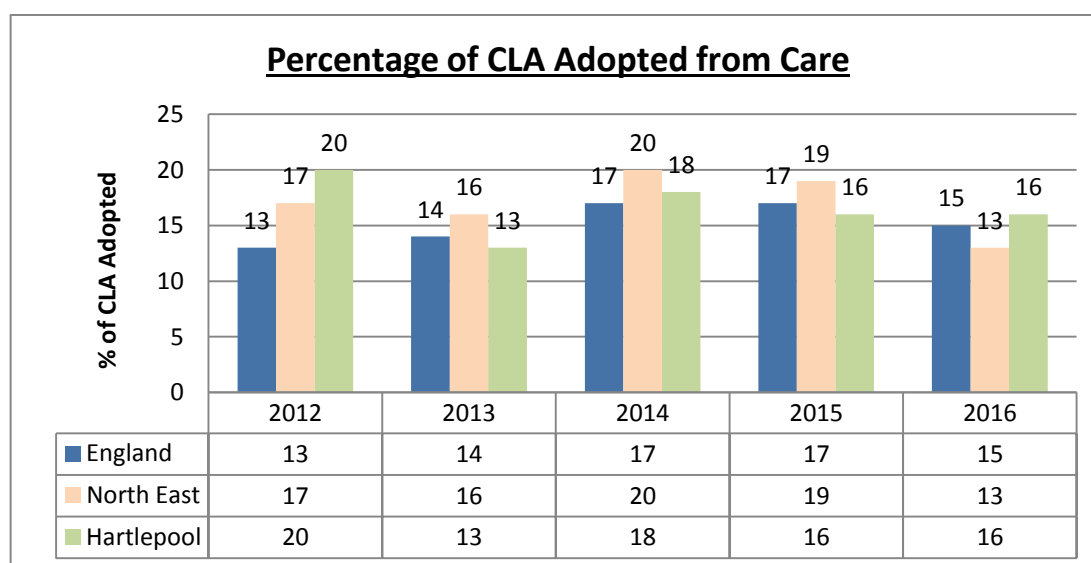
(Graph 12)

7. LOOKED AFTER CHILDREN

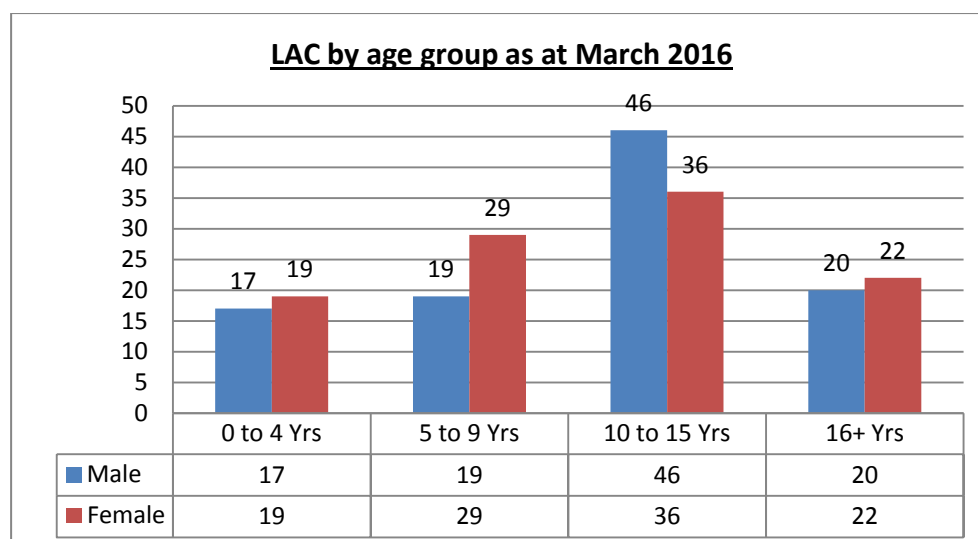
7.1 The following table shows the number of looked after children in Hartlepool with comparisons against national and regional picture.

	2013	2014	2015	2016
England	68,080	68,810	69,480	70,440
North East	4,220	4,240	4,270	4,400
Hartlepool	185	200	165	210
Stockton	360	380	375	375
Redcar and Cleveland	175	175	185	200
Middlesbrough	360	350	360	380
Darlington	210	190	200	205

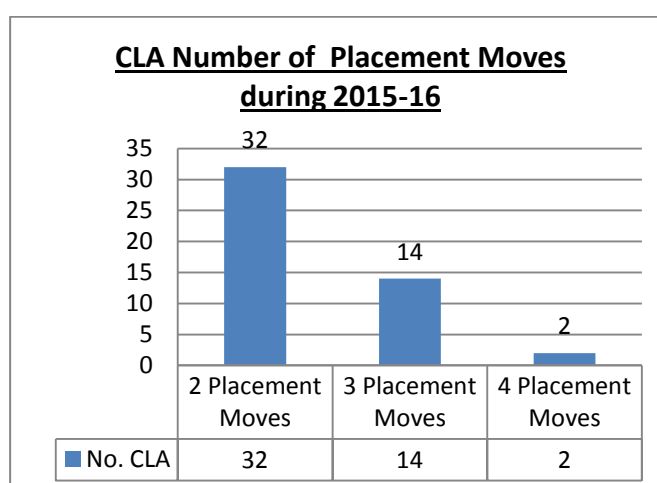
7.2 Recently the government has strongly encouraged local authorities to increase the numbers of children who are adopted. However this is being challenged by the courts. This is being constantly reviewed however Hartlepool performed well against national and regional average.



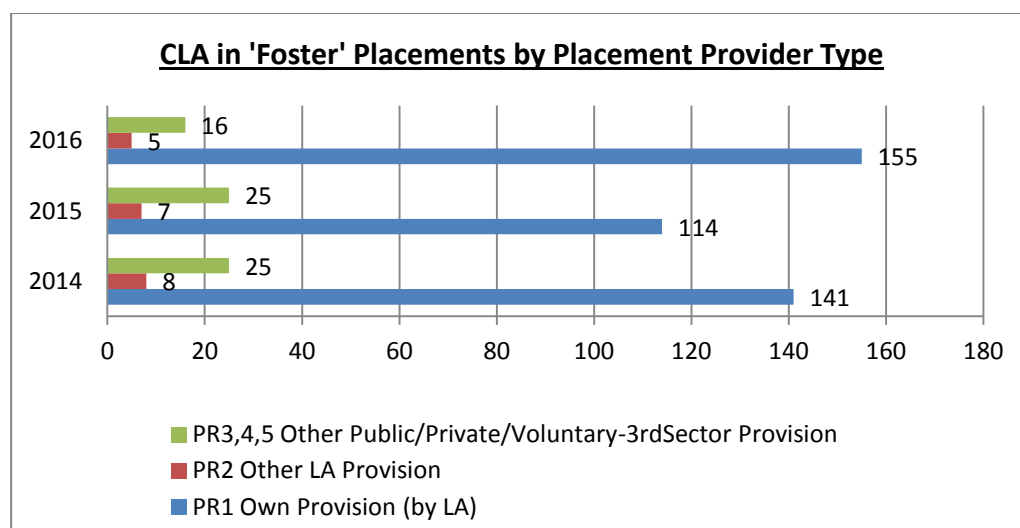
7.3 The table below sets out the ages of children looked after at the end of March 2016. A large proportion below are aged 10 – 15 however the analysis of this information needs to separate those children that are permanently looked after with long term fostering arrangements in comparison to those who are short term. This work is ongoing to understand this picture.



- 7.4 It is really important that children who are looked after have stability in their lives and a focus of our work is to ensure that placements are appropriate to meet children's needs. The indicator below shows the number of children who have had placement moves. These numbers are relatively low in relation to the total number of children looked after however the any placement movement should be minimised. This is regularly reviewed and IROs (Independent Reviewing Officers) discuss this within Looked After Reviews.



- 7.5 It is important that Looked After Children can live within their community and are cared for by highly skilled and caring carers. Hartlepool feel that this can be best achieved through in house foster carers. This also allows Hartlepool social workers to support the foster carers to ensure that they are equipped to deal with any presenting issues. Recruitment of foster carers takes place all the time to ensure that as many children as possible can be placed with in house foster carers. The table shows below that the majority of placements are internal which is a good performance.



