



## AGENDA

### CHILDREN'S CHAMPIONS BOARD

**Wednesday 24 September 2008 at 2.00 pm**  
**Swale 1, Sessions House**  
**County Hall, Maidstone**

Ask for: **Theresa Grayell**  
Telephone: **(01622) 694277**

*Tea/Coffee will be available 15 minutes before the meeting.*

#### **UNRESTRICTED ITEMS**

*(During these items the meeting is likely to be open to the public)*

#### **A. BOARD BUSINESS**

1. Substitutes
2. Declarations of Members' Interest relating to items on today's agenda
3. Minutes of Board Meetings held on (a) 12 March 2008 and (b) 21 May 2008 (Pages 1 - 10)
4. Dates of Future Meetings

*The Board is asked to note that the following dates have been reserved for its meetings in 2009. All meetings will start at 2.00 pm at County Hall.*

Wednesday 11 March 2009 (Child Protection)  
Wednesday 20 May 2009 (Looked After Children)  
Wednesday 23 September 2009 (Child Protection)  
Wednesday 2 December 2009 (Looked After Children)

5. Chairman's Announcements

#### **B. ITEMS FOR CONSIDERATION**

1. Child Trafficking (Pages 11 - 18)
2. Aiming High Pathfinder Program (Pages 19 - 28)

#### **C. UPDATES**

**Information Papers on these issues will be sent to Members separately:-**

*NB – Information items are not for consideration at this meeting*

1. Looked After Children and Child Protection statistics
2. Review of the Board's Terms of Reference

#### **EXEMPT ITEMS**

*(At the time of preparing the agenda there were no exempt items. During any such items which may arise the meeting is likely NOT to be open to the public)*

Peter Sass  
Head of Democratic Services and Local Leadership  
(01622) 694002

**Tuesday 16 September 2008**

*Please note that any background documents referred to in the accompanying papers maybe inspected by arrangement with the officer responsible for preparing the relevant report.*

**DRAFT****KENT COUNTY COUNCIL**

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**CHILDREN'S CHAMPIONS BOARD**

MINUTES of a meeting of the Children's Champions Board held at Sessions House, County Hall, Maidstone, on Wednesday 12 March 2008.

PRESENT: Mrs A D Allen (Chairman), Mr M J Vye (Vice - Chairman), Mr T J Birkett (substitute for Mrs M Newell) Mr I T N Jones, Dr T R Robinson and Mr J D Simmonds.

OTHER MEMBER PRESENT: Mr M C Dance (Cabinet Member for Operations, Resources and Skills, CFE)

IN ATTENDANCE: Mr K Arthur, Safeguarding Policy and Standards Manager, CFE; Mrs K Lambourn, Policy and Performance Manager (Child Protection/Children in Need), CFE; Mrs J Doherty, Policy Manager, Central Policy Unit, CED; and Miss T A Grayell, Democratic Services Officer, CED.

**UNRESTRICTED ITEMS****1. Minutes**

*(Items A3 (a) and (b))*

RESOLVED that the Minutes of the meeting held on 5 December 2007 are correctly recorded and they be signed by the Chairman. There were no matters arising.

The Minutes of the meeting held on 26 September 2007 were signed at the December meeting, but one small retrospective correction to the title of Minute 16 has since been made, and a corrected version of this page was signed by the Chairman.

**2. Presentation – Integrated Processes**

*(Item B1 – Presentation by Miss N Patient, ContactPoint Project Manager, who was in attendance at the invitation of the Board)*

*(The slides used in this presentation are attached to these Minutes as Appendix 1)*

(1) Miss Patient referred to a series of slides which had been included in the meeting papers and tabled some additional, updated information. She explained how the ContactPoint and Common Assessment Framework (CAF) processes fitted together and the range of services they would cover. Points highlighted in Miss Patient's introduction, and in response to questions from Members, were as follows:-

- (a) the ContactPoint Service would be established in Kent early in 2009, and would bring several benefits. It would allow early identification of children with problems, aid preventative work, and allow one central information database which would link all agencies and avoid duplication;
- (b) the ContactPoint directory would include basic information only – no case notes or information from GPs. There was a statutory requirement for organisations

to supply data, including all schools and independent schools, for example, so this would help identify children not attending school;

