

Corporate Parenting Committee

Agenda

Date:	Tuesday, 14th November, 2017
Time:	4.00 pm
Venue:	R1 & R2 - Westfields, Middlewich Road, Sandbach, CW11 1HZ

The agenda is divided into 2 parts. Part 1 is taken in the presence of the public and press. Part 2 items will be considered in the absence of the public and press for the reasons indicated on the agenda and in the report.

PART 1 – MATTERS TO BE CONSIDERED WITH THE PUBLIC AND PRESS PRESENT

1. **Apologies for Absence**

To receive any apologies for absence.

2. **Declarations of Interest**

To provide an opportunity for Members and Officers to declare any disclosable pecuniary and non-pecuniary interests in any item on the agenda.

3. **Minutes of Previous meeting** (Pages 3 - 8)

To approve the minutes of the meeting held on 19th September 2017.

4. **Virtual School Headteacher's Annual Report 2017** (Pages 9 - 48)

To consider the Virtual School Headteacher's Annual Report 2017.

5. **Corporate Parenting Update** (Pages 49 - 54)

To consider an update on Corporate Parenting.

Contact: Gaynor Hawthornthwaite
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6. **Local Safeguarding Children's Board (LSCB) 2016/2017 Annual Report** (Pages 55 - 104)

To consider the Local Safeguarding Board 2016/2017 Annual Report.

7. **Health Annual Report 2016/2017** (Pages 105 - 118)

To consider the 2016/2017 Health Annual Report.

8. **Input from Children and Young People**

To receive an oral update on the health of cared for children and care leavers.

CHESHIRE EAST COUNCIL

Minutes of a meeting of the **Corporate Parenting Committee**
held on Tuesday, 19th September, 2017 at Committee Suite 2/3 - Westfields,
Middlewich Road, Sandbach, CW11 1HZ

PRESENT

Councillor G Merry (Chairman)
Councillor D Flude (Vice-Chairman)

Councillors P Butterill, M Deakin, B Dooley, S Edgar, L Durham, M Grant,
J Saunders and L Smetham

COUNCILLOR IN ATTENDANCE

Councillor G Hayes

OFFICERS IN ATTENDANCE

Nigel Moorhouse – Director of Children’s Social Care
Kerrie Birtles - Head of Service: Cared for Children & Care Leavers
Moira McGrath – Designated Nurse – Children’s Safeguarding – NHS South
Cheshire CCG)
Moira Angel – Director – Children’s Safeguarding – NHS Cheshire CCG)
Ruth Tucker - Named Nurse Safeguarding Children
Anna Connelly - Safeguarding Manager, Cared for Children
Gaynor Hawthornthwaite – Democratic Services Officer

12 APOLOGIES FOR ABSENCE

Apologies for absence were received from Councillor O Hunter

13 DECLARATIONS OF INTEREST

Councillor Merry declared a personal interest on item 10 on the grounds
that she is a member of the Fostering Panel.

14 MINUTES OF PREVIOUS MEETING

That the minutes of the meeting held on 4 July 2017 be approved as a
correct record.

15 INDEPENDENT REVIEWING OFFICER (IRO) ANNUAL REPORT

Consideration was given to the Independent Reviewing Officer’s 2016/17
Annual Report and the IRO’s contribution to quality assuring and
improving services for cared for children and care leavers, which included
the following:

- The statutory functions of the IRO
- Impact of the IROs on the outcomes for children and service provision in 2016/17
- Profile and staffing:
 - Location and independence of the service
 - Structure and characteristics
 - Specialist skills
 - Caseloads and additional duties
 - CPD, learning opportunities and contributing to the learning of others
- IROs' oversight of cared for children's care plans
 - Increase in population and number of reviews – 3 year comparison
 - Timeliness and child participation in reviews – 3 year comparison
- IROs and their role in improving child participation and advocacy
 - Comparison of advocate and Independent Visitor allocations in 2016
- Consultation – cared for children and care leavers' case reviews
- IRO issue resolution process – IRO alerts total and type of alert (DRP Level 1 and DRP Level 2)
- Distribution of alerts and good practice notification across relevant services
- Thematic data – themes within alert summary 2016-17
- IRO oversight of care leavers' matters
 - Care leavers living out of area
 - Number of pathway plan reviews and young people participation
 - Quality of pathway plans
 - Ethnicity
 - Disability
 - Education, employment and training
 - Unaccompanied asylum seekers
 - Accommodation for care leavers
 - Parenting
- The year ahead – IRO team targets and priorities for 2017/18

In considering the report Members of the Committee made a number of comments and asked questions about the care leavers living out of the area, how virtual schools fit in with care plans, the increase in caseloads of

the IROs and how the workload was being addressed by the 9 full-time permanent posts.

RESOLVED

That the report be noted.

16 UPDATE ON HEALTH OF CARE FOR CHILDREN AND CARE LEAVERS

Moira McGrath, Designated Nurse - Children's Safeguarding, gave a presentation to the Committee on the Health of Looked after Children and drew attention to:

- Key achievements – roles and structures
- CQC Inspection
- How healthy are our cared for children
- Developments for 16+ and transition cared for children and care leavers
- Care leavers health passport
- Initial Health assessments
- IHA action plan
- Priorities for 2017-2018

The Committee asked questions during the presentation and welcomed the comprehensive and valuable piece of information in the Care Leavers Health Passport that was now being included in the Pathway Plan as well as the IHA action plans and 2017-18 priorities that are now in place.

With regard to the percentage data for 2017, it was agreed that it would be helpful if the figures provided could be compared to the general population up to age 25, in the next report.

The Chairman thanked Moira for the presentation and asked for the presentation to be circulated to Committee members.

RESOLVED

That the presentation be noted.

17 INPUT FROM CHILDREN AND YOUNG PEOPLE

Kerry Birtles provided the Committee with an update following the last meeting of the Shadow Board for Young People when the following three areas relating to services were discussed:

- Accessing services (geographical challenges) – services that are available, but not visible
- Having access to GP services with support

- Receiving advice to make an informed decision

The Committee agreed that it would be helpful if the signposting of services available could be increased.

RESOLVED

That the report be noted.

18 CORPORATE PARENTING UPDATE

The Committee received an update in relation to cared for children and young people and care leavers as follows:

National Developments

- Outstanding inspection reports from other local authority areas

Local Developments

- Rising demand in Children's Social Care
- Star Awards and November Children's Rights Month
- National Adoption Week 2017
- National Care Leavers Week 2017
- Overview of Education Results
- Official Schools Adjudicator Report
- Independent Visitor Standards
- South Cheshire College Awards – Cared for Winners

RESOLVED

That the report be noted.

19 CORPORATE PARENTING SCORECARD (QUARTER 1)

Consideration was given to the scorecard for the first quarter of 2017/18, which covered the following six measures of performance:

- General
- Involve me
- Provide me with a good safe home
- keep me healthy
- Help me achieve
- Support me to move into adult life

The scorecard compared the current quarter with the year end 2016/17 and indicated the quarterly direction of travel.

In considering the scorecard, the Committee felt that it would be helpful if the figures could be recorded as either a percent or a figure, but not both.

They also thought that a date the information was recorded on the system should be included within the table.

RESOLVED

That the content be noted.

20 EXCLUSION OF THE PUBLIC AND PRESS

That the press and public be excluded from the meeting during consideration of the following items pursuant to Section 100(A)4 of the Local Government Act 1972 on the grounds that they involve the likely disclosure of exempt information as defined in Paragraph 3 of Part 1 of Schedule 12A to the Local Government Act 1972 and public interest would not be served in publishing the information.

21 FOSTERING PANEL REPORT

Consideration was given to the Independent Fostering Panel Chair's Annual Report. Members had the opportunity of asking questions on any points of interest or clarification.

RESOLVED

That the report and its conclusions be noted.

22 ADOPTION PANEL REPORT

Consideration was given to the Independent Fostering Panel Chair's Annual Report. Members had the opportunity of asking questions on any points of interest or clarification.

RESOLVED

That the report and its conclusions be noted.

The meeting commenced at 4.00 pm and concluded at 6.10 pm

Councillor G Merry (Chairman)

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Virtual School

Headteacher's Annual Report 2017



Nicola Axford

Virtual School Headteacher

Cheshire East Council

October 2017

Executive Summary

During 2016/17 the Virtual School has continued to support all cared for children and to continually review its operation to ensure it is meeting its statutory duties while providing effective support.

The overall number of children has risen and although still below the national rate, this increase has been significantly above that experienced elsewhere. There is also a higher number of children with high level of Special Educational Needs (SEN), which means that the overall population is more complex as well as larger in number.

The make up, operation and funding of the Virtual School has been reviewed. There has been no increase in core staffing but temporary tutors have been appointed to work directly with young people have been appointed to increase flexibility and reduce reliance on agencies and some core staffing is now funded through the Pupil Premium. The impact of these changes is currently being monitored.

All children have access to additional Pupil Premium funding to put in place actions and interventions which are additional to the normal school support and which will help them achieve targets. From April 2017 a new system has been introduced whereby schools request funding to carry out specific interventions. This will increase accountability and allow the impact to be monitored

The completion rate of Personal Education Plans (PEPs) has risen to over 90% as has the percentage completed to a good or better standard. The Virtual School are currently developing an ePEP which will reduce the paperwork and hence time needed for the PEP process without any loss of quality. The system is being tested in seven schools with the roll-out over the next two years.

Attendance overall is good and has remained high in primary schools but less so in secondary due to a number of children in crisis who had been unable to attend school or for whom suitable education was difficult to find.

Schools have been supported to try and reduce exclusions and the impact of this has been a reduction in the overall number of days lost and a reduction in the percentage of children with one or more fixed term exclusion. There have been no permanent exclusions.

The Virtual School has led on an Attachment Awareness Project with primary schools and has funded twelve schools to take part in action research. Early indications are that this is having a tangible and positive impact on the behaviour and achievements of cared for children.

Use of good quality alternative provision (AP) has increased and has had good outcomes for children who have previously been unable to sustain or access full time mainstream school. Training and support has been provided to the Fermain Academy in Macclesfield and pupils attending are now well managed and able to make good progress.

The Virtual School works closely with other teams in Social Care, SEN, School Admissions and Youth Support. In some cases this is through panels and meeting groups such as the 16+ Multi-Agency Group or Children Causing Concern meeting but is often through informal joint working and

collaboration of individual staff. As a result of these collaborations policies and procedures have been revised to become more efficient.

There has been an increase in the number of reception children achieving a Good Level of Development as a result of targeted support, mainly around communication.

Results at Key Stage 1 fell to 25% achieving the expected level. There were only four children in the group and two did not take the tests so statistically invalid although progress and support of current Year 2 children has been introduced to raise attainment next year.

At Key Stage 2 there was an improvement in the percentage of children achieving the expected level in maths, writing and grammar, punctuation and spelling but a slight fall in reading and an overall decrease in the percentage gaining expected level in all areas. Progress was significantly lower for children with SEN, often as they did not complete the tests and so were a high negative progress score was given. Work is already in place through use of Virtual School Tutor and use of tablet based monitored revision to improve outcomes for 2018.

At Key Stage 4 there has been an increase in the number of children gaining 5 or more GCSE C (or equivalent) passes and also on the number gaining the required level 4 or above in the new GCSEs for maths and English. All pupils have been supported to find positive destinations for post 16 and almost all started these programmes in Sept 2017. Progress was greatest in pupils with good levels of attendance and so this will be continually monitored and challenged. Progress and outcomes were highest for children with only one or two placements compared to those with more placements.

Post-16 engagement is supported and monitored monthly and the percentage Not in Education Employment or Training (NEET) in July 2017 was 21%. The number of young people starting Higher Education (HE) is the same as 2016 although the overall number currently in HE has fallen slightly.

Cared for children involved with youth offending have significantly higher levels of SEN and the outcomes are lower than for the wider cohort. An advisor also works part time for the Youth Justice Service and oversees these cases. She is currently reviewing the support mechanisms to increase attendance at the end of the orders.

Priorities for 2017/18

1. Continue to provide support and interventions for schools and children to improve outcomes, evaluating the impact of the intervention and use of Pupil Premium.
2. Identify and implement changes resulting from the Social Care Bill which includes Virtual School Headteacher to have responsibilities for previously looked after children as well as looked after and to promote mental health and attachment awareness in schools.
3. Monitor the impact of commissioned and front line services through engagement, progress and outcomes.
4. Develop a self- assessment tool for use with and by schools to improve their practice and support for cared for children.

Contents	Page
1. Self Evaluation	5
2. Introduction	6
3. Remit and operation of the Virtual School in Cheshire East	6
3.1 Staffing and Organisation	7
3.2 Funding	7
3.3 PEPs	10
3.4 School admissions	14
3.5 Improving attendance	15
3.6 Reducing exclusions	16
3.7 Participation of young people	17
3.8 Partnership working	17
3.9 Training provision	18
4. Contextual breakdown of Virtual School cohort	20
4.1 Population breakdown	20
4.2 School location and Ofsted rating	22
4.3 Special Educational Needs	23
4.4 Alternative Provision	24
5. Educational Outcomes	26
5.1 Early Years and Foundation Stage (Reception, age 5)	26
5.2 Key Stage 1 (Year 2, age 7)	26
5.3 Key Stage 2 (Year 6, age 11)	27
5.4 Key Stage 4 (Year 11, Age 16)	30
5.5 Post 16 (Year 12/13, age 16- 18)	34
6. Higher Education	36
7. Cared for young people involved with Youth Engagement Service	37
8. Priorities for 2017-18	38

1. Self Evaluation

Area	Self Evaluation			Priority actions for 17-18
Foundation Stage				Early intense intervention for children below targets
Key Stage 1				Enhance progress monitoring and early intervention
Key Stage 2				Identify and have support for underperforming pupils
Key Stage 4				Challenge schools where pupils under-perform
Post-16				Reduce NEET Cygnet and tutor and targeted support
Higher Education				Improve access to tasters and promote HE to Y10+
Outcomes for cfc engaged with YOT				Align PEPs with YOT documents. Confirm long term plan for YOT education support
Admissions				Agreed policy to support admissions, especially SEN
Attendance				Rapid response to falling attendance, especially SEN
Exclusions				Reduce number of repeat exclusions, especially SEN
Leadership and Management				Monitor staff capacity/wellbeing as numbers increase. Review working in line with new DfE stat. guidance
Staff Training				Increase attachment awareness in high schools. Increase number of good+ peps
Finance				Monitor new funding plan and impact of support
PEPs				Continue to see increase in quality of returned PEPs 75% of CE schools on ePEP by July 2018
Changes in school placement and AP				Increase challenge and monitoring of pupils in AP – attendance, attainment, progress and exclusions
Partnership Working				Establish agreed protocols for SEN and admissions. Work with S Care to increase engagement of F Carers
Monitoring and Evaluation				Increase detail and quality of data of monitoring data and use to priorities actions.
Participation by children and young people				Revise My Voice to allow children to comment on VS support and review practice accordingly. Work with YSS to increase feedback from children
Safeguarding and promotion of wellbeing				Work with Emotionally Healthy Schools programme to raise awareness of attachment as means of promoting mental health

Green = Area doing well

Amber = further work needed Red = High priority for action

2. Introduction

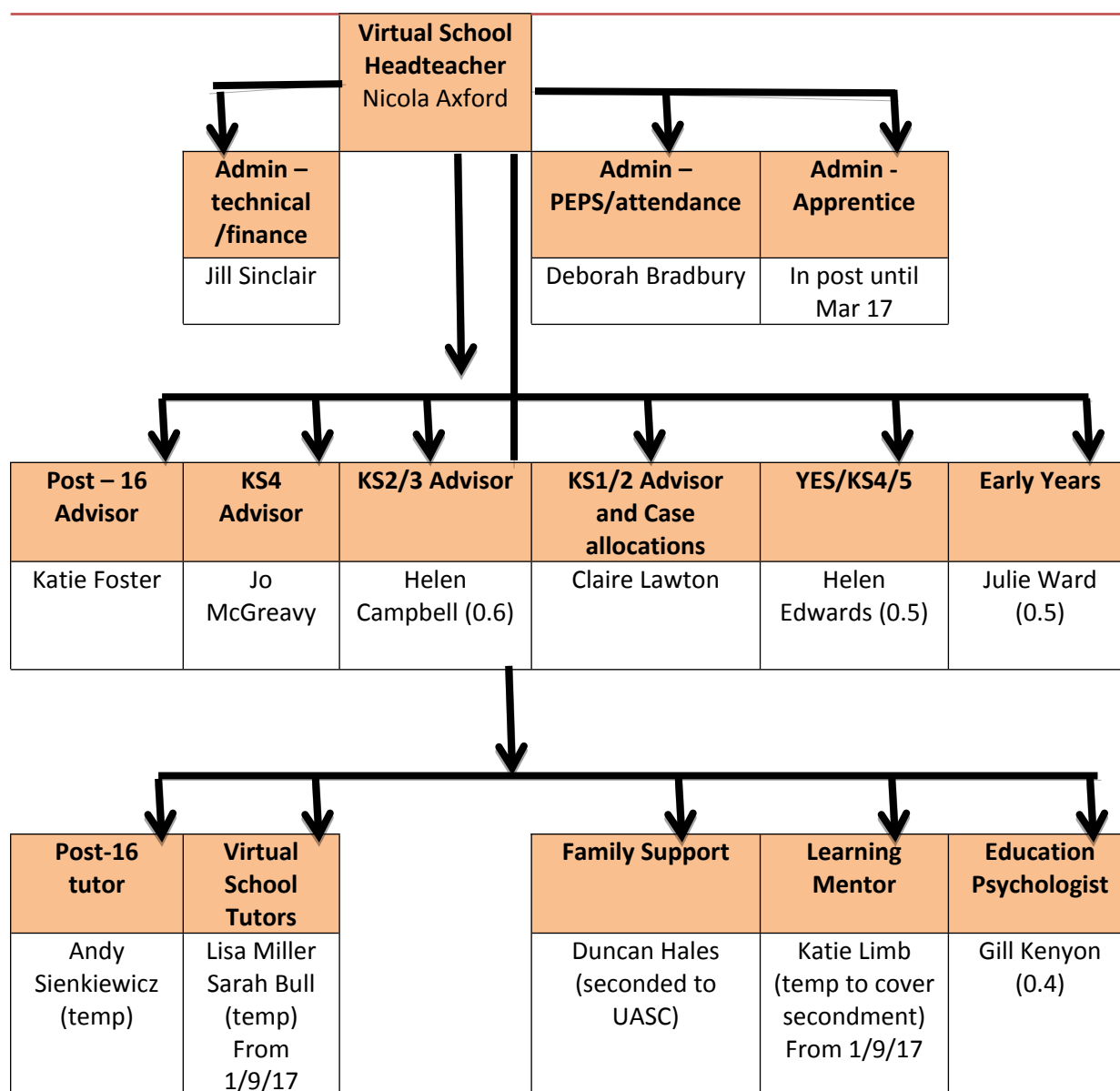
This report presents an overview of the operation and impact of the Virtual School during 2016-2017. The Virtual School (VS) supports all children in care and relevant care leavers regardless of their length of time in care but the educational attainment data in the report relates to those who have been in continuous care from March 31st 2016 to March 31st 2017. This is the cohort reported in national data which is supplied to external agencies such as Ofsted. National comparative data, where quoted, is that published in the Statistical First Release of the Outcomes of looked after children which was last published in March 2017.

3. Remit and operation of the Virtual School in Cheshire East

Local authorities have a duty under the Children Act 1989 to safeguard and promote the welfare of a child looked after by them. This includes a particular duty to promote the child's education achievement, wherever they live or are educated. The authority must therefore give particular attention to the educational implications of any decision about the welfare of those children. The local authority is required to appoint a Virtual School Headteacher (VSH) for the purpose of discharging the local authority's duty to promote the educational achievement of its looked after children, wherever they live or are educated.

The maxim of the Cheshire East Virtual School is to "Engage, Achieve and Progress". The Virtual School operates in such a way as to follow the Statutory Guidance to Local Authorities in the document "Promoting the education of looked after children" (DfE, July 2014). This requires the local authority to ensure that there are systems in place which promote good education provision for cared for children and to monitor that these are in place. In Cheshire East this duty is taken further by ensuring that every young person in care has a named Virtual School Advisor linked to their case can provide challenge support to schools, carers and social workers. This in turn helps to ensure that there is suitable education in place, champion the needs of the child and challenge and support education providers to ensure that they make suitable arrangements to allow the child to reach their full potential. This is carried out through termly PEP (Personal Education Plan) meetings with additional meetings and activities put into place for those with the highest level of need. The service is provided to all children in care up to the end of the school year in which they become 18 and is available to older young people on request.

3.1 Staffing and Organisation



The make up and nature of the Virtual School Team is kept under review to ensure that the skills available match the needs of the cohort. Structure as of 1st Sept 2017 is shown above.

The team has evolved to provide more direct contact with children and young people so that the support can be more closely tailored to needs and monitored. Tuition has previously been made available to young people to provide additional after session to help prepare for exams or when pupils are between schools by use of agency staff if schools cannot provide the tutor. By diverting the funds to employ tutors directly will provide a service which is more flexible, responsive and can feed directly into the PEP. Both tutors are employed through the Medical Needs Team with one being funded via the Pupil Premium and the other, a temporary 1 year post, being funded from the innovation fund. The Family Support Worker was already working to support the unaccompanied asylum seeking children (UASC) into education and has now been seconded into Social Care to

provide intensive support for these young people. The Learning Mentor has been employed on a temporary basis to work with children in school who are not progressing or are at risk of exclusion and who require support in addition to that which the school can provide.

The amount of support available from the Education Psychology Service has increased and will be reviewed further to see if this is sufficient to give advice and support to schools around children with challenging or complex behaviour.

Monthly staff supervisions are arranged for all staff to discuss their own wellbeing and workload and also to raise any cases that need input from the Virtual School Headteacher (VSH). In addition there are regular team meetings, often conducted via web-links to avoid unnecessary travel where the team can receive updates from Senior Managers and the performance of the team can be discussed. All staff is invited to identify training needs which will allow them to be more effective in their role or any specific are of interest.

During 16/17 all staff have been offered courses on attachment, emotion coaching and building resilience and individuals have attended courses on suicide prevention, improving literacy and care leaver support to access Higher Education. The VSH is a member of the NW VSH group and also of the National Association of VSH, (NAVSH) and through this network the Virtual School is able to keep abreast of current developments such as registration of Alternative Provision, Quality Assurance visits to schools and ePEPs.

The VSH has regular supervision with the Head of Service for Pupil Participation and completes a monthly scorecard for the Director of Education and Skills as a means to monitor progress. This gives a detailed breakdown of the performance of the VS and key indicators are extracted to be included on the Corporate Parent Scorecard.

The team are a very highly motivated and committed group of professionals who always act in the best interests of the child. During 2016/17 there has been a very low level of absence amongst the team with no long term sickness or stress.

Actions 2017/18

- **Monitor impact of additional staffing and caseload/wellbeing of staff**
- **Compile list of additional specialists who can be commissioned to provide specific support to individual children when needed, e.g. play therapist**

3.2 Funding

The Virtual School's main budget is the Pupil Premium Plus which is devolved to the Local Authority and is to be used as seen appropriate by the VSH as to best promote achievement and progress. The amount which is made available to the LA is £1900 per child in care as reported on the March return but the guidance makes clear that while it is expected that the majority of this is used for direct support of children, it does not need to be allocated equally as some children will need less than £1900 and some will need considerably more. The funding criteria also states that the Pupil Premium can be used to fund staff or central services such as training as long as they have a direct impact on improving the experience and outcomes for children.

Prior to April 2018, all children were allocated £1400 to support the actions identified in the PEP. The main use of this was to fund 1:1 or small group teaching, support to enhance social and emotional skills and purchase of specific resources. The remaining funds have been used to provide high cost support for children with particular needs. These include; attending high cost alternative provision for children without SEN who cannot manage mainstream school, providing a series of off-site support such as animal therapy or forest schools, having a weekly work placement to add variety and help prepare for the world or work or funding specialist support such as bereavement counselling. Significant funds were also allocated to schools and children to prepare for exams or to prepare for transition. In almost all cases this helped children to increase their skills and knowledge before the exams but always improved their preparation and confidence. The total allocation for 16/17 was £628,900 and the table below shows how this was used.

Summary use of Pupil Premium	Amount	Number of children
Basic allocation	£310,100	301
Additional payment	£194,700	97
Alternative provision	£62,700	26
Fermain places	£27,500	6
Attachment research projects	£33,000	15 schools

All school age children in care were allocated Pupil Premium (PP) once the PEP was returned to describe how this would be spent and in some cases funding was allocated to children outside this age range if the need was evident. For example a nursery child with the need for additional speech and language support or a post-16 young person not in education who wished to take up a work placement to gain skills and confidence. Some school age children did not have a basic allocation if the school felt it had all the resources needed, such as an independent special school which already receives a high level of funding or if the Virtual school was arranging and funding provision such as tuition or off-site learning.

The Virtual School also has an additional budget of the Personal Education Allowance but this was reduced in 2016/17 and has been removed since April 2017.

The table below shows the way in which this budget was allocated during the financial year 2016/17.

Summary Use of VSSF	Amount	Number of children
Educational Support/tutors	£12,000	28
Agency Provision	£28,600	21
Alternative Provision	£27,000	26
Training/venue	£11,800	150 staff
On-line learning	£20,000	20
Laptops/IT support	£15,900	35
Literacy support	£3,000	60
Resources/rewards	£5,800	

From April 2017 a new system has been introduced which does not include a standard allocation but asks schools to give a spending plan for each child. All requests are then considered by the advisor and the VSH and funding allocated accordingly. This will allow closer monitoring of the use of the money and allow the impact to be more easily seen. A second change since April has been that the Pupil Premium is now used to fund some staffing. Three existing posts are funded in this was, PEPs administration, Post-16 support and Educational Psychologist support and one of the new tutors who will work with Y6. The way that this affects the overall spending pattern and the impact on pupils will be analysed next year. Analysis of the previous spending suggest that these changes can be made while retaining the efficiency of the service and it is envisaged that the additional staffing will provide a quick response to children in difficulty and so enhance the service.

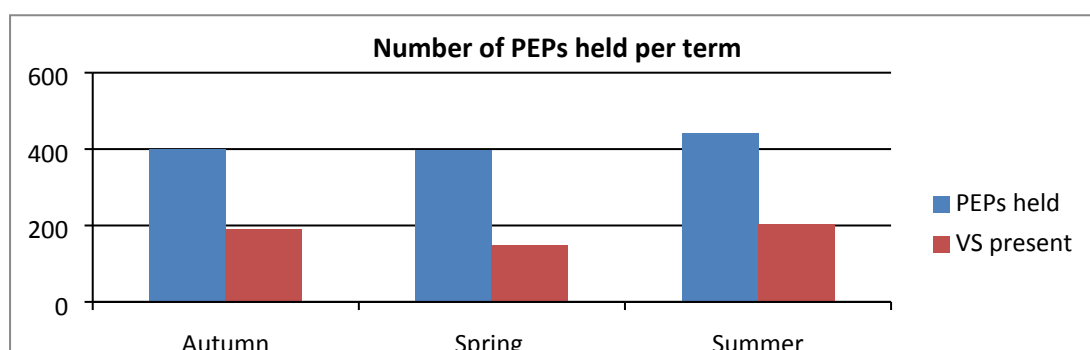
Actions 2017/18

- **Monitor the requests received and compare with pupil outcomes and progress**
- **Monitor educational psychology report and consider increase if needed**

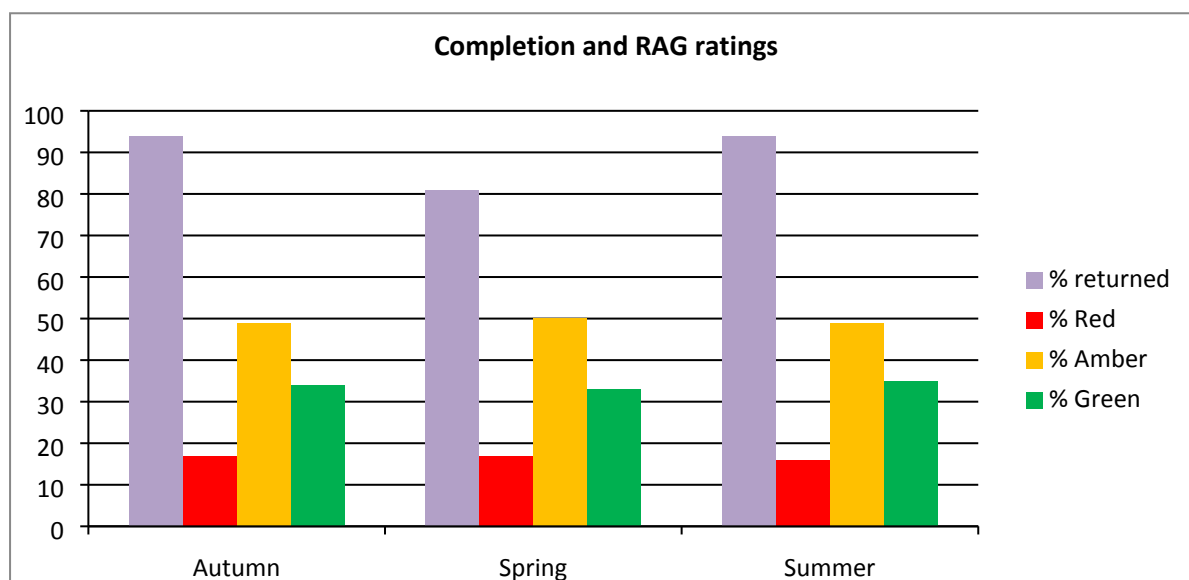
3.3 Personal Education Plans (PEPs)

The Virtual School attends all initial PEPs for children and young people between the ages of two and eighteen years old. For younger children the PEP is completed by Social Workers as part of a care planning or review meetings. Young people who become known to Social Care after the age of eighteen are not usually relevant to the service and so do not receive the same level of support as those in care but advice from the Virtual School is available on request.