8. THE VOICE OF THE CHILD

- 8.1 It continues to be a priority and an area of improvement to ensure the voice of the child is clearly heard in their journey through child protection services. Those workers who have direct contact with these children are charged with the responsibility of ensuring work is carried out to assist a clear understanding of what their lives are like and what they have to say about their situation. Social workers are encouraged to use a variety of participation tools to achieve this goal and to use their professional judgement to determine how best to elicit children's views taking into account their age and level of understanding.
- 8.2 The attendance of children at child protection conferences presents an ongoing dilemma for child care practitioners who, themselves, find the experience daunting and intimidating on occasion. It is essential that the children have their voices heard through the conference process as they are the experts in their individual and unique circumstances. The 'All about Me' conference pack has been implemented and its use in practice has had a powerful impact on conferences. The pack is designed for children and young people to complete to inform the conference of their wishes and views. It is completed by the child, with support if needed, and is read out at conference.

9. CURRENT ISSUES TO CONSIDER

- 9.1 There has been a national, regional and local increase in the number of care proceedings. Locally in Hartlepool there were approximately 10/12 care proceedings ongoing in March 2016 there is currently 50 cases (families) in care proceedings which is large increase. Interestingly there is some national debate about the reasons for this however there are a number of reasons being discussed by the judiciary; social workers are better at identifying issues and dealing with them earlier, children's social care have reduced their thresholds, there are significantly more families struggling in the current climate. Audits carried out across the service indicate that there

has not been any change in thresholds in Hartlepool. This increase in care proceedings has a significant impact on resources across the council. There is increase workload for social workers in preparing court documents and attending court which is held in Teesside and any additional work that the court dictates. There is also an increase in work for the legal team who ensure that all documents are collated, offer advice and guidance to social workers throughout the process, liaise with barristers and attend court for the hearings.

- 9.2 The recruitment and retention of social workers continues to be a challenge that is also reflected regionally and nationally. There is a lack of experienced social workers wanting to work within the front line safeguarding area. This is particularly problematic with the increase in care proceedings as it needs to be experienced social workers that manage these cases in court due to their complexities. Recent recruitment for social workers has highlighted this issue with all social workers recruited being newly qualified social workers. This is positive in the longer term as we can support these workers to grow into excellent social workers however in the short term this is currently causing the service difficulties with an increase in caseloads for more experienced staff. This is being closely monitored. In order to plan for a service that can meet all the needs we are reviewing all our recruitment and retention strategies. This includes: Frontline programme which enables students to learn on the job, working closely with universities to attract social workers and a task and finish group made up of staff and managers to review current retention issues and identify solutions.
- 9.3 The Children's Hub went live in June 2016. The hub consists of the council, NHS foundation trust, police, designated education officer, CAMHS and Harbour. The performance of the hub is being regularly reviewed with governance processes in place to review operations across Hartlepool and Stockton. Performance information will be presented within the next safeguarding report.
- 9.4 A Performance Management Framework has been developed for all the Tees Local Safeguarding Boards. This framework will offer an opportunity to review performance across the Tees Valley. A first draft of this framework will be completed by November and information from the framework will be included within the next safeguarding report.

10. RISK IMPLICATIONS

- 10.1 The pressures being placed on the workforce due to an increase in need therefore this needs to be regularly monitored to understand the resources needed to meet the need.

11. FINANCIAL CONSIDERATIONS

- 11.1 There are no specific financial implications within this report, however it needs to be noted that the increase in the number of children looked after places significant pressure on the children's services budget. The budget pressure is currently forecast to be between £1.6million and £2million.

12. LEGAL CONSIDERATIONS

- 12.1 There are no legal considerations within this report.

13. CHILD AND FAMILY POVERTY CONSIDERATIONS

- 13.1 There are no specific child and family poverty considerations within this report however it needs to be noted that the current economic climate seems to be having an impact on families' ability to cope. All social workers are aware of these issues and work to develop a plan that meets each child and families needs.

14. EQUALITY AND DIVERSITY CONSIDERATIONS

- 14.1 All children in need are supported regardless of their situation. Workers will ensure within their assessment and interventions that they identify the needs for the individual child and respond appropriately.

15.1 STAFF CONSIDERATIONS

- 15.1 There are no staff considerations within this report.

16. ASSET MANAGEMENT CONSIDERATIONS

- 16.1 There are no asset management considerations within this report.

17. RECOMMENDATIONS

- 17.1 Members are asked to note the contents of the report and particularly note the following:
- A reduction in the number of contacts
 - A reduction in the number of referrals
 - A reduction in the number of child and family assessments being undertaken
 - A slight reduction in the number of children subject to protection plans

- The number of children subject to a CP plan for the second or subsequent time has decreased from previous year but is still higher than 2013/14 and work need to be done to explore the reasons.
- An increase in the number of children looked after
- Strong performance for Children looked after being adopted against regional and national information, however this needs to continuously monitored due to recent court judgements that appear to be having an impact on the number of adoptions granted

18. REASONS FOR RECOMMENDATIONS

- 18.1 It is important for members to be updated on safeguarding performance to ensure that that members can undertake their scrutiny role.

19. BACKGROUND PAPERS

None

20. CONTACT OFFICER

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CHILDREN'S SERVICES COMMITTEE

8th November 2016



Report of: Director of Child and Adult Services

Subject: A BETTER CHILDHOOD IN HARTLEPOOL

1. TYPE OF DECISION/APPLICABLE CATEGORY

1.1 For information only.

2. PURPOSE OF REPORT

2.1 To update Members of Children's Services Committee on the implementation and progress of A Better Childhood in Hartlepool.

3. BACKGROUND

3.1 A Better Childhood in Hartlepool is a cross public sector transformation programme supported by Cleveland Police, the CCG and Hartlepool Borough Council. As part of this programme Hartlepool Borough Council and the National Health Foundation Trust have developed and redesigned their services in Hartlepool with the aim of:

- Improving outcomes and life chances for children, young people and families;
- Improving the resilience of families and communities and reducing family breakdown;
- Supporting more families through early intervention and prevention;
- Moving from a culture of 'identification and referral' to one where workers 'own and intervene';
- Reducing demand for specialist services, bringing numbers of Looked After Children in line with statistical neighbours.

3.2 A report was presented to Children's Services Committee on the 8th March 2016 setting out the initial implementation phase of A Better Childhood in Hartlepool. This set out the development of integrated teams across four localities which includes: Health Visitors, Family Support Workers, School Nurses, Community Nursery Nurses and Social Workers.

- 3.3 The agreement between all partners was to base the integrated localities on the current children's centre reach areas which also align to the school clusters. A needs analysis was undertaken to understand the level of staffing needed in each area. Staff have been allocated based on this needs analysis and this will be regularly reviewed by senior managers.
- 3.4 It was agreed that the office bases for these teams would be Rossmere Children's Centre, The Star Centre, Carnegie and Ward Jackson school annexe. These were selected as they offered the best fit for the integrated teams. This included the need to ensure that all workers are able to access their systems.
- 3.5 In addition to the four locality teams, the Intensive Response Team (IRT) has been created. The primary focus of this team is to provide intensive support and assistance to families to prevent needs escalating. Although there is an expectation that the one worker model will be the primary level of support for children and families there are some families who will require additional more intensive support to ensure that the children remain within the family. Hartlepool have over 200 children looked after which is a significant cost to the local authority. It is expected that the support and intervention offered by this team can contribute to the reduction of the numbers of children needing to be looked after. The Intensive Response Team is a multi disciplinary team which consists of Family Support Workers, parenting lead, experienced health visitors and a housing support officer. Other services are aligned the team which includes: Family Nurse Partnership, CAMHS and the Educational Psychology team.

4. NEXT STEPS

- 4.1 The proposed implementation date of the 1st August had to be moved to the 1st October due to issues relating to IT and health staff consultation. All staff within health and the council finally moved into the localities on the 10th October 2016.
- 4.2 The four locality managers are holding briefing sessions with agencies, groups and organisations within the localities throughout October. The focus of these sessions is to develop relationships with key stakeholders, inform people about the new structure/pathways within Early Help and to roll out the new Early Help Assessment (EHA)

5. EARLY HELP ASSESSMENTS/EARLY HELP MODULE

- 5.1 Research carried out in the Autumn of 2015 identified that partners did not feel the early help assessment was user friendly and it was not being used across all services. In consultation with parents/carers and stakeholders a new early help assessment was developed and will be launched within the locality development sessions throughout October. The Early Help

Assessment has been developed within the Early Help Module of the electronic children's system.