- (c) the 'sensitive services' referred to were services relating to any mental health, substance misuse or sexual health needs a young person may have;
- (d) the large number of potential users of the ContactPoint identified – 10,400 – was made up of staff who most needed access to the service to do their jobs; for example, headteachers, deputy headteachers and social workers responsible for referring young people onto services. Access for these users would be introduced in stages;
- (e) all users of the system would need to have had enhanced CRB checks (which would be reviewed every three years) and be fully trained before being able to access it. Miss Patient emphasised that ContactPoint could not be accessed from the Internet, or by any authorised user;
- (f) young people and their parents would not be able to log in directly but a young person could request to see their record under existing Access to Information legislation;
- (g) Members would not be able to access it directly but, to help them assist a local family which had approached them for help, they could request information via an authorised practitioner;
- (h) most children would have one 'lead professional', in most cases their lead Social Worker, but, for those with complex needs, professionals would need to decide between them who would take on the lead responsibility;
- (i) ensuring the quality of the data included was covered in the responsibilities of Miss Patient's colleague, the CAF/Lead Professional Project Co-ordinator, Ms Burwell;
- (j) Members were shown an example ContactPoint screen. The system was flexible and could be searched in several ways. After its launch, the system would continue to be developed to cover further and non-statutory services, for example, allowing a young person to search for local youth club facilities;
- (k) Members asked to be advised of the costs of introducing the new system, once these were known, and be advised as and when each new part of the system was introduced/launched.

(2). RESOLVED that:-

- (a) the content of the presentation, and the information given in response to questions, be noted, with thanks; and
- (b) the Board be kept informed of the progress of the system and be advised when each new part of it is introduced/launched, and the of costs of introducing the new system, once these are known.

**3. The Safeguarding Vulnerable Groups Act 2006, and the Independent Safeguarding Authority**  
*(Item B2 – Report by Director, Strategy, Policy and Performance)*

*(The slides on the new vetting and barring arrangements are attached to these Minutes as Appendix 2)*

(1) Mr Arthur introduced the report and explained that the new arrangements had emerged in response to the recommendations of the Bichard inquiry into the murders of two young girls in Soham. The report set out the key points of the new arrangements and had appended to it the Kent Safeguarding Children Board's guidelines on safer recruitment and employment. These guidelines were essentially a set of minimum standards that all agencies within Kent's children's workforce could sign up to in preventing unsuitable people being appointed to work with children.

(2) Although the funding details of the new arrangements were not yet known, Mr Arthur set out some likely costs. He explained that the current cost of a CRB check was £40 per person, and the new arrangements would require some 30,000 staff to be registered within the Authority. This number covered staff engaged under two areas of activity – regulated (those who worked directly with young people, including Social Workers, Youth Workers, Teachers, School Governors, etc) and controlled (support and administrative staff who would have access to information about young people but not work directly with them). The overall estimated cost for KCC of bringing in the new arrangements was £1.5m. This did not include the costs of supporting those voluntary organisations for which KCC acted as an 'umbrella', as it did for current CRB checking arrangements, and the ISA had stated that there will be no charge for registration of volunteers who meet the criteria. It was also recognised that up to 11 million people will need to be registered with the ISA in total, which will present a logistical challenge to central government, and it has been confirmed that the Criminal Records Bureau will administer the arrangements

(3) There would be a transition period of approximately 12 to 18 months while the new arrangements were set up, and new Independent Safeguarding Authority (ISA) registrations carried out, and it was important to minimize the risk of people falling through the net during this time. Those likely to be registered first would be those who had either never been CRB checked or had last been checked years ago. Those who had most recently been CRB checked would be registered last by the ISA. Also, in the transition period, everyone currently on a barred list (List 99, POCA and POVA) would be reviewed to see if they met the new barring criteria. Each case would necessarily be reviewed thoroughly by an ISA panel of experts (chaired by Sir Roger Singleton) and everyone was likely to be allowed to make representation, so the review process would be slow and potentially very costly.