During the initial PEP the Virtual School leads the meeting to demonstrate how the PEP should be completed and how to ensure that targets are SMART and appropriate. The Virtual School also takes responsibility for ensuring that a PEP is provided to the Social Worker in readiness for the initial review which is no longer than twenty days since coming into care. PEPs are reviewed each term with the education provider to taking a lead in these by reviewing the impact of the previous actions, update the PEP and return to the Virtual School. Support and training is available to assist schools, settings or colleges with the PEP process. Each case is then reviewed to establish its support needs. Those with the highest support needs are rated as RED, in which case the advisor will attend all PEPs and probably have more frequent contact with the child, carer, school and Social Worker. Cases rated as AMBER have slightly less contact with the advisor whilst those rated as GREEN are monitored with attendance at one PEP per year. The chart below shows the ratings over the year. The number of PEPs has risen to follow the growing number of children in care and the chart below shows the number of PEPs completed each term and the number attended by the VS staff.



This year there has been a drive to ensure that all PEPs are completed and loaded onto the child's case with a particular focus on those of school age where it is important to monitor progress. The chart below shows the percentage of PEPs for school age children which have been completed and the RAG ratings. The target for completion is 90% each term. The shortfall in spring was due to the short length of the term – PEPs held in March were not completed and returned within the term.



Analysis of the RAG ratings of the PEPs shows that while the ratio of each rating fluctuates slightly during the year most cases are rated as amber or green. The most frequent reason for cases being rated as amber is that attainment is below age expected which will include most children with special needs. The proportion of cases rated at each support level has remained fairly constant over the year and is similar to that of previous years. However, the rising number of children in care means that the actual number of RED cases who require high levels of support have increased from seventy to eighty-two. This group included those who were at risk of exclusion or who required intensive support from the VS to plan and oversee their provision planning.

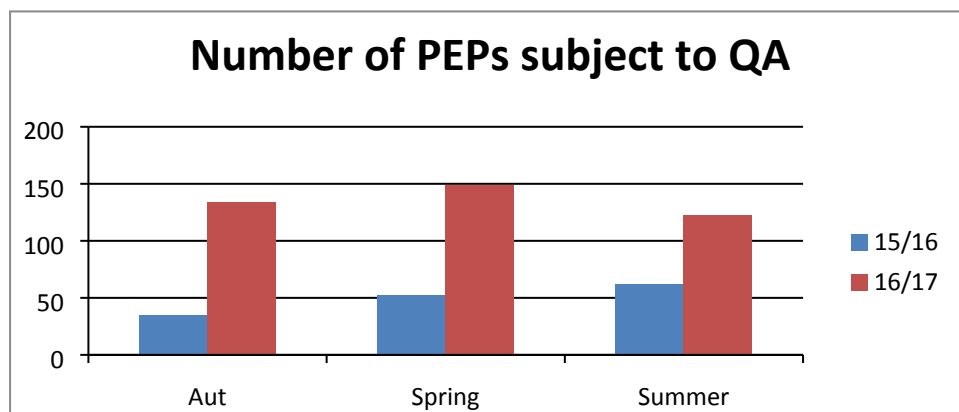
Although the Virtual School Advisor does not attend all PEP meetings, they often do so for the more complex cases and in these situations can be a crucial and consistent link for the child. For example when a child is awaiting a new school or cannot attend school due to mental health issues the advisor will visit the child at home and make sure they have access to some tuition and learning and that this, where possible, includes a chance to include some social interaction.

The quality of the PEP is the joint responsibility of the local authority that looked after the child and the school. Social workers, carers, VSHs, Designated Teachers and, as appropriate, other relevant professionals will need to work closely together. Social Workers have been asked to prioritise attendance at PEP meetings so that they gain essential information about their child. As well as updates on their attainment and progress this should include discussion of their attitude, emotional state, friendships etc. If a child has a statement or Education Health and Care Plan (EHCP) then one of PEP meetings is run alongside the annual SEN review. This means that targets in the EHCP can be addressed through the PEP and that Social Workers and carers have the chance to review the impact of the SEN support for the child.

Since June 2017 the Virtual School has assumed responsibility for loading the PEPs onto Liquid Logic. This has speeded up the time in which this part of the child's record is completed and will allow more accurate recording of PEP completion.

There is a rigorous Quality Assurance (QA) process which has been developed jointly by the Virtual School and the Designated Teachers. This was reviewed in August 2016 and the threshold to be rated as good was raised to include prompt return and very clear details on the interventions and how these will be monitored.

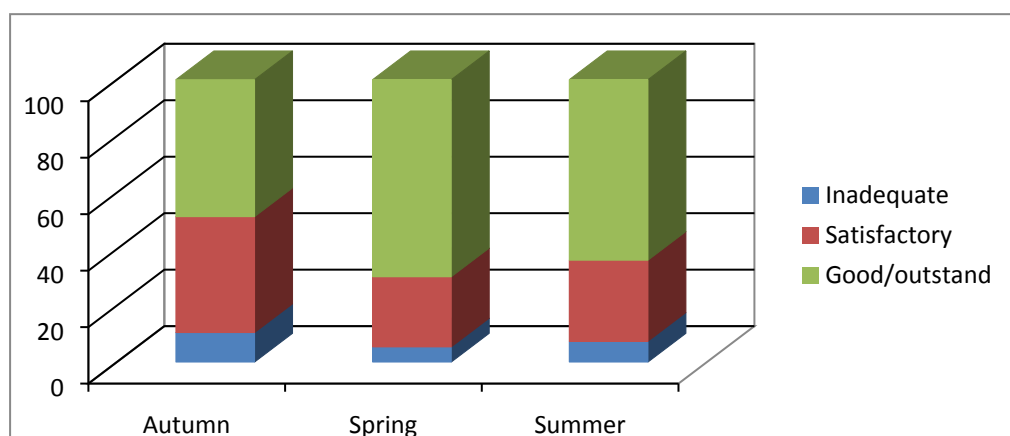
The overall number of PEPs which have need quality assured has increased from 149 to 405, which mainly comprise those sent in by schools which the VS advisor did not attend.



PEPs for all ages are subject to QA and the table below shows the number of each stage that were analysed through the year.

	Pre-school	Primary	Secondary	Post-16
Autumn	1	48	80	5
Spring	3	57	75	14
Summer	1	26	83	12

The chart below show the judgements of the PEPs which were quality assured at the end of each term.



Main reasons for PEPs being judged as satisfactory and not good were

- Late returns – requested in 5 working days
- Lack of timescales or monitoring arrangements for targets
- No narrative given to share views of those attending or other teachers

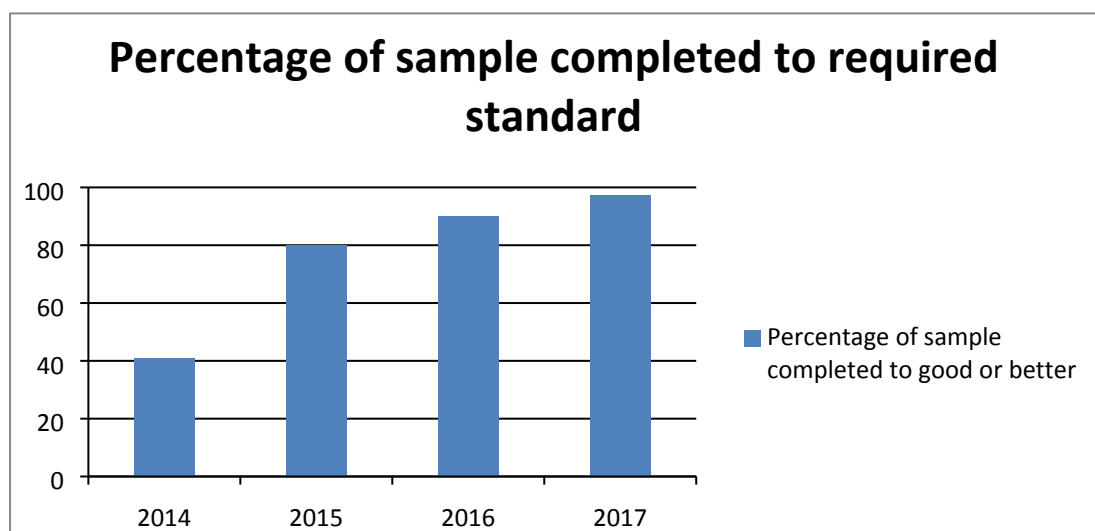
PEPs judged as inadequate had significant amounts of information missing or when a previous PEP had been used as a template and not all the information had been updated. In both these cases the PEPs were returned to the school.

In addition to the continual QA process the VSH has carried out sample moderation exercises on 44 PEPs. Six elements were reviewed. The results are shown in the tables. Child participation was included this year. All children are invited to attend the PEP or to make their views known before via a 'My Voice' form which can be completed with a teacher or carer and brought to the meeting to give the child's views.

PEP sections	Good	Adequate	Inadequate
All care information is provided	83	13	4
All school information is provided	83	17	0
Evidence that child has been invited to contribute	88	13	0
School has clear overview of child's needs	83	17	0
Targets and interventions are SMART and suitable	88	4	8
Use of Pupil Premium stated clearly	70	17	4
Overall Judgement	95	2.5	2.5

Changes over time

Even with the increased level of demand this shows that there continues to be an improvement in the number of PEPs meeting the required standards which implies that there is an ongoing increase in the understanding and therefore appropriate support offered to our children in school.



Development of an ePEP

Electronic PEPs (ePEPs) have the potential to make the PEP process easier for schools and more secure by removing the need for documents to be transferred between the Virtual School and the child's school. The Virtual School have looked at several commercial products and evaluated these and also worked with the Cheshire East Project Development Team to explore the feasibility of an ePEP on Liquid Logic. The latter option has been chosen as it will allow ePEPs to be immediately incorporated into the child's records and avoids the risks associated with data being held on an external website. It also allows for the product to be developed and modified exactly as needed rather than an 'off the shelf' product and, by being an in house product, gives good value for money. Development work has been going on since Dec 2016 and the first pilot schools began using the system from July 2017 with the intention being to bring on most schools before July 2018.

Actions 2017/18

- **Provide additional support for schools where PEPs are below 'good'**
- **Oversee roll-out of ePEP to Cheshire East schools**

3.4 School Admissions

The Virtual School are responsible for ensuring that every child has access to suitable education. Where possible and appropriate school moves will be avoided as it has been recognised that school can be a consistent and stabilising feature of a child's life. If a move is essential then the following principles apply:

- Educational provision should mean a full-time place.
- Schools judged by Ofsted to be 'good' or 'outstanding' should be prioritised for looked after children in need of a new school.
- The choice of education setting should be based on what any good parent would want for their child. It should be based on evidence that the setting can meet the educational needs of the child and help them make the maximum progress.
- The child's wishes and feelings should be taken into account and the suitability of the education setting tested by arranging an informal visit with the child.

Children move schools for a number of reasons which include

- Change of foster placement which means that continuing at current school is unrealistic
- Carers move house which means that continuing at current school is unrealistic
- Change to live with adopters
- Change of school if proximity to social contacts/family mean are having a strong negative impact on the child's progress and learning
- Change when school can no longer meet needs (SEN or non-SEN)

Cared for children are given the highest priority under school admission arrangements and the usual fair access protocols do not apply. The Virtual School works with headteachers to make sure that any admission is made as swiftly as possible. Where schools are reluctant to offer places the Virtual School will consider making appeals or directing schools to admit. In 2016-17 there were no appeals made and no directions needed. All children for whom a place in primary school was requested were

allocated a place swiftly. Secondary applications to mainstream are usually slower to process with schools requesting additional information and meetings. Places were secured for all applicants except one where the child was returning to Cheshire East and required alternative provision which was not locally available and the mainstream school nearby was unwilling to accept on roll. This child continued to receive education and has now been found a place at another provider. The Virtual School works with all schools who are admitting a child to offer support, with funding if needed to ensure a smooth integration.

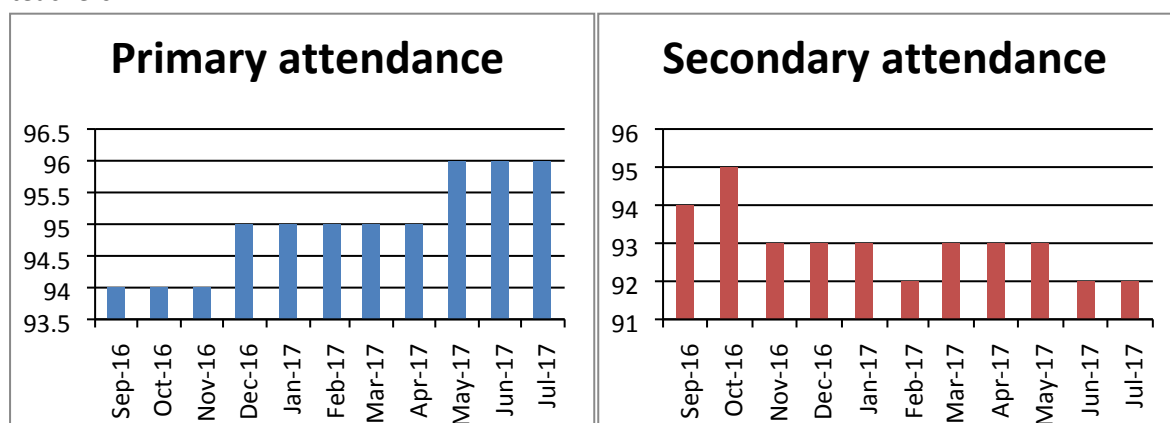
In 2016/17 there were forty-nine children started a new school during the academic year. These included two children who had been home educated prior to becoming cared for and five who were moved by SEN following the review or initiation of an EHCP. All the primary moves were made smoothly and swiftly but there were delays and difficulties in securing places for four secondary transfers, two inside Cheshire East and two outside.

Actions 2017/18

- **Produce protocol for admissions of children moving into Cheshire East**
- **Work with Special Educational Needs Team to produce protocol to improve admission of children with SEN to schools inside and outside of Cheshire East**

3.5 Attendance

The Virtual School monitors and tracks the attendance and progress of all cared for children via a commissioned service and works with carers and Social Care staff as well as education providers to make sure effective plans are in place and carried out. Although there have been some primary children with reduced timetables due to medical or emotional needs the overall attendance in this age range is good and has risen during the year. A frequent cause of absence is when children are placed for adoption and are given a time to settle into their new family although we encourage carers to make contact with school as quickly as possible and to make visits and contact with the teachers.



Attendance in secondary school started well but has declined during the year. While there is an inevitable reduction in June and July due to exams this level of absence and number of secondary pupils classed as Persistent Absentees (PA) has risen from 8.8% to 9.3% which equates to thirty four children and is the same as than the overall PA rate for England in 2016 rate but below the 10% rate of statistical neighbours. Fifteen of these had attendance very close to the threshold, (87%-90%)

whilst most of the others were children who had been in crisis during the year and had changed placement and/or school and may have had time between schools. Six children in this group started with very low attendance and refused to attend school but were supported and ended the year with regular attendance of 75-100% and all indicators showing that this will continue to improve.

The overall rate for all children in care was 94% but this includes the Y11 summer term data and so the target for 2017/18 will be set at 94% for secondary schools and raised to 96% for primary.

Actions 2017/18

- **Monitor attendance by school type to allow greater targeting of support**

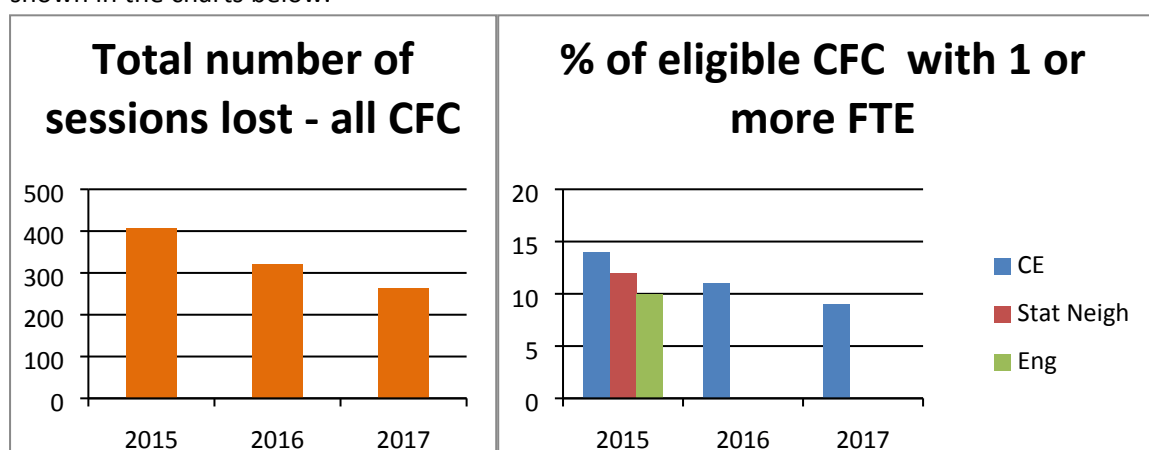
3.6 Reducing exclusions

The Virtual School has a duty to work with Headteachers to try and avoid excluding a cared for child and to make sure that he have the support in place to thrive and make progress. During 2016/7 the Virtual School has been quick in its response to exclusion or threat of exclusions so that a joint plan for the child can be implemented which identifies any key triggers and also instances when the inappropriate behaviour does not occur and these strengths can be build on.

If an exclusion was unavoidable then there were similar meeting held afterwards to try and avoid any further instances.

The Virtual School has commissioned places at the Fermain Alternatvie Provision in Macclesfield and this has contributed to the reduction in repeat exclusions and total number of session lost. The Fermain staff have been trained in how to support children with insecure attachment and Pupil premium funding has been used to help provide a mentor/key worker to support our children.

Regular reports of the total numbers of sessions lost and the number of children invovled are reported, which include all children in care. The national data published refers only to 'eligible' children who have been in care for one year or more as of 31st March and attend maintained schools or academies. The latest published data for this refers to 2015. The details and changes are shown in the charts below.



Actions 2017/18

- **Work with schools to identify pupils at risk of exclusion and put in support as preventative measure**

3.7 Participation of young people

The Virtual School recognises that young people are at the heart of all its work and that to be effective in helping young people to succeed in education, their wishes and feelings must be listened to.

All young people are invited to contribute to their PEPs, either by attending the meeting or by sharing their thoughts on the 'My Voice' form which can be presented at the meeting on their behalf. Action plans are influenced by this input in a variety of ways such as:

- Deciding what subjects to have tutoring in and when/where this takes place,
- Determining the order in which topics are addressed in revision,
- Agreeing targets for improvement in attendance or behaviour,
- Identifying any particular issues in school which show a staff training need
- Deciding whether additional adult support, eg mentor is required.

The Children's Society set up a network of participation champions and the Virtual School has been consistently included in this although the focus this year has been on transferring this work into the Youth Support Service. This network has looked at how participation should be practical and add value to the young people. As a result this year a care leavers football team was set up to allow care leavers a chance to maintain contact with support in an informal way. The Virtual School contributed to the costs of this and a member of staff took part in arranging and leading the sessions.

The voice of young people is included in staff appointments and two students have participated on interview panels this year. In both cases they were involved in planning the questions and identifying the desirable qualities and had an equal say with other panel members when the decisions were made.

Actions 2017/18

- **Encourage young people to chair their own PEP meetings**

3.8 Partnership working

Partnership working is crucial to the effectiveness of the Virtual School and we recognise our role in part of a team with a child at the heart. Our closest working partners are Social Workers with whom we have much formal and informal contact. Some of the VS team are based at Cledford alongside the PTC team while others regularly work there and so catch up on cases. The VSH, together with the Group Manager for the Permanence and Through Care Team has set up a bi-monthly Children of Concern meeting where cases can be discussed with colleagues from Fostering, Commissioning and Youth Offending and a combined plan put into place. The PEPs are the shared responsibility of the school and the Social Worker and support is given to both to make sure these are in place and effective. Social Worker attendance at PEP meetings is an expectation and input at team meetings has helped to increase their awareness of special educational needs and the use of Pupil Premium.

The other team who are closely linked to Virtual School are Special Education and Disabilities Team (SEND). Both teams are located in Macclesfield Town Hall and this means that regular conversations can take place on cases which helps to avoid delay and build good relationships. The VSH is a member of the SEN Assessment and Moderation Panel and the Head of Service/Service Manager have agreements in place which ensure that the Virtual School is involved in any cared for children

cases who also have special educational needs and also offer advice for any SEN issues which arise for children placed outside of Cheshire East.

The Virtual School also works with the Independent Reviewing Officers and foster carers, providing training and support as needed. Through membership of Education, Complex Needs, Headteacher and Virtual School Head groups the Virtual School is able to remain in touch with all current events relating to cared for children and also to make sure that other teams are aware of matters which influence their area.

Actions 2017/18

- **Implement tracking system for SEN pupils to reduce delays**
- **Work with Social Care staff to review promotion and attendance of foster carers at training**

3.9 Training Provision

The statutory duties of the Virtual School include providing training on education issues relating to children in care and Headteachers and Governing Bodies are required to appoint a Designated Teacher to champion the cause of cared for children and also to ensure that this teacher has access to training. In CE this is provided in a variety of ways

- a) Update/network meetings open to all schools and led by the Virtual school
- b) Bespoke training in one school which can be around a particular child or for all staff
- c) Arranging outside speakers to provide 'expert' input.

The network event was held in June 17 and was attended by almost 80 staff. This provided information and updates on development of the ePEP, allocation of Pupil Premium and developing a self assessment tool for schools to assess their provision for cared for children and the progress they make. Feedback was positive with delegates stating that the sessions were useful and would help them to better support children in school.

Bespoke training has been arranged for more than fifteen schools where additional help was requested. In some cases this was for new Designated Teachers who wanted to become familiar with the PEP process while for others it was when pupils were exhibiting behaviours which put them at risk of exclusions or was impacting on them settling to work and make progress. All Virtual School staff are able to lead this training which also includes working with colleges and training providers.

Attachment Awareness Project

The Conference in 2016 was focussed on Attachment Awareness and was led by Kate Cairns Associates who are recognised leading experts in this area. As well as a focus for the Virtual School the Cheshire East Primary Heads recognised that increased knowledge in this area would be beneficial and so the programme was planned in partnership. Two 'ignition' meetings were held in Autumn 2016 to which all schools were invited and then schools were invited to take this further in their schools by attending further training and by designing and implementing a piece of action research based around attachment. The training was on emotion coaching and resilience building. Twelve schools took up this challenge and have made changes in their schools based on their new

understanding. In autumn 2017 schools are feeding back on their projects and will present at the 2107 Conference but early indications are that this is having a positive impact.

The Virtual School also contributes to the Foster Carer training programme. Sessions have been planned on curriculum changes, preparing for tests, SEN and post-16 progression but uptake, like many foster carer training sessions attendance has been poor. This includes events planned for carers and children such as careers fairs and revision session. Training is not mandatory for carers and there is a concern that the lack of engagement could indicate that carers do not demonstrate high educational aspirations and commitment for their children.

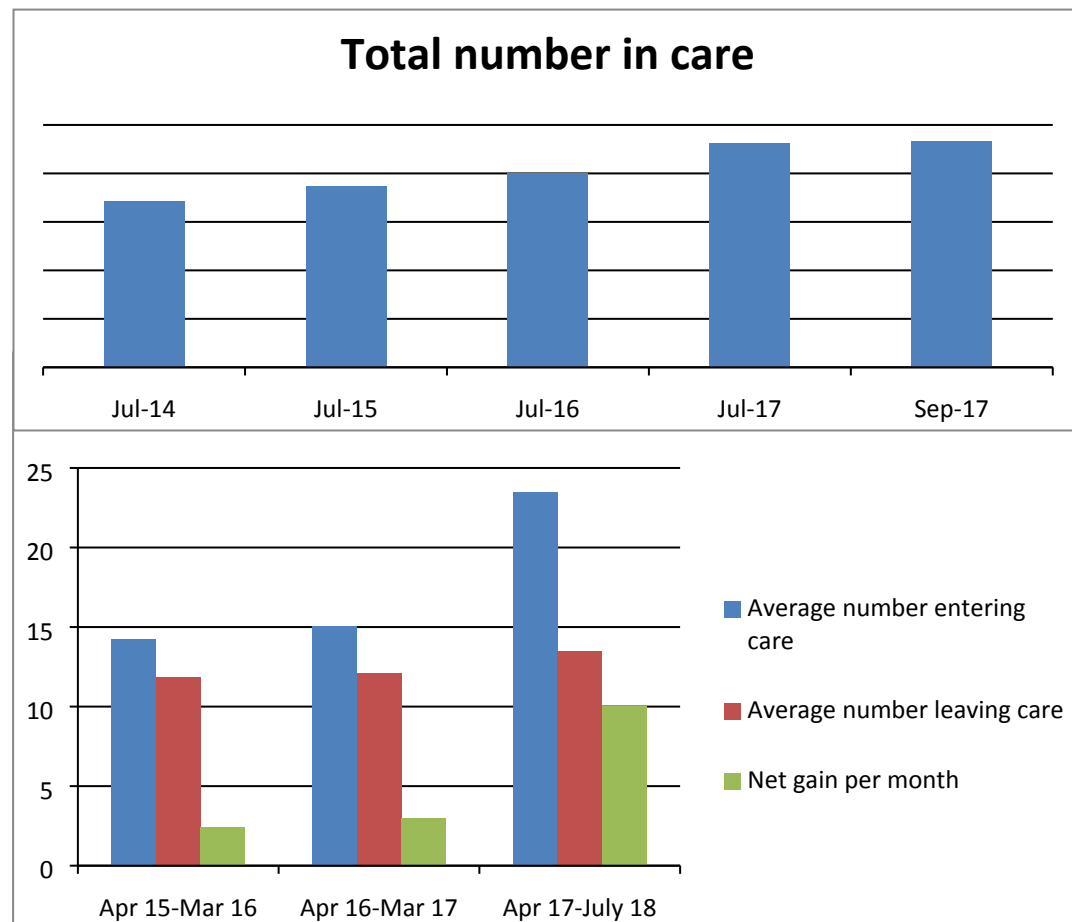
Actions 2017/18

- **Arrange regional as well as local training**
- **Improve attachment awareness in high schools and support action research projects**

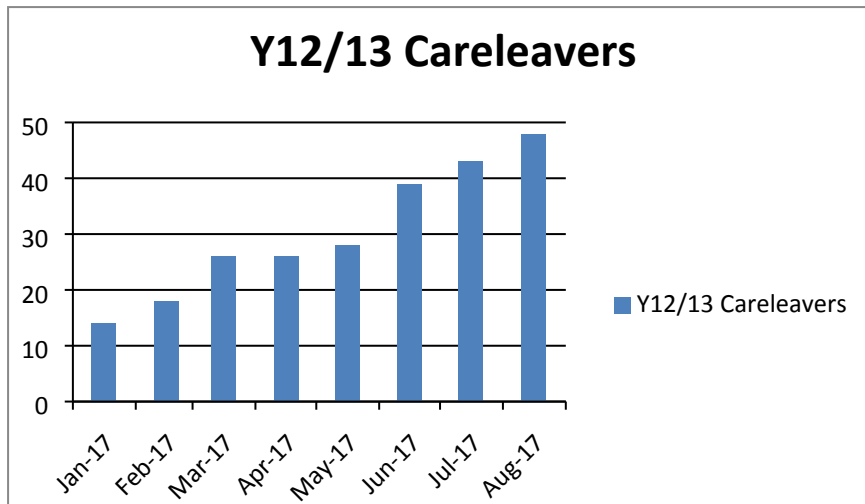
4 Contextual breakdown of Virtual School cohort

4.1 Population breakdown

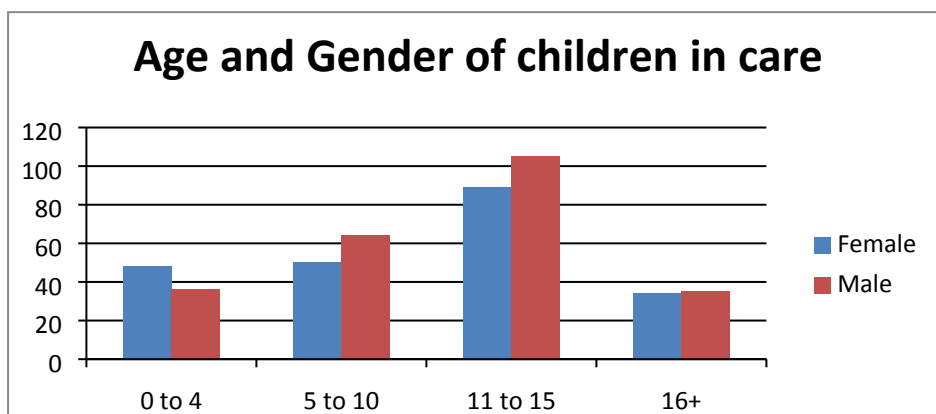
The Virtual School supports all children in care, including those who become cared for as a result of nights away from home due to disabilities. Over the last two years the number of children in care has risen across England but the rate of increase has been greater in Cheshire East than that nationally or in statistical neighbour areas. This is shown in the chart below along with the average change per month which has shown a significant increase since March 2017.