- 5.2 The Early Help Module is a children's integrated system developed to record a child and families journey whilst having support from early help services. This enables the family to tell their story once and ensures that the support provided by all agencies around the family is joined up. To ensure that families are receiving the right support at the right time the council and partner agencies have agreed the use of a shared "informed consent" arrangement. This document is an integral part of working with families within early help as it allows sharing of information between agencies once consent has been gained from parents/ carers.
- 5.3 Hartlepool Child and Adult Services is one of the first areas in the country to use the Early Help Module as an integrated multi agency record keeping system. Health professionals working within the early help service have all received Early Help Module training and Parent Support Advisors within schools will be trained on the system within the next two months. Other partner organisations will have the opportunity within the next 12 months to access training and subsequently use the system.
- 5.4 A performance framework within the Early Help Module is being developed and is in the latter stages of completion. This will enable the council and stakeholders working within early help to identify, monitor and evaluate child and family progress with a view to further developing services.

6. GOVERNANCE

- 6.1 A Better Childhood in Hartlepool is a multi agency transformation programme and it has been agreed that the oversight of this programme would be through the Children's Strategic Partnership. An operational board will be established and report to the Strategic Partnership. A number of workstreams will be established to ensure implementation is truly multi agency.

7. RISK IMPLICATIONS

- 7.1 Substantial work has been carried out throughout Spring/Summer 2016 between Health and Social Care to establish a joined up approach to working across two disciplines. To ensure management of caseloads is robust and safe, the teams will be managed by two Health managers and two Social care managers. Principal practitioners from Social care will work alongside health leads and senior health practitioners will work alongside the Social care managers. This will ensure robust oversight of both organisations procedures and assist with case allocation.

- 7.2 Supervision will take place jointly during the initial phase of implementation. Caseloads will be allocated on a weekly basis at a joint meeting with all managers. Work is being undertaken to identify and remove any duplication within the system and across services which should create additional capacity for all practitioners to undertake targeted work with families.

8. FINANCIAL CONSIDERATIONS

- 8.1 The aim of a Better Childhood in Hartlepool is to reduce the need for children and families to access specialist services. Specialist services are costly and it is important over the next year to understand the impact the Early Help service is having on a reduction in demand.

9. LEGAL CONSIDERATIONS

- 9.1 There are no legal considerations with this report.

10. CHILD AND FAMILY POVERTY CONSIDERATIONS

- 10.1 These proposals ensure that children and families will be supported at the earliest possible opportunity and therefore will support families in poverty before they face crisis.

11. EQUALITY AND DIVERSITY CONSIDERATIONS

- 11.1 This approach focuses on a community based approach and therefore all children and families will be supported based on need.

12. STAFF CONSIDERATIONS

- 12.1 Staff have been significantly involved with this transformation programme from the outset and the proposals set out in this report have been developed by staff teams.

There is a change of management for a number of HBC and NHS Trust staff and staff consultation has now concluded. HBC staff briefings and communications have taken place throughout the programme and will continue over the next twelve months.

13. ASSET MANAGEMENT CONSIDERATIONS

- 13.1 The teams are based in four community localities as set out in section 3.4.

14. RECOMMENDATIONS

- 14.1 To note the progress of the implementation and development of A Better Childhood in Hartlepool.

15. REASONS FOR RECOMMENDATIONS

- 15.1 To ensure that children and families continue to receive the right support at the earliest possible opportunity.

16. BACKGROUND PAPERS

Children's Services Committee Report, Better Childhood Programme, 8th March 2016

17. CONTACT OFFICER

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CHILDREN'S SERVICES COMMITTEE

8 November 2016



Report of: Director for Child and Adult Services

Subject: ANNUAL COMPLAINTS REPORT
1st April 2015 – 31st March 2016

1. TYPE OF DECISION/APPLICABLE CATEGORY

1.1 For information.

2. PURPOSE OF REPORT

2.1 For members of the Children's Services Committee to note the Annual Complaints Report of the Child and Adult Services Department on complaints and representations for the period 1 April 2015 to 31 March 2016.

2.2. The Annual Report is attached as **APPENDIX A** to this report.

3. BACKGROUND

3.1 The Children Act 1989 Representations Procedure (England) Regulations 2006 came into force from 1 September 2006. This requires local authorities to have a complaints procedure specifically for anyone receiving a children's social care service.

The Annual Report provides information on the complaints and representation frameworks appropriate in the department. It draws together information in relation to complaints that have been received and dealt with during the reporting period.

4. PROPOSALS

4.1 The report offers an opportunity to demonstrate learning that has occurred from complaints and actions implemented as a result.

4.2 The content of the Report includes the following areas:

- Complaints and compliments received 2015/16
- Outcomes of complaints
- Learning lessons and service improvement
- Complaint comparisons between north east regional local authorities 2015/16
- Complaints considered by the Local Government Ombudsman in 2015/16

4.3 The Report provides an analysis of complaints and compliments and draws comparisons with the previous year. Performance is highlighted in a range of areas so that practice issues may be considered.

5. RISK IMPLICATIONS

5.1 It is important that children's social care work has a learning and continuous improvement culture. It is there critical to review all complaints and ensure that any learning that can be disseminated to the workforce. There is a risk that if we do not spend time reviewing complaints that this learning will be lost.

6. FINANCIAL CONSIDERATIONS

6.1 There are no financial considerations for this report.

7. LEGAL CONSIDERATIONS

7.1 There are no legal considerations for this report.

8. CHILD AND FAMILY POVERTY CONSIDERATIONS

8.1 There are no child and family poverty considerations within this report.

9. EQUALITY AND DIVERSITY CONSIDERATIONS

9.1 All service users are informed of the complaints process and supported to use this if needed.

10. STAFF CONSIDERATIONS

10.1 There are no staff considerations within this report.

11. ASSET MANAGEMENT CONSIDERATIONS

- 11.1 There are no asset management considerations within this report.

12. RECOMMENDATIONS

- 12.1 That members of the Children's Services Committee note the Annual Report and approve online publication.

13. REASONS FOR RECOMMENDATIONS

- 13.1 It is a legal requirement that an Annual Report be published on complaints, presented to the relevant Policy Committees and made available to staff, the Care Quality Commission (CQC), Ofsted and general public.

14. BACKGROUND PAPERS

- 14.1 None.

15. CONTACT OFFICER

- 15.1 Sarah Ward, Principal Social Worker, Child and Adult Services, 01429 523944
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Complaints, Compliments and Representations Report 1 April 2015 - 31 March 2016

Hartlepool Borough Council
Child and Adult Services



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1. Introduction

Welcome to Hartlepool Borough Council's Child and Adult Services Department's Complaints, Compliments and Representations Annual Report. The report covers statutory complaints for adult services, children's services and public health for the period 1 April 2015 to 31 March 2016.

The report outlines:

- Details of the complaints and compliments received over the reporting period;
- Actions implemented, any lessons learned and resulting improvements following enquiry into complaints;
- Performance in relation to handling of complaints.

2. Background

Complaints and compliments are valued as an important source of feedback on the quality of services. Each complaint is investigated and, where appropriate, redress made. Equally important is the work to learn lessons to prevent a repeat of failure in service quality and continually improve services.

2.1. What is a complaint?

A complaint is any expression of dissatisfaction about a service that is being delivered, or the failure to deliver a service. The Local Government Ombudsman defines a complaint as *"an expression of dissatisfaction about a council service (whether that service is provided directly by the council or on its behalf by a contractor or partner) that requires a response."*

A complaint can be made in person, in writing, by telephone or email or through the council's website. It can be made at any office. Every effort is made to assist people in making their complaint and any member of staff can take a complaint.

2.2. Who can complain?

A complaint can be made by:

- A person who uses services
- A carer on their own behalf
- Someone who has been refused a service for which they think they are eligible
- The representative of someone who uses services or a carer acting on their behalf. This could be with the consent of the service user or carer or in the case of someone who does not have the capacity to give consent, where they are seen to be acting in the best interests of that person.
- Anyone who is or is likely to be affected by the actions, decisions or omissions of the service that is subject to a complaint.

3. Child and Adult Services Complaints Frameworks

Hartlepool Borough Council's Adult Social Care, Children's Social Care and Public Health complaint handling is derived from separate statutory complaint procedures. Complaints which fall outside of statutory complaint regulations are handled under the corporate complaints procedure. The overall responsibility for Adult Social Care, Children's Social Care and Children's Services areas rest with the Department's Complaints Manager (Social Care Development Manager). The remit of the Complaints Manager is:

- Managing, developing and administering the complaints procedures.
- Providing assistance and advice to those who wish to complain.
- Overseeing the investigation of complaints that cannot be managed at source.
- Supporting and training staff.
- Monitoring and reporting on complaints activity.

