

**CORPORATE PARENTING SPECIALIST
ADVISORY GROUP**
Wednesday 4th November 2015

PRESENT – Cllrs McFall (Chair), Ali, Bateson, Brookfield, Connor, Daley, Entwistle, Gunn, Harling, Humphreys, Kay, Z Khan, Liddle, Lee, Mahmood, O’Keeffe, Sidat, Smith, Tapp, Taylor, Virmani and Whittle.

Also Present –

Robert Arrowsmith	Head of Service - Policy, Planning & Performance
Karen Barrick	Head of Service – Permanence
Charlotte Hesketh	LAC Virtual Head and Assessment Officer
Aldo Staffa	Looked After Children’s Education Manager
Shelia Morris	Designated Nurse, Looked After Children
Patricia Harrison	Co-Opted Member
Ben Aspinall	Democratic Services Manager
Rebekah Mottershead	Dedicated Group Support Officer

RESOLUTIONS

8. Welcome and Apologies

The Chair welcomed everyone to the meeting of the Corporate Parenting Specialist Advisory Group. Apologies were received from Cllrs Julie Slater, Whittle and Wright. Apologies were also received from Linda Clegg Director of Children’s Services, Gavin Redhead, Christie Walsh and Susan Clarke.

RESOLVED –

That the apologies be noted.

9. Minutes of the Meeting held on the 15th September 2015

RESOLVED – That the Minutes of the meeting of the Corporate Parenting Specialist Advisory Group held on the 15th September 2015 be agreed as a correct record.

10. Gold Beez Cards; Update

The Chair advised that due to the unavailability of young people’s representatives this item would be deferred to the 24th February meeting of the Group.

RESOLVED –

That the ‘Gold Beez Cards; Update’ be brought to the Group at its February Meeting.

11. Looked After Children Health Report

The Chair welcomed Shelia Morris, Designated Nurse, Looked After Children, to the meeting.

The Group was presented with the Clinical Commissioning Groups (CCG) annual Looked After Children Health and Wellbeing Report. Sheila advised that the report set out in detail;

- The importance of multiagency partnerships and joint working in addressing health issues and risk taking behaviours for Looked After Children.
- The positive improvement in the uptake of health assessments
- The emotional and mental health needs for Looked After Children and young people.
- Developments being made to ensure that Care leavers were having their health needs addressed.
- The importance of knowing the numbers of children in Care. This was essential for planning health services-sufficient staff/resources to undertake health assessments

Members were provided with an outline of the statutory guidance and the timescales to which Local Authorities must adhere to address health concerns of Children in our Care, and an overview of the key principles adopted by the CCG and Local Authority to ensure the successful delivery of this service.

It was noted that every Looked After Child must have a health assessment and a health plan developed to reflect the child's health needs. The Group heard that this health assessment should be completed within the first 20 days of a child entering Care, and would be incorporated into the child's overall care plan.

Sheila informed the Group that following on from this initial assessment, a 'Strengths and Difficulties' questionnaire was completed with foster carers to create a baseline for the child's behaviour after their first 12 months in the Care system. Members questioned who assessed the results of this questionnaire and were informed that a panel made up of representatives from numerous agencies such as the CCG, ELHT, CAMS and the Local Authority.

Members were informed that additional health assessments would be commissioned by the ELHT every 6 months for children under 5, and annually for those over 5 to ensure the health needs of Looked After Children continued to be met. The Group noted that assessments for those over the age of 16 would be completed by the child's GP.

It was reported that because many Looked After Children could have experienced trauma, the results of health checks and the 'Strengths and

Difficulties' questionnaire were analysed to identify any potential mental health illnesses. Sheila advised that should there be any abnormal indications, the child's Social Worker and a child psychologist would be consulted.

A discussion was held around the mental health of those in Care and Care leavers and the provision currently in place to assist them. Members questioned if there were sufficient provisions to meet the psychological needs of Children in Our Care. It was advised that the 'Strengths and Difficulties' questionnaire helped to identify any key concerns, and treatment was implemented accordingly.

Members noted that previous emotional traumas could leave young people vulnerable and expressed concerns around an incident that recently been brought to the attention of the Licensing Committee, it was reported that the Council's Engage team had investigated the incident but reported no evidence had been found, therefore the Licensing Committee had not been able to review the license. Members raised concerns that the licence had not been revoked, particularly when the caution was in relation to young, vulnerable, people. It was felt that this incident should be looked into further.

The Group heard that the consequences of emotional trauma did not always manifest until adulthood, and that there was little provision for the treatment of mental health conditions for Care leavers once they left psychiatric wards. It was reported that there was a pilot scheme in the Borough which aimed to look at supporting this vulnerable group, though this was costly, and that additional work with Adult Services would be beneficial to support Care Leavers.