(4) RESOLVED that the information given in the report, and in response to questions, be noted, with thanks.

#### **4. Meetings with Care Leavers**

*(Item B3 – Report by Overview, Scrutiny & Localism Manager)*

*(Mr P Brightwell was in attendance for this item at the invitation of the Board)*

(1) Miss Grayell introduced the report of the January meeting with young people leaving care, and sought Members' views on how they wished to approach the next meeting with the same group, due in July 2008.

(2) Members who had attended the meeting said how impressed they were with the mature approach the young people had taken to tackling and relating the problems they had experienced. Members also observed that many of the points raised were those which any young person might share, whether or not they were in care.

(3) Mr Brightwell explained that a recent meeting between the Leader of the County Council and a similar group of care leavers had raised similar issues, which the Leader had asked the Board to address. He set out how he proposed to take forward each of the issues

raised, and explained that he would prepare a detailed action plan which he would share with Board Members. Points highlighted in discussion, and in response to questions raised by Members, were as follows:-

- (a) all young people who have left care continued to receive advice and support from a personal adviser up to the age of 21, via the Connexions service;
- (b) some district councils had raised the minimum age for housing application in an attempt to manage demand on very limited housing stock;
- (c) young people had expressed a range of views on whether or not a school should be advised of a student's care status, but several Members and officers expressed the view that a school did have a legitimate need to know and echoed the young people's unanimous view that such information should be treated very sensitively;
- (d) private and voluntary organisations had a role to play in the provision of housing and advocacy services. KCC supported some such organisations and services via grant funding – for example, the Young Lives Foundation and the Independent Visitor service. Members expressed concern that budget pressures may force the KCC to reduce its financial support, and sought reassurance on this point.

(4). RESOLVED that:-

- (a) the issues which arose at the recent meeting with care leavers, and the actions being put in place to take them forward, be noted;
- (b) the next meeting between the Board and the same group of care leavers, to be held in July 2008, be planned as a daytime rather than an evening meeting, in the school holidays, but the young people be consulted to see if this arrangement also suited them; and
- (c) the second Corporate Parenting event, to which all KCC Members would be invited, be planned for June 2008, so the guidance still awaited from the National Children's Bureau (currently expected at the end of March) could be used in preparing its content. The event would serve to keep all Members up to date with their role as Corporate Parents and also highlight the work of the Children's Champions Board in equipping Members to fulfil this vital role.

**KENT COUNTY COUNCIL**

**CHILDREN'S CHAMPIONS BOARD**

MINUTES of a meeting of the Children's Champions Board held at Sessions House, County Hall, Maidstone on Wednesday 21 May 2008.

PRESENT: Mrs A D Allen (Chairman), Mr M J Vye (Vice - Chairman), Mrs C Angell, Mr J Curwood, Mrs V J Dagger, Mr I T N Jones, Dr T R Robinson and Mr J D Simmonds.

OTHER MEMBERS PRESENT: Mr M C Dance (Cabinet Member for Operations, Resources and Skills, CFE).

IN ATTENDANCE: Mr P Brightwell, Policy and Performance Manager (Looked After Children/Leaving Care), CFE; Mr J Mitchell, Joint Commissioning Officer, CFE; and Miss T A Grayell, Democratic Services Officer, CED.

**UNRESTRICTED ITEMS**

**5. Membership**

1. Members noted that Mrs C Angell and Mr J Curwood had joined the Board in place of Mrs M Newell and Mr D A Hirst, respectively. Mrs Angell and Mr Curwood were welcomed to the Board.

**6. Minutes**

*(Item 3 (a) and (b))*

1. RESOLVED that the Minutes of the meeting held on 12 March 2008 are correctly recorded and that they be signed by the Chairman. The Minutes of the meeting held on 5 December 2007 are already approved and signed and are included for reference only.
2. Mr Brightwell advised the Board that KCC's Pledge to all children and young people had been launched at two events, in East and Mid Kent, which had been well publicised and attended. It would have two more launch events, one in West Kent and one for children placed in Kent by other local authorities. He undertook to ensure that all Board Members were advised of the dates of the future launches and invited to them.