The framework covers situations where there is dissatisfaction about actions, decisions or apparent failings of services within the department.

3.1. Adult Social Care Complaints Framework

A single level integrated complaints process was introduced on 1 April 2009 with the implementation of the Local Authority Social Services and National Health Service Complaints (England) Regulations 2009.

These regulations place a duty on NHS bodies and adult social care organisations to coordinate handling of complaints and to advise and support complainants through the procedure.

A joint protocol for the handling of complaints that span more than one health or social care organisation had been developed to ensure a comprehensive response is provided to complaints that cross more than one organisation.

The complaints procedure aims to be as accessible as possible. The policy is flexible to ensure that the needs of the complainant are paramount and allows the Department and the complainant to agree on the best way to reach a satisfactory outcome. The full detail of the complaints procedure is available on the council's website. Briefly, on receipt of a complaint the level of impact is determined and complaints screened according to their content as being red (high impact), amber (moderate impact) or green (low impact). The process for handling the complaint is dependent on the impact.

3.1.1. Timescales for the resolution of complaints

Staff will always try to resolve problems or concerns before they escalate into complaints and this ensures that, wherever possible, complaints are kept to a minimum.

Since the introduction of the 2009 regulations the only mandatory timescale is that the complainant receives an acknowledgement within 3 working days. The legislation allows for a maximum 6 month timescale to investigate and respond to a complaint. This offers a more flexible approach to the amount of time in which complaints should be dealt with. In our policy, we aim for even the most complex of complaints to be completed within 65 working days. If timescales cannot be met, a new timescale should be discussed with the complainant. Locally, timescales have been introduced for amber and green complaints of 40 and 20 working days respectively.

There is a time limit of 12 months from when the matter being complained about occurred to when a complaint may be made. After this time, a complaint will not normally be considered. However, the 12 month time limit does not apply where the local authority is satisfied that the complainant had good reasons for not making the complaint within that time and where it is still possible to investigate the complaint effectively and fairly.

3.2. Children's Social Care complaints framework

The Children Act 1989 Representations Procedure (England) Regulations 2006 came into force from 1 September 2006. This procedure is for all representations received from children and young people, their parents, foster carers or other qualifying adults about social care services provided or commissioned by children's social care. The full detail of the complaints procedure is available on the Council's website.

The Regulations are now fully embedded into the children's social care complaints system and information derived from complaints is included in the annual monitoring of children's social care and reported to Ofsted.

All children, young people or their families who make a representation are offered the services of an Advocate to enable their views to be effectively promoted.

There are three stages to the procedure.

» Stage 1

Local Resolution: The aim of stage 1 is to sort out the matter as quickly as possible. The complaint will be allocated to a manager who will contact the complainant to discuss the complaint. Stage 1 of the complaints procedure should be completed within 10 working days but if there are a number of issues to look into, this can be extended up to 20 working days. The complainant will receive a response to the complaint in writing.

» Stage 2

Investigation: This part of the procedure is used when the complainant remains unhappy after their complaint has been responded to at Stage 1 or the complaint is sufficiently serious enough to warrant a more formal investigation. Investigations are conducted by an Investigating Officer who must be independent of the service area being complained about. An Independent Person is also appointed at Stage 2. This is a statutory role and the Independent Person (who is external to the council) works alongside the Investigating Officer with a remit to ensure that the process is open, transparent and fair.

Reports completed by the Investigating Officer and Independent Person are submitted to an Adjudicating Officer (usually the Assistant Director).

The investigation and adjudication process should be concluded within 65 working days.

» Stage 3

Independent Complaint Review Panel: If the complainant is dissatisfied with the outcome at Stage 2, they may request that the issues are taken to a Complaint Review Panel (Stage 3). The Panel consists of an Independent Chair and two independent panel members. The Panel considers the complaint and can make recommendations to the Director of Child and Adult Services within 5 working days of the Panel meeting.

The Director is required to make a formal response to any findings and recommendations of the Review Panel within 15 working days of receiving the Panel's report.

3.3. Public Health Complaints

When complaints are received into the department relating to a public health function the Public Health Complaints, Compliments and Comments Procedure provides the framework for resolution. The full detail of the complaints procedure is available on the Council's website.

Where a person is dissatisfied with a public health function they have received, they have a right to complain. The complaint will be acknowledged within 3 working days. The complaint would usually be investigated by a senior officer. The regulations allow a maximum of 6 months to respond to a complaint (NHS Bodies and Local Authorities Partnership Arrangements, Care Trust, Public Health and Local Healthwatch Regulations 2012). We will however endeavour to respond as quickly as possible.

3.4. Corporate complaints

Where complaints are received in to the Department that do not come under the jurisdiction of the statutory social care or public health complaints procedures, the Corporate Complaints Procedure provides the framework for resolution. A mechanism exists for those complaints which are considered by the Department under the Council's Corporate Complaints Procedure to be reported via corporate arrangements within the Chief Executive's Department. Complaints in relation to schools are dealt with by individual schools and their governing bodies. Local authorities have no legal obligation to investigate the substance of a complaint regarding an individual child and have no powers of direction in this regard.

» Pre-formal Complaint Stage

An initial attempt should be made to resolve a complaint as quickly as possible. A complaint at this stage should be responded to within 5 working days.

» Formal Complaint

Where a person remains dissatisfied with a service they have received, they have a right to proceed to a formal complaint. The complaint should be completed within 20 working days.

» Chief Executive Review

If a person remains dissatisfied with the response to the formal complaint, they have the right to request the complaint to be reviewed by the Chief Executive.

3.5. Referral to the Local Government Ombudsman

If, at the end of the relevant complaints procedure, the complainant remains dissatisfied with the outcome or the way in which their complaint has been handled under any of the procedures, they may ask the Local Government Ombudsman (LGO) to investigate their complaint. Complainants may also approach the LGO directly without accessing the complaints process. In those cases it is usual for the LGO to refer them back to the council for their complaint to be examined through the relevant complaints process before they intervene.

4. Principles and outcomes

Good handling of complaints and representations involves:

- Keeping the complainant at the centre of the complaints process;
- Being open and accountable;
- Responding to complainants in a way that is fair;
- Being committed to try to get things right when they go wrong;
- Seeking to continually improve services.

Statutory complaints are underpinned by the following:

- A procedure that aims to be fair, clear, robust and accessible;
- Support being available to those wishing to make a complaint;
- Timely resolution following enquiry into complaints/representations;
- Lessons learnt following complaints and services improved;
- Monitoring being used as a means of improving performance.

5. Public information

Information about the complaints and representations framework is accessible via the council's public access points and also the Council's website. Carers and service users of children's and adults social care are provided with factsheets explaining the procedure when they take up a new service and when care plans are agreed and reviewed.

Information in other formats such as large print or Braille or translation in languages other than English are made available upon request.

6. Summary of representations

6.1. Adult Social Care

6.1.1. Compliments

Compliments are generally recognised to be an indicator of good outcomes for service user and carers. They also serve to provide wider lessons regarding the quality of services.

During 2015/16, 66 compliments have been received relating to Adult Social Care. These range from an expression of thanks and appreciation in the form of a thank-you card to written letters where the benefit of social work or care interventions can be seen to have improved a person's quality of life. Appendix 1 provides some examples of compliments received during the period.

6.1.2. Complaints received in 2015/16

A total of 16 complaints were received. One complainant withdrew their complaint and one was withdrawn when the complainant did not engage with the process leaving 14 complaints investigated. The number of complaints received has decreased by one from last year.

All of the 14 complaints investigated have concluded local statutory complaints processes. To date, one of the 14 complainants have progressed their complaint on to the Local Government Ombudsman (LGO).

Three of the 17 complaints received in 2014/15 were carried forward to 2015/16. Two of these were resolved locally whilst one progressed to the LGO.

Complaints that were either partly upheld or upheld are outlined in Appendix 2.

6.1.3. Client groups

Adult Social Care			
Client group	2015/16	2014/15	2013/14
Older Persons	6	4	10
Learning Disabilities	1	1	2
Physical Disabilities and Sensory Loss	1	2	2
Adult Mental Health (Integrated Service) or AMHP function	1	4	1
Contracted Services	7	6	1
Total number of complaints received	16	17	15

The service users who were the focus of the complaints were 5 males and 11 females.

Complaints which are considered either complex or have a number of elements are usually investigated by someone independent of the council. In 2015/16, Independent Investigating Officers were appointed to 10 of the 14 complaints investigated. The remaining 4 complaints were investigated and responded to internally.