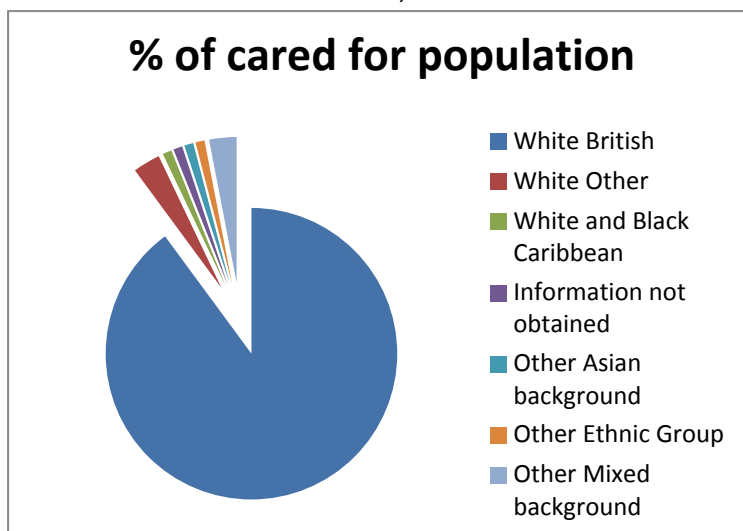
Although young people of any age can access support from the Virtual School the main focus is for those who are expected to be in education or training and so covers the time to the end of the school year when they become eighteen years old. During the two years post Y11 young people moved from being cared for to becoming semi- independent care leavers and the chart below shows the increase in this group over the year. This group also includes unaccompanied asylum seeking children who have been accommodated by Cheshire East. Although only a small group, these young people require intensive support to help them to become familiar with their new life and to allow them to access education, in some cases for the first time and they are supported in this by the Virtual School support worker currently seconded to the Social Care Leaving Care team.



Overall the number of children and young people supported by the school rose from 425 in Sept 2016 to 512 in July 2017, an increase of 20%. All new cases have been supported by the Advisors with no additional staffing but the capacity to support all children effectively is being monitored. The number of boys in care is slightly higher than girls overall, but the chart below shows how this varies with through the various age ranges.

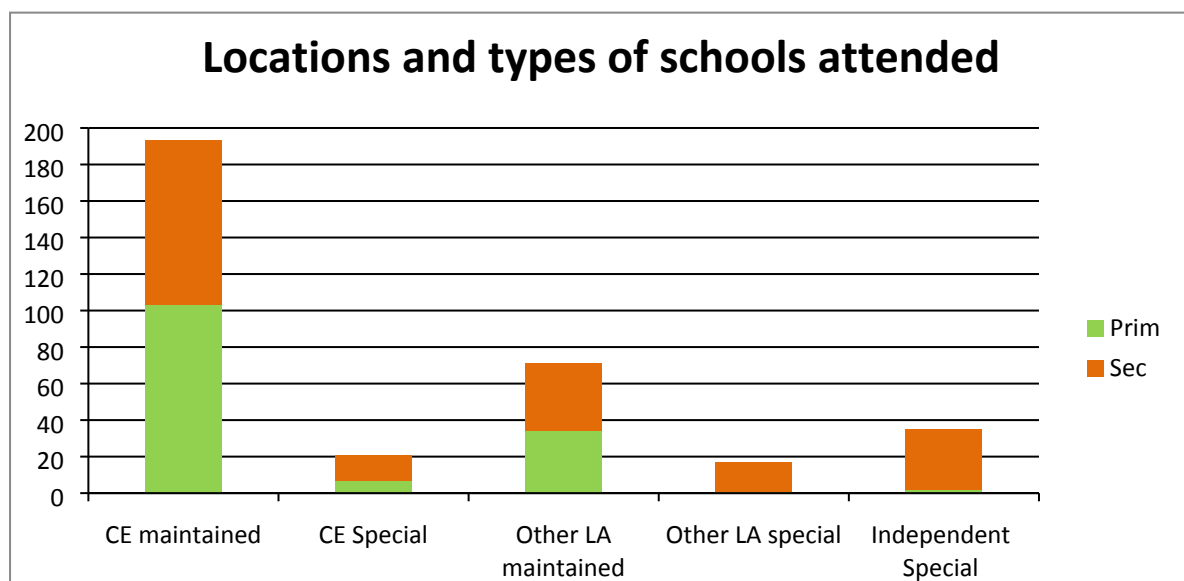


Although there are cared for children from a range of ethnic backgrounds, the vast majority of children in care are White British, as shown in the chart below.

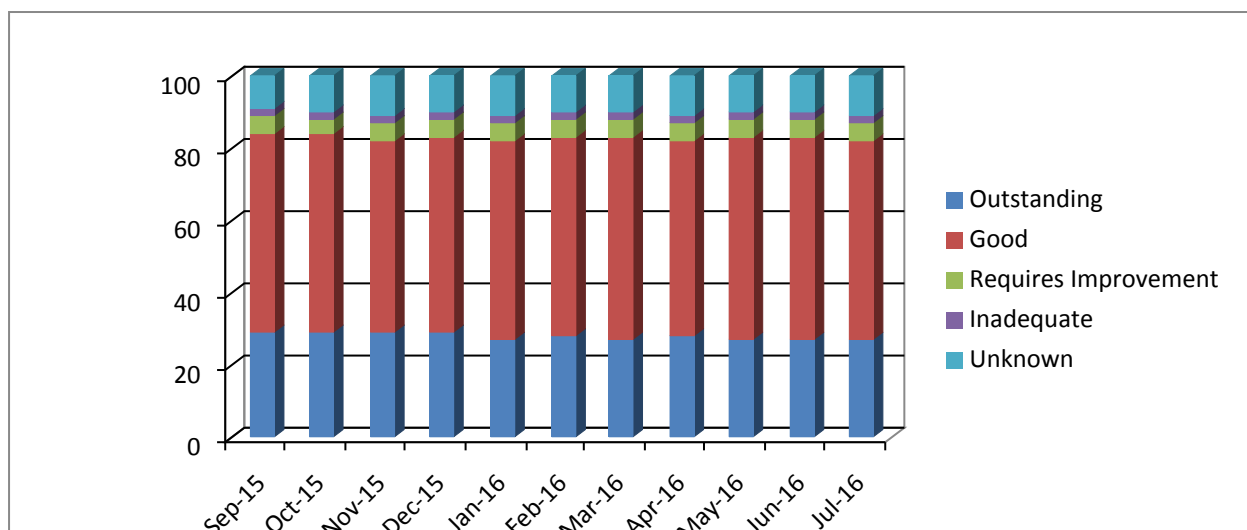


4.2 Schools Location

Whenever possible children will continue to attend the same school when they enter care to provide stability and continuity. This means that the majority of children attend schools in Cheshire East. Where children are placed with long term carers who live outside Cheshire East and when the continuation of a daily journey to their previous school is unreasonable then another school will be found and the admissions process previously outlined instigated. Children with special educational needs are placed by the SEN department of the local authority who administer their plan. This is usually the borough in which the child lives and the child's needs will be assessed and suitable education found. For some SEN children living in Cheshire East there is no suitable or available provision within the borough and so these children travel to neighbouring boroughs to attend school. The charts below show the number of children education in each location in each type of school.



Wherever possible, the principles for placing children in schools rated by Ofsted as 'good' or 'outstanding' are adhered to. Instances when this is not the case may be when a child is already at a school when it's rating falls, and a subsequent risk assessment suggests that moving schools would have a greater negative impact than remaining or when a school rated as 'requires improvement' or 'inadequate' offers the best local and personal provision. The number of schools in each category per month is shown below.

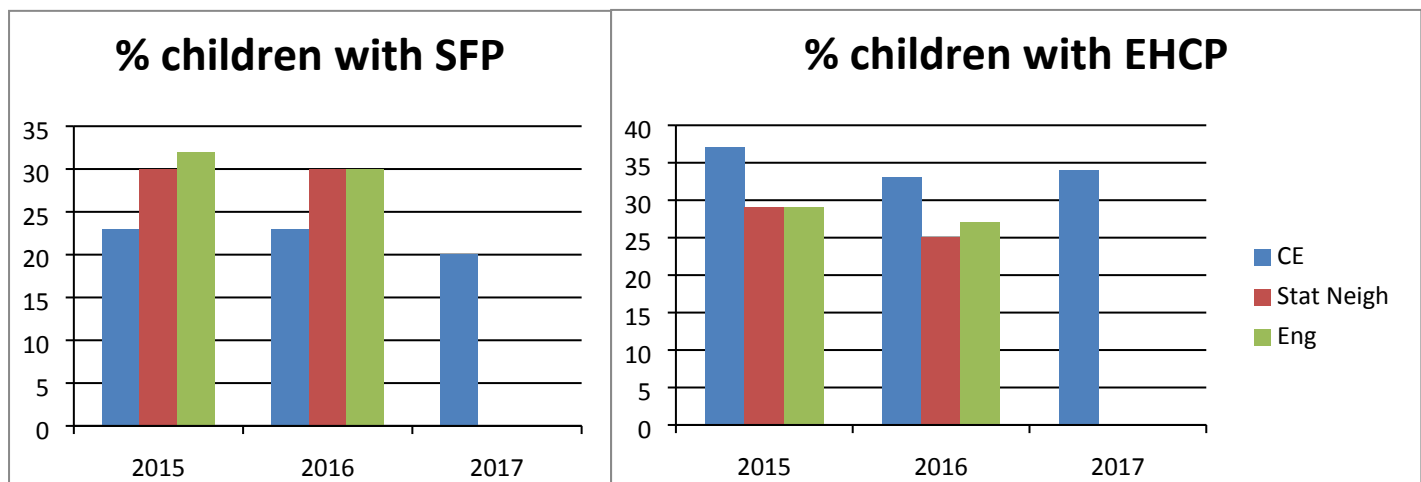


In 2016 there were seven children attending schools rated as inadequate. Six were at a new school but the final inspection of the school under its previous name found it inadequate and so that remained as its rating, although the new leadership and management are now in place. The other child was a Y11 pupil at a special school for the deaf who entered care in spring 2017 just before an inspection and when it was considered inappropriate to move schools.

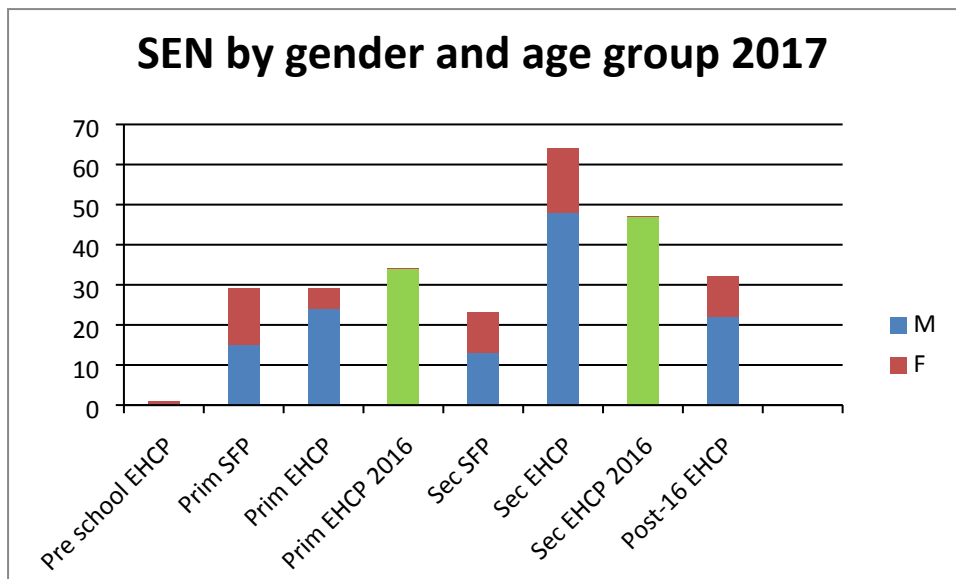
Schools have an unknown rating if they are academy converters when the previous reports are removed from the Ofsted system or new schools which are not straightforward conversions from a previous school and so had no previous report.

4.3 Special Educational Needs

Children with Special Educational Needs (SEN) are those deemed to require support in school which is different from and/or additional to that available to all children through good quality teaching. This can be to support cognition, learning, physical or social/emotional needs. Once a need has been identified the school will try to support 'in house' and will then gather evidence to request further support if necessary. Children will be issued with either a school focus plan (SFP) for in school support or an Education Health and Care Plan (EHCP) when the LA has agreed to assess and has provided additional support either in school or by sourcing a place at a special school. The overall level of SEN has fallen slightly this year the percentage of children requiring the support of an EHCP remains above that for statistical neighbours and for England while the rate for SFP is below these comparators. This is shown in the charts below for children in care more than one year.



EHCP. These children are often very complex and require intensive support from their advisor, which is often compounded as they might be placed outside of area necessitating considerable time and resources spent on traveling to meetings. The number of cases of SFP and EHCP for all children supported in 2016 is shown below together with the comparative data for ECHP's in 2016.



The Virtual School works establishes links with SEN teams in all areas to ensure that children are in the correct school and making progress as quickly as possible. Advisors are involved if an application for a needs assessment is made and will be contacted by the SEN team to request any contextual data which may impact on the decision. If a child has a plan then school are asked to review the EHCP at a PEP meeting so that the EHCP targets can be reflected in the PEP although these are not the same as the PEP actions are usually quite short/medium term and specific while the EHCP outcomes are more generalised or long term.

If a school or carer feel that needs are not being met the Virtual School will work with school to ensure that due process is followed and all necessary documents are submitted to the relevant SEN team. There can be a delay when finding a new school for an SEN child, particularly if placed out of Cheshire East while consultations take place and funding agreements are made. Draft protocols to address this have been drawn up and it is the intention that these are finalised before December 2017.

Fourty three children with EHCP attend Special Schools or Independent Special Schools outside of Cheshire East and twelve attend mainstream schools outside the CE borough. In most cases the SEN team in the authority where the child lives administers this EHCP so that all local knowledge can be used regarding transition and school provision. These children are often the most complex and so incidents of school moves are higher than in the general population. This can lead to a delay in finding a new school while files are moved and agreement is made between the SEN teams involved regarding the nature of the education to be sought and the funding arrangements. Plans are in place to streamline this process so that transfers are made swiftly and children can resume learning.

4.4 Alternative Provision (AP)

For some children, attendance at a mainstream or special school is not possible or appropriate and so they receive an alternative curriculum. In most cases this is arranged and monitored by the child's school and makes up part of their curriculum, perhaps 1 or 2 days per week for a fixed term. Examples of provision attended during include Forest Schools to develop self confidence and

following instructions, animal therapy to gain emotional regulation and extended work placements to increase employability skills and ability to succeed in an adult environment. Such placements are arranged at the PEP and are funded by the Virtual School but managed and overseen by school. In some cases children may be having more severe difficulties and full time alternative provision is required. These are cases when the child's anxiety and behaviour mean that permanent exclusion is likely or when there have been several cases of repeated exclusion. The Virtual School Advisor will be heavily involved in such cases, identifying suitable places and making referrals and visiting the provider to ensure they are regulated to provide a safe, supportive environment and are focussed on achievement and progress. Alternative Provision is also sometimes the best option for pupils moving into Cheshire East, particularly those in Y10 or Y11 who have previously had would have difficulty in finding and settling into a new school.

In 2016 there were eleven children in such places, seven in Y10 and four in Y11, Of these, eight were with providers who offer a full curriculum, including GCSE's and the pupils were settled, making progress and engaged with the number of exclusions falling dramatically. Before starting AP the average number of exclusions for these pupils was 3 episodes per year but while attending AP this fell to 1 episode while the average attendance rose from 77% to 83%. All providers are either independent school registered in their own right or providers listed in the Cheshire East Alternative Providers Directory and have to meet the safety and safeguarding standards required to be in the directory. Providers are asked to give regular reports on the child's progress and to contribute to or attend meetings about the children.

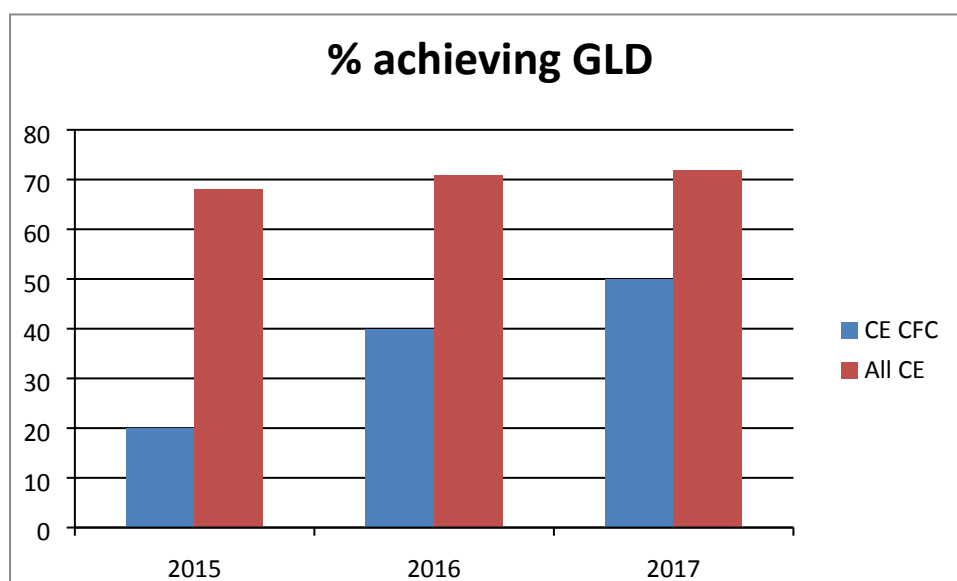
In 2016/2017 The Virtual School worked closely with the Fermain Alternative Provision Academy in Macclesfield. This is an independent provision run by the Youth Federation and where places are commissioned by Cheshire East with schools paying a 'top-up' when a child is placed there. The Virtual School purchased five places and provided training to staff in attachment issues and how to support children with traumatic backgrounds in their lessons. This was found to be effective and was then supplemented by part funding of a mentor to be the key worker for cared for children. This has had a dramatic effect on the attendance and engagement of children at the Fermain and has allowed the most vulnerable to feel safe, welcome and listened to so that they can make progress in their learning. As a result one pupil with a previous attendance of 64% increased this to 92 % while another with regular exclusions before starting at Fermain has had none since and has been identified as a star pupil.

5. Educational Outcomes

Children are supported in school from the time they enter care although for some this is only a transitory time and they may return home quite quickly. Therefore the data captured and reported at local and national level relates to those children who had been in care for at least twelve months.

5.1 End of Reception- age 5 years

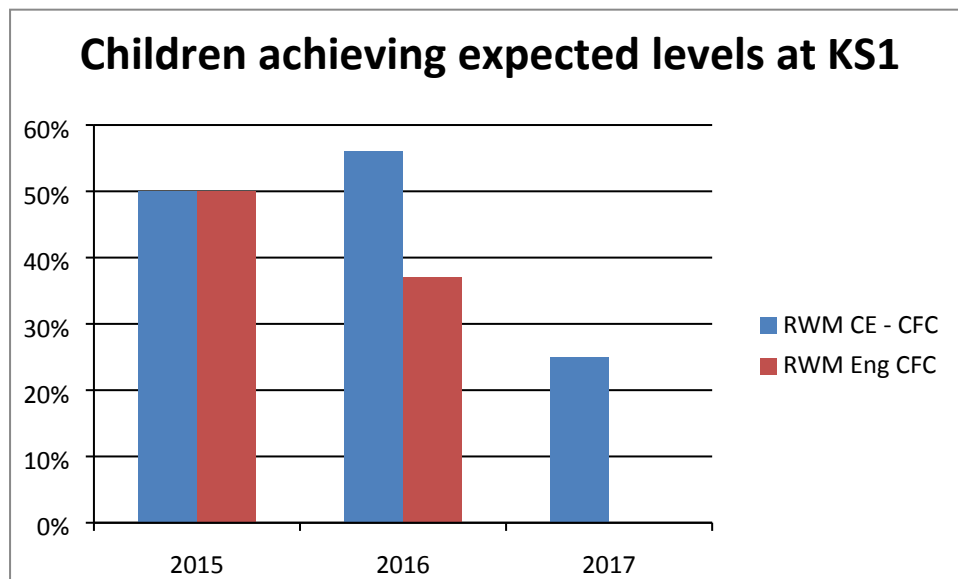
Children are assessed in fifteen skill areas at the end of their Reception year. Those who are assessed as reaching the expected level in the key twelve areas are deemed to have reached a 'Good Level of Development' (GLD). These areas include speech and language, social and emotional development as well as basic literacy and numeracy. Cared for children of this age have often suffered neglect and language skills are frequently under-developed, which in turn inhibits speech and language, communication and literacy skills. All children are entitled to free nursery places in the term following their second birthday and the Virtual School Early Years Advisor will work with the carer and Social Worker from this time to encourage them to take up this offer. In 2017 there were eight children who completed their reception year and the data is shown below.



5.2 End of Key Stage 1 – age 7

There were only four children in this group in 2017 so statistical analysis should be treated with caution. This is mainly due to the number of children who move to adoption during KS1 and so leave care before completing these tests. Two children did not take the tests; one achieved the expected standard in all areas and the fourth pupil did not. This child had attended three primary schools due to changes in foster carers and only moved to the current school in April 2017. They have received lots of support, both academic and social and has been reported to be making progress. The children who did not take the tests both have SEN. One has required a very high level of support to be able to function in school this year which has been funded by the Virtual School and the other moved schools in Dec 2016 to be with adopting parents. This child has had lots of support to help them settle

and this has been reported as making progress but still operating below the level of the tests. All the children had attendance above 90% with an average of 96%

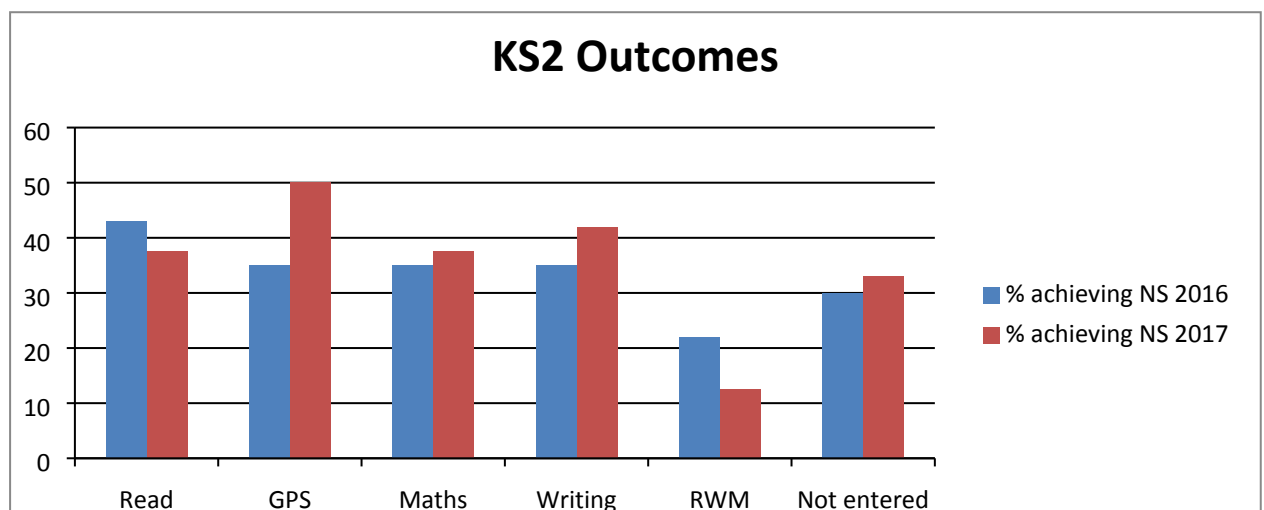


5.3 Key Stage 2 – age 11

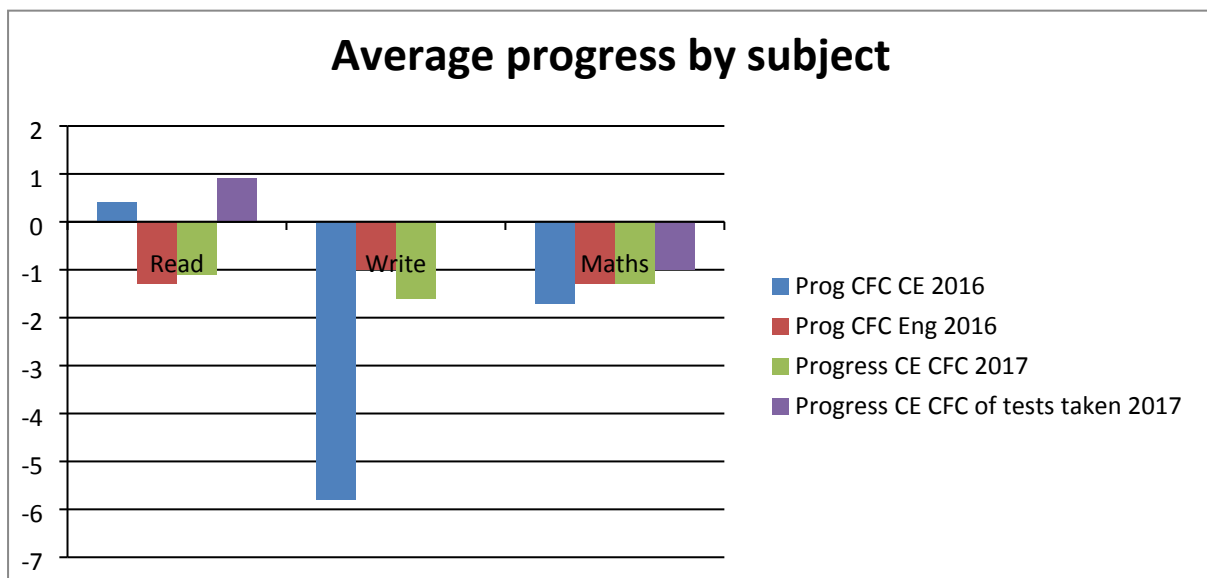
Twenty four children completed Y6 and were therefore eligible to take the assessments. Eight children (33%) did not complete the tests as they were either assessed to be working below the level of the tests or it was felt that the test would prove to cause a higher level of anxiety than could be managed. The level of children across Cheshire East who did not complete the tests was 2%. All these children have an EHCP and so have additional learning needs as well as any anxiety that results from their experience of trauma or past life.

Children are assessed in reading (R), writing (W) grammar punctuation and spelling (GPS) and maths (M) and have to complete a total of six tests covering four hours which take place on set days and times in exam conditions, although schools are asked to help children prepare and use staff and rooms flexibly to reduce exam stress.

The percentage of children gaining the national standard (NS) for each of the tests for 2017 is shown below.

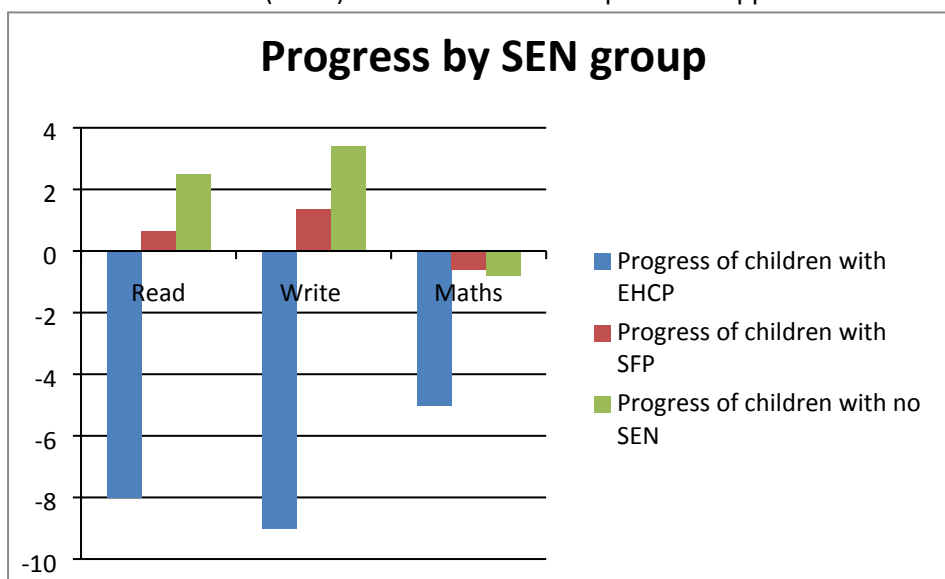


Children's progress in each subject can be measured by comparing their expected scores based on KS1 results and the actual results in Y6. If a child does not complete the tests but has a result from KS1 then they are automatically given a high negative progress rating. The overall progress data is shown below, together with the data from 2016 and the progress for just those children who completed both sets of tests. This shows that although still deficit, the progress has improved for writing and maths.