**7. Update on Actions Identified from the Meeting with Looked After Children and Care Leavers on 23 January 2008**

*(Item 5 - Report by Director, Strategy, Policy and Performance and Director of Children's Social Services)*

1. Mr Brightwell introduced the report and explained that it updated progress made since the last report to the Board on 12 March 2008. Much progress had been made since that meeting in addressing the three biggest issues raised by young people - the Independent Reviewing Officer (IRO) Service, housing and travel - the latter via the Freedom Pass. Comments

made by young people at the 23 January meeting had prompted some changes to the IRO invitation card scheme.

2. RESOLVED that:-

- (a) the information given in the report, and in response to questions raised by Members, be noted and welcomed; and
- (b) the future actions set out in “next steps” of the report be agreed and supported.

**8. Outline of Programme for Corporate Parenting Briefing, 6 June 2008**

*(Item 6 - Report by Director, Strategy, Policy and Performance)*

- 1. Mr Brightwell explained that the new Corporate Parenting Guidance ‘Putting Corporate Parenting into Practice’, issued by the National Children’s Bureau, had greatly influenced the programme for the event. The 6 June briefing for all Members would focus on the ‘Universal’ Corporate Parenting responsibility, shared by all elected Members, while future proposed events would address the ‘Targeted’ and ‘Specialised’ Corporate Parenting roles, which concerned fewer Members.
- 2. In discussion, the following points arose:-
  - (a) Members welcomed the opportunity to be updated on changes to their role as Corporate Parents;
  - (b) Members of the Board had been sent a copy of the NCB Booklet ‘Putting Corporate Parenting into Practice’ which was welcomed as a very clear and informative document; and
  - (c) concern was expressed that some Members of the County Council may still believe that the Corporate Parenting role was restricted only to Members of the Children’s Champions Board, and the briefing on 6 June would be a good opportunity to reinforce the fact that the role was shared by *all* elected Members.
- 3. RESOLVED that the information given in the draft programme and in Mr Brightwell’s presentation, be noted and welcomed, and the proposed future events which will cover the ‘Targeted’ and ‘Specialised’ Corporate Parenting roles be supported. *(Later in the meeting, when discussing Terms of Reference, a date for a half-day briefing on the Targeted Corporate Parenting role was set as 8 July, pm.)*

**9. Parental Alcohol Misuse and its Impact on Children in Kent**

*(Item 7 - Report by Director, Strategy, Policy and Performance)*

*(Mrs K Lambourn, Safeguarding Policy and Performance Manager, and Ms K Sharp, Commissioning Manager, Young Persons’ Services, KDAA, were in attendance for this item)*

- 1. Mrs Lambourn introduced the report and explained that it had been requested by the Board arising from a recommendation in the report of the Select Committee on Alcohol Misuse, published in March 2008, which had expressed concern about the potential impact of alcohol misuse on children. Arising from this discussion, and in responses given by Mrs

Lambourn, Ms Sharp and Mr Brightwell to questions put by Members, the following points were highlighted:-

- (a) Although localised schemes had done much good work over the years to address locally-identified problems, there was a need to spread good work and take a strategic and systematic approach to service delivery across the whole County.
- (b) To this end, a Hidden Harm Group had been established to bring together agencies to address strategically the issues identified by the Select Committee on Alcohol Misuse, as well as services relating to Drugs Misuse.
- (c) Much work was being done by voluntary bodies, the most well known of which were the Sunlight project in Thanet and the Windmill Clinic in Medway, Swale and Dartford, but there were many more good local projects around the County.
- (d) Funding and services for alcohol misuse had traditionally been directed towards misusers themselves and not to those affected by alcohol misuse. It was important now to redress this balance.
- (e) Previous uncertainty over continued funding for KDAAT's alcohol misuse work had now been lifted with the Government's commitment to three years' more funding. The allocation of that funding, however, was still an issue to be addressed.
- (f) KCC could help support and spread the work of voluntary organisations by taking up the issue via Children's Trusts.
- (g) Members were keen to visit and support the work of local schemes in their areas and would be given details of them.