6.1.4. Advocacy services

Of the 14 complaints investigated, 2 of the complainants chose to have an advocate assist them with their complaints. However, one complainant chose to be supported by a family member during the complaint investigation.

6.1.5. Timescales and the Grading of Complaints

There is a maximum 6 month statutory timescale for investigating and responding to a complaint relating to adult social care. However, the overall aim is to respond to complaints in a timely manner. The likely timescales for investigation are discussed with the complainant at the outset of a complaint investigation and updates on progress of the investigation are provided by the Investigating Officer at regular intervals. There are a range of factors that can impact upon timescales such as:

- Whether the complaint has been considered low, moderate or high impact;
- The number of points of complaint for investigation;
- The availability of the complainant and other key people the Investigating Officer needs to interview;
- The time taken to conduct interviews with key people which can range from complaint to complaint;
- Seeking appropriate consent for obtaining information from partner agencies and awaiting the necessary information to inform the complaint investigation;

- Reading case files and records and obtaining copies of local policies and procedures;
- Consideration all available information and the drafting of a complaint investigation report;
- Carrying out factual accuracy checks on the draft report and providing feedback to the complainant before finalising and submitting the final report.

6.1.6. Complaints carried forward to 2016/17

All of the 14 complaints concluded investigation in 2015/16 and there are no complaints to carry forward to 2016/17.

6.1.7. Complaints considered by the Local Government Ombudsman in 2015/16

There were 2 complainants who approached the LGO in 2015/16 for consideration of their complaint.

One related to a complaint that was investigated in 2014/15 where the LGO concluded that *“The Council completed assessments and made adult social care provision according to the relevant legislation at the time and in accordance with the Mental Capacity Act.”*

The other was a complaint received and investigated by Adult Social Care in 2015/16 where the LGO concluded that *“There is no evidence the care Mrs Y received at a care home was inadequate. The Council is not at fault.”*

6.1.8. Complaints relating to north east regional local authorities 2015/16

It should be noted that each local authority has their own unique systems for gathering and reporting data. For example, some local authorities record concerns raised as ‘pre complaints’ or ‘informally resolved complaints’ and these type of representations may or may not be included in the table below.

Local Authority	Total Number of Complaints Investigated	Rate of Complaints (per 1000 18+ Population**)
A - Redcar & Cleveland	11	0.10
B – Durham	73	0.18
Hartlepool	14	0.21
C – Middlesbrough	23	0.21
D – Stockton	37	0.25
E - North Tyneside	47	0.29
F – Newcastle	73	0.32
G - South Tyneside	40	0.34
H – Gateshead	62	0.39
I – Sunderland	87	0.39
J – Darlington	49	0.59
K - Northumberland	No information	-

** ONS Mid-2013 estimates, Office for National Statistics

6.2. Children's Social Care

6.2.1. Compliments

Compliments are generally recognised to be an indicator of good outcomes for service user and carers. They also serve to provide wider lessons regarding the quality of services.

During 2015/16, 10 compliments have been received relating to children's social care. These range from an expression of thanks and appreciation in the form of a thank-you card to written communication. Appendix 1 provides some examples of compliments received during the period.

6.2.2. Complaints received in 2015/16

A total of 26 complaints were received. One complainant withdrew their complaint and one was withdrawn when the complainant did not engage with the process leaving 24 complaints investigated. The number of complaints received has decreased by 11 from last year. Complaints that were either partly upheld or upheld are outlined in Appendix 2.

There were no complaints received from children or young persons. All complaints received in 2015/16 were from parents or carers.

Of the 24 complaints investigated, 22 of these have been concluded and 2 remain ongoing. Of these:

- 22 of the 24 complaints were responded to at Stage 1 in the first instance. Of these:
 - 19 complaints were concluded at Stage 1;
 - 3 complaints progressed from Stage 1 to Stage 2.
- 2 of the 24 complaints were not first considered at Stage 1 and proceeded directly to Stage 2.
- 3 of the 5 complaints investigated at Stage 2 were resolved at the conclusion of the Stage 2 process. The 2 remaining complaints are still being investigated at Stage 2.

There were 3 complaints carried forward to 2015/16 from previous reporting periods. All 3 complaints progressed to Stage 3 and were heard by an Independent Complaint Review Panel at the final stage of the local statutory complaints process. All 3 complainants have approached the LGO for consideration of their complaint.

6.2.3. Advocacy services

Of the 24 complaints investigated, one complainant chose to be represented by a Solicitor.

6.2.4. Complaints considered by the Local Government Ombudsman in 2015/16

There were 3 complainants who approached the LGO in 2015/16 for consideration of their complaint. Of these:

- One related to a complaint that was investigated in 2013/14 where the LGO concluded that *“The Ombudsman cannot consider Ms B’s complaint about the welfare report the Council prepared for private family proceedings in respect of her son, C. The law prevents her from considering complaints about court action.”*
- One related to a complaint that was investigated in 2014/15 where the LGO concluded that *“The complaint investigation into Mr G’s complaint about children’s services was generally sound but it went beyond statutory timescale. The Council was at fault for the delay in sharing information with Mr G but this does not cause him significant injustice.”*
- The remaining complaint from 2014/15 is still being investigated by the LGO and will be carried forward for reporting in 2016/17.

6.2.5. Complaints carried forward to 2016/17

Of the 24 complaints investigated in 2015/16, 2 complaints which are currently being investigated at Stage 2, will be carried forward to 2016/17.

6.2.6. Complaints relating to north east regional local authorities 2015/16

It should be noted that each local authority has their own unique systems for gathering and reporting data. For example, some local authorities record concerns raised as ‘pre complaints’ or ‘informally resolved complaints’ and these type of representations may or may not be included in the table below.

Local Authority	Total Number of Stage 1 Complaints	Rate of Complaints (per 1000 0-19 Population*)	Total Number of Stage 2 complaints**	Stage 2 complaints actioned in 2015/16 as a % of Total stage 1 Complaints 2015/16**
A – Gateshead	37	0.82	4	10.8%
B - Redcar & Cleveland	26	0.85	4	15.4%
Hartlepool	22	1.11	5	22.7%
C - North Tyneside	50	1.12	1	2.0%
D – Durham	132	1.16	8	6.1%
E – Newcastle	81	1.20	11	13.6%
F – Stockton	56	1.19	8	14.3%
G - South Tyneside	45	1.36	4	8.9%
H – Middlesbrough	67	1.86	16	23.9%
I – Darlington	54	2.15	14	25.9%
J – Sunderland	176	2.86	23	13.1%
K – Northumberland	No	-	No information	-

* ONS Mid-2013 population estimates, Office for National Statistics

** Note: some complaints investigated at Stage 2 in 2015/16 may have been investigated initially at Stage 1 and some may have been investigated directly at Stage 2 without first being considered at Stage 1.

6.3. Public Health

There were no complaints received in relation to Public Health. Statistical comparisons were made with regional Local Authorities which confirmed the number of complaints received in this area were extremely low or non-existent.

7. Lessons learned

Lessons learned are an important aspect of the complaints framework. Appendix 2 outlines the context of some improvements that have been put in place as a direct result of complaints and representations received in adult social care and children's social care.

8. Conclusions and way forward

8.1. Going forward

We continue to ensure that a person-centred approach is adopted for the handling and investigation of each complaint. We will continue to focus on ensuring that we monitor that: complainants receive appropriate and timely feedback on complaints; appropriate apologies are offered; and any service improvement recommendations are delivered.

8.2. Action plan

Actions for 2016/17 are as follows:

- Continuing to raise awareness of and promote the complaints procedure for adult social care, children's social care and public health.
- Continuing to remind and encourage the workforce to inform the Standards, Engagement and Development Team when expressions of thanks have been received. These provide an indication of satisfaction with services and should be recorded and reported.
- Continuing to raise awareness of lessons learnt from complaints and ensure they are fed into policies, procedures and practice. There is an established Continuous Improvement Group in children's social care which is used as a forum to receive complaints statistical data and any learning from complaints is used as a driver for improvements.
- Commissioning the LGO to deliver their 'Effective Complaints Handling Training in Children's Social Care' to those managers and Heads of Service who investigate complaints.
- Liaising with Independent Complaints Advocacy (ICA), the organisation commissioned by the Council to deliver an advocacy service for NHS complaints, to ensure that the service is meeting the needs of the local population.

- Engaging with neighbouring local authorities and partner agencies to review the joint protocol devised in 2009 for the handling of complaints that span more than one agency to ensure it remains fit for purpose.