Special Educational Needs

The level of SEN within the cohort is similar to last year although the number not taking the tests is slightly higher. The chart below shows the progress made in each subject by children who had non SEN, a school focus plan (SFP) where their additional needs can be met within school or an Education Health and Care Plan (EHCP) where additional or specialist support is needed.



Only one of the children with EHCP completed the tests and so the rest were deemed to have made significantly negative progress, although this may not be a reflection of their actual ability. Only two children attend special schools with others being supported to remain in a mainstream setting. This is the second year of the new curriculum and assessment and so comparisons can only be made with 2016. Although there was an increase in the percentage gaining the expected standard in three of the four areas the number reaching this in reading writing and maths has fallen, which is disappointing for the pupils and their teachers as well as for those in the Virtual School who have been supporting them.

Five children met the expected standard in three of the four areas and fell no more than four marks for the threshold for the fourth area. Three did not achieve in maths, one in reading and one in writing. All these pupils have had additional support via 1:1 teaching and access to additional exam preparation. Four of these children attended Cheshire East schools, all of which are known to give good support to cared for children and which have shown an improvement this year in their overall KS2 outcomes although the school attended by the pupil who did not meet the reading standard had an 4% fall in this area overall.

All the children were offered additional tuition from January and this was put into place for 13 children. This included all the children who gained the expected levels in RWM and increased the confidence of children even when they did not quite reach the standard score in particular subjects. A Kindle Club was set up to promote reading in children who were identified as needing support in this subject. All the children who took up this offer gained the expected level in reading although one boy did not wish to participate and he gained the expected level in all subject except reading.

Attendance for the group has been very good with 79% having an attendance over 98% and an average attendance of 96%. The length of time in care ranged from eleven years to just over one year. During their current time in care most children have attended just one primary school although two have attended five schools. The majority of children have had two or three placements although four have had just one and four have had five or more. The SDQ score (Strengths and difficulties questionnaire) ranged from five to thirty six with fourteen having a score above fifteen, suggesting that professional support such as Children and Families Support Team or CAMHS be considered as well as in school support such as Learning Mentors.

Actions have already begun to improve outcomes for 2018 which include monitoring and support by the newly appointed VS tutor, provide tablet based revision and progress tracking for test preparation and monitoring visits to schools to review support plans.

One young person who has ended KS2 has written an autobiography and has agreed to take part in a video recording to be used to help schools understand and support cared for children. In this, she describes how school offered her safety and support and has equipped her for the future.

Actions 2017/18

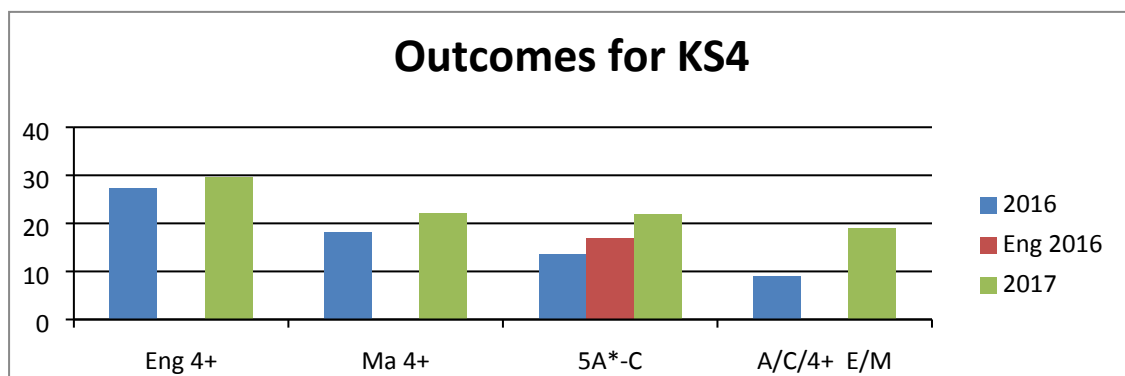
- **Increase detail requested from schools re. progress so that support can be better targeted**
- **Use tutor to observe Y6 pupils and implement early support plan with school**
- **Provide electronic revision aids which can support test preparation and track progress**

Key Stage 4

Twenty seven pupils ended Year 11 in 2017 although two more pupils were of the age of Y11 but will not be completing their studies or taking exams until next year. 2016 data is included where appropriate and also the overall outcome for all cared for children in England for 2016 but it must be recognised that new qualifications and grading systems have been introduced in 2017 and the government have urged caution when comparing with previous years.

Overall performance measures for KS4 were changed in 2016. 5A*-C were no longer the main indicator and this was replaced with the number gaining A*-C in maths and English and also the calculated attainment and progress in 8 subjects. The indicator for 2017 was planned to be by those gaining grade 5 or above but it has since been announced that pupils gaining grade 4 or above will not need to re-sit the exams and the proportion gaining Level 4 in maths and English will be reported.

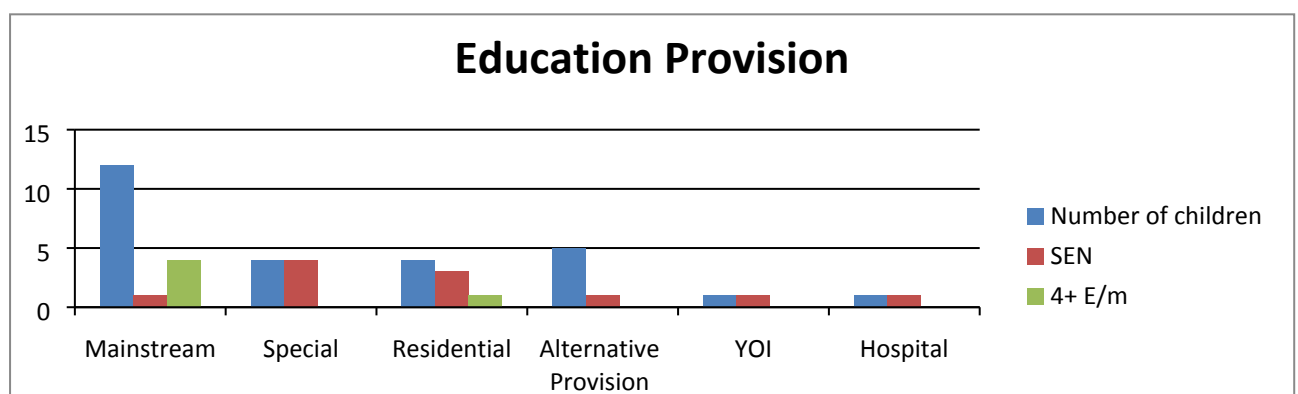
The chart below shows the outcomes for individual and combined core subjects and also the number gaining 5+ higher passes including maths and English.



The number of pupils who gained Level 4 and above in maths and English was 5 while the number gaining 5+ higher grade passes was 6.

Nature of school

Pupils within the cohort ended Y11 in a range of educational provisions. These are shown in the chart below which also shows the number of SEN pupils in each type. The overall level of SEN within the cohort was 41%, slightly lower than the level of SEN in Y11 students in 2016.



Five pupils ended Y11 receiving alternative provision. For three some this was a full time structured programme arranged which the pupils engaged with well and which has allowed them to gain some qualifications that will allow them to move onto their chosen next steps. For 2 children there were reviews and modifications made to the provision but engagement was low. One of these children had left care and become a care leaver while the other was placed with parent.

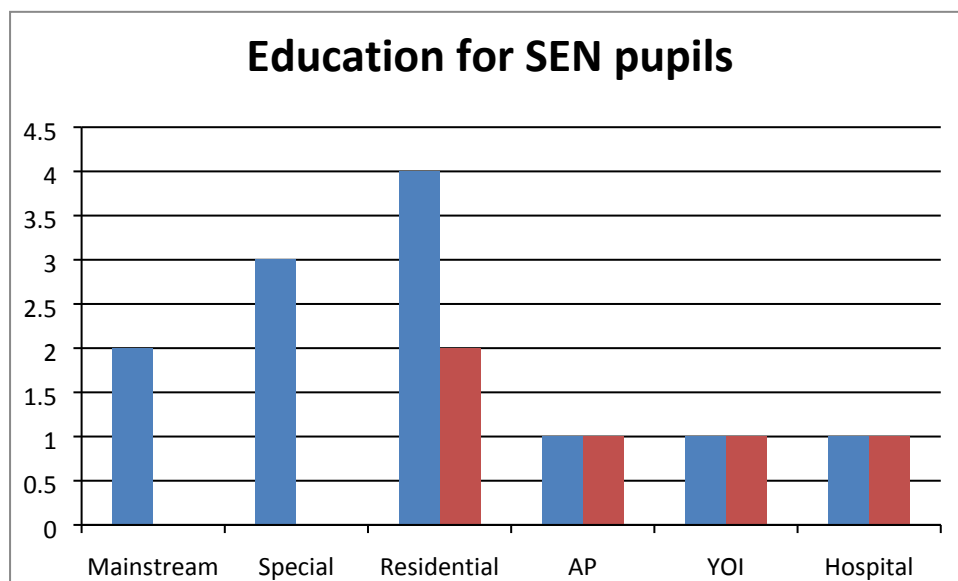
The pupils in the YOI and hospital during the exam period were engaged with education but did not gain qualifications.

Special Educational Needs

Twelve pupils in this group had an EHCP with none having a SFP. This was 42%, of the cohort, 9% higher than that of the 2016 and reflects the overall increase in SEN amongst the population.

The chart below shows the type of school attended by SEN children with only two completing Y11 in mainstream provision, with both of these having considerable time in resource provision within school. Five of these students moved provision during K4 – these are shown on the chart below. For one student this was a move from mainstream to alternative provision following a move from foster carers to return to parent when school could not meet his needs and the other four were unavoidable as children moved residential placements or were required to move to hospital or into custody. In all cases, arrangements were made for education to continue but this was based around self development and basic skills so that progress to more formal qualifications can be made in future.

All young people in Y11 were supported to ensure they had a clear progression plan for Y12 but this was especially important for SEN pupils, some of whom would be moving from residential care into other areas. The post-16 SEN advisors worked with the VS to review plans so that their EHCP could be revised and new provision named and at the end of July, places had been confirmed for all of these students.

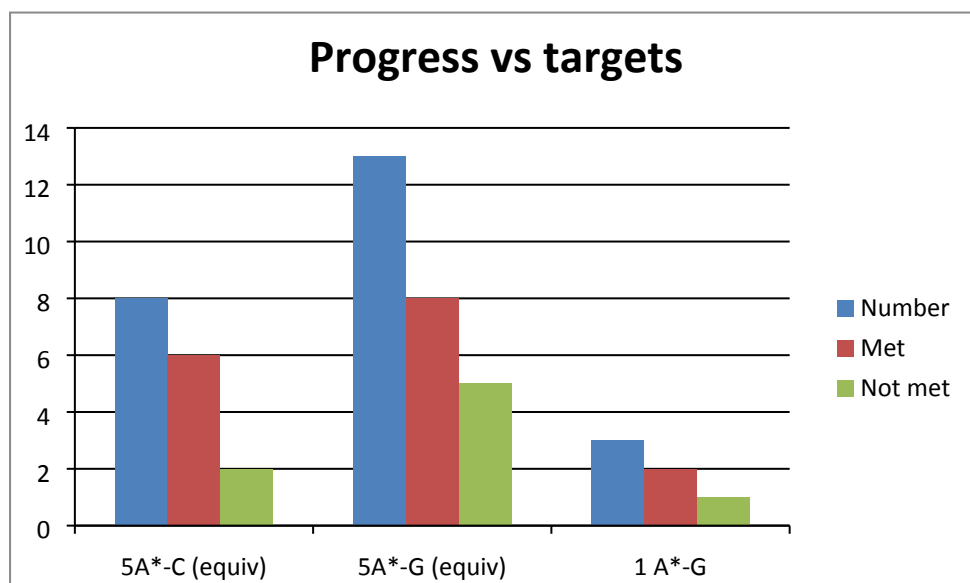


Progress

All schools are asked to provide information about the student's progress and predicted attainment at each PEP and also at the end of each term. Schools are encouraged to provide additional tuition and support as required and receive additional funding in order to do this.

In February a revisions session was held for students and carers to explore revision methods and to help in setting up a revision plan. Despite repeated contact with carers this was very poorly attended with just five young people although those there said they found it very helpful.

At the start of Y11 schools were asked to predict the highest likely outcomes for their students and these are shown in the chart below together with the number who met this prediction.



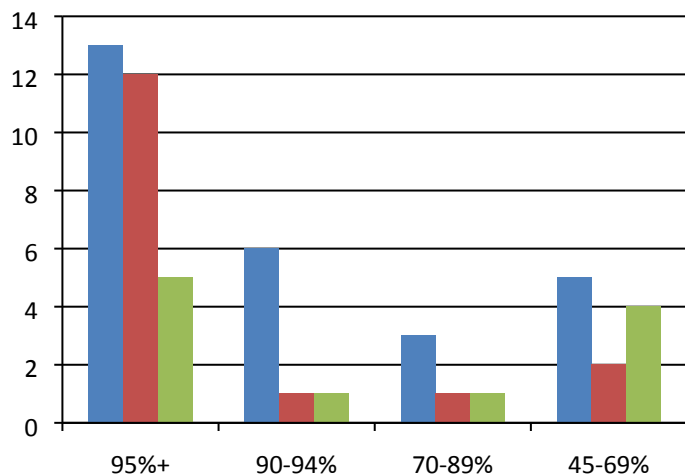
Two pupils who were predicted to gain at five or more higher level qualifications and did not do so. In one case the student gained four higher passes and the other was a pupil on a vocational programme where on only four entries were made, with good passes achieved in all. Likewise four of the pupils predicted to achieve five or more G+ (level 1) qualifications were on courses which only allowed them to be entered for less than five full GCSE qualifications although they were successful in other courses such as Entry Level or employability.

Scores at the end of Y6 suggested that eleven students had the potential to gain high passes in GCSEs but only six achieved this. All these children were offered additional support and tuition and five gained a mixture of results which included some C grades. Four had entered care since Y9 following difficult home lives and three had moved schools, all of which will have impacted on their progress.

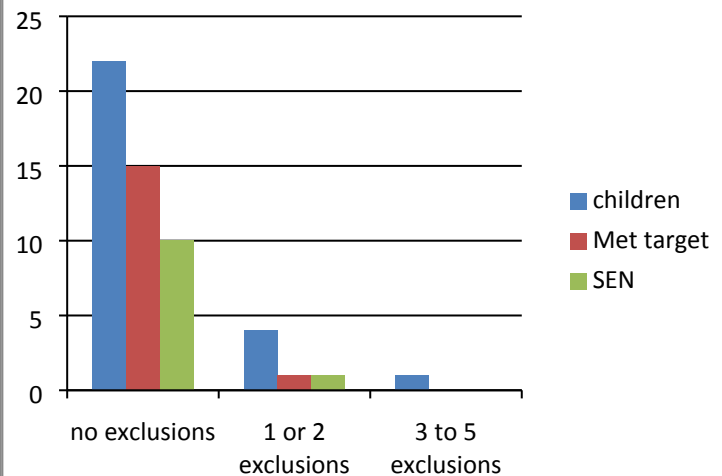
Educational Experience and outcomes

The Virtual School works with schools and carers to promote high attendance at school or education provision and to reduce exclusions. The vast majority of Y11 had attendance above 90% and had no exclusions during their final year. The charts below show the relationships between attendance and exclusions and how well the students met their targets.

Attendance and outcomes



Exclusions and outcomes



The child with 95%+ attendance who did not meet their target was at a special school and achieved 100% attendance but took a mixture of GCSE and other qualifications and so could not reach the target set at the start of the year.

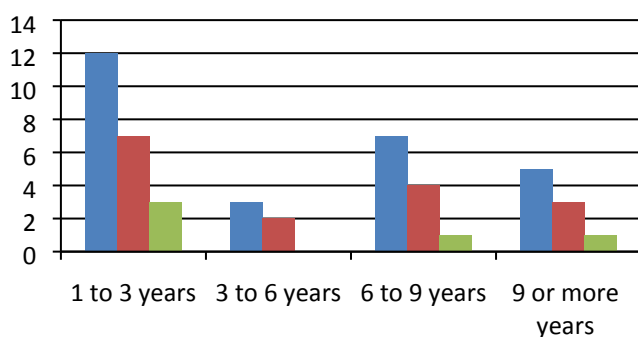
The charts also show the number of children in each category with and EHCP. In some cases attendance was reduced due to pupils being on reduced timetables or moving between schools but for some it was a result of children not wishing to engage in their education plan although this was modified and adapted to be accessible. Three children in the lowest attendance group were in residential provision and another in custody.

Most children did not have any exclusions and were able to focus on their education. Schools were reluctant to exclude and did so only as a last resort in cases of aggression to other pupils or staff. The pupil who had five exclusions was supported by the school to have a modified programme of work experience and off-site learning. This provided a settled environment for the end of Y11 and although the pupil did not reach their target they gained an apprenticeship with the work placement and are now doing well.

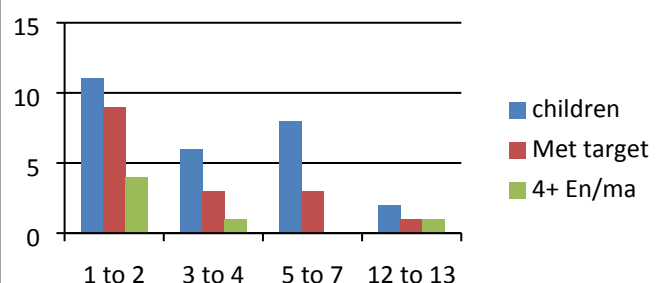
Care Experience and outcomes

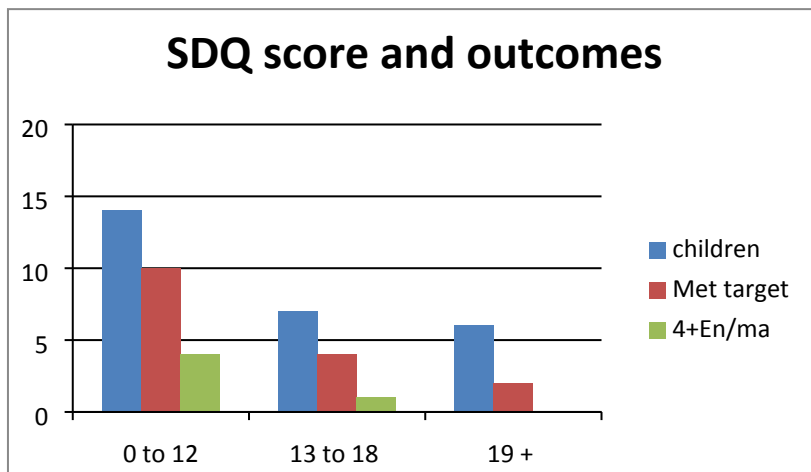
It is recognised that a child's care experience will have a significant impact on how they perform at school. High levels of anxiety about where and with whom they will be living, contact or lack of contact birth families or a low sense of self worth caused by years of abuse will all resilience and tenacity needed to meet the demands of GCSE exams. Despite this, with consistent support and adults who understand them, some children manage and succeed. The charts below show the outcomes and progress for children based on three factors which have been found significant although caution is needed before making any generalisations due to the small numbers involved.

Time in care and outcomes



Number of placements and outcomes





Although not statistically significant, this data suggests that the greatest influence was the number of placements. 82% of children with 1 or 2 placements met their targets but this fell to 50% for 3-4 placements and then 40% for those with 5 or more placements. The proportion of children meeting their targets was broadly similar regardless of length of time in care. The Strengths and Difficulties Questionnaire also appears to be significant with the percentage of those reaching their targets falling from 71% to 57% to 33% for each of the scorer ranges.

Progression

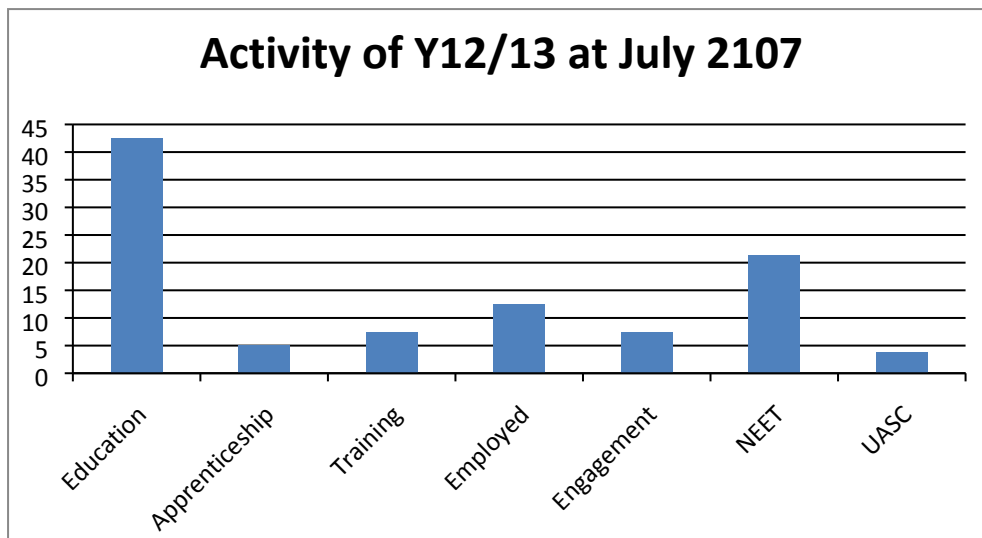
All pupils were supported by their advisor to identify and plan for a suitable post-16 option. In some cases this was difficult as young people were moving areas but as of early October all except three were settled into education, training or self development activities with the three who were not engaged having intensive support from the Virtual School and Youth Support Service.

Actions 2017/18

- **Utilise tutor to give additional sessions where needed, especially for pupils on alternative programmes**
- **Develop rigorous tracking for pupils not in mainstream, ensuring that this includes mock exams and entry for qualifications which will support progress post-16**

5.5 Post-16

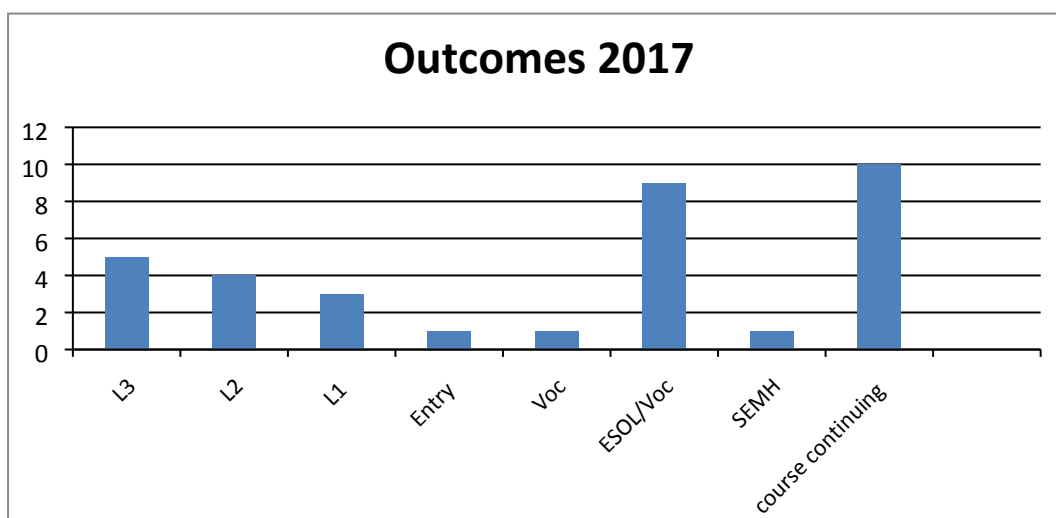
The Virtual School works with Social Care to provide support for all post-16 cared for and care leavers and will help and advise on any case but focusses primarily on young people in the two years after ending statutory school education. These would be in school years 12 and 13 and under the Raising of Participation Age are expected to be in education, employment, training, engagement or volunteering. Social Care lead on supporting and monitoring those above this age, i.e. young people who become 19, 20 and 21. From 2016 the DfE have started reporting activity using the same age groups for care leavers although this is only experimental as not all councils have full data or have submitted to the DfE.



There is considerable flux within this cohort but the chart above shows the activity of Y12/13 as of the end of July.

Young people are supported wherever possible to continue in education and this year thirty four young people completed Y13. Support was available when requested and since April a post-16 tutor has been employed to provide help with coursework, exam preparation and getting into college. He has worked with eight NEET young people and has succeeded in helping five move from NEET into re-engagement programme including maths/English tuition. Support plans are still in place for the remaining young people and other who require additional support. The Cygnet programme which aims to develop employability and workskills has move from Work Force Development to the Virtual School since April 2017. A tender was drawn up and Total People were awarded the contract to start in April. 12 young people have been referred to the programme with 11 requesting the initial interview. Some have decided that they do not wish to continue or work with Total People and so 5 have continued to the next step. As a result of this feedback from young people the specification has been revised to allow more flexibility and this will operate from October in way which will focus more on work experience than centre based learning.

The chart below shows the outcomes of the young people who were in education in 2017.



As a result of the closer working with through the 16+ multi-agency SPEED group, data collection and therefore monitoring has become more focussed. Since Jan 2017 data is collected separately for cared for and care leaver young people and

As the post-16 cohort vary each year the numbers undertaking each level or type of course differ between years. Most of the young people have chosen to study vocational based courses with only one undertaking Levels as their L3 option. This student had extensive support but was not able to complete all their exams and so gained only 1 pass but has identified a foundation course as the progression route for next year.

All other students on L3 courses achieved their qualifications and are now looking at options for employment with training or higher education. One of these students gained a Student of the Year Award. All students who gained Level 2 (L2) qualifications will progress to L3 courses with the exception of one student who has opted to complete another L2 in a different vocational area.

Many of the young people with SEN have completed L1, vocational or entry level courses and will progress into further formal or informal education settings.

Despite intensive support, three young people have left college this year. One moved to another college nearer to the new home but has not settled and so is now seeking employment while another has worked with the Cygnet programme and post-16 tutor to continue her GCSE studies to increase her grade from last year before starting a different course in September.

During the year seven asylum seeking young people have been supported. The Virtual School have developed a close link with colleges, particularly South Cheshire College, to ensure that all young people are able to join in with an appropriate ESOL course and have the additional support needed to be able to participate and gain from this. All except one of the young people on these courses have made good progress and will transfer to the next level in September. This includes one student who gained the Student of the Year Award for ESOL (English for Speakers of other languages) students. One young person left Cheshire East to live with relatives in London and has since left college and is proving difficult to engage. A member of the Virtual School has been seconded to Social Care to provide daily support to these young people to assist them in accessing education and integrating into their new lives. This is proving very successful and means that any emerging issues with education, health, housing etc. can be swiftly addressed.

Actions 2017/18

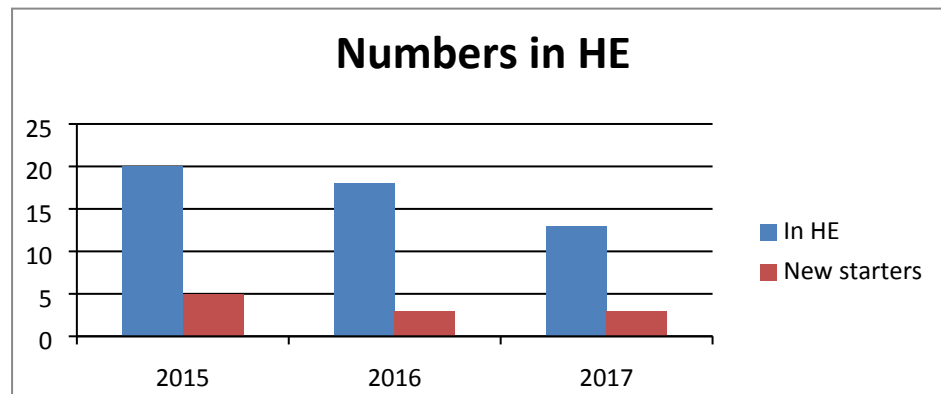
- **Monitor the impact of the post-16 tutor and revised Cygnet programme**
- **Establish targeted support programme for young people without good pass in English and maths**

6 Higher Educations

All young people are encouraged to consider university as an option and are invited to taster days and events. The uptake for these has been low for the care leaver specific event, possibly because young people do not wish to be singled out and would rather attend with their school visits.

The chart below shows the total number of young people in Higher Education and the number of starters. Although this has decreased over recent years the latest national data shows that Cheshire East has 10% of 19-21 year olds in HE compared with 6% in the North West and the whole of England.

The Virtual School will support young people with their applications and this year has provided funding where additional audition costs have been incurred.