Sheila advised that multi agency partnership working was essential to ensuring the medical and emotional welfare needs of Children in our Care and care leavers were met.

It was noted that such partnerships were already working to deliver a comprehensive service for both Looked After Children and Care Leavers. The Group heard that there was now a designated Care Leaver Nurse, a Designated Nurse for Looked After Children, Health Visitors and School Nurses all fully trained to meet the needs of Children in our Care.

Members were advised that putting the voice of the child was also an important aspect of ensuring the long term health of a Looked After Child; particularly as they entered early adulthood. Sheila indicated that overriding peer pressure and encouraging young people to take care of themselves was something which was being worked on, and would be continued through the work of the Designated Nurse moving forwards.

It was reported that to meet the health needs of such a vulnerable group as Children in Our Care, provision needed to focus on ensuring that Looked After Children were able to access universal services as well as targeted and

specialist services where necessary. Members noted that the provisions now offered in Blackburn with Darwen were;

- SDQ Training (Emotional Health & Wellbeing)
- LAC Training /Workshops for Health Visitors & School Nurses
- RCN Intercollegiate Competency Framework for staff working with LAC
- SCAYT-Support for carers
- Engage Team-support for Looked after Children
- Brook Sexual Health services
- Inspire –Substance & Alcohol misuse service
- Smoking Cessation services
- Changing Lives-Domestic abuse support services.
- Young People's Resource Centre for health services
- Leaving Care Team-Personal Advisors
- YOT Nurse.
- Dental services.

Sheila advised that as the Clinical Commissioning Group worked closely with the Local Authority, there was already a good open dialogue that allowed challenge to see what may be going wrong and to share methods of best practice.

RESOLVED –

1. That the Designated nurse for Looked After Children be thanked for her attendance
2. That the Looked After Children Health and Wellbeing Report be noted

12. Educational Attainment of Looked After Children – Primary Age

The Chair welcomed Robert Arrowsmith, Head of Service-Policy, Planning & Performance to the meeting and invited him to present the Group with a report outlining the results of Looked After Children of Primary Age.

The report was presented to the Group and contained information regarding the results attained in Blackburn with Darwen by Looked After Children in comparison with national figure, and an overview of the educational challenges they faced.

It was reported that there were two types of performance measures; performing to age expected levels and the expected progress between two points. It was noted that these measures were used to divide children into 'beneath expected', 'met' and 'above expectations'.

Robert advised that at the Foundation Stage, children were assessed for physical development, literacy, numeracy, an understanding of the world and the arts. He indicated that this was a wide ranging assessment and the expectation was that a child should achieve 'met' at all counts. The Group

heard that Looked After Children did not do well at this stage as many had entered the Care system before the age of 6 and had often come from an emotionally unstable environment.

The results obtained by Looked After Children in Key Stage One and Key Stage Two were presented to the Group. These results highlighted reading, spelling and phonetics to be an area where Looked After Children were particularly weak.

Members discussed why this may be the case. Charlotte Hesketh, Virtual Headteacher, advised that writing and reading stemmed from early experience with speaking; if you cannot speak then you cannot articulate. The Group was informed that Looked After Children would lack the supportive work at home which subsequently impacted their ability to meet age related expectations in such areas.

The Group noted that the results of the Looked After Children of Blackburn with Darwen had risen year on year, with a quarter of children achieving Level 5 or above, and maths results now being on a par with non-looked after children. It was noted that this was a national trend, but that Blackburn with Darwen Looked After Children's results were higher than the national average across the board.

It was reported that the children placed out of the area did not achieve as well as those within Blackburn with Darwen. Members heard that the Authority was working to improve the relationships with schools out of the Borough to ensure that all Children in their Care received the same educational opportunities.

Members were informed that the Virtual School had been noted by OFSTED and had proven a success. The Group heard that there was now a good network of Virtual Headteacher's nationally and it was hoped that a conversation would take place to include Personal Education Plans into OFSTED reports moving forwards.

It was reported that the implementation of the Virtual School, Designated Teachers, Pupil Premium funding and Personal Education Plans had positively contributed to the rising attainment levels of Looked After Children in Blackburn with Darwen. Members agreed that the Local Authority and schools had worked hard to put measures in place to support children early on in their school life and these areas should be further supported and promoted in the future.

RESOLVED –

That the Head of Service-Policy, Planning & Performance be thanked for his attendance and his presentation

Signed.....

Chair of the meeting at which the Minutes were signed

Date.....