Appendix 1: Examples of compliments received across Children and Adult Social Care services

Adult Social Care

"I was very impressed (again) at the manner in which you conducted the review – and I do think mam is lucky to have you battling for her you do really come across as being both thoroughly professional and genuinely concerned. I would therefore like to formally thank you for that."

From a family member about a Social Care Officer

"The family have asked that I write to you to thank the Council for their prompt and exemplary response ... my cousins and aunt have asked that I mention 'X's social worker who appears to exemplify the attitude of Council staff by being an efficient social worker but also a caring person who has immediately gained the confidence of 'X'."

From family members about a Social Worker

"I would like to express my gratitude for the very professional way that the personnel in the Adult Services Team have helped my mother and father all the people they have seen have exceeded their duty to just do their job but have also shown genuine concern for my parents' situation. I have also felt tremendously supported and I can't praise the team highly enough."

From a family member about Adult Social Care

"Am very satisfied with all aspects to this service. Complete customer service, including assessment of needs and supplying all equipment needed. Good communication throughout. Words don't seem enough to describe the difference it's made to our lives. Thank you and keep up the good work."

From a service user about an Occupational Therapist

"Many thanks for all your help, you will never know how my grab rails, chair, trolley etc have made my life so much easier I've never come across anyone so caring."

From a service user about an Occupational Therapy Assistant

".... to express our sincere gratitude for your kind and sensitive handling of 'X's affairs and funeral arrangements. Your time and patience – it has been very helpful and much appreciated at this time."

From a family member about a User Property and Finance Officer

Children's Social Care

"Thank you for all your help and for getting us this far."

From parents about a Social Worker

"I had a meeting with D and she explained that she would try and get the best support for me and my family. D was very understanding about what I believed I needed and she was really able to help me in an effective way. In my opinion she did her job incredibly well and helped me a lot."

From a parent about a Social Worker

"I thoroughly enjoyed working with D as it really helped knowing she was someone to talk to. She always listened when we talked and never stopped me from talking and always thought about my feelings."

From a parent about a Social Worker

"Due to previous history with social services I was dreading this situation but thanks to D taking some time listening and advising I have some faith restored. A true credit to the service."

From a parent about a Social Worker

"R sat down with me and J and explained why she was involved. She took mine and J's feelings into account. R was fantastic and working with her is fantastic."

From parents about a Social Worker

"Working with V has been good so far as there is honesty and I know now I am getting back on my feet. I can talk to her and trust her."

From a parent about a Social Worker

"C helped me and my children move to a new house that was away from my partner. I feel much happier and safer now."

From parents about a Social Worker

"I appreciate you going out your way to help me."

From a member of the public about a Children's HUB Worker

Appendix 2: Partly upheld or upheld complaints and lessons learned in Children and Adult Social Care Services

Adult Social Care	
Details of complaint/Outcomes	Lessons learned and where appropriate, actions taken
<p>The complainant (the wife of a service user) was dissatisfied with her husband's discharge from hospital. The complainant alleged that her husband's discharge was delayed by adult social care and that she received a poor quality service from adult social care both within the hospital and later at home.</p>	<p>There were 5 separate elements of complaint investigated. The independent complaint investigator concluded that there was no delay caused by adult social care and that the Council had acted in accordance with the Hospital Discharge Policy.</p> <p>Council staff engaged in hospital discharge processes have been reminded of the need to provide patients and family members with relevant information in an appropriate format. This will include use of the Hartlepool Now website and information factsheets that have been developed.</p> <p>Learning from the complaint investigation was shared with the NHS Care Transitions Team.</p>
<p>The complainant (the daughter of a service user who had sadly passed away) alleged that despite several requests over two months to the manager of the residential care home, no OT assessment of her late mother's needs was undertaken. Further, the complainant alleged that no risk assessments were carried out.</p>	<p>The independent complaint investigator concluded that the residential care home had initiated a referral for an OT assessment but did not chase this up proactively. There was no evidence to indicate that risk assessments had been completed.</p> <p>There was an apology made to the complainant and a commitment made to cascade the findings and learning from the complaint investigation report to other care home providers to ensure lessons were shared more widely. There was also dialogue with health partners about visiting professionals writing up their interventions with regard to residents.</p>

<p>The complainant (a service user) was dissatisfied with the standard of respite care she had received in a residential care home. This related to 'prn' mediation, lack of food choice, weight loss, missing personal items and personal hygiene.</p>	<p>The complaint investigation concluded that some elements of the service delivered could have been better.</p> <p>The complainant was provided with a payment to ameliorate the loss of personal items and the adult social care workforce was reminded that someone can complain to the Council directly about a service the Council has arranged on the service user's behalf. The Commissioned Services Team cascaded the recommendations arising from the complaint to other care home providers to enable learning to be shared more widely.</p>
<p>The complainant (the son of a service user who had sadly passed away) alleged that the residential care home did not look after his father properly. The complainant alleged his father was not checked on often enough, he was not regarded as an equal partner in his late father's care, he was not informed about psychiatric assessments and raised concerns about care provided in the lead up to his late father's hospital admission.</p>	<p>The independent complaint investigator concluded that some elements of the complaints were upheld or partly upheld. The complainant was provided with an apology for not being informed about proposed assessments or being fully involved in this regard.</p> <p>The complaint highlighted areas that were worthy of appropriate consideration as part of adult social care's review and update of practice standards. The residential care home was encouraged to formulate a template to record when care staff communicated with a family member or carer with respect to the wellbeing of the resident. The provider was also reminded to ensure that any notes or comments added to care plans are signed and dated to ensure greater consistency in recording of medical advice and interventions.</p>
<p>The complainant (a relative of a service user who lacked mental capacity) alleged that the care home failed to implement the agreed care plan and was not appropriately attentive to her relative's physical and emotional needs.</p>	<p>The independent complaint investigator upheld the complaints made.</p> <p>The Council agreed to share the findings from the complaint investigation report with the Care Quality Commission as part their regular information sharing meetings. In addition, the particular issues highlighted were addressed with the care home and assurances sought that action had been taken to address the areas the complaint raised.</p>

The complainant (the granddaughter of a service user who provided her consent for her granddaughter to act on her behalf) alleged that the contracted home care provider neglected her grandmother's care needs.	The independent complaint investigator partly upheld this element of complaint and found that not all of the home care provider's staff were appropriately familiar with the organisation's policies and procedures. The home care provider has taken steps to address this and apologised to the complainant.
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Children's Social Care	
Details of complaint/Outcomes	Lessons learned and where appropriate, actions taken
<p>The complainant (the mother of the children) was unhappy that it took over two weeks before she was informed of the outcome as to whether the children's grandmother could have unsupervised contact with her grandchildren. The complainant alleged that her children were unsettled wondering if they could go to their grandmother's during the summer holidays whilst awaiting the outcome.</p> <p>Concluded at Stage 1</p>	<p>The Team Manager concluded that the relevant checks took too long which constituted a delay. An apology was provided to the complainant.</p>
<p>The complainants (the parents of a child) alleged that the Council failed to take action when they raised concerns about the welfare of their children, made decisions based on assumptions and provided confusing and conflicting advice regarding benefit entitlement following the children going to live with their grandparents.</p> <p>Concluded at Stage 2</p>	<p>Five elements of complaint were investigated where one element was upheld. This related to the confusing and conflicting advice regarding benefit entitlement. An apology was provided and clear guidance issued to the workforce with regard to what advice should be given to family members when children move away from their parents to live with extended family members.</p>

<p>The complainant (the mother of a young person) was dissatisfied that despite planned contact arrangements, her daughter was away with her foster carers. Further, she was not notified of this until she arrived for the planned supervised contact session.</p> <p>Concluded at Stage 1</p>	<p>An explanation was provided to the complainant that a worker had tried to reach the complainant by telephone and letter to inform her. An apology was provided a subsequent contact session was arranged.</p>
<p>The complainants (the parents of a child) expressed their dissatisfaction that the father of the child was not informed or contacted for his views and wishes about a proposed plan for his son to reside with extended family members.</p> <p>Concluded at Stage 1</p>	<p>An explanation of the events that happened was outlined in the Team Manager's response to the parents. It was acknowledged that the father was not contacted and an apology was provided.</p>
<p>The complainant (the grandparent of a young person) raised concerns about his granddaughter's care. He alleged there was a lack of social work visits and appropriate interventions in relation his granddaughter, confusion about contact arrangements, he believed his granddaughter was exposed to danger and not sufficiently protected as well as a failure to carry out an assessment of his and his wife as carers for his granddaughter.</p> <p>Concluded at Stage 2</p>	<p>From the 16 elements of complaint that were investigated, one was partly upheld which related to overnight stays outside of the foster placement.</p> <p>However, although the complaint was in the main not upheld, there was some learning points that emerged from the complaint investigation that have been made in practice. These include:</p> <ul style="list-style-type: none"> • Development of best practice guidance in relation to delegated authority; • Guidance to foster carers in relation to overnight stays; • Reminding workers of the need to complete running and missing interviews in a timely manner; • Development and implementation of communication plans in complex cases where family dynamics exist; • Amendments made to IT systems so dates of running and missing interviews are captured.