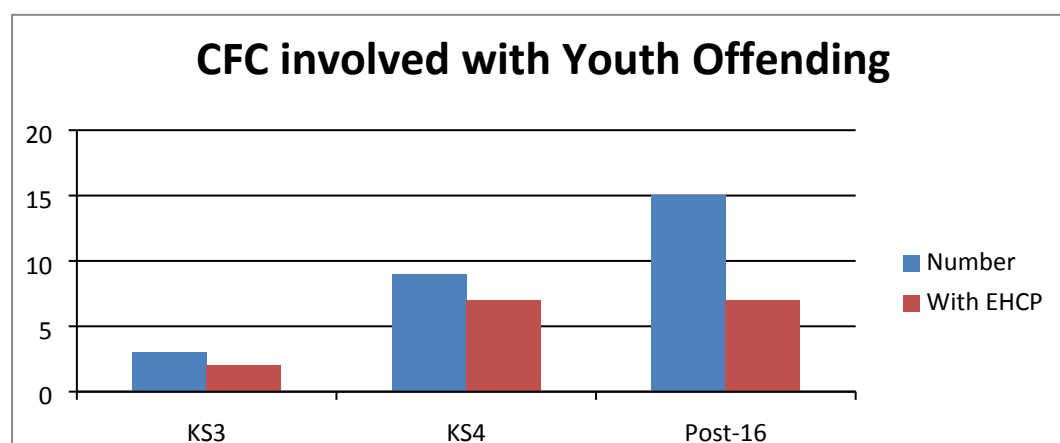
Actions 2017/18

- **Work with local universities to arrange bespoke visits in specific subject areas – initially art/media and health/social care**

7 Cared for children involved with Youth Offending Team (YOT)

The Youth Offending Education Advisor works 50% of her time within the Virtual School. As well as a focus on cases which overlap with YOT she also has a small caseload of other cases.

The chart below shows the ages of these young people and the number of the young people in each group who have or had an EHCP, the proportions of which are much higher than those for the whole cared for population. For this reason the Advisor has made it a priority to build up links with the SEN team and to ensure that processes can be followed swiftly and effectively for any transitions for these young people.



The table below shows the outcomes and activities of the young people age 16 and above in July 17 and also in Sept 17. The Virtual School and Youth Support work together for young people who are

NEET to try and re-engage them with positive activities. Tuition and Cygnet have been offered but these young people are looking for paid employment although they may not have the skills needed by employers. It is hoped that the revised Cygnet with a greater focus on work experience will be something that these young people will wish to take part in.

Age	Activity and outcomes July 17	Activity Sept 17
KS4	3 Alternative provision 2 Special School 2 Residential school/home 1 Hospital 1 Custody	2 special school 3 independent school 1 college 1 hospital 2 training
Post 16+	5 Employed 5 Training/education 5 NEET	3 employed 6 Training/education 3 NEET

Actions 2017/18

- **Youth Justice Service to provide quarterly data on engagement of pre and post-16**
- **Joint supervision of shared advisor**

8 Development Priorities for 2017-18

In addition to the specific actions included in the various sections of the report the Virtual School has identified the following priority areas and key actions to be addressed this year.

1. Continue to provide support and interventions for schools and children to improve outcomes, evaluating the impact of the intervention and use of Pupil Premium.
Monitor requests and impact of Pupil Premium
Increase targeted support and interventions for pupils in Y6, 11 and post-16
2. Identify and implement changes resulting from the Social Care Bill which includes Virtual School Headteacher to have responsibilities for previously looked after children as well as looked after and to promote mental health and attachment awareness in schools
Summarise changes in draft statutory guidance and produce models for implementation and impact
Evaluate models and make changes to staffing structure and use of funding
3. Monitor the impact of commissioned and front line services through engagement, progress and outcomes
Work with procurement and commissioning to develop monitoring process for commissioned services
Increase direct supervision of commissioned service and clarify expectations to be achieved
4. Develop a self- assessment tool for use with and by schools to improve their practice and support for cared for children

Identify schools where progress is below expected and use self-evaluation to plan for improvement

Share best practice where pupils achieve above expectations

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Cheshire East Council

Corporate Parenting Committee

Date of Meeting: 14th November 2017

Report of: Kerry Birtles, Head of Cared for Children & Care Leavers

Subject/Title: Corporate Parenting Update

Portfolio Holder: Jos Saunders

1. Report Summary

- 1.1. This report provides an update to the Corporate Parenting Committee on national and local developments in relation to cared for children and young people and care leavers.

2. Recommendation

- 2.1. Corporate Parenting Committee is asked to:
- 2.1.1 Note the contents of the report.

3. Reasons for Recommendation

- 3.1. The Corporate Parenting Committee is as advisory group to the Cabinet and, as such, needs to be aware of any national or local issues that are likely to impact on cared for children and care leavers. The Corporate Parenting Committee need to be able to scrutinise and challenge performance to improve outcomes for cared for children and young people.

4. Other Options Considered

- 4.1. None; this is an update report.

5. Background

National Developments

Advisor appointed to boost local support for care leavers

- 5.1. A new adviser to support young people as they leave the care system has been appointed as part of the government's drive to improve the lives of vulnerable children. Mark Riddell MBE has been appointed as the National Implementation Adviser for care leavers, and will work closely with local

authorities as they drive forward the new duties introduced through the Children & Social Work Act (2017). Mark was until recently the leaving care manager in Trafford, the first local authority to receive an outstanding Ofsted judgement for its leaving care service. Our officers have already worked closely with Mark as part of the New Belongings Project. Mark's role includes helping councils to develop a stronger local offer of support for care leavers, offering Personal Adviser services for all care leavers up to age 25 and delivering on their special responsibilities as a 'corporate parent' – principles set out in the Act. He will have a particular focus on supporting those councils that have had their leaving care services rated as inadequate or requiring improvement by Ofsted.

Update on Homelessness Reduction Act

- 5.2. The Homeless Reduction Act will come into force on 1st April 2018 and will place new duties on Local Authorities and other public bodies to identify, support and refer households at risk of homelessness. Clause 10 places a duty on all public authorities, where they encounter someone who they believe to be homeless or threatened with homelessness, to ask that person to allow the relevant council to be informed. If the person agrees, the public authority must notify the council and provide the person's contact details.
- 5.3. The Homelessness Reduction Act 2017 significantly reformed England's homelessness legislation by placing duties on local authorities to intervene at earlier stages to prevent homelessness in their areas. It also requires housing authorities to provide homelessness services to all those affected, not just those who have 'priority need'. These include:
- an enhanced prevention duty extending the period a household is threatened with homelessness from 28 days to 56 days, meaning that housing authorities are required to work with people to prevent homelessness at an earlier stage;
 - a new duty for those who are already homeless so that housing authorities will support households for 56 days to relieve their homelessness by helping them to secure accommodation.
- 5.4. Strategic Housing will provide further guidance prior to the Act coming into force.

Local Developments

Children in Care Council Update

- 5.5. During the last month the young people attending the Children in Care Council have been involved in a range of key activities alongside informal activities designed to support their personal, social and educational development.

- 5.6. Pre-event consultation for the Game Changer conference in Blackpool - the Game Changer event is a North West regional event for children in care and care leavers and is the first of its kind. Some of the young people were also involved earlier in the year in the planning of the event, that took place in Blackpool on Saturday 4th November.
- 5.7. Takeover Day 2017: Group members are taking an active role in Takeover Day 2017 and will be working alongside Nigel Moorhouse and Mark Palethorpe next month. Young people also expressed an interest in being able to 'Takeover' other key roles for the day.
- 5.8. Star Awards: Young people have been involved in the Star Awards event planning, putting forward ideas and giving feedback on the last few details of the event. A care leaver was involved in the judging panel this year.
- 5.9. Planning for Corporate Parenting Committee: Young people have discussed the key issues affecting them ahead of the November Corporate Parenting Committee. The young people looked at the theme of Education in preparation for the upcoming session.
- 5.10. Visit from Head of Service: The young people organised a session and invited Kerry Birtles, the new Head of Service, along so that they could spend some time getting to know each other. Kerry also discussed with the young people what their key concerns were and the group decided on some areas of work that they will cover in the coming months, such as the Pledge and the Corporate Parenting Strategy.

National Adoption Week 2017

- 5.11. National Adoption Week took place from 16th – 22nd October. This included a successful campaign for Cheshire East along with the other local areas as part of 'Adoption Counts'. Cheshire East received 27 enquiries between 16th and 22nd October (the highest weekly number to date). This included an open evening on 18th October, which 14 households attended. There were also 9,968 visits to our website during the week, which peaked at 1,881 on 21st October.

Update on Teenage Pregnancy and Parents

- 5.12. Corporate Parenting Committee has been particularly interested in the work underway around those in care who are pregnant or teenage parents. The following provides an update on recent work:

Care Leaver Mothers

- 5.13. Motherwell is a charity for women run by women, promoting positive health and wellbeing, by offering a range of educational services, holistic therapies and mental health support. The charity was recently successful in achieving a funding bid to provide a Parent Advocate Worker to support our care leaver parents. The Parent Advocate Worker will provide support to mothers who have had their children removed, to prevent the cycle taking place again via one to one support, counselling and alternative therapies.
- 5.14. Research Project – this will be carried out by the Head of Abuse Studies at MMU Crewe. This is a three year project which will research the correlations in childhood experiences of abuse and implications that this has on parenting. It is hoped that this research will identify which interventions are successful with families, and which are not. Additionally it will also identify if there are any gaps in services.
- 5.15. Positive Parenting Groups – working with the children's centres, we held our first Positive Parenting Group in July 2017 at Oak Tree Children's Centre in Crewe. 11 out of 20 pregnant and parent female care leavers indicated they would engage with the group. Going forward, the group will be split into two models across the North and South of Cheshire East.
- North Locality Positive Parent Group - this will be an informal peer support group with the plan to bring services to their group, as and when identified by the young people or identified by staff as a need, around their parenting and health issues.
 - South Locality Positive Parenting Group - one day a month our south based care leaver mothers can access the children's centre and have their own group. On this day they can also access health advice and support from services already based within the centre.
- 5.16. Care Leaver Fathers

Research Project, Care Leaver Fathers - A research project into male care leaver fathers and their experiences and interactions with social care in relation to their own children is currently underway. This research will give the fathers a voice and the data will be used to identify any areas which the fathers feel that support is lacking. Improvements can then be implemented in the service via a training programme will be given for Personal Assistants/Social Workers. We have had a good response from fathers interested in taking part in the research project.

Direct one to one support and group support for Care Leaver Fathers via Dads Stuff - this has been assigned to all Personal Advisors to refer. Dads Stuff who can offer care leaver fathers direct one to one support, and this includes absent fathers who want to be involved in their child's life. They will support dads with their overall parenting and attend meetings in support of dads. Our dads also have the option of attending the Dads Stuff group, once

they feel confident in accessing the service, or before if they are happy to. The current group in Sandbach is a busy group and this is being extended across other areas in the authority.

Resource Folder – we have set up a resource folder covering the following topics; advocacy, domestic abuse, emotional and mental health, housing, identity, immigration, independence and ready to live alone, LGBT, money and budgeting, parenting, physical health, sexual health, sexual exploitation, substance misuse and trafficking and slavery.

Update on children's home position

- 5.17. The commissioning process for the redesign of Cheshire East's residential homes for children in care was completed at the end of 2016-17 and a contract was awarded to BetterCare Keys, a national children home provider, to run from 1 April 2017. The aim is to provide a more flexible range of children homes and to increase the capacity to care for more of our children within the borough. However, the provider has had significant challenges in mobilising the service due to recruitment issues and we are currently exploring other models of delivery. We currently have a 3 bed Children's Home operational in Crewe. We are looking at our options to commission for an additional 11 beds as planned and agreed by Cabinet in October 2016.

6. Wards Affected and Local Ward Members

- 6.1. Although the number of Cheshire East cared for children and young people is relatively small, they are a vulnerable cohort, who live across Cheshire East and in other local authority areas.

7. Implications of Recommendation

7.1. Policy Implications

- 7.1.1 There are a number of policy implications as a result of local and national developments and these will be reported, as appropriate to the relevant Committee.

7.2. Legal Implications

- 7.2.1 The national and local developments described in this report are wide ranging and will in many particulars have legal implications. Legal advice will be sought, as appropriate, upon all relevant emerging issues.

7.3. Financial Implications

- 7.3.1 There are no direct financial implications of this report.

7.4. Human Resources Implications

7.4.1 There are no direct financial implications of this report.

7.5. Equality Implications

7.5.1 There are no equality implications as a result of this paper.

7.6. Rural Community Implications

7.6.1 None.

7.7. Public Health Implications

7.7.1 None identified at this stage.

8. Risk Management

8.1. Cared for children and care leavers are a vulnerable group that are at risk of a number of factors – poor education and training, health, safeguarding and transition into adulthood.

9. Contact Information

Contact details for this report are as follows:-

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LSCB Annual Report 2016-17 & Business Plan Priorities 2016-18

Page 55

Agenda Item 6



Cheshire East Local
Safeguarding Children Board



investing in children

Contents Page

Foreword from the Independent Chair 3

1. Cheshire East Safeguarding Children Board

Background 5

The Board 5

Governance 6

Key Roles 7

Key Relationships 7

Partnership Key Lead Areas 9

Board Membership and Attendance 10

Financial Arrangements 10

2. Children and Young People in Cheshire East

Our Child Population 11

3. The Child's Journey in Cheshire East

Cheshire East Consultation Service (ChECS) 11

Early Help 12

Children in Need and Child Protection

Cared for Children

Care Leavers

Child Death Overview Panel

Review of 2015-16 Priorities

4. Review of priorities

Improvements against the priorities

Performance, scrutiny and challenge

Learning and Improvement

2015-16 Annual Reports

5. Summary of reports

Children and Family Court Advisory and Support Service

Health

Probation

Schools

Police

Key Priorities for 2016-18

6. Key Partnership Priorities

Budget for 2016-17

Risks and Issues

Appendices

7. 1. Cheshire East Safeguarding Board Structure

2. Board Membership and Attendance

3. Financial Arrangements 2016-17

4. Financial Arrangements 2017-18

Foreword from the Independent Chair

I am pleased to present the 2016-17 Annual Report on behalf of all the agencies represented on the Cheshire East Local Safeguarding Children Board (CELSCB). The reports shows that in Cheshire East we have continued to build on the strong partnership foundation to meet the many challenges facing agencies in ensuring that we are not only keeping children and young people safe but also improving the outcomes for our most vulnerable children.

We hope that you will find that the report helps you to better understand how organisations and people work together and the contribution the Safeguarding Board has made to this. It sets out how these arrangements can continue to improve on the basis of the Safeguarding Board and partners being able to objectively and critically learn from what works well and act to improve what may not work as well as was intended.

Firstly I would like to thank my predecessor Ian Rush who retired as Independent Chair at the end of July 2017; for his leadership and support across the partnership and continuing the improvement journey.

The continuing challenge will be maintaining the progress of the last few years, through a time of policy change and new national priorities that include changes to Safeguarding Boards; without losing sight of what matters – the safeguarding of children in Cheshire East.

In January 2016 the Government commissioned Alan Wood to review the future of LSCBs, and our Board submitted thoughts to

this process. The report, and the Government's response, came out early in 2016-17; which made a number of recommendations for the future of LSCB arrangements. With the publication of the Children and Social Work Act in April 2017 the Board and its wider partnership will need to engage in work to determine what the future multi agency safeguarding arrangements will need to look like in order to continually improve the local safeguarding system.

While we have yet to receive any detail there is the potential for real change and with this, both opportunities and the risk of instability. My intention is to ensure that, here in Cheshire East, we do not let ourselves be distracted from the job we need to do while we manage whatever changes are to come.



This report covers 1 April 2016 to 31 March 2017 and highlights the activity, progress and challenges faced by Cheshire East LSCB with a particular focus on the journey of the child; the refresh of both the Neglect and Early Help Strategies; Project Crewe and the impact this initiative has had on engagement with families, improvements in relation to number of families being supported through early help and the reduction in size of caseloads for social workers in one of the more challenging localities in Cheshire East. We have set out the achievements made in 2016-17 and the areas where we need to continue to make improvements.

As you read through the pages of this report you will gain an insight into the work of the Board, how we audit, review, learn and invest in partnerships with the ultimate aim of improving the lives of our children. There is no doubt that there is much to celebrate in our work, but much more that we can do. We are committed to continuous improvement and strive to improve the lives of children who are neglected or in need of early help, those who live with the toxic trio of parental domestic abuse, substance misuse or poor mental health and those who are at risk of child sexual exploitation. We are determined to tackle these issues from every possible angle, to improve practice, to better engage with children and communities and to build stronger partnerships.

As Independent Chair I am committed to ensuring our children, young people and their families have a voice and are heard. This is an area of strength for the partnership and in the report you will be able to see that we have actively engaged with children and young people through direct reporting to the Board; undertaking a safeguarding survey through our schools with a number of 'calls for

action' being incorporated in to the 2017-18 Business Plan; accumulating in annual celebration event of children and young people's contribution to safeguarding. In 2016-17 CELSCB was proud to be awarded 'Investors in Children' for the imaginative work it has done in relation to engagement.

To conclude, I would like to thank members of the Board, across the partnership of our voluntary, community and statutory services and all the frontline practitioners and managers for their commitment, hard work and effort in keeping children and young people safe in Cheshire East. We will continue to seek out what we can do better, to support the community we serve and ensure that children and young people are safer as a result.

If you have any questions about the report or the information contained in it, please contact me at LSCBEast@cheshireeast.gov.uk

Gill Frame,

Independent Chair, Cheshire East Safeguarding Board

1. Cheshire East Local Safeguarding Children Board

Background

[Working Together, 2015](#) (WT15), the statutory guidance for Local Safeguarding Children Boards (LCSBs), requires each area to produce and publish an Annual Report on the effectiveness of the arrangements to safeguard and promote the welfare of children and young people in their local area. This report sets out what we have done over the past year and also what we plan to do next year to make Cheshire East a safer place for children and young people.

This report is aimed at everyone involved in safeguarding children, including members of the local community as well as professionals and volunteers who work with children, young people and families.

A copy of this Annual Report will be sent to senior leaders and stakeholders in our area, including the Chief Executive of the Council, the Leader of the Council and the Executive Director of Children's Services. The report will also be sent to the Health and Well-being Board, Children and Young People's Trust Board, Community Safety Partnership, Corporate Parenting Board and the Council's Children and Families Scrutiny and Overview Committee. Individual agencies will also be encouraged to present this report through their internal Boards and scrutiny arrangements.

The Board

Cheshire East Safeguarding Children Board (CESCB) is made up of senior representatives from agencies who work with children and young people from the local authority, schools, health, the police

and others. The Board members work together to keep children and young people safe from harm.

CESCB is responsible for scrutinising the work of its partners to ensure that services provided to children and young people actually make a difference.



In order to provide effective scrutiny, CESCB is independent from other local structures and has an independent chair that can hold all agencies to account. The main role of the CESCB are set out in its constitution and are to co-ordinate and ensure the effectiveness of what is done by each agency on the Board for the purposes of safeguarding and promoting the welfare of children in Cheshire East.

Board Members Front Line visits observations

All staff had an awareness of the board and most knew who their agency rep was.

Governance

CESCB has three tiers of activity (see Appendix 1):

Main Board – this is made up of representatives of the partner agencies as set out in WT15. Board members must be sufficiently senior to ensure they are able to speak confidently and have the authority to sign up to agreements on behalf of their agency.

Executive – is made up of representatives from key statutory member agencies and has strategic oversight of all Board activity. The Executive takes the lead on developing and driving the implementation of the CESCB's Business Plan. It is also responsible for holding to account the work of the sub-groups and their chairs.

Sub-groups and Task and Finish Groups (Cheshire East) – these groups work on the board's priority areas on a more targeted and thematic basis. They report to the Executive and are ultimately accountable to the Main Board.

The sub-groups operating at March 2017 were:

- Quality and Outcomes
- Audit and Case Review
- Learning and Improvement
- Safeguarding Children Operational Group
- Policy & Procedures

The Task and Finish Groups operating at March 2017 were:

- Private Fostering
- Neglect

- Child Sexual Exploitation, Missing from Home & Care and Trafficking
- Early Help

Sub groups (Pan-Cheshire) – Cheshire East works closely with the other Cheshire LSCBs on certain areas to maximise the opportunity for streamlined processes across our boundaries. The following pan-Cheshire sub-groups are currently in operation:

- Pan-Cheshire Child Death Overview Panel
- Pan-Cheshire Policies and Procedures
- Pan-Cheshire CSE, Missing from Home and Care and Trafficking

There are a number of other- Domestic Abuse Partnership Board, Harmful Practice and Youth Detention. The responsibility of the Pan Cheshire Groups are to set the Strategy for the county with local group implementing and quality assuring the delivery of the strategy



Key Roles

Independent Chair – The Independent Chair for Cheshire East is Gill Frame. Gill joined the Board in August 2016 when we said goodbye and a big thank you to the previous chair Ian Rush as he retired.

The Independent Chair is accountable to the Chief Executive of the local authority. During 2016/17 the Chief Executive of Cheshire East was Michael Suarez. It is his role to appoint or remove the LSCB chair. The Chief Executive meets regularly with the Independent Chair through the Safeguarding Review Meeting to maintain an overview of the effectiveness of the board, to hear any safeguarding concerns and to challenge the performance of the Board.

The Director of People's Services was **Kath O'Dwyer**, who holds the role of Director of Children's Services and is a member of the main Board. She had responsibility to ensure that the CESC B functions effectively and liaised closely with the Independent Chair and also attends the Safeguarding Review Meetings.

Lead Member – the Lead member for Children's Services has responsibility for making sure that the local authority fulfils its legal duties to safeguard children and young people. **Councillor Liz Durham** held the role during the year. The Lead Member contributes to the CESC B as a 'participating observer', i.e. she takes part in the discussion, but is not part of the decision making process.

Lay Members – During the year the Board said goodbye and thank you to two Lay Members, **Sam Haworth** and **Alana Eden**. The Board also welcomed **Luchvinder Kaur**.

Children and Young People's Challenge Champions – a strength the Board is its commitment to ensure that the voice of children and young people is a key focus of the Board. **Voice for Children** are care leavers and Members of the Board. They work with young people in Cheshire East to represent their voices on the Board. During the year **Jodie Morris**, one of the Directors left and the Board thank her for her contribution. **Liam Hill** continues to carry out this role on behalf of the Board.

Key Relationships

CESC B has a number of key relationships with other Strategic Partnership Boards. The Chairs of these boards meet quarterly in the **Partnership Chairs Board** to discuss themes and issues, risks and sub-regional developments across the boards. A Memorandum of Understanding is in place that sets out safeguarding arrangements between these key strategic partnerships in Cheshire East.

Children and Young People's Trust Board (CYPT) – this is a partnership Board that aims to improve outcomes for all children and young people in Cheshire East. The Children and Young People's Plan is a key mechanism to provide strategic leadership, determining joint priorities, joint planning, and ensuring integrated working. Priority 2 of the plan, 'Children and young people feel and are safe', is largely delivered by CESC B through its business plan. The Chair of CESC B is also a member of the Trust.

Corporate Parenting Committee (CPC) – When children and young people are brought into the care of the Local Authority, Cheshire East Council becomes their 'Corporate Parent'. Since May 2016, Corporate Parenting has been coordinated by the Corporate Parenting Committee, which works as an advisory committee to the

Cabinet of Cheshire East Council. The committee is made up of cross-party representation. The purpose of the committee is to ensure that the Council effectively discharges its role as Corporate Parent for all children and young people in care and care leavers from age 0-25 year's old, as well as holding partners to account for the discharge of their responsibilities in this area.

Health and Wellbeing Board (HWBB) – CESC links with the Health and Wellbeing Board and is held to account for key safeguarding issues for children in Cheshire East. This annual report and business plan will be presented to the Health and Wellbeing Board.

Cheshire East Safeguarding Adults Board (CESAB) - The CESAB carries out the safeguarding functions in relation to adults 18 years and over. A number of members of the CECSB also sit on CESAB.

Safer Cheshire East Partnership (SCEP) – SCEP is responsible for the commissioning of Domestic Homicide Reviews (DHR's), which are undertaken on its behalf by the CESAB. It receives reports on domestic abuse and sexual violence. SCEP is the lead partnership for 'Prevent' (the approach to tackling extremism and radicalisation) in Cheshire East and works with the other partnership boards to ensure that the Prevent strategy is being implemented across all agencies and in the community.



Partnership Key Lead Areas

Key partnerships agreed the following leads for shared priority areas:

Shared priority area	Strategic governance lead
Domestic Abuse	Cheshire East Domestic and sexual abuse partnership board (CEDSAP)
Prevent	Safe Cheshire East Partnership (SCEP)
Reducing Offending	SCEP Youth Justice Board
Anti-social Behaviour	SCEP
Organised crime	SCEP
Hate Crime	SCEP
Child Sexual exploitation (CSE)	CESCB
Trafficking and Modern Slavery	Local Safeguarding Adults Board (CESAB)
Hate crime	CESAB
Substance misuse	Health & Wellbeing board (HWBB)
Mental Health	HWBB
Improving outcomes for children and young people	Children and Young People's Trust (CYPT)

Member Agency Management Boards – CESCB members are senior officers within their own agencies providing a direct link between the CESCB and their own single agency management boards to ensure that high quality multi-agency practice is embedded.

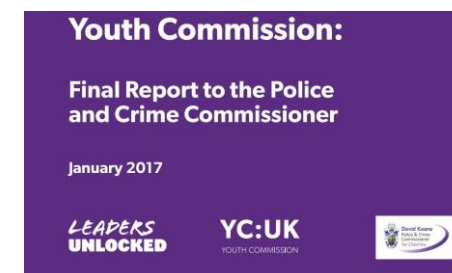
Police and Crime Commissioner – The Police and Crime Commissioner (PCC) funded the Cheshire Youth Commission. This project aimed to enable young people aged 14-25 to inform decisions about policing and crime reduction in Cheshire, working in partnership with the Police & Crime Commissioner (PCC) and Cheshire Constabulary.

The Youth Commission ran an event called the 'Big Conversation' which was able to talk to over 1,500 other young people about their priority topics. The Youth Commission hosted their own conference at Cheshire Constabulary Headquarters where they presented their final conclusions and recommendations for change on their six priorities

1. Hate Crime
2. Abusive Relationships
3. The Relationship between Young People and the Police
4. Drug and Alcohol Abuse
5. Mental Health and Vulnerable Young People
6. Cyber-bullying and Safety Online

Full details can be found by following this [link](#).

The Participation Network is a multi-agency group that brings together engagement and participation workers across the partnership to share and develop good practice and to join up



services in engaging with children and young people. The CESCOB is represented on this Network.

Board Membership and Attendance

The Board is well attended by key partners. A summary of Board membership and attendance for 2016-17 is in Appendix 2.

Financial Arrangements 2016-17

The finances of the Board for 2016-17, including member contributions are at Appendix 3 and 4.



2. Children and Young People in Cheshire East

Our Child Population

Cheshire East is a generally affluent area and, for the vast majority of children and young people, it is a good place to grow up. However, there are pockets of deprivation in Cheshire East where we know that children and young people do not enjoy the same outcomes, and the gap in attainment between more vulnerable groups and their peers, although reducing, remains too great.

There are approximately 75,100 children and young people under the age of 18 in Cheshire East, 51% are male and 49% are female. Children and young people make up approximately 20% of the total population.

9% of primary pupils are entitled to free school meals (an indicator of deprivation), compared to 16% nationally and 7% of secondary pupils compared to 14% nationally.

Overall 92% of individuals are of British ethnicity. The biggest minority groups in Cheshire East are 'white other' (2.5%), Asian/Asian British (2%), and mixed/ multiple ethnicities (2.6%).

The vast majority of pupils' ethnic backgrounds are reported to be White British (88% of primary pupils and 91% of secondary pupils).

There are just under 100 different first languages recorded for primary and secondary pupils, although only 6% of primary pupils and 4% of secondary pupils have a first language other than English, compared to national figures of 19% and 15%, respectively.

The number on a child protection plan has reduced from 279 on 31st March 2016 to 275 on 31st March 2017.

There were 7 disabled children on a child protection plan in 2016-17; an increase of 2 from March 2016.

As at 31st March 2017 428 children and young people were cared for by Cheshire East; 28.7% of these live outside Cheshire East.

3. The Child's Journey in Cheshire East

Cheshire East Consultation Service (ChECS)

ChECS is the 'front door' to access services, support and advice for children, young people and their families; from early help and support through to safeguarding and child protection. All referrers are required to have a telephone discussion with a qualified social worker and are advised on the level of need for the child and family and the appropriate next steps. Co-location of the police, the multi-agency missing from home service, the Child Sexual Exploitation (CSE) service, and domestic abuse hub within the front door arrangements at ChECS 'front door' team has been achieved through close collaboration, and is improving multi-agency responses.

	Consultation activity	No. converted to referral
2013-14	6788	2444 (36%)
2014-15	7493	2783 (37%)
2015-16	9843	3687 (37%)
2016/17	10,432	3438 (33%)

Table 1: Number of consultations over the past four years and the percentage that resulted in a referral to children's social care

There has been a 54% increase in consultation activity in the last 2 years and a 6% increase from last year. However, conversion to referral has reduced by 4%.

There has been an average of 890 consultations and 287 referrals a month over the past year.