2. RESOLVED that:-

- (a) The information set out in the report, and in response to questions, be noted and welcomed; and
- (b) The Board receive an update report on the work of the Hidden Harm Group, at the end of its first year of operation.

## **10. Kent Children's Trust Arrangements**

*(Item 8 - Report by Director, Strategy, Policy and Performance)*

*(Mrs J Ackroyd, Trust Development Manager, was in attendance for this and the following item)*

1. Mrs Ackroyd introduced the report and set out national and local developments since the issue was last reported to the Board in December 2007. The KCC had been identified as the Children's Services Authority and so had the lead responsibility for bringing in the changes in the National Children's Plan – 'Building Brighter Futures'. Children's Trusts were the mechanism by which the aspirations in 'Building Brighter Futures'

would be achieved. Mrs Ackroyd pointed out three key aspects of the new changes:

- (a) They emphasised the need to use schools as a medium by which to address the issues;
  - (b) They emphasised the role of the family and the need to support the family as a whole unit; and
  - (c) Changes would be phased over a period of time so they could mature and develop, to affect long term and lasting change.
2. Arising from discussion, and from Mrs Ackroyd's and Mr Mitchell's responses to questions put by Members, the following points were highlighted:-
- (a) The 23 school clusters in Kent were being used as a basis for Local Children's Services Partnerships (LCSPs) to keep schools at the centre of developments and to take advantage of existing relationships and networks. This method had been chosen as a good model in Kent, and other local authorities which had not based their arrangements around schools had found that, to be effective, they had had to change their arrangements to follow this model.
  - (b) Similarly, good engagement and inclusion of parents and families had proven vital to the success of the new arrangements.
  - (c) The new Children's Trusts arrangements had three threads:
    - i they changed the way in which professionals worked together to deliver services;
    - ii they produced a range of new services which had arisen from this new joint working; and
    - iii they led to the establishment of new Children's Centres (of which, 8 were planned for Kent by the end of 2008).
  - (d) Pathfinder Projects which had run across the County had now produced measurable results and had shown how the new arrangements could work. The final evaluation of Pathfinder Projects was due to be published in June 2008.
  - (e) Members expressed a range of individual views about how Trusts would relate to and impact upon the respective roles of CFEPOC and the Children's Champions Board, and how the Trusts' work should be scrutinised, and expressed concerns that the role and profile of the Board should be protected from being eroded. Mrs Ackroyd assured Members that Member engagement had been a well debated issue around other local authorities as the Trust arrangements had developed.

- (f) Members also expressed concern that some detail of how the new arrangements would work was, as yet, unknown, but would need to be known before they could see and judge the whole and how it fitted together and impacted upon the role of Members. Members expressed anxiety that a single, prescriptive template should not be imposed, as one size did *not* fit all. Mrs Ackroyd reassured Members that it was not the intention to impose a standard template.
  - (g) Leading on from the views expressed in (e) above, Members were keen to fit the review of the Board's Terms of Reference into the timetable of the incoming KCT arrangements.
3. RESOLVED that the information set out in the report, and the clarification given in response to Members' questions and views, be noted, with thanks.

**11. Development of the Terms of Reference of the Board**  
*(Item 9 - oral item)*

- 1. The Chairman explained that this issue had been added to the agenda as the impetus to review the Board's Terms of Reference had increased in recent months with the ongoing development of Children's Trusts arrangements and emerging changes to the Corporate Parenting role.
- 2. Members acknowledged the increasing urgency of the issue and expressed various views and concerns, in addition to those expressed in paragraph (e) of the previous minute, about how the development of Kent Children's Trusts would relate to and impact upon the role of the Board. Views contributed to the discussion were:-
  - (a) Members should be able to consider and comment on changes to the Terms of Reference privately and in closed groups, not just in the public at Board meetings.
  - (b) Many children and young people were not in the two groups covered in the Board's current TOR, so were not looked at. There was a whole area of the population just at the edge of the most needy groups, and the review offered an opportunity to include them.
  - (c) Terms of Reference should be a clear indication of what the Board was, and the Board ought to do exactly what the Terms of Reference promised. The Board had the power to focus where it wanted to, and was a good vehicle to influence and affect change.
- 3. RESOLVED that:-
  - (a) A draft of suggested new Terms of Reference be prepared by the officer team in time for Members to consider at the second Corporate Parenting briefing event on 8 July; and
  - (b) A report setting out the Board's desired revision to its Terms of Reference be presented to Cabinet on 15 September.