<p>The complainant (the father of a child) was dissatisfied with a number of aspects of his child's respite care provision.</p> <p>Concluded at Stage 1</p>	<p>The Head of Service looked into the complainant's concerns and there was one element which was upheld. This related to miscommunication about cancellation of service provision. An apology was provided to the complainant.</p>
<p>The complainant (the mother of a young person) expressed her unhappiness that information was shared with daughter that she believed should not been.</p> <p>Concluded at Stage 1</p>	<p>The Head of Service discussed with the complainant the dilemmas around how sensitive and difficult information is shared with young people to understand the reasons why they have become looked after and details of their family history and background. There was also discussion about whether withholding information is in a young person's best interests.</p> <p>The Head of Service found that the young person's life story work was not up to date and addressed the situation.</p>
<p>The complainants (the parents of young children) alleged that they were provided with conflicting advice, unreasonable judgments being made about them and a failure to adhere to policies and procedures.</p> <p>Concluded at Stage 2</p>	<p>The investigation concluded that elements of the complaint were either upheld or partly upheld. A number of actions and learning improvements were identified as a result including:</p> <ul style="list-style-type: none"> • An apology provided for those elements of complaint upheld or partly upheld; • A communication plan devised and implemented; • A review of the direct work undertaken with the children was carried out to identify if any further work was needed; • A reminder about the importance of the children's voice within assessments and interventions. • Wider learning points from the complaint being shared with Independent Reviewing Officers.

CHILDREN'S SERVICES COMMITTEE

8 November 2016



Report of: Director for Child and Adult Services

Subject: SERVICE USER FEEDBACK

1. TYPE OF DECISION/APPLICABLE CATEGORY

1.1 For information.

2. PURPOSE OF REPORT

2.1 For members of the children's Services Committee to note the "Listening to children, young people and families. Service User Experience report" October 2016

2.2. The Report is attached as **APPENDIX A** to this report.

3. BACKGROUND

3.1 It is important that children's services understand the experience of children, young people and families using our services. Our vision very clearly sets out that we will develop services with our service users and not "do to them". This attached report sets out the work that has been undertaken with our children and families.

3.2 Continuous Improvement is a key part of the vision for Children's Services alongside being a learning organisation. It is therefore critical for the division to understand the views of our children and families to ensure that services are truly meeting need and empowering families to change.

4. RISK IMPLICATIONS

4.1 It is important that children's social care work has a learning and continuous improvement culture. It is there critical to review all experiences of our children and families and ensure that any learning that can be disseminated to

the workforce. There is a risk that if we do not spend time reviewing children and families' experiences that this learning will be lost.

5. FINANCIAL CONSIDERATIONS

5.1 There are no financial considerations within this report.

6. LEGAL CONSIDERATIONS

6.1 There are no legal considerations for this report.

7. CHILD AND FAMILY POVERTY CONSIDERATIONS

7.1 There are no child and family poverty considerations within this report.

8. EQUALITY AND DIVERSITY CONSIDERATIONS

8.1 All children, young people and families are encouraged to give feedback on the service they received.

9. STAFF CONSIDERATIONS

9.1 There are no staff considerations within this report.

10. ASSET MANAGEMENT CONSIDERATIONS

10.1 There are no asset management considerations within this report.

11. RECOMMENDATIONS

11.1 For members of the children's Services Committee to note the "Listening to children, young people and families. Service User Experience report" October 2016

12. REASONS FOR RECOMMENDATIONS

12.1 It is important for Children's Services to understand the experiences of children, young people and families to ensure that services can be improved as required.

13. BACKGROUND PAPERS

None.

14. CONTACT OFFICER

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Email: Sarah.Ward@hartlepool.gov.uk

Listening to children, young people and families

Service User Experience report October 2016



Introduction

People who use services, their families and carers are at the heart of the work that Children Services do. Understanding how people experience services has helped us shape the **Vision for a Better Childhood in Hartlepool**.

Mission statement:

“To enable all children and families¹ in Hartlepool to have opportunities to make the most of their life chances and be supported to be safe in their homes and communities.”

The Vision is underpinned by our Obsessions:

- Children and young people have opportunities to make the most of their life chances and are safe.
- Family relationships, strengths, skills and ability to cope are improved.
- The impact of domestic violence, mental health, drugs and alcohol misuse on children and families is reduced.
- Parents, carers and young people are helped to gain skills and get jobs.

Our Vision and Obsessions are rooted in our values:

- We will work to protect children from significant harm;
- We will keep children and their families at the heart of everything we do;
- We understand that every child and every family is different. We will assess each child and their family so that we can offer services to suit their needs. We will do this using an approach called the ‘team around the child’ model;
- We will respect each child and their family and always treat them with dignity. We will not make changes to the services we provide without good reason;
- We believe we can make the biggest difference to a child’s quality of life by providing a service as soon as we find out that the child needs support from us;
- We will check our services often to make sure they are as good as they can be. We will make changes to our services if we need to;
- Our workers will be skilled and will do their jobs well. Managers will give support and guidance to the staff in their teams. All workers will get high-quality training as part of their job;
- Our services will work together to make sure we make each child’s quality of life better.

¹ For the purposes of this Strategy, ‘families’ includes wider family members and carers including foster carers.

We will:

- Have a workforce approach based on intervention based practice.
- Have a workforce that owns, intervenes and takes action to meet the needs of children and families and assumes their responsibilities as agents of change.
- Have reflective workers who are skilled and knowledgeable and draw on the latest research and evidence based practice.
- Build effective relationships with the families we work with to ensure they receive the help and support they need.
- Support families to develop their own plans making sure that all support networks available to them are used. This includes wider family networks and also workers from other organisations.

This report draws on the voices of the parents, young people and children that we have spoken to (see Appendix 1²).

² This report does not include details of complaints, concerns and compliments that are reported in the Annual Complaints report.

Listening to people...

We have talked to parents, carers, children and young people both individually and in groups.

What people have said about our services:

From a parent carer perspective:

- It wasn't always clear where to get help from.
- It is sometimes hard to access services.
- There is too much "red tape" and too many assessments when more than one service is involved.
- Services don't always share information.
- People worried about being judged so sometimes delayed asking for help.
- At times, getting help and support took too long.
- Often there were too many people involved with their family. People just wanted to talk to one person.
- Plans were sometimes vague and people felt that they could have been written for any child.

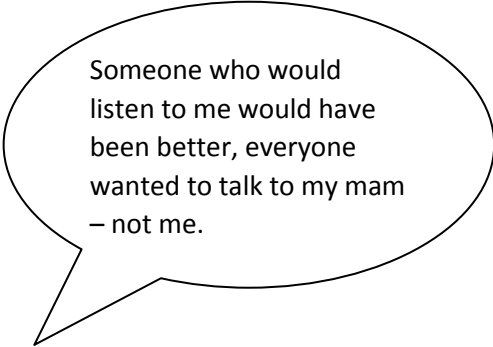
"I didn't think that my views were being heard properly"
Mother

"I said loads and loads but I felt ignored" Mother

From a children/young person's perspective:

- The best workers "take time" and are sympathetic. They are more like a friend than a worker.
- Young people like to have one worker who is easy to contact.
- A good worker listens to young people.
- A good worker takes the time to see and talk to the child/young person and does not just accept what a parent or carer has said.
- A good worker writes records and plans with the young person/child.

I remember sitting with the man from YOS and answering loads of questions. I didn't see a plan but he did send me a letter telling me what I was supposed to do



Someone who would
listen to me would have
been better, everyone
wanted to talk to my mam
– not me.

What people have told us about our social workers

Some people have told us that their social workers:

- Explain their role and the reason why they are involved with the family.
- Listen and take people's feelings into account.
- Involve families in decision making.
- Come to visits well prepared.
- Have the best interest of the family at heart.

However, some told us that:

- Contacting their social worker can sometimes be a problem.
- Social workers didn't always have enough time to spend with the family.
- Social workers didn't always keep appointments that had been agreed.
- Sending out paperwork took longer than was agreed which caused anxiety for families.
- Social workers didn't always do what they said they would do.
- Social worker frequently change which is really difficult for families.