Board Members Front Line visits - staff comments

The front door is constantly changing, so it's about embracing the change

Early Help

Early help is about getting additional, timely and effective support to children, young people and their families, to help them as early as possible before issues become more serious. Over the past year there has been an improved understanding and support from agencies in providing children and families with early help. This is

also better coordinated, mainly through the use of the common assessment framework (CAF).

The Early Help Brokerage Service is a service with a dedicated team whose aim is the swift allocation of early help cases. This will provide timely referrals to early help, and identification of the best service to meet the needs of the child or young person and their family.

During 2016-17 ChECS received 10,432 contacts of which 3,328 were passed to Early Help Brokerage Service. Overall this was 32% of ChECS contacts, which is similar to the 30% during the first 6 months of Early Help Brokerage operation in the second half of 2015-16.

CESCB will continue to scrutinise the effectiveness of the front door and responses to early help in 2017-18.



Children in Need and Child Protection

Local authority	2014 -15 Completed in 45 days	2015-16 Completed in 45 days	2016-17 Completed in 45 days
England	81%	83%	
North West	82%	83%	
Cheshire East	72%	89%	88%
Cheshire West & Chester	84%	82%	
Warrington	88%	81%	
East Riding of Yorkshire	78%	75%	
North Yorkshire	91%	95%	
Solihull	57%	83%	
Warwickshire	85%	84%	
Central Bedfordshire	97%	95%	
Hampshire	79%	88%	
West Berkshire	71%	86%	
North Somerset	56%	57%	

Table 2: Percentage of assessments completed within 45 days nationally, regionally and for our statistical neighbours. 2016-17 data will not be released until October 2017.

Assessment timescales

4102 social care assessments were completed in 2016–17. 88% of these were completed within 45 days. 1697 of these were ended following assessment with the individual not being in need of social care support.

Children in Need

A child in need (CIN) is defined as; a child who is unlikely to reach or maintain a satisfactory level of health or development, or whose health or development is likely to be significantly impaired without provision of services from the local authority, or he/she has a disability. As at 31st March 2017 we reported 1974 open episodes to the Department for Education as per the CIN census guidance. This compares with 2183 at the end of March 2016. This equates to a rate of 263.2 per 10,000 of the 0-17 population compared to 291.1 in 2016. Last year our statistical neighbour average was 289.7 so we sit in the mid range of the group and we were substantially lower than the national and northwest figs of 337.7 and 380.1 respectively.



Board Members Front Line visits - observations

Most agencies reported to have a clear understanding of thresholds and feel supported through training, advice and close working relationships with other agencies.

Agencies also agree that through CAF, CPP and CIN processes agency thresholds are made clear.

Another agency reported they are unclear of the threshold guidance but acknowledged they can seek guidance, support and clarity from their managers and through supervision to rectify this.

All staff interviewed understood their agencies role in safeguarding and were confident in carrying out their own safeguarding responsibilities.

Child Protection

When the local authority receives a referral and information has been gathered during an assessment (which may have been very brief), in the course of which a concern arises that a child maybe suffering, or likely to suffer, significant harm, the local authority is required by Section 47 (S47) of the Children Act 1989 to make enquiries.

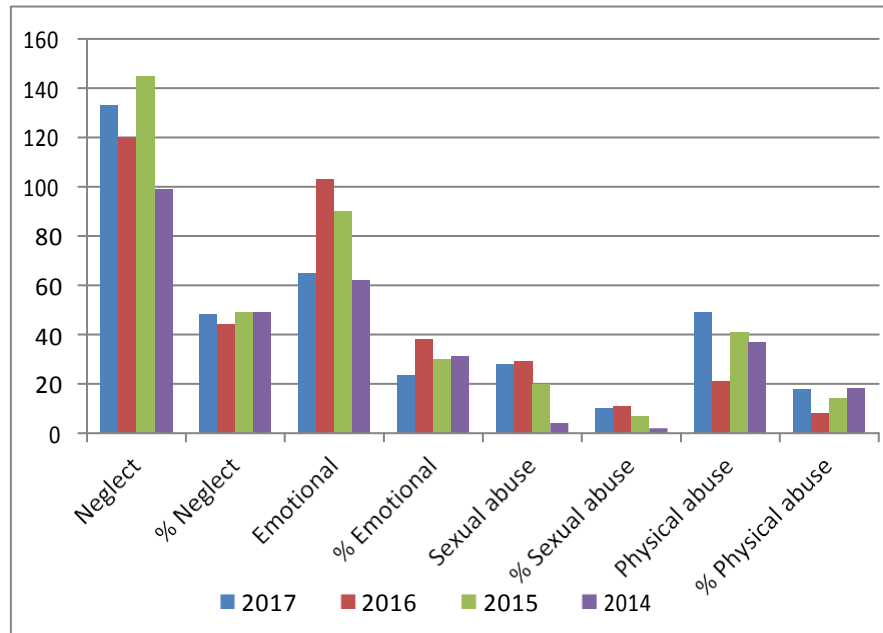
- The number of S47's initiated within the year was 786, a small increase of 2.5% from the previous year (767) but substantially less than the 2014/15 figure of 914.
- The number of Initial Child Protection Conferences (ICPC) undertaken in the year was 397, an increase of 13.4% from last year (350) and similar to the 2014/15 figure of 426. The percentage of S47's going onto ICPC has increased to 51% from 46% in the previous 2 years.
- The number of Child Protection Plans (CPP) started during the year was 362 which is an increase of 11% from the

previous year (327), but still slightly less than 2014/15 figure of 394.

Key Indicators	2011/12	2012/13	2013/14	2014/15	2015/16	2016/17
CPP lasting 2 years or more	2.6%	2.1%	5.7%	0%	0%	0.5%
Children becoming the subject of CPP for a second or subsequent time	13%	15.1%	15.9%	13.9%	22.9%	17.4%
Child protection cases which were reviewed within required timescales	99.3%	97.9%	91.3%	89.1%	99.5%	99.0%
ICPC within 15 days	91.3%	85.4%	87.9%	41.7%	69.7%	80.4%

Table 3: Child protection numbers 2011-17

- The number of children becoming subject to a CPP for a second or subsequent time has reduced from 22.9% in the previous year to 17.4%.
- ICPCs taking place within 15 days has increased to 80.4% from 69.7% in 2015/16.



Graph 1: Child protection categories 2014-17

Cared for Children

Cared for children are those that are looked after by the local authority either voluntarily or through a statutory order. As at 31st March 2017, 428 children and young people were being cared for by the local authority, an increase of 10.6% from the previous year.

This equates to a rate of 57 per 10,000 and puts us in line with our statistical neighbour average from last year. Discussions at the Northwest information group suggest there has been a rise in the number of children coming into care across the region so it is likely

that once the information is released nationally we will be in a similar place within our statistical neighbour cohort.

Of this number:

- 123 (28.7%) live outside the local authority area;
- 50 live in residential children's homes;
- 7 live in residential specialist school as at March 2017;
- 310 children and young people in foster placements; of these 123 (39.7%) live out of the local authority area;
- We also supported a number of individuals who presented as unaccompanied asylum seeker children (UASC) with support and advice including accommodation, where appropriate.

The figures show a high number of young people live out of the area; in reality many of these live nearby but across Cheshire East's border. Extensive work is underway to ensure there are enough local foster carers in Cheshire East to ensure where possible local placements are made and that children stay in the area.

In the last 12 months a total of 141 children have ceased to be cared for by the Local Authority. Of these, 26 children have been adopted; 24 children became subject of special guardianship orders; 34 individuals have left care due to turning 18.

The table overleaf is a comparison of cared for children based on the 2014-15 statutory returns (which is the latest data available for all comparators).

Cheshire East's proportion of cared for children is lower than the England average, North West average and our statistical neighbour average, and although we have increased slightly to 57, our performance is still at the lower end of our comparator group.

As at 31st March 2016, Rate of Cared for Children per 10,000	
England	60
North West	82
Statistical neighbour Average	56.3
Solihull	79
Warrington	78
Cheshire West & Chester	71
Warwickshire	68
North Somerset	52
Cheshire East	51
Central Bedfordshire	48
Hampshire	46
West Berkshire	44
East Riding of Yorkshire	42
North Yorkshire	35

Table 4: Rate of Cared for Children per 10,000 at the end of 2016

CECSB has increased its scrutiny and challenge around cared for children in 2016-17 and will continue to do so in 2017-18.

Initial health assessments for cared for children are not being consistently carried out within the required statutory time frame. Work continues with the Local Authority and Health to improve communication around notification and consent when children are taken into care and to ensure sufficient dedicated clinic capacity for children to receive health assessments within the statutory time frame. The detail is regularly monitored at the CECSB Quality/Outcomes group and has continued to be challenged appropriately at both CECSB Executive and Board.

Care Leavers

As at 31st March 2017 there were 199 care leavers in Cheshire East. This has decreased slightly over the last 12 months and is marginally lower than the 225 in March 2016.

Child Death Overview Panel

The death of any child is a tragedy. It is vital that all child deaths are carefully reviewed. The death of any child under the age of 18 is reviewed by a Child Death Overview Panel on behalf of the Local Safeguarding Children Board. The pan-Cheshire Child Death Overview Panel is made up of a group of professionals who met six times in 2016-17 to review all the child deaths in their area. There were a total of 49 child deaths across Cheshire during 2016-2017 notified to the panel; of these 25 were from Cheshire East.

The Panel has a role to identify any trends or themes and to make recommendations to the CECSB on learning from the reviews and how to prevent and reduce child deaths. The panel has an independent chair who provides regular updates to the CECSB and produces an [annual report](#) that summarises the key themes arising from child deaths, progress against actions and priorities for the coming year.

Project Crewe

Project Crewe was established in August 2015 as a result of a successful Innovation Bid by Cheshire East to the Department of Education (DfE). This service aims to achieve positive sustainable outcomes for families with children in need aged 0 to 19 years old. Catch 22 delivers this service in partnership with Cheshire East

Council. CESCIB continues to monitor and challenge the impact of this service on vulnerable children and young people.

The project has worked with 390 children (186 families) with a 97% engagement rate overall. There has been a reduction in child in need cases in Crewe by 12.4% and Social Worker caseloads have reduced by 30%.

The project was part of a Randomised Control Trial (RCT) undertaken by the Behavioural Insights Team. Some findings from this have been;

- More child in need (CIN) cases closed than the cases which remained with Cheshire East Council (CEC)
- Families were visited 3x more frequently and offered personalised flexible support. This was seen to develop stronger more trusting relationships between the staff and their cases more quickly
- The Solutions Focused Approach (SFA) was valued by Project Crewe families. They felt empowered through being given ownership over their problems. Using feedback tools in conjunction enabled families to visualise their progress
- SFA suited some cases more than others – it appeared to resolve acute issues more than on-going or particularly chaotic ones, and also required the CIN case parents to acknowledge their situation is problematic.

The success of this in achieving better outcomes, earlier, for our children and young people has meant that Project Crewe will be extended into Project Macclesfield from April 2017, helping more children and families across the borough.

Emotionally Healthy Schools Programme

Phase 2 of the Emotionally Healthy Schools (EHS) programme is now well under development with five components:

1. Access to specialist mental health advice (single point of access) and a brokerage model to support professionals working with Children and Young people (CYPMH Link Programme), which is now delivered by CWP;
2. Access to tools and support to schools to implement the tools (Tools for Schools) which is now delivered by Visyon;
3. Educational specialist Leadership Programme, led by Middlewich High School;
4. Systems and processes to identify and support vulnerable children and young people to thrive;
5. Development of 'Getting Advice' including on-line platform.

This programme of work is now a key element of the Cheshire East Clinical Commissioning Group Local Transformation Plan for Young People's Mental Health, which is governed via the Children and Young People's Strategy Group which reports to the Health and Wellbeing Board.

Board Members Front Line visits – staff comments

The 'emotionally healthy schools' is an exciting project and gives CAMHS a great opportunity to work with schools. The focus is on early intervention and funding is coming through Phase 2.

4. Review of Priorities for 2016-17

Review of Priorities

The following three partnership objectives underpin the key plans for children and young people; the children and young people's plan, the children and young people's improvement plan and the CECSB business plan:

- **Frontline Practice is consistently good, effective and outcome focused**
- **Listening to and acting on the voice of children and young people**
- **The partnership effectively protects and ensures good outcomes for all children and young people in Cheshire East.**

CECSB agreed the following priorities to deliver these objectives in 2015-17:

We will improve frontline multi-agency practice through:

- Improving Board engagement direct with frontline staff
- Continuing to drive developments around key safeguarding areas including children at risk of CSE, missing from home, female genital mutilation, radicalisation and extremism, forced marriage/honour based abuse and privately fostered children and young people
- Embedding strengthening families
- Implementing our neglect strategy
- Implementing changes around the integrated front door

- Improving safeguarding arrangements for disabled children
- Improving identification and response around children and young people with mental health issues, including self-harming

We will continue to improve the participation of young people in CECSB business through:

- Ensuring that the voice of children and young people is central to CECSB business
- A Challenge and Evidence Panel of children and young people
- Engaging children and young people in co-producing information and support relevant to them
- Ensuring that the CECSB celebrates children's rights and participation and the contribution of children and young people to safeguarding
- Ensuring the voice of children and young people is central to the CECSB's training programme

We will strengthen the partnerships through:

- Engaging the community through links with voluntary and faith sector
- Improving the board's role and traction in relation to developing early help

Improvements against the Priorities

Improving Frontline Practice

Improving CECSCB's engagement with frontline staff

CECSB e-bulletins

CECSB has continued to publish its e-bulletin, Newsflash and Frontline Bulletin. These have covered a variety of topics including

- FGM new statutory guidance
- Cheshire East Neglect Strategy Group
- Disrespect NoBody Campaign
- SMART planning
- Private Fostering Awareness week
- Violence Against Women and Girls
- New Pan Cheshire Online Procedures
- Keeping Kids Safe Online

Feedback from Board members has been that this method of communication is effective in supporting them in promoting CECSB and in disseminating safeguarding information within their services.

Board Members Front Line Visits observations

Staff were made aware of the latest safeguarding news through their managers via team meeting, supervision and the dissemination of the LSCB e-bulletin.

The Safeguarding Children Operational Group (SCOG), a multi-agency group of first line managers, has continued to provide opportunities to disseminate key messages to frontline staff, discuss

implementation of new policies, and agree good practice models. SCOG has carried out a number of pieces of work in 2016-17:

- Guidance on tackling the toxic trio developed to support all practitioners across the partnership to identify level of need.
- Work to improve the quality of strategy discussions and ensuring that these are multi-agency meetings. This included exploring the use of technology and improving systems to alert partners to a forthcoming strategy discussion. Health partners are reporting that they are being invited to contribute to these meetings.
- Moving from a multi-agency report to child protection conferences to a single agency report to improve the focus and quality of agency evidence and planning. Early indications from Independent Reviewing officers are that the quality of the information provided is improving.
- Multi-Agency Practice Standards Survey to establish if the level of awareness is sufficient and if not what should the next steps be.

Continuing to drive developments around Child Sexual Exploitation

The CECSB's CSE Operational group is multi-agency and considers all children for whom there are concerns in respect of CSE who fall below the threshold for a CSE child protection plan. The group also considers persons of interest and potential locations that present a CSE risk. The CSE screening tool informs referral into the group and the completing professional is invited to attend the multi-agency forum to share information and agree a plan of intervention that will safeguard, manage and minimise the risk, promote welfare and prevent future harm.

During 2016-2017 this operational group held 12 meetings, and considered 71 referrals (a reduction from 93 in 2015-16); 56 of which were concerning young people at risk, and 15 concerning potential perpetrators or persons of interest. Referrals were received from the Police, Cheshire East Council (ChECS, Social Workers, Family Support Workers, Youth Engagement Service, and Youth Prevention Service), schools, commissioned services, Health and non-Local Authority Fostering Services.

The evidence from the group in 2016/2017 indicates that practitioners who use the tool generally have a good understanding of CSE and are recognising and responding to the indicators. Six locations where children and young people are thought to be particularly at risk were identified; these were managed on a joint agency basis and the risks reduced.

Positively, 86% of those identified in 2016-2017 have subsequently been closed to the group, following a re-submitted screening tool which gave evidence that the risk has been managed and reduced. 7% of cases were escalated as requiring consideration for a child protection plan, most often with neglect as the underlying concern and risk to the child, which demonstrates that the group is effectively safeguarding young people and ensuring the risks are responded to appropriately.

Work in these key areas is regularly reported into the CECSB to ensure focus.

Continuing to drive developments around children missing from home

Most children who go missing in Cheshire East go missing once and go missing from their home. Some children go missing many times

and this includes children who have moved between care and home/semi-independent living and those who are cared for.

Board Members Front Line visits - observations

The team spoke in detail about their return interviews, peer mentor sessions, child feedback surveys, quarterly reporting and child focussed case studies and how they champion child views in meetings and ensure that other professionals are listening to their voice. They gave examples of how they are regularly sharing the voice of children and how the roles of case workers adapt and how the delivery of work changes based on feedback that they receive in their service from young people

During 2016-17 Cheshire East Local authority received a total of 1056 missing notifications from the Police pertaining to children and young people reported missing in the Cheshire East area. 495 of these notifications related to 104 children who were cared for either by CE as a local authority or who had been placed in Cheshire East by another local authority.

Local authority	Number of children/Young people	Number of episodes	Average per individual
Cheshire East	72	312	4
Other local authority	32	183	6

Table 5: Missing notifications

In addition we received 564 notifications relating to 314 individuals who were living at home when reported missing. The vast majority of these are 1 off incidents with no cause for concern and 171 episodes (30%) related to only 16 individuals. All of these individuals were known to social care and were being actively supported either through CIN or CP. A small cohort of these were subsequently taken into care.

Board Members Front Line visits – staff comments

Further development of Missing and CSE in the local authority- there are changes to policy around Missing and CSE and we are heavily involved in influencing changes to protocols and will then work to ensure frontline agencies are aware of the changes to definitions and Working Together Guidance

Trafficking

The Pan Cheshire Child Modern Slavery Strategy was developed during 2016/17. This sets out the commitment of the PAN Cheshire Safeguarding Children Boards to do everything possible to prevent, and detect the trafficking of children and to respond and support the victims when identified. We recognise that to achieve this, a multi-agency response is required.

The purpose of this strategy is to ensure a clear, co-ordinated response to trafficked Children across Cheshire in line with the five key priority areas

1. Strategic commitment across all areas
2. Identify, improve awareness, understanding and recognition
3. Prevent Trafficking
4. Protect and develop positive interventions and support for victims

5. Prosecution of perpetrators

Full details of the strategy can be found by following this [link](#).

Continuing to drive developments around children in a home with domestic abuse

Cheshire East Domestic and Sexual Abuse Partnership (CEDSAP) had four priorities last year directly addressing Children and Young People's work. Below is a summary of what we achieved against these ambitions:

PRIORITY	ACHIEVEMENT
Further develop the role of the Hub in relation to the 'One Front Door'	- Hub increasingly integrated with opportunities to systematise processes
Improve the quality of practice in Children's Services for assessing, analysing and responding and reviewing effectiveness where domestic abuse is an issue for the family, and ensuring that specialist sector provision supports this work with effective services and participation in multi-agency arenas	- Children's Risk and Needs Tool developed and use promoted and monitored at ChECS, Case Conferences - Specialist services systematically reporting to and attending ICPCs
Improve awareness of and increase referrals to specialist sexual violence provision, particularly for children and young people	- Awareness sessions provided and referrals for CYP doubled, albeit from a low base
Embed the newly commissioned 'Whole Family Service' and ensure outcomes are delivered and shared	- CEDAS well established, significant number of referrals for CYP received, challenges re timeliness of assessment and provision

CEDAH – Single Point of Contact for domestic abuse

**I didn't realise how helpful this sort of support can be.
Having someone else saying that this isn't OK**

Hub referrals increased by 22% to 1592, with an almost doubling of self-referrals. Referrals were received from a wide sector but they would welcome more from GPs in particular who are often in a position to act as a bridge to support at earlier stages.

The Hub also receives and routes direct programme referrals. In the last year there were 256 of which 186 were Children's Programme referrals and 60 Adults Change Programme.

Independent Domestic Violence Advocacy Team and Multi-agency Risk Assessment Conferences

'My teacher referred me but I don't think that all young people would go to a teacher.'

Teachers need to know who they can refer to. I was very lucky.'

Multi-agency Risk Assessment Conferences (MARAC) continue to provide an effective process for information sharing and action planning in high risk cases. The number of cases has fallen in the last year by 6% to 537 adults with 663 children. 48% referrals came from the Police.

The Independent Domestic Violence Advocacy Team (IDVA) team is a short term to medium, crisis lead intervention aimed at high risk victims of domestic abuse. They had 493 referrals into the core services, 159 into Macclesfield Hospital provision and 176 into Leighton IDVA service.



IDVAs are now attending Initial Child Protection Conferences more consistently to ensure the conference is informed about risk to children and support clients in working with the agreed plan. They are also increasingly co-located with CIN/CIP teams and both IDVAs and social workers report increased and improved joint work to deliver good outcomes for families.

CEDAS (Barnardo's and Cheshire Without Abuse) –the end year report from Commissioned Providers will be available on the CEDSAP website and will include fuller data on the work with those who harm as well as with victims and their children.

Sexual Assault Referral Centres and Rape and Sexual Abuse Support Centre

“I feel my son has become calmer, sleeps better, eats better and has become a better person. His understanding of the world around him has been more given to him in depth and he understands more. He can now evaluate situations a lot more clearly and risk assess himself in those situations.” – Father

Following increased awareness raising through LSCB administered workshops, we have seen a doubling of referrals for children and young people, which means that more families and practitioners are benefitting from the specialist services provided and from increased and co-ordinated multi-agency work.

CEDSAP remain very concerned about Crown Court delays which cause huge distress to victim/witnesses and are now impacting trial outcomes. These matters have been escalated but they are yet to see a clear improvement.

Workforce Development

Excellent training, got everyone involved and very engaging

This course was very useful – lots of useful tools and programmes to take forward in my work

CEDSAP continue to provide a wide range of training with and for the LSCB:

- Levels 1 and 2 Domestic Abuse
- 'Toxic Trio'
- Responding to sexual violence
- Creating a Culture of Change – responding to those who harm
- Teen Relationship Abuse

In addition IDVAs in hospitals train staff to identify and refer appropriately and we run workshops for the Adults sector to inform their risk management including the safeguarding of children in the families of their clients.

CEDSAP have developed a key risk and needs assessment tool for practitioners involved in supporting children and families affected by domestic abuse. This is increasingly used in referrals and at case conferences/core groups to inform planning.

Board Members Front Line visits observations

Most teams had access to LSCB training and were sent the LSCB newsletters.

All agencies received safeguarding training, in house or through the LSCB. It was clear that safeguarding is embedded into practice. All agencies agreed that LSCB training content was of high quality and well publicised

An agency requested that confirmation of places is made at the

time of booking.

It suggested that managers should do the same training as frontline staff to ensure the support is there if required.

One agency also asked if there could be more training on

- Toxic Trio Training
- Self-harm and emotional behaviour

In most agencies, supervisions are held regularly and in line with policy. For the police however supervisions are not always available but the use of management oversight is continuously available at a number of levels including peer to peer support and challenge.

Most agencies felt supervisions are seen as being a really effective support tool for staff at all levels to air concerns and raise challenges if necessary.

Continuing to drive developments around Female genital mutilation (FGM)

The Local Safeguarding Children and Adults Boards across Cheshire agreed and implemented a pan-Cheshire practice guidance for FGM. This covers female children under the age of 18 and adult females including those who come under the Care Act 2014 definition of an Adult at risk.

To prevent FGM in the future, agencies need to work closer with practising communities and foster stronger links so together we are able to break the taboo and silence surrounding the harmful practice of FGM.

Continuing to drive developments around Radicalisation and extremism

The Prevent strategic work has evolved into a pan-Cheshire group, to ensure all agencies are kept up to date with latest developments. This will monitor that the Cheshire East Prevent action plan is completed. Partner agencies been asked to ensure they follow the Prevent training strategy by ensuring their staff and volunteers receive appropriate training. The CECSB website has a [Prevent page](#) where information on resources and training is available.

A Channel Panel has continued to meet throughout the year to safeguard individuals at risk from being radicalised or being groomed into becoming involved in acts of violent extremism. Channel is a cross-Cheshire initiative, led by Cheshire Police through community safety. The multi-agency Channel Panel manages risks on a 'case by case' basis through meetings. The panel is chaired by a senior manager from the Safer Communities Partnership. The overall number of cases considered has reduced due to nationally mandated changes from July 2016. 46% of referrals were for young people under 25, a small number of which had a prevalence of mental health issues.

Private Fostering

There has been positive progress around Private Fostering activity in Cheshire East during 2016/17:

Children's Social Care has been notified of 10 new private fostering arrangements. Following assessment, all of these notifications were confirmed as being private arrangements and came to the attention of Children's Social Care via the expected routes, indicating that

there is awareness in the community and across the partnership about what constitutes a private fostering arrangement.

- We continue to seek feedback from young people who attend their meetings to shape and develop the service.
- Young People feel listened to and they have access to independent advocacy.
- There are excellent links between Health, Education and Children's Social Care and work is underway to improve training and inductions to include private fostering.
- A clear communications and marketing strategy is in place which targets awareness raising across Cheshire East and a detailed log is being kept of who we are reaching.
- We have improved our data collection and use this effectively to target future activity
- Referrals are being made in a timely manner.



What young people said about Private Fostering:

“Don’t mind meetings but not too often”,

“Form needs to be changed for 2nd and other meetings”,

“Change the ratings on feedback forms - Outstanding (fab, brilliant) Good (good enough) Requires Improvement (could do better) and Inadequate (not good enough)”,

“Don’t want Mum there at meeting”,

“Done very well, don’t need to change”.

All of the above will be used to develop the feedback forms and the private review meeting in the coming year.

Child Protection Case Strategy meetings

There is an active task and finish group working on improving the quality of strategy discussions and ensuring that these are multi-agency meetings. This includes exploring the use of technology and improving systems to alert partners to a forthcoming strategy discussion.

The desired impact of this work is that strategy discussions will in the majority of cases be planned, multi-agency meetings. Although this work is not yet complete the activity from the group has already increased focus on multi-agency participation in strategy meetings across the partnership.

Embedding strengthening families

The new model for child protection conferences continued to be used during the year. This focuses on the strengths of the family as well as the areas that need to improve, which helps to engage children, young people and families in the planning process. It also helps families to understand why the plan is in place and what needs to happen to achieve it. Improved understanding and engagement with the plan and agencies delivering it should lead to improved outcomes for children, young people and families. A

review of the model was conducted which evidenced that has been well received as an improvement in addressing the issue of drift and improving planning. This will complement the implementation of Signs of Safety in 2017-2018.

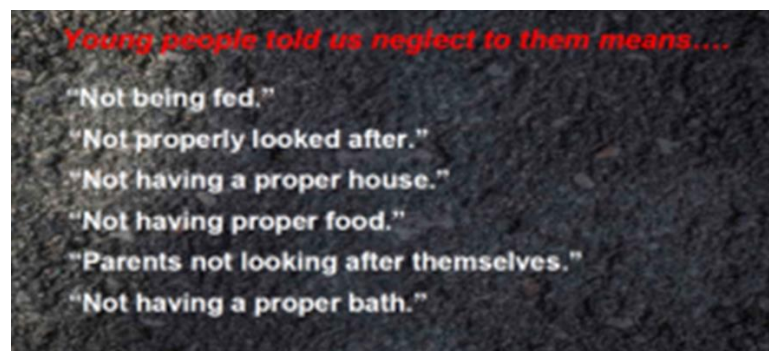
Implementing our neglect strategy

During 2016-2017 CECSB has revised its [neglect strategy](#) and developed [campaign resources](#) to highlight the issue of neglect, how to spot the signs, and what to do next. The toolkit contains visual templates, digital assets, messaging, and local information about neglect and campaign management advice.

Board Members Front Line visits observations

All agencies

- Commented that looking for and identifying neglect was common practice within their area of work.
- Detailed that if Neglect was identified that they would report this to ChECS, agencies were aware that this was an LSCB priority.
- Some said they found the Graded Care Profile helpful in identifying neglect and found it's used more and more by staff.



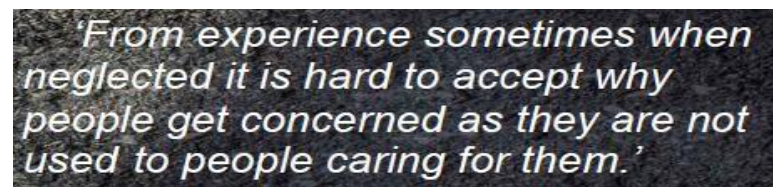
The campaign is one element of the new Neglect Strategy 2017-2019. This is a multi-agency approach to tackle the priorities for safeguarding the borough's children and young people.



The campaign's key messages are:

- What is neglect?
- How do we spot it?
- Where do I find more information?
- Who do I talk to?
- 1 in 10 children suffer neglect

The CECSB was fortunate to work with students from Eaton Bank Academy in Congleton in developing the campaign. To support workforce development on Neglect in the region of 300 practitioners have been training in the use of the Graded Care profile 2. Neglect will continue to be a focus for the Board in 2017-18.