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By: Marilyn Hodges, Director Strategy Policy & Performance

To: Children's Champions Board

24 September 2008

Subject: Child Trafficking

Classification: Unrestricted

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Summary: This report advises Members of the Children's Champions Board of the issues concerning the trafficking of children including national and local responses to trafficking.

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### **The trafficking of children**

1. The attached paper sets out in detail the issues concerning the trafficking of children including national and local responses to trafficking.

### **Recommendations**

2. Members of the Children's Champions Board are asked to:
- a) note the report;
  - b) use this as an opportunity to put forward questions to officers.

Teresa Gallagher  
Team Manager, West Transitions Team  
01622 605578  
teresa.gallagher@kent.gov.uk

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*Background Documents:*  
None

*Other Useful Information:*  
None

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## INTRODUCTION

The trafficking of children is a worldwide problem. It is estimated that 1.2 million children are trafficked every year throughout the world. The international organisation End Child Prostitution, Pornography and Trafficking of Children for Sexual Purposes (ECPAT) (2004) report that the United Kingdom is a significant transit and destination country for children who are trafficked, and that the majority of the children trafficked into the UK are from China, Vietnam or Africa.

The literature on the subject of trafficking admits the difficulty of assessing the true nature and extent of child trafficking into the UK, partly because of the clandestine nature of the activity, and partly because of the deficits in the data collection mechanisms, an issue I shall come back to later.

UNICEF's report (2003) *Stop the Traffic!* also noted that the trafficking of children has become a global issue and estimated that at least 250 children had been trafficked into the UK in the previous five years. Equally, the report by ECPAT – *Missing Out* (2007), a summary of research into the nature and extent of child trafficking in the North West, the North East of England and West Midlands, identified 80 known or suspected child victims of trafficking in small-scale study in Manchester, Newcastle, and the West Midlands conurbation. 48 of these children had gone missing from the care of the local authority.

ECPAT's *Cause for Concern* (ECPAT 2004) research report, based on interviews on child trafficking within London Social Services teams, concluded that child trafficking existed for purposes beyond sexual exploitation, and included the exploitation of children in domestic servitude, restaurant and catering labour, building site labour, begging, drug trafficking and benefit fraud.

Child Exploitation Online Protection (CEOP) in a (2007) scoping exercise carried out over 18 months, estimated that over 330 children had been trafficked in that period, and that about 183 of these had gone missing from Social Services.

## Definitions

There has been a historical difficulty in distinguishing the difference between 'human smuggling' and 'human trafficking', the two most common types of illegal movement of people for financial gain, and the distinction has only recently been clarified. The main difference between smuggling and trafficking is that *human trafficking* is engaged in with the intention, among others, of exploitation of the trafficked persons for financial gain *after* arrival in the country of destination. Trafficked victims may be coerced or tricked by the person arranging their relocation, such that on arrival at the destination country, the trafficked individual is denied their human rights and forced into exploitation by the trafficker or person into whose control they are delivered or sold.

In contrast, in *human smuggling*, immigrants and asylum seekers may pay people to help them enter the country illegally, after which there is generally no longer a relationship (London Child Protection Committee 2006).