Family Leadership Courses

We have also worked with In-Control (Appendix 2) to deliver a number of Family Leadership courses. These have included Rites of Passage with children and young people and Sharing Knowledge for parents of children with additional needs.

Rites of Passage.

The young people who attended the course were drawn from across services including Looked After Children, young people with learning difficulties and young people with additional needs.



The group wanted the opportunity to have the same hopes, dreams and aspirations as anyone else. They wanted social workers and support workers to help them “dream big”.

They want services and support to be based on their wishes and grounded in their daily lives. For the Looked After Children there was a pragmatic acceptance of the processes and professionals in their lives but no involvement in the development of their own plans. In some cases they said they had never seen the plans.

The group wanted to be seen and heard. The young people wanted social workers to see and talk to them on every visit. They wanted social workers to listen to them and not rely on what was being said by their parents and carers.

Key messages from Rites of Passage group of young people



Some of the young people felt that social workers would “predict” what they wanted rather than really listen to what they were saying.

A number of the young people who were Looked After talked about the considerable number of changes in social worker they had experienced. The young people knew that sometimes this was unavoidable because of sickness and social workers leaving but it could still be difficult for the young person. The young people talked about how new social workers learnt about them, and how the previous social worker would pass the file over and “they have big files on us”.

Sharing Knowledge

Parents from the 1 Hart 1 Mind 1 Future group came together for the Sharing Knowledge course.

Working together, the parents produced two presentations that focused on the key issues that they wanted senior staff in the department to hear.

One group of parents showed through a presentation how they struggled to get “joined up” support from services. Because of the complex needs of some of the parent’s children, they had a lot of professionals involved in their lives. The parents felt that each professional acted in a very individual way leaving the parents feeling overwhelmed by the number of people involved in their lives and struggling to deal with a range of assessments that focused on different aspects of their lives. The lack of a whole family approach sometimes left families feeling frustrated and confused.



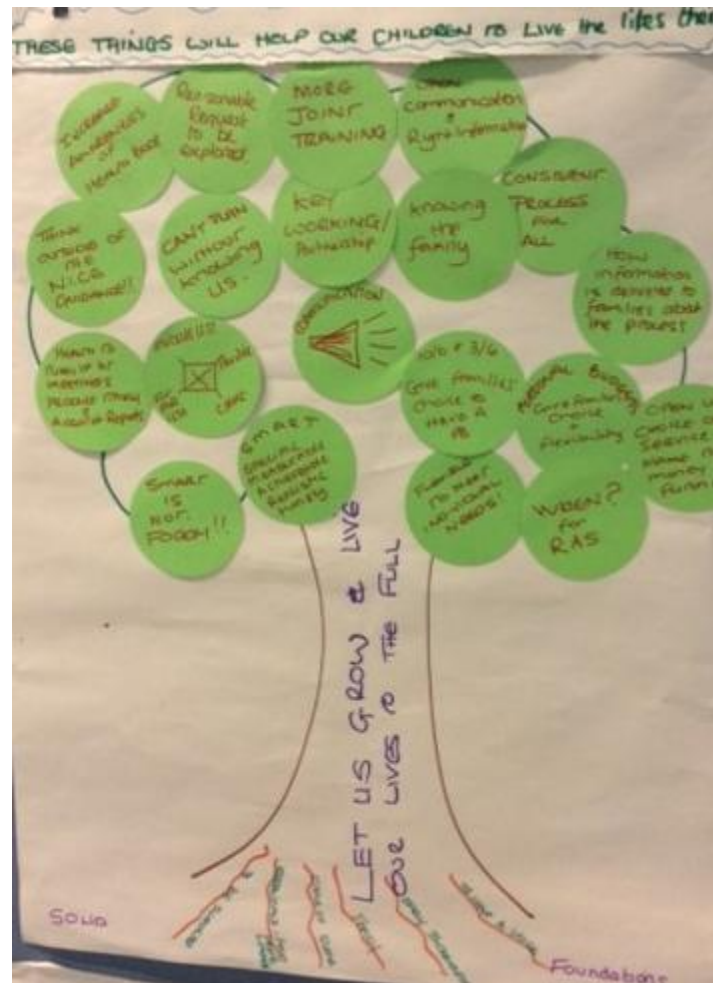
The second group of parents described a “Tree of Despair” where they:

- Don’t always know who to turn to
- Felt that professionals were often frightened to commit or make decisions
- Felt that they were passed from “pillar to post” and
- Didn’t always feel listened to



In order to change this “Tree of Despair” to a tree with strong foundations that supports their children to grow and live full lives they said we need to:

- Develop strong key working partnerships with other professionals and the family
- Make sure that all professionals involved really get to know the family
- Communicate openly
- Provide good, correct and timely information.
- Think more creatively
- Provide a more consistent approach.
- Give families more flexibility and choice



The work of the Participation Team

The Participation Team are promoters, facilitators and advisers on participation. They work to widen the participation of under-represented groups of children and young people including encouraging engagement with vulnerable groups. The team coordinates town wide participation events including Take Over Day and Award evenings.

The team support a number of groups:

- Youth Council
- Children in Care Council
- Rites of Passage group
- Young Inspectors
- Asian Girls Group

The Young Inspectors

The Young Inspectors are aged between 12 and 22 and come from a range of backgrounds and experiences. The Young Inspectors Inspect services aimed at 13

to 25 year olds and give recommendations for improvement. The young people are all trained and aim to improve the design, delivery and evaluation of services.

The Young Inspectors took part in an audit exercise of the Hartlepool Children's Safeguarding Board completed Section 11's. They found that:

- Organisations used acronyms and jargon
- Children and young people were not often involved in organisations safeguarding policies and procedures.
- Organisations were not aware of advocacy services that were available for young people and therefore did not promote them with children and young people.

The findings from the exercise have been fed back to the Board.

The Children in Care Council

The Children in Care Council are a group of young people aged between 13 and 21 who are in care or are care leavers.

The group meet once a week. The group decide what issues they will look into and arrange the Looked After Children Celebrating Success event and Looked After Children Summer Barbecue. The group present reports to the Corporate Parent Forum.

One of the areas the Children in Care Council has looked at is Looked After Children's Reviews. Using a combination of survey's, face to face and telephone interviews with children and young people, the Children in Care Council made a number of recommendations that focused on changes to the Looked After Children review process including:

- Young person to contribute to where the review is going to be held and who is going to attend.
- Ensure the paperwork is sent out at the same time before each review is held
- Ensure offer of advocate before each review
- Appointment to be made up to a week before with the Independent Reviewing Officer to look at the recommendations.

The Children in Care Council Report was presented to the Corporate Parent Forum.

The Children in Care Council have worked with schools, young people in care, care leavers, foster carers, social workers and other professionals to try and identify why there was an educational attainment gap between young people who are in care and those that are not and what could be put in place to try and reduce the gap.

After presenting a report to the Corporate Parent Forum, the Council have worked hard to promote the findings of the report and ensure their recommendations are being implemented.

Recommendations achieved so far include:

- One to one support offered to all looked after children.
- Young people involved in training for foster carers, social workers and schools.

- Information has been sent to those who work with looked after children regarding town wide opportunities and opportunities specially for looked after children.

Looked After Children's Summer Barbecue

The annual barbecue is attended by children in care, care leavers and foster carers. As part of the barbecue, the children and young people were asked about their vision for Hartlepool and what areas they would like to see the Children In Care Council focus on in the future.

The feedback has been collated and fed into the town wide Your Say, Our Future consultation and Children In Care Council future planning.





Conclusion

We will continue to meet with children, young people and their families to make sure that their voice is heard in our continuous improvement work.

Appendix 1

Children's Services

Methods for data collection:

- Face to face interviews with random sample of closed cases
- Service user feedback provided as part of the Assessed and Supported Year in Employment (ASYE)
- Focus groups with children and young people and parents and carers.

Family Leadership - Working with In-Control, the department has commissioned a number of Family Leadership Courses. These courses help people understand how the health and social care system works organise meetings and present questions without getting frustrated. The courses aim to help participants find solutions to improve their lives and give participants the confidence to work in partnership to enable them or their loved ones to have choice and control over their lives.

The Rites of Passage course took place in October 2015. 12 young people aged between 15 and 21 years took part. There were 4 males and 8 females in the group, 5 were Looked After and 9 had additional needs.

Parents from the 1 Hart 1 Mind 1 Future group came together for Sharing Knowledge course.