Developing our Early Help Strategy

Having a strong early help offer is extremely important in ensuring we provide families with the support they need as soon as they need it, and we prevent problems from escalating. Serious problems can cause serious harm to children and young people in the long term, are detrimental to everyone in the family, and are more difficult to address.

A range of agencies are involved in identifying where families need additional support, and in providing early help. This strategy will support us to have a consistent and coordinated approach across the partnership, so all families can expect the same support and good quality service no matter what their needs are and where they live.

This strategy evaluates the needs of children, young people and families in Cheshire East, ensuring that our resources are targeted where they are most needed and will have the most impact.

The Strategy and action plan was endorsed by the Board for implementation in 2017-18.



Board Members Front Line visits - observations

Services were able to provide the rationale and importance of Early Help and working with parents for 'early intervention and early onset of support to avoid escalation'.

Most agencies commented they have a 'close' working relationship with the Early Help Brokerage service with 'direct' contact to them. Another agency identified that the '360' approach allows good information collecting from the wider agencies providing a better picture of the family and potential risks where previously barriers to information collecting have caused challenges.

Learning and Development

The Learning and Development sub-group have:

- Developed the GCP-2 training that forms part of the Neglect Strategy and are monitoring attendance
- Continued the development of topics and promotion of the 7 minute briefings to partner agencies
- Conducted a review of the CECSB multi-agency training to ensure that the local three houses model is embedded and that agencies role in child protection conferences is clear.
- Provided assurance that the voice of the child is central in all multi-agency training and have continued to work with "Voice of the child" to deliver "World through our eyes" workshops as part of the CECSB training offer.

A Toxic Trio toolkit was developed by SCOG to support all practitioners across the partnership to identify level of need. The expected impact of the framework is:

- Greater consistency across the partnership in respect of thresholds supported further by an increase in common language.
- Adult practitioners will have an increased focus on the impact on children of parental issues/factors.
- Children's practitioners will have increased ability to identify the right support for parents at the right time

Listening to Children and Young People

Voice for Children (VfC)

The voice of the child has continued to influence the work of the board in 2016-17; each board meeting begins with an item from a representative of Voice for Children to focus that brings a child centred approach. VfC also lead on many of the participation activities on behalf of the board. Liam Hill from VfC also brings with him his experiences from a number of other activities with vulnerable young people in Cheshire East, including visits to young people in placements. During 2016-17 Liam also co-chaired the Youth Justice Board National Convention.

The Children's Society is also a member of the board and influences our work through feedback from children and young people.



Board Members Front Line visits - observations

The majority of staff evidenced a positive commitment to engage and listen to children and young people.

Many services also evidenced a proactive approach to engaging and listening to children.

Voice of the child is included, for example, in the reception area children and young people have a suggestion box and comment 'tree';

In each of the meeting rooms the layout of chairs, tables etc. is designed to be inclusive. Initiatives such as the 'listen up groups' are aimed at supporting the child/young person and improving practice.

The colours and resources in meeting rooms are age and gender related; the art room appeals to all; the ambiance in each room is again aimed to encourage children and young people to communicate.

Young people can be trained to be part of a 'young adviser' group; they are paid through Cheshire East for providing peer support, advice and guidance.

Investors in Children

In 2016-17, CECSCB was proud to be awarded 'Investors in Children'.

The Investing in Children Membership Award™ recognises and celebrates examples of imaginative practice with children and young people. Investing in Children members are those services that can demonstrate a commitment to dialogue with young people that leads to change. An assessment was made on the work of the board on those areas that young people helped the board to identify to hear their voices:

- Establish a 'Scrutiny' Panel of young people.
- Improve the Cheshire East Safeguarding Children's Board (CECSB) website.
- Young people's survey of safeguarding.
- Annual celebration of children and young people's contribution to safeguarding.
- Look at the CECSB's training from a young person's perspective.
- Start each board meeting with the voice of the child.

Survey of Safeguarding

In 2016-17 the CECSB survey consulted with over 900 children and young people aged between 5 and 19, compared with 26 young people in the previous year's pilot. This identified some of the areas where young people had concerns and wanted more to be done by the CECSB as follows:

- Substance misuse
- Child Sexual Exploitation
- LGBTQ



- On-line safety
- Neglect
- Radicalisation and Extremism

These have been integrated into the CECSB Business Plan for 2017-18. This use of a survey will be repeated on a bi-yearly basis and consideration given to a variety of cohorts, including colleges and this work is underway.

"Challenge and Evidence" Panel of young people

A Challenge and Evidence Panel took place in October 2016 with a pupil Safeguarding group at a Cheshire East High School.

A 'you said, we did' approach had been adopted and the CECSB fed back to the young people on the progress made. The young people put a number of challenges to board members. The key areas challenged were:

- Wider participation with cared for children, e.g. foster carer recruitment
- Confusion between CSE and sexual abuse
- Domestic abuse – more info for young people
- Legal highs – lack of understanding
- Young people's access to safeguarding advice
- Availability of school based policing in Cheshire East

Annual celebration of children & young people's contribution to safeguarding

The annual 'Act Now' conference is a good example of participation. Young people organise, plan and lead the conference, supported by the Safeguarding Children in Education and Settings (SCiES) Team. This was called 'Act Now 16' and showcased and celebrated the peer led work in schools around safeguarding.

The young people presented on key safeguarding issues relevant to them including:

- Body Image
- Resilience
- Pupil Safeguarding group
- Staying safe on Social Media

The audience included staff from all member agencies, including social workers, health, police, voluntary sector, and councillors. The presentations from the young people have been used to raise awareness and promote issues across partner agencies via email, the website and key documents. More information on the conference is available on the CECBS website, including the presentations and a video of the day.

CECSB and the SCiES Team held a follow up event with the young people to thank them for their involvement.



November Children's Rights Month (NCRM)

November Children's Right's Month is an annual celebration of children's rights across the borough. CECBSB members took part in a range of activities including the 'takeover takeaway' developed by young people for adults to experience life for them. This included being bullied, getting arrested, becoming a care leaver by either setting up home on a budget or getting by on just £21 for a week. LSCB members also took part in Hands Up (for Children's Rights) where across Cheshire East everyone shows their support for Children's Rights synchronising this to a key moment where we will try to get as many hands up as possible. This year the theme was 'get creative', so members decorated their hands ready for Hands Up.



Strengthening Partnerships

We will strengthen relationships with other key partnerships to improve the reporting, accountability and sharing of good practice

Key updates from Children's services have been scheduled on the forward plan for the Health and Wellbeing Board to ensure they have strategic oversight and scrutiny of the quality of children's services and the key issues for children and young people in Cheshire East.

The Partnership Chairs Group has continued to meet during the year. It has been exploring cross cutting issues within Business Plans and identifying shared risks.



Performance, Scrutiny and Challenge

CESCB has a comprehensive quality assurance framework, which can be found on our website. In 2016-17 this has provided CESCB with a range of quantitative and qualitative information in relation to the effectiveness of safeguarding in Cheshire East.

Performance A quarterly picture, showing a clear trajectory of progress. Allowing us to set targets and evaluate our performance against our statistical neighbours.	Feedback from Children and Young People, Parents and Carers What children, young people and their families want and is important to them, what their experience is of our services.
Qualitative Information Detailed information on what is working well and areas for improvement for specific services, including what the causes of issues are.	Feedback from Staff What staff know would help them to work with families, what is working well, and what could work better.

Performance Monitoring

The CESCB scorecard has covers a range of measures from all partners and has been aligned with the areas of focus for the CECSB. It provides a robust oversight of safeguarding practice across the partnership. The CESCB Quality and Outcomes Sub Group is effectively scrutinising and challenging partnership performance and is driving improvements to partnership working.

This includes identifying risks to improving outcomes across the partnership that are subsequently added to the CESC's risk register where they are monitored and challenged until progress is made. An example of improvement has been the % GP reports submitted to initial case conference which stood at 34% in quarter 4 2015/16 and had increased to 83% by quarter 3 2016/7.

A range of quality assurance activity supports performance monitoring. Arrangements for this are robust and support and supplement partnership performance monitoring. This includes the CESC multi-agency audit programme, LSCB frontline visits, and the annual CESC Children and Young People's Challenge and Evidence Panel.

The Audit and Case Review subgroup has:

- Conducted a number of audits to inform multi-agency practice.
- Overseen reflective reviews
- Remodelled the audit and case review methodology and process
- Scrutinised single agency safeguarding audits

Areas of continued challenge in 2017-18 include:

- GP input to CP conferences – this has improved significantly through the work of the Designated GP, but will remain a focus in 2017-18
- Initial health assessments for cared for children – has been variable over the year, it has been challenged by CESC remains an areas for further improvement and scrutiny
- No. of disabled children on a plan – (7 in Q4)

Multi- Agency Audits

'Toxic trio'

The 'toxic trio', Domestic Abuse, Substance Misuse and Parental Mental Illness, are very often characteristics of the families involved with safeguarding services and are factors in many of the serious case reviews carried out after a child has died or been seriously injured and abuse or neglect is thought to be involved .

To consider we do this, a "live" case discussion model was trailed involving a family scenario. Agencies were invited to consider their real life responses to the incidents, how they would work with the family and the other agencies following each incident. The aim was to identify any potential improvements in the way that agencies organise their services to make it easy for families who have multiple complex problems to access help and support.

The exercise exposed a gap between Strategic leads and Practitioners views on in the reality of response and level of need of the situation. There were also differing postcode defined resources which impact on response.

It also indicated that whilst appropriate tools are available, i.e. GCP, orange sheet, CAF, these are not being routinely used and that caseload pressure was seen as the hurdle to some of this.

There was recognition of the importance of information sharing and the need for multi-agency working. However the issue of services clarifying which others are involved with a family remains a challenge

Domestic Abuse

This audit was undertaken to assess the quality of our support to children and young people at risk from domestic abuse. It identified areas for improvement specific to work around domestic abuse:

1. Ensure pathways between ChECS, the Domestic Abuse Hub, and specialist domestic abuse services are robust and information is routinely shared to effectively protect children and young people.
2. Ensure that there is sufficient capacity within commissioned domestic abuse services.
3. Ensure guidance is available for professionals on what domestic abuse programmes are appropriate for parents to undertake
4. A case list of domestic abuse cases at early help to be sampled in order to establish whether the right cases are being classified as domestic abuse.
5. Review whether schools could receive copies of the MARAC minutes.

Domestic abuse has been a feature of most LSCB reviews including a current Serious Case Review. There has been evidence of good practice including information sharing, risk management and multi-agency co-ordination as well as learning that has resulted in SMART action planning.

Core Group Audit

CECSB audits have shown that collective reports to child protection conferences were not routinely providing appropriate depth of information. This was due insufficient multi-agency contributions to the collective report which meant that multi-agency working was

not identifiable from the collective report. A single agency report has been introduced and rolled out via SCOG and the CECSB newsletter.

There is a task and finish group currently developing a quality assurance framework for single agency reports to identify standards and how these will be monitored and reviewed. This group are also developing a quality assurance framework for wider core group activity to improve of the functioning of these.

The prediction made at the referral stage that a s47 enquiry was likely to be necessary was incorrect for 62.5% of the cases. We know anecdotally from our work in other LA's that the figure for CE is high. The decision to hold a strategy discussion was often made with limited information.

In relation to Domestic Abuse a multi-agency audit found the following strengths:

- Children and young people are protected and were found to be experiencing good outcomes
- Identification of risk and response from agencies was swift and appropriate
- Information from other agencies is appropriately gathered within ChECS, resulting in families receiving the right level of support.
- All cases were found to be supported at the right level of need
- Families understood the purpose of plans and why services were involved
- Evidence of good multi-agency working, and information sharing between the core agencies
- MARAC was shown to be effective in supporting good information sharing and identification of risks for children

- Examples of good direct work and support to children and young people and their families
- Examples of appropriate challenge between agencies driving good outcomes for children
- Operation of the Domestic Abuse Hub as a central point of contact for agencies for support and information sharing

It also identified areas for improvement relating to the quality of practice within the wider system:

- Assessments and plans addressed the key presenting risks from domestic abuse, but did not always evaluate or address all the risks within the family, such as disguised compliance and parental substance misuse.
- Permanency for children and young people needs to be a key consideration in planning from a much earlier stage.
- Still have more to do to ensure the lived experience of children and young people is fully understood and reflected in all our work.
- Wider family members need to be more involved in planning.
- Involvement from wider agencies, such as Housing, alcohol and substance misuse services, was not always sought
- All agencies need to be proactive in ensuring they have the full context for the family and understand the risks involved.
- Plans still need to be SMARTer, and the use of contingency plans needs to be improved.
- Quality of case recording overall needs to be improved.

Serious Case Reviews (SCR):

This year we have had a child that has required a Serious Case Review. This review has not been completed within this year due to an ongoing investigation.

Reflective Reviews:

This year the LSCB received two notifications of cases that required Reflective Reviews. The outcomes of these will report to the CECSB in 2017-18.

Single Agency Audits

The Audit and Case Review sub-group has a rolling programme of considering single agency audits and reviews. The audits are presented by the relevant agency and provide additional opportunities to share learning and to scrutinise the work of partners. In the last year audits have been received from Eastern and South Cheshire CCGs; these covered Safeguarding Children – Health Visiting, Maternity – Annual Safeguarding Audit and Climbe Compliance – Paediatrics.

Examples of risks identified in these audits are

- No Designated Doctor for safeguarding children in post in South Cheshire CCG. Designated Doctor in post in Eastern Cheshire CCG who is able to provide advice to the CECSB. Firm plan agreed to provide 5 sessions for an appropriately qualified Paediatrician to carry out the Designated Doctor role across the Cheshire East footprint as from June 2016.
- Initial health assessments for Cared for Children are not being routinely carried out within required statutory time frame. Work being carried out with the LA and NHS providers to

improve communication regarding notification and consent when children are taken into care and to ensure sufficient capacity within providers to provide clinics where health assessments are undertaken.

The National Probation Service have not undertaken any recent audits in respect of safeguarding children, however they have one planned for August 2017.

Frontline visits

Member visits to frontline services are a key part of the LSCB quality assurance framework they provide a connection between the Board and frontline practice. The agencies requested to host during this round were:

- Cheshire & Wirral Partnership Trust (CAMHS Crewe)
- Cheshire East Council Frontline Line Social Work
- Styal Prison
- Cheshire Police
- Cheshire East Council Principal Manager, Family Services
- Catch 22
- CAFCASS

Each visit was underpinned by a questionnaire on the following key areas:

- Understanding the role of The Board
- Evidencing the voice of the child
- Understanding the agency role in safeguarding
- Support from managers/colleagues / Challenge and escalation
- Agencies response to Neglect
- Graded Care Profile

- Early Help
- Forward Planning
- Thresholds of intervention
- Suggestions for the board

There were some key themes from the reports received and these are distributed around this report.

Section 11 Audits

Section 11 (4) of the Children Act 2004 requires each person or body to which the duties apply to ensure they have arrangements in place to safeguard and promote the welfare of children. During 2016-17 agencies continued to focus on the priorities identified in their S11 audits from the previous year. The Board will be carrying out Section 11 Audits again in 2017-18.

Section 175/157 Audits

Schools complete an annual S175/157 audit, this covers all the key areas of S11; findings from this audit are reported during the autumn to the CECSB.

Challenge Log

The CECSB has made a number of challenges to single agencies during 2015-2016. These are collated in a challenge log that track and monitor the responses ensuring that issues are addressed. This included raising concerns with a care provider on the quality of their responses to risk taking behaviours.

Board Members Frontline visits - observations

Staff felt confident in raising a challenge and some have experienced their service challenging another agency or partner

agency challenging them.

Examples of challenge were evidenced by multiple agencies and those challenges had positive outcomes. This provided good reassurance that staff are comfortable in escalating as required to their managers.

Local Authority Designated Officer (LADO)

The Local Authority Designated Officer (LADO) oversees investigations into allegations against staff and volunteers who work with children and young people. Cheshire East's LADO sits within the Council's Safeguarding Unit. The Board oversees the work of the LADO through scrutiny of its annual report and activity reports to the Quality and Outcomes sub group.

During 2016/17 there were 233 referrals to the Cheshire East LADO, which is a reduction of 89 from 2015/16.

- Of these: 91 (40%) were categorised as Consultations; 85 (36%) as No Further Action after Initial Consideration; and 57 (24%) met the threshold for a LADO strategy meeting.
- Most referrals were from professionals working in the Education Sector (30%) which is a 10% increase from last year.
- There were a total number of 56 contacts from education professionals of which 17 (30%) met the threshold for a LADO strategy meeting: 28 (50%) were consultations only and did not need any preliminary investigation to determine whether the threshold was met.
- There was no clear distinction between types of schools making referrals to LADO.

- 21% of referrals came from social care, which is consistent with last year when 24% of referrals came from social care. It should be noted that only 1 (8) % of these referrals related to a social care employee. The remaining 98% related to Education staff (67%); Foster Carers (17%) and transport (8%).
- 14% of referrals were from the police, an increase of 10% from last year. 7 out of the 8 referrals came from Cheshire Police, the other came from GMP. None of the referrals related to police officers. Cheshire Police have confirmed that they are fully aware of their obligations regarding referrals to LADO and confident that any case that would require a referral to LADO will be made.
- Referrals from and about those working in the voluntary and faith sectors remain low. LADO's throughout the country have reported similarly low levels from these sectors, however it is reported that relationships with safeguarding leads in the respective diocese is largely positive.

The LADO has continued to ensure that allegations are managed in a timely way: 76% of referrals were concluded within 3 months, a reduction from 88% in 2015/16. There have been several cases which have incurred significant delay (more than 12 months) once they reach the court arena. The delay appears to be a result of judiciary capacity and beyond the involved agencies control.

CECSB Training and Development

[CESCB training](#) continues to develop, deliver and evaluate a robust needs led multi-agency training package.

During the year 65 multi-agency courses were delivered to 1652 participants with an overall attendance figure of 100% which are the highest recorded in 13 years. No courses were cancelled or postponed.

Organisation	15-16	16-17
Children & Families	22%	19%
Social Care	18%	22%
Early Years	5%	8%
Primary Schools	11%	9%
Secondary/Colleges	4%	2%
Special Schools	1.5%	1%
Independent Schools	0.5%	0.5%
NHS	13%	13%
Adult Health	0	0
CWP	5%	5%
Housing	0.5%	2%
Justice & Crime Prevention	5%	3%
Voluntary	13.5%	15%
Adults	1%	0.5%

Table 6: Training attendance percentages

Attendance is from across all areas of the children's workforce. However there are notable exceptions including Cheshire fire service, northwest regional ambulance service and Styal prison: work is being progress with these organisations to promote LSCB training with promising networks created with Styal prison.

Courses were deliberately over subscribed to maximise attendance. The average attendance was 25 which is the planned number per course. Work continues to review courses where numbers drop below 20. Attendance on multi-agency training increased for social care, early years and housing and has decreased for children and families, primary schools, secondary schools/colleges and justice/crime prevention.

In addition to the existing training program a suite of E-Learning courses was developed and accessed by 400 staff.

140 multi-agency staff attended "Working Together" lunch time seminars in Crewe and Macclesfield. These covered topics requested by the attendees, home schooled children and safeguarding, C.S.E and the changes to the Youth Engagement Service.

Learner feedback:

Feel better equipped to take protective steps especially when we have a hunch.

Cheshire East LSCB provides excellent training.

Course had enabled me to be confident in the use of GCP2 I can think of a family I want to use it with straight away.

Extremely well presented, speaker passionate and clearly knew the topic well.

The trainer engaged the group throughout the day, on a very sensitive subject, amazing to be able to share her story. This will definitely change my practice.

I have looked at some families I am working with in a different way and planned certain sessions differently

As a student Health Visitor this session gave me a great overview of my role in safeguarding children, observing such things as family dynamics, predisposing factors, disguised compliance and the importance of working within a multi-disciplinary framework.

I have encouraged practitioners to refer children to SARC when a referral had not previously been considered

During this year's Frontline visits all agencies agreed that CECSB training content was of high quality and well publicised.

Bespoke events, new courses and development activity:

- As part of the neglect strategy the GCP2 has been launched as the evidence based assessment tool to support practitioners to identify neglect and prioritise need. 300 practitioners were trained within 4 months.
- 209 staff attended Rape and Sexual assault workshops from adult and children services.
- Collaboration with the Councils Workforce Development Team and Children's Social Care has resulted in the sharing and development of training processes such as building e-learning capacity and refining evaluation methods.
- Developed an e-learning portal and produced Introductory courses on Child Sexual Exploitation and "What to do when you are worried about a child" for partners across the workforce.
- Assisted with the promotion and development of the "Working Together" seminars. Attendees have requested future seminars to include; Signs of Safety, Substance Misuse and a better understanding of certain practitioner roles and responsibilities.

- Developments of both monthly training bulletins and 7 minute briefings have facilitated timely communication to all partners of current safeguarding issues. Both have been received well and are reported to be useful.



5. 2015-16 Annual Reports

Summary of reports

Each partner agency is expected to meet their safeguarding responsibilities as described in the member compact and under Section 11. All agencies are expected to ensure their staff and volunteers undertake appropriate single and multi-agency training.

Partner agencies are expected to provide an annual update for scrutiny to the board, setting out any key achievements in the previous year.

Extracts are included below from some of the reports on activities that have taken place over the last year by our partners.

CAFCASS

The **Children and Family Court Advisory and Support Service** (Cafcass) main priorities in 2016-17 were to continue to improve the quality of their work, and to support family justice reform. An example of this is support to their child exploitation and diversity ambassadors/champions who collate learning from inside and outside the organisation on these subjects and promote it to colleagues.

The demand on Cafcass services grew once again in 2016/17, by around 13% in public law (involving the local authority) and 9% in private law (involving arrangements for children following parental separation). Demand is now approximately 30% higher in public law, and 20% higher in private law, than it was three years ago, putting the family justice system under considerable pressure. Nonetheless, each of Cafcass' key performance indicators has been met.

The Cafcass research programme undertook a small-scale internal research into: domestic abuse in spend-time-with (contact) applications (this has been in collaboration with Women's Aid); trafficking and radicalisation cases known to us; and high conflict (rule 16.4) cases.

Health

In June 2016 The Care Quality Commission (CQC) undertook a review of Safeguarding and Looked after Children Services across the **Cheshire East health economy**. A full report was published in [October 2016](#).

The CQC identified a strong culture of safeguarding across the health economy as well as strong and visible leadership. They identified many areas of good practice as well as some areas requiring further development.

Action plans have been developed by the Clinical Commissioning Group (CCG) and all providers. Progress on action plans are



monitored through Safeguarding Assurance Meetings with providers and the Clinical Quality and Performance Committee.

The work of the CCGs is aligned to the CECSB priorities of improving practice, listening to children and young people and strengthening partnership working.

The CCGs have contributed to partnership working through the work of the Health and Well-Being Board and to the CECSB Board and all of its sub groups. This has included the work of Child Death Overview Panel, the multi-agency case audit process, neglect strategy and Practice Learning Reviews as well as the newly established Quality and Outcomes sub group. They have worked with the LA commissioners to develop joint safeguarding standards and quality assurance processes for providers. They have strengthened their links to the Corporate Parenting Board and worked jointly with the LA to improve the timeliness and quality of initial health assessments for cared for children. They are working with partners in developing an integrated and co-located front door.

The CCGs are committed to listening to and acting on the experiences and views of services users. This commitment is reflected in the provider safeguarding standards and in the quality assurance processes. The work of the CCG in promoting 'the voice of the child' this year is outlined in more detail later in this report.

The CCGs have a responsibility to promote quality in health care. This year we have focussed on GP practice in safeguarding and the Quality of health assessments for Cared for Children. There is improved information sharing processes between GPs, other health professionals and other agencies. There has been a significant increase in the number of reports provided by GPs for child

protection case conferences. More robust information sharing processes have been developed in respect of the primary health care team and information sharing in the arena of child sexual exploitation.

There has been good multi-agency work undertaken between health and the LA to establish timelier and better quality health assessments for Cared for Children. There has been a significant improvement and the work will continue.

The CCGs are committed to listening to the voice of young people when commissioning health care services. They work closely with youth advisors drawn together from Local schools, local employers and organisations representing young people.

They engage young people in describing how services work for them and how they could be improved e.g. there has been consultation with young people during the development of Cared for Children's health booklet and in relation to their own health as they leave care.

Cheshire and Wirral Partnership (CWP) have strengthened the governance arrangements surrounding and responding to notification of case conferences. Cheshire East safeguarding unit notify CWP of all initial child protection case conferences. CWP safeguarding team identify if CWP are involved with a case and invite the relevant staff to the conference, ensuring they can access safeguarding supervision and that the relevant paperwork necessary for conference is completed. In addition for those cases where CWP has had previous involvement but are not currently open to CWP, a summary of CWP's involvement and potential risks associated with this is routinely forwarded to the conference chairs.

CWP has ensured that all staff who may be involved in safeguarding children have been made aware of all the relevant safeguarding children tools (for example, graded care profile, Home Conditions etc.) used for assessing risks to family's and the child protection process. It is an integral part of CWP safeguarding children training programme.

Safeguarding practice links (SPLs) have been identified in East Cheshire clinical teams who are supporting and signposting their teams on safeguarding matters as well as championing safeguarding. Group supervision is provided for these SPLs every two months.

CWP have refreshed their Safeguarding strategy to ensure Safeguarding continues to be a priority across the organisation. Objectives are set to reflect those of the LSCBs. The CWP safeguarding strategy is underpinned by the "Think Family" approach.

CWP have a single agency safeguarding audit programme focusing on outcomes for children and young people as well as focusing on the engagement of adult services within the safeguarding children agenda.

CWP continue to strive to capture the voice of the child and have a participation programme. Within the CAMHS programme the voice of the child and the engagement of their views is central. Supervision records evidence that the voice of the child is at the centre of the case.

Probation

The **National Probation Service** (NPS) have a Divisional

safeguarding leads structure embedded and has put in place an action plan in relation to safeguarding children. They have increased the number of staff who have completed NPS mandatory training as well as CECSB training. All new staff have a pathway in terms of learning and development. There is a protocol and additional focus on home visiting and requirements to observe relevant factors, which links to neglect referral. They have captured the voice of the child in their OASys assessments, MAPPA meetings and through home visiting protocol and ensuring direct contact with children is recorded in agency records.

Schools

Education settings including schools, colleges and early year's providers have continued to develop their knowledge and response to safeguarding. They are supported in this work by the Safeguarding Children in Education Settings (SCiES) team.

Education settings continue to respond to expectations placed upon them, around Safeguarding, from the government; for example, during this year "Keeping Children Safe in Education" statutory guidance has been updated, as a result of which, they have to have one policy document for "Safeguarding and Child Protection"; education settings have implemented this with many using the exemplar policy provided by SCiES. There is now an expectation that there is an annual Safeguarding update for all education staff; settings have facilitated this; the update has included information on Trafficking, Breast Ironing, and radicalisation. In every education setting there now has to be an identified Deputy Designated Safeguarding Lead in addition to the Designated Safeguarding Lead. What is very positive to note is that, with this expectation, as well as with other expectations of the updated "Keeping Children

Safe” guidance many Cheshire East education settings were already doing those things as it had been promoted as good practice by the SCiES team.

Sexualised behaviour in children has emerged as a concern this year; as a result education settings have accessed advice and practical support. Wide use is made of the Brook Traffic Light Tool to support an understanding of what is normal, what is a concern and to offer practical ways of managing this. SCiES have run Harmful Sexualised Behaviour training; collaborating closely with partner agencies; supporting education settings in developing a proactive approach as well as supporting specific plans where identified risk is high.

Education settings have continued to develop their approach to, and resources for, evidencing the Voice of the Child. Many have accessed SCiES training and implemented their templates to support this. A multiagency working party has developed materials to support with gaining the voice of the child where there may be communication difficulties. As a result of all this work there are specific examples of where it has impacted on decisions made in multi-agency meetings.

Many education settings have set up Safeguarding groups with their pupils or have had a focus on safeguarding with their existing school council; there are many examples of the difference they have made e.g. changing the way parking outside the school takes place, changing practice/behaviour on line, influencing positive changes in the school environment, impacting on school policy development.

Schools are consistently identified as effective in their safeguarding practice by Ofsted.

Police

The Police have now fully digitalised the process of recording and managing cases of people reported missing from home (MfH). They have revised the policy to take into account the requirements of the College of Policing Authorised Professional Practice which has also removed the absent category. These improvements have already reaped benefits in the efficiency of managing missing from home cases ensuring that people are returned home safe and well as well as reducing future missing incidents.

The number of MfH cases continues to rise which has an impact of vulnerable young people who are often the repeat MfH cases. Work is ongoing to provide oversight on this issue in order that it can be understood and addressed. The number of children in care who are MfH continues to rise. Particular issues are experienced with some privately run homes. Work is ongoing with the care homes problem solving group in order to address these issues.

Child exploitation remains a priority for the force and a great deal of effort goes into the identification of potential victims and perpetrators of Child Sexual Abuse. Officers and staff are trained to identify and flag cases to ensure they are thoroughly investigated and that safeguarding can be put into place. Officers are in place in each policing area to act as Single Points of Contact specialising in CSE. They have oversight of all cases in each area and ensure an effective response is provided to cases where CSE has been identified.