The United Nations (2000) defines human smuggling as follows:

*... the procurement , in order to obtain, directly or indirectly a financial or other material benefit, of the illegal entry of a person into a State Party of which the person is not a national or permanent resident. One person can pay another to be smuggled abroad, often involving an illegal entry or false documents...*

And the Palermo Protocol (United Nations, 2000), which was ratified by the UK in February 2006, provides a legal definition of trafficking, and more specifically child trafficking, as:

*a. ... the recruitment, transportation, transfer, harbouring or receipt of persons, by means of the threat of or use of force or other forms of coercion, or abduction, of fraud or deception of the abuse of power or of a position of vulnerability or of the giving or receiving of payments or benefits to achieve the consent of a person having control over another person, for the purpose of exploitation. Exploitation shall include, at a minimum, the exploitation of the prostitution of others or other forms of sexual exploitation, forced*

*labour or services, slavery or practices similar to slavery, servitude or the removal of organs.*

- b. The consent of a victim of trafficking in persons to the intended exploitation set forth in sub-paragraph (a) of this article shall be irrelevant where any of the means set forth in sub-paragraph (a) have been used.*
- c. The recruitment, transportation, transfer, harbouring or receipt of a child for the purpose of exploitation shall be considered “trafficking in person” even if this does not involve any of the means set forth in sub-paragraph (a) of this article.*
- d. “child” shall mean any person under eighteen years of age.*

Thus ‘trafficking’ may be seen as the movement of persons, with their consent obtained either by deception or by force, for the purposes of exploitation. In child trafficking, the question of consent or otherwise is irrelevant. Any movement of a child for the purposes of exploitation is considered to be child trafficking.

The reports by ECPAT and CEOP clearly do more than just draw attention to the scope of the problem of child trafficking; they point to serious inadequacies in identification and the protection and care of children who have been trafficked.

### ***UK responses to trafficking***

The Child Exploitation and Online Protection Centre (CEOP) was established by the UK government in 2006 to protect children from sexual exploitation from the internet. The centre is charged with assessing annually the nature and scale of child trafficking, and it has a dedicated child trafficking unit that works closely with the Serious Organised Crime Agency (SOCA), The Scottish Crime and Drug Enforcement Agency (SCDEA), the Association of Chief Police Officers (ACPO), the United Kingdom Human Trafficking Centre (UKHTC) and other relevant statutory and non-statutory stake holders on all issues relating to child trafficking across the UK. It completed a scoping

project on Child Trafficking in the UK in 2007, which provided a startling insight into the nature and scope of child trafficking in this country, and formed the basis upon which government and local authorities can begin to understand the complexities of the problem and to prepare better programmes for adequately safeguarding trafficked children's welfare.

In October 2007, the Home Office, in partnership with NSPCC, ECPAT UK, CEOP and Comic Relief, launched the NSPCC Child Trafficking Advice Line. It offers assistance in the form of advice to professionals in statutory and non-statutory services as to how to meet the needs children who show signs of having been trafficked.

Human trafficking is an international crime, and many countries in the world are affected either as a source, transit or destination country. The UK has made major strides in supporting international efforts to combat trafficking and developing appropriate legislation of its own. In 2000 trafficking became enshrined in international law for the first time through the Palermo Protocol, a United Nations initiative to

*.....prevent, suppress and punish trafficking in persons, especially women and children. Palermo Protocol, Article 3 (UN 2000)*

The Palermo Protocol was the first international instrument to define and address the trafficking problem, but in addition, the UK evaluated a number of mechanisms which are also of relevance to the issue, such as the International Convention on Civil and Political Rights, the European Convention on Human Rights; the UN Slavery Convention; the International Labour Organisation Convention 29 and 105 on Forced Labour, and the International Labour Organisation Convention 182 on Worst Forms of Child Labour.

The UK action plan for tackling the issue of human trafficking (2007) focuses on safeguarding and promoting the welfare of children. It re-asserts the importance of joined-up thinking and working by the different agencies in the identification and treatment of children who are trafficked and covers areas of prevention, investigation, law enforcement and prosecution and the provision of protection and assistance to victims. To this end, the National Register for

Unaccompanied Children came to force in 2004, with the aim of providing information on unaccompanied children on one database to which numerous agencies will have access. The Asylum Seeking Units are designed to enable workers identify children who are trafficked.

Overall, children arriving in the UK, unaccompanied by their parents/carers and seeking asylum, have become separated from their parents/carers for a number of reasons: some leave because of economic hardships, others are trafficked for sexual exploitation and possibly other dubious activities and a number may be escaping from abusive families. It is almost inevitable, then, that the vast majority of these young people would experience some form of trauma.

## **ROLE OF SPECIFIC AGENCIES**

Department for Children, Schools and families Document 'working together to safeguard children' (2006) and 'what to do if you're worried a child is being abused' (2006) call for all agencies to work closely together to protect children. For children who may be trafficked, ports of entry, the BIA are crucial in identifying and safeguarding the welfare of such children.

## **KENT COUNTY COUNCIL**

Kent County Council has developed procedures in line with national procedures for safeguarding the welfare of children who may be trafficked, thus safeguarding the welfare of those children within the child protection framework. It is estimated that in 2006 about 2,850 unaccompanied children/young people applied for asylum nationally (Thomas Coram Research Unit, July 2008). It is however unclear how many of these children would have been trafficked. However, given that CEOP (2007) estimate that about 330 children may have been trafficked over the course of a year. It could be estimated that about 15-20% of these children/young people, approximately 40-60, who may have been trafficked could come to Kent County Council.

## **WORK IN PROGRESS**

- The nomination of a named senior officer to take lead role on the issue of child trafficking.
- Finalising the procedures and policies to enable better working together with other agencies to strengthen protection of the welfare of children who may have been trafficked.
- Training of social workers in identifying, assessing and protecting children who may have been trafficked.

## **MY RESEARCH**

I chose to conduct research in the area of child trafficking because I am primarily interested in understanding the psychological needs of such children and what makes them vulnerable to being trafficked. The research will focus on how Children's Social Services meet the needs of children who are trafficked. As stated in *Working together to Safeguard Children who may have been Trafficked* (London Child Protection Committee 2006), the issue of child trafficking is a challenge to child care social workers and departments as a whole. Everyone working, or in contact, with children and young people has a responsibility to take steps to make sure their welfare is safeguarded and protected from harm.

Teresa Gallagher - Team Manager, West Transitions Team

By: Bill Anderson, Director Children's Social Services

To: Children's Champions Board

24 September 2008

Subject: AIMING HIGH PATHFINDER PROGRAM

Classification: Unrestricted

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Summary: The report summarises the new government initiative 'Aiming High for Disabled Children' [AHDC]. The aim of the initiative is to transform services for disabled children and their families. KCC has been awarded Pathfinder status for short-term breaks element of AHDC initiative, and therefore, the report also outlines the transformation plan for short-term breaks, which has to be delivered by April 2010.

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## Introduction

1. (1) The Government is investing substantial new money to ensure disabled children and young people have a far better chance of fulfilling their potential. Up to now services for disabled children have too often been uncoordinated and insufficient to enable families with disabled children to enjoy aspects of life other families take for granted.

(2) The Aiming High for Disabled Children initiative has been established to improve the following outcomes for disabled children which are poor in comparison to the general population:

- Educational attainment
- Health
- Transition to adulthood
- Employment
- Family Break up
- Poverty
- Siblings are more likely to experience emotional and behavioural difficulties

(3) The initiative is underpinned by £430m from the DCSF with additional funding from the DOH over three years 2008-09 to 2010-11.

(4) AHDC promises action in three areas to improve outcomes:

- Access and empowerment.

- Responsive services and timely support, and
- Improving quality and capacity.

(5) The government aim is to ensure that everywhere there is a range of holistic support with emphasis on early intervention to enable disabled children and their families achieve their full potential. Additional resources have been earmarked for those services families have said are the most important to help them live ordinary lives: short term breaks, access to child care, transition to adult services, and, from 2009-10, access to equipment and wheelchairs, and more generally strengthening the voice of families and disabled children.

(6) At the centre of the transformation programme is the core offer and local authorities are expected to deliver this by 2010. The principles and minimum standards have been summarised below:

- Information – It is expected that disabled children and their families can access the information they need at every stage of a child's life.
- Transparency – support for disabled children and their parents are determined on a fair, understandable and transparent basis.