Cyber enabled crime is an increasing crime type that presents challenges to law enforcement. This is a rapidly evolving area of policing where new tactics are being developed to neutralise the threat posed by offenders with a sexual interest in children.

6. Key Priorities for 2016-18

Key Partnership Priorities

The three overarching objectives remain for 2016-18;

- **Frontline practice is consistently good, effective and outcome focused**
- **Listening to and acting on the voice of children and young people**
- **The partnership effectively protects and ensures good outcomes for all children and young people in Cheshire East**

At a Board workshop members worked together to agree the following key priorities and actions that will sit under the objectives;

- Implementation of the [neglect strategy](#)
- Improving the effectiveness of multi-agency child protection/child in need planning
 - Improve the quality of the Child in Need meetings
 - A task & finish group to be established to determine the scope of work.
 - A suite of evidence based practice tools for assessments, direct work and planning to be agreed
 - Implementation of the Signs of Safety
- Oversee the deliver and engagement with the Early Help strategy
- Strengthen our response to Complex Safeguarding and Safeguarding vulnerable groups

- Develop local implementation plans for vulnerable groups and on-line safety based on the PAN Cheshire strategies.
- Ensure that Young Carers are identified early and services become more 'joined up'.
- Collaborate with LSAB, to improve the way that agencies work together to respond to the whole family.
- Provide assurance to the Board that agencies respond and link LGBTQ young people into support services as appropriate.
- Effectiveness of partnership response to child sexual abuse to ensure good outcomes.
- Dedicated consistent approach to new emerging issues i.e. Trafficking. Child Sexual Exploitation, On-line safety

Budget for 2017-18

An outline budget for CESC's work in 2017-18 is set out at Appendix 4.

Risks and Issues

It is essential to identify, analyse and prioritise risks to ensure that these are managed effectively and do not impact adversely on the Board's plans. The Board maintains a risk register which is reviewed and updated bi-monthly at the Executive Group.

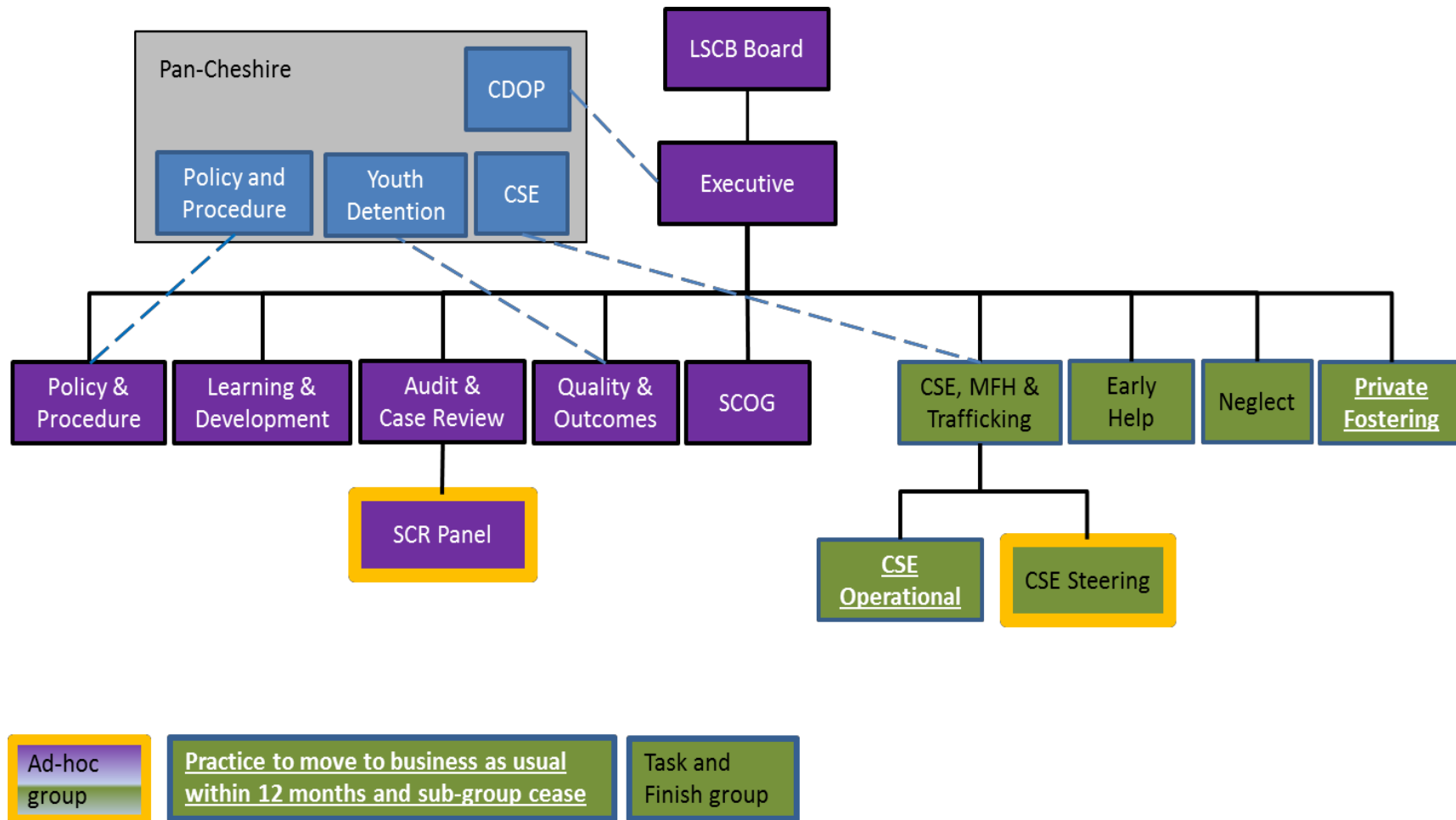
During the year the following risks were closed as the LSCB were assured by the actions taken to address each risk.

- Recruitment and retention of Social Workers, Team Managers and Independent Review Officers

- Lack of Designated Doctor for South Cheshire CCG area as part of Cheshire East Council footprint
- GP's attendance/reporting for Child Protection Plans/Conferences
- Disbandment of the Improvement Board
- CCG Recruitment to the vacant cared for nurse for 16-25

The LSCB Budget was added to the risk register as partners budgets are under pressure and this impacts upon their ability to contribute.

Appendix 1: Cheshire East Safeguarding Board Structure



Appendix 2: Board Membership and Attendance

	26.05.16	28.07.16	22.09.16	24.11.16	31.01.17	30.03.17	25.05.17
Independent Chair							
Voice for Children						A	
The Children's Society				A	A	A	A
South Cheshire CCG				A	A		A
East Cheshire CCG							
South and Eastern Cheshire CCG Designated Nurse							A
CWP NHS Foundation Trust							
East Cheshire NHS Trust						A	
Mid Cheshire Hospital NHS Foundation Trust		A	A			A	
Wirral Community NHS Trust		A					
NHS England	A	A		A			A
Public Health		A					
Executive Director of People		A		A			
Lead Member for Children's Services		A		A			A
Head of Children's Safeguarding							
Director of Children's Social Care							A
Head of Youth Engagement Service		A	A	A			
Head of Service - Children in Need and Child Protection					A		
Principle Manager for Early Help				A	A		
Safeguarding Adults Strategic Manager							
Cheshire East Domestic Abuse Partnership (CEDAP)			A	A	A		
Cheshire Police							
Head of Service - Youth Justice							A
Cheshire Fire Service						A	A
Primary School Heads Representative		A	A	A		A	
Secondary Schools Head Representative		A	A	A			A
Representative for Colleges and Further Education		A		A			
Independent Schools Representative	A	A	A	A			
HMP Styal Head of Residence and Services							
Probation - CRC			A		A	A	A
Probation - NPS			A				A
Lay Member	A	A	A			A	
Lay Member	A	A					
NSPCC							
Voluntary Sector Representative	A	A					A
Voluntary Sector Representative							
Housing					A		
Cheshire CAFCASS							

Appendix 3: Financial Arrangements – 2016-17

The tables below sets out the CECSB's outline budget and outturn expenditure for 2016-17, along with the financial contributions from partners.

Area of Expenditure	2016-17 Actuals (£)
Direct Employee Exps	£161,187
Safeguarding Project Manager (0.70 fte)	
Performance Officer (0.50 fte)	
Training Manager (0.81 fte)	
Training Officer (0.91 fte)	
CECSB Admin (2 fte)	
Indirect Employee Exps	£0
Employee training	
Conferences and seminars	
Transport	£2,196
Mileage and car parking	
Premises	£7,554
Hire of rooms for training, CECSB meetings	
Supplies and Services	£72,268
Independent Chair	
Agency staffing to cover Safeguarding Project Manager post prior to appointment	
Training costs - printing, tutor and course costs	
CDOP Pan-Cheshire Chair (CE contribution)	
Peer challenge costs	
Auditor costs	
LADO funding (0.5 fte)	
Phone and mobile phone charges	
Lay member expenses	
Refreshments for meetings	
Competition prizes	
TOTAL EXPENDITURE	£243,205
Carry forward reserves from 2015-16	£76,303
Income in 2016-17	£240,409
Total available spend 2016-17	£316,712
Expenditure 2016-17	£243,205
Reserve carry forward to 2017-18	£73,507

Appendix 3: Partner Contributions

	CESCB Partners	2016-17 contributions
Health	Eastern Cheshire NHS	£5,000
	Mid Cheshire Hospitals	£6,772
	South Cheshire CCG	£18,778
	Eastern Cheshire CCG	£18,778
	Cheshire and Wirral Partnership	£4,093
	Wirral Community NHS Trust	£5,500
Criminal Justice	Probation Service (NRC)	£1,700
	Probation Service (NPS)	£992
	Police	£25,000
	HMP STYAL	£2,000
	CAFCASS	£550
LA	Local Authority	£41,000
	YOS (to be included in above from 2017-18)	£3,300
Education	Schools	£92,950
	Independent Schools	£5,500
	Cheshire FE Consortium	£4,500
	Total	£236,413

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ANNUAL REPORT TO: Cheshire East Health and Wellbeing Board FOR INFORMATION

Report of:	Sheila Williams Designated Nurse Cared for Children and Moira McGrath Designated Nurse Children's Safeguarding
Subject/Title:	The Health of Cared for Children and Young People Annual Report: Apr 2016 - 2017

"Most children become looked after as a result of abuse and neglect. Although they have many of the same health issues as their peers, the extent of these is often greater because of their past experiences. For example, almost half of children in care have a diagnosable mental health disorder and two thirds have special educational needs. Delays in identifying and meeting their emotional well being and mental health needs can have far reaching effects on all aspects of their lives, including their chances of reaching their potential and leading happy and healthy lives as adults" (DfE &DoH, 2015).

Purpose

The purpose of this report is to provide assurance to Cheshire East Health and Wellbeing Board in their role as corporate parents of the children in their care. It will also highlight any areas for further service improvement and priorities for 2017 - 18.

Statutory guidance places a duty on CCGs to work with local authorities to promote the health and well being of Looked after Children and to ensure that suitable arrangements are in place.

"Parents want their child to be healthy and happy and to reach their full potential." (DfE &DoH, 2015).

It is important to recognise both the statutory responsibilities for this vulnerable group of children and young people, and the role of agencies working together as corporate parents, in having "high aspirations":

Regular surveillance is provided via quarterly updates to the Quality and Outcomes sub group of the LSCB; six monthly updates to the Health and Wellbeing Board and an annual report to the Cheshire East Corporate Parenting Board and South and Eastern Cheshire CCG respective Governing Bodies.

In Cheshire East, Looked after Children (LAC) are referred to as Cared for Children. For the purposes of this report the terms are synonymous.

Executive Summary

In response to legislative changes and to meet the needs of Cared for children, multi agency partnerships have been strengthened through the development of closer work and engagement with the Corporate Parenting Operational Group. This group reports to the Corporate Parenting Committee and provides greater scrutiny of local partnership working in relation to Looked after Children's health.

There have been some changes and additions to the Looked after Children team over the year. The CCG has reviewed its commissioning arrangements of the Looked after Children's health team and this is now being provided by Wirral Community NHS Trust, improving the alignment and communication with community services across Cheshire East. An opportunity has arisen to review the role of the designated nurse for Cared for Children to maximise available clinical time. The 0-19 year service is commissioned by Public Health to provide review health assessments for Cared for Children. Importantly, we are now working in partnership with CEC to deliver the Special Educational Needs and Disability (SEND) strategy to ensure this group of children (approximately 25%) are clearly identified and supported across the age spectrum. This more integrated approach will continue to reduce any unwarranted variation and optimise resources.

In September 2016 the newly appointed 16+ and Transition nurse for Looked after Children came into post. Primarily this role is to support care leavers and help prepare them for adulthood and independence. We have already seen good progress. Examples include: alignment/streamlining of processes; development of assessment tools bespoke to Cared for Children; working with the Designated clinical Officer (DCO) for SEND; improved signposting to local services and the establishment of formal and informal networking across sexual health, CAMHS, CSE, drug and alcohol services and the wider system.

Importantly, the relationships with this group of young people appear to have strengthened. Consequently we are better informed and able to prioritise and develop work plans specifically to address issues this group of young people face and support them to develop solutions.

The CCG has prioritised work in 2017 – 2018 to improve compliance with timescales for statutory health assessments and the use of Health Passports for Care leavers. Progress has been made in both these areas and work continues. There are clear plans to accelerate this passport work to include all Cared for Children and address. There will also be an increased focus on the emotional wellbeing and mental health of this group of children.

CQC carried out an inspection of arrangements in relation to Looked after Children and Safeguarding (CQC, 2017). The result was positive overall and good progress has been made in response to their recommendations.

Context

How NHS Eastern and South Cheshire Clinical Commissioning Groups has met their responsibilities for Cared for Children within the Legal Framework.

The CCG has responded to changes in the legal framework to ensure it meets its responsibilities to Cared for children. Intercollegiate guidance (RCN and RCPCH, 2015) makes recommendations as to appropriate knowledge skills and competencies of health care staff working with Cared for Children. The CCG has a Designated Doctor and a Designated Nurse for Looked after Children. The CCG also recognises the need to ensure an integrated approach to commissioning Looked after Children's health provision without unwarranted variation (NHSE, 2017). With the retirement of the Designated Looked after Children Nurse an opportunity has arisen to review the role and a decision was made to jointly commissioning a full time Designated Nurse Looked After Children Nurse to work across the four Cheshire CCGs. This post will be supported by an administrator 22.5 hrs per week to ensure the designated nurse has more clinical time to deliver their responsibilities. At the time of writing this report, interviews have taken place and appointments have been made to both posts. The administrator will take up post at the beginning of September 2017, the Designated Nurse start date is subject to employment checks and notice requirements. Interim arrangements are in place to mitigate any risks to ensure there are no gaps in the service.

The Children and Social Work Act (HMSO, 2017) strengthens the principles of corporate parenting and the requirement that local authorities work with "relevant partners" in this regard. There is also an emphasis on the "local offer for care leavers" which includes promoting their health and well being. In response the CCG has commissioned a 16+ and Transition Nurse who works closely with the 16-19 School Nurse Specialist and the Child Sexual Exploitation (CSE) nurse specialist to meet the specific health needs of this group of young people. The role is key to further developing this area of work in partnership with the local authority. In particular this will include participation work to promote the mental health of children and young people.

Following the Children and Families Act 2014 reforms, there is an increasing emphasis on the need to have a co-ordinated approach to Special Educational Needs and Disability (SEND) (DfE and DH, 2017) and for CCGs to have a Designated Clinical Officer (DCO) in place. The CCG responsibilities for Looked after Children with SEND are linked to their corporate parenting responsibilities.

The SEND Joint Partnership Board has recently finalised a strategy. DCO plans are aligned to deliver this strategy plus the priorities identified following a CCG 'gap analysis'. Health is represented on this board by the DCO and an Executive lead

from the CCGs. The joint board has 5 workstreams, one of which is health. Work continues locally to ensure integrated provision of services with regular meetings and information sharing between the LAC team and the DCO. Early identification of children with SEN is key and we are currently working with CEC to map the sufficiency needs of this group. This is particularly important as 25% of our Looked After children population require education and health care plans.

Population

At 31st March, 2017, 429 children were cared for by Cheshire East Council. This ratio of 56 Children in Care to every 10,000 children in a population is similar to our statistical neighbours.

In addition there 198 children placed in Cheshire East area by other local authorities.

Key performance indicators

Statutory government returns in relation to children who have been in care more than a year have been collated for the period 1st April 2015 to 31st March 2016

Whilst there is no data available for the March 2016 – 17 we have made significant improvements in relation to compliance with statutory health assessments:

Percentage of children who have been in care more than a year with an up to date health assessment in the year ending 31st March 2017

Year ending	March 2017	March 2016	March 2015	March 2014
% children National	No data	90%	90%	88%
% children CEC	90.9%	70.8%	95.9%	97.6%

National data source: Department of Education: Children looked after in England (including adoption and care leavers), year ending 31 March 2016: additional tables: SFR 41/2016, 8 December 2016

This figure is up 20% from last year and in part is related to improvements in the process of requesting and recording health assessments on Liquid Logic (the local authority electronic records). Where compliance has not been maintained the majority relate to reluctance on the part of some 16+ young people, of the school age children 4 related to delay with out of area requests and 8 related to delay due to school nurse capacity. Where 16+ young people are reluctant or refuse a range of processes are being developed in conjunction with personal advisors to ensure that a health care plan is in place.

Percentage of children with up to date immunisations ending 31st March

Year ending	March 2017	March 2016	March 2015	March 2014
% children National	No data	87%	88%	87%
% children CEC	92.9%	82.7%	98%	97.6%

There has been an improvement in the recording of up to date immunisation status at the time of review health assessment to which this improvement is attributed. There is a need to continue to progress this improvement further.

Percentage of children with up to date developmental checks - under five year olds up to date at 31st Dec

Year ending	2017	2016	2015	2014
% children National	No data	No data	No data	No data
% of children CEC	100%	82.4%	100%	100%

Compliance with the healthy child programme is excellent and has improved from last year.

Percentage of children who have had a dental check in year ending 31st March

Year ending	2017	2016	2015	2014
% children National	No data	84%	86%	84%
% of children CEC	80%	76%	98%	98%

Dental check dates need to be recorded more accurately and followed up especially where it is an action on the health care plan at the time of review health assessment

Number of young people where substance misuse is identified as a problem at year end 31st March 2017

Year end	2017	2016	2015	2014	2013
Number of identified children	12	10	6	11	9

There were 12 children over the period of this report. 2 children received intervention, 9 were offered intervention but refused and 1 child was not offered intervention as they refused a health assessment. The main area for attention here is the 9 young people who declined intervention. The service which supports substance misuse was until recently provided by Catch 22. This service is now provided by Cheshire and Wirral Partnership Trust. The 16+ and transition nurse is working more closely with this provider in order to develop relationships which will make the service more accessible to young people, their personal advisors and carers.

Emotional and mental health

Percentage of children with raised Goodman's (Goodman and Scott, 2012) strengths and difficulties questionnaires (SDQ). These were completed by carers in relation to 96% of 4-16 year olds which is an excellent compliance rate.

Year end	Average score	Normal range (under 14)	Borderline (14-17)	Concern (17+)
2013	14.4	47%	12%	42%
2014	14.2	45%	14%	41%
2015	13.4	50%	15%	34%
2016	14.6	46%	10%	45%
2017	14.6	44%	3%	53%

There is an upward trend in scores which will need further investigation.

The CEC Children and Families Support Team produce an annual report which identifies more detail. In order to begin to address these issues and as part of the emotionally healthy schools programme staff, including school nurses and specialist nurses cared for children have attended training in relation to supporting children and young people's emotional and mental health. A multi-agency approach is needed to ensure children and young people get the best support available.

Discussions have taken place regarding the need to ensure a mental health assessment on entry into care for all young people. There is a proposal to offer SDQ to all children on entry into care.

The tool “How am I getting on?” is being piloted by the 16+ and Transition Nurse Specialist and personal advisors in order to consider young people’s perception of their own emotional well-being and the realities of their need for support with the aim of care planning at an individual level, future planning and to identify any gaps in service or opportunities for development.

Root cause analysis of compliance with Initial Health Assessments (IHA)

All children should have a statutory health assessment within 20 working days of entering care.

Cheshire East Children requiring IHA

Time frame	Request received with 48 hrs	IHA within 20 working days
Q4 2015-16	20%	12%
Q1 2016-17	69%	36%
Q2 2016-17	66%	52%
Q3 2016-17	82%	30%
Q4 2016-17	64%	58%

IHA’s for Cheshire East children originating from NHS Eastern Cheshire CCG

Timeframe	Number of IHA’s required	Completed in timescales
Quarter 1 2016-17	16	10
Quarter 2 2016-17	15	8
Quarter 3 2016-17	15	5
Quarter 4 2016-17	16	7

In response to poor compliance with timescales for initial health assessments (IHA) the Designated Nurses and Doctors across four Cheshire CCG areas undertook a root cause analysis. The results informed the following recommendations:

1. Clear pathway to escalate late IHA requests which is shared across Cheshire.
2. IHA integrated shared pathway and process across Cheshire.
3. Greater scrutiny of cancelled and/or DNA appointments by senior children’s social care managers.
4. All the health providers have dedicated admin/secretarial support for IHA clinics.
5. Dedicated IHA clinics that have sufficient capacity to offer all children/young people an appointment for their IHA within statutory timescales i.e. 3-4 clinics per month according to need.

6. Education and training for social care staff and carers by health practitioners in order to ensure that the IHA process and pathway is understood and the IHA forms, supporting information and referral letter are completed.

Eastern Cheshire and South Cheshire CCGs agreed with their health provider organisations to establish dedicated administrative support and dedicated IHA clinics across Cheshire East. These are now in place.

Following discussion, East Cheshire Trust are exploring the possibility of a more flexible approach to where IHAs take place, rather than the expectation that all children will attend a clinic at the hospital. Similar Mid Cheshire Hospital Trust are exploring alternative locations including community clinics based in the South of the LA area.

A refreshed pathway for IHA has been agreed along with procedures for escalation.

The Designated Doctor has also provided bespoke training for paediatricians undertaking initial health assessments including raising awareness regarding assessing the risk of child sexual exploitation.

A draft pathway for the completion of Goodman's strengths and difficulties questionnaire as part of the initial health assessment is being developed in order to improve baseline mental health assessment.

The actions taken above have led to some improvement to children receiving their IHAs within time scale for quarter 1 of 2017/18, (Over 60%)

Quarter 1 requests for initial health assessments were received for 45 children. 27 of these children were seen within the statutory time frame and 18 were not.

Capacity issues within paediatric clinics accounted for 6 of the children not being seen within time frame. The recent employment of another community paediatric consultant is expected to ease this pressure going forward.

The remaining 12 children were late having their initial health assessments for a variety of reasons. These included late notification of placement by the Local Authority, cancellation of appointments by foster carer, child not brought to appointment, placement changes for children, absconding from placement, and clash of health appointment with LAC review meeting.

These issues highlight the need for continued close working between health professionals, social workers and foster carers to meet cared for children's health needs in a timely fashion.

Inspections

During September 2016 the Care Quality Commission (CQC, 2016) conducted an inspection of health services for Looked After Children and Safeguarding in Cheshire East. Overall, this was a very positive report however there were a number of recommendations to further build good practice and experience in respect of Cared for Children. The designated professionals have worked with health providers and the Local Authority to agree and develop an action plan and to monitor its progress. The recommendations and progress to date is outlined below:

Implement plans to introduce health passports for all children leaving care so that they have access to their health histories.

This work has started and continues to progress. A health passport and pathway has been developed with the aim of preparing and providing health passport information to Cheshire East Young People 3 months prior to their 18th birthday. This information will also be offered to young people who are 18 years old on or after January 1st 2017. Implementation has been delayed due to paper records from the previous health provider needing to be scanned onto the new provider electronic system. This continues to be a priority for 2017 - 18

Ensure that a Named Nurse for Cared for Children is employed to lead the operational delivery of the service that is separate from the quality monitoring role carried out by the Designated Nurse.

With changes to commissioning arrangements the role of Named Nurse Cared for Children has been commissioned by the CCG as part of the Cared for Children Team Service Specification. This role is now separate from the Designated Nurse role.

Ensure that the role of designated nurse for Cared for Children is carried out by a person who is not also employed by the provider as part of the service delivery.

Staff changes have provided an opportunity to separate these two roles. A full time Designated Nurse with half time administrative support has been appointed across the four Cheshire CCGs. She will take up post following pre-employment checks being carried out.

Develop the systems for notifying medical professionals of the requirement for both initial and review health assessments for Cared for Children, and for completing the health assessments within statutory timescales so that Cared for Children are not disadvantaged in having their health needs planned for and met in a timely way.

This work continues. Progress has been made with the development and embedding of shared systems for reporting using "liquid logic" (Cheshire East Council electronic

record keeping system). The establishment of electronic child health records “System One” within Wirral Community NHS Trust provider services will complement this.

Ensure that all Cared for Children and young people have the opportunity to choose where to have their health assessments carried out. Practitioners are being actively encouraged to consider the most appropriate location for health assessments. For example the 16+ and Transition Nurse will often meet young people informally with their social worker either at their placement address or another social setting in order to effectively engage them prior to a more formal appointment. ‘Children’s choice’ will form part of the training for health visitors and school nurses during the coming year. Improvements to quality assurance of health assessments will enable this information to be monitored from quarter 2, 2017-18.

Provide information or training to all school nurses about expected standards for completing Looked after Children review health assessments, particularly in relation to capturing the wishes and feelings of children and young people. Arrangements for training are being reviewed in light of the transfer of the Cared for Children service to Wirral Community NHS Foundation Trust. This will be an important theme. Compliance with training is currently above 90%.

Development of the Clinical Nurse Specialist 16+ and transition role

The 16+ Nurse works with children and young people age 16-25 years in relation to relation to the statutory guidance promoting the health of looked after children (DFE & DH, 2015). In practice this means that the role involves:

1. Active involvement and completion of statutory review health assessments for young people 16-18 yrs. This can involve tenacity and a high level of commitment in order to develop the effective working relationships which lead high quality health care plans and will progress to the provision of meaningful health information as young people leave care.
2. Working with young people, professionals, statutory agencies providers of care and third sector organisations in order to that the inequalities in health which young people and care leavers experience are redressed.
3. Involvement with care leavers and their personal advisors up to the age of 25 years. This is usually an advisory role and is closely related to the special educational needs and disability (SEND) reforms (DfE & DH, 2015)

Since this position started in September 2017 there has been good progress. Examples include:

- alignment/streamlining of existing processes;
- additions to health assessments to include CSE specific assessment information;

- improved accessibility to drug and alcohol services by signposting to local 'drop in' services
- joint, regular meetings between CAMHS mental health worker to share concerns, particularly around self harm, and discuss cases
- accompanying young people to their GP to support discussion around self harm
- working with 'Body Positive' to address LGBTQ and sexual health issues
- established links with health advisors to support those young people on medication for sexually transmitted disease manage any issues around side effects or drug interactions.
- approximately 25% of the young people are now registered with or using the 'C Card' initiative where they can access condoms free of charge
- establishment of formal and informal networking with sexual health, CAMHS, CSE, drug and alcohol services and the wider system.
- work with SEND DCO to identify issues with the 16+ LAC cohort
- Working with unaccompanied asylum seekers to support and guide them through the NHS system

Importantly, the relationships with this group of young people appear to have strengthened. Consequently we are better informed and able to prioritise and develop work plans specifically to address issues this group of young people face and support them to develop solutions.

Other developments

The Child Protection Information Sharing Project (CP-IS) is being rolled out nationally. This will lead to improvements in communication with social care particularly in relation to urgent contacts. East Cheshire NHS Trust (Macclesfield DGH) is now live with this system and Mid Cheshire Hospitals NHS Foundation Trust (Leighton Hospital). This will lead to appropriate health settings having greater awareness of the child's legal and child protection status and appropriate communication regarding attendance being reported to social care more effectively.

Priorities for 2017-18

In addition to completing the actions arising from the Care Quality Commission inspection, the CCG will develop clear plans to:

1. Ensure efficient systems and processes are in place to allow for smooth handover to newly appointed Designated Nurse LAC
2. Continue progress regarding the CQC recommendations and promote choice
3. Work with corporate parenting committee to improve how we listen to the 'Voice of the Child' and ensure we feedback 'You said – we did'
4. Renew the focus on sexual health, emotional wellbeing and mental health
5. Improve timeliness of initial health assessments and challenge providers where necessary to be more flexible in their approach.
6. Ensure all children leaving care have a health passport and that work continues across the age range.
7. Address areas where there is low or borderline performance by having clear measurable objectives in place and good data analysis
8. Ensure that the integrated commissioning arrangements work well for Cared for Children
9. Work closely with the local authority to strengthen corporate parenting arrangements
10. Ensure effective multi agency arrangements are in place to support the health and wellbeing of care leavers.
11. Continue the close working between the Designated Nurse, Doctor and the Designated Clinical Officer SEND to ensure that arrangements for Cared for Children with SEND are addressed in an appropriate manner.
12. Improve system wide working and explore options to network with Greater Manchester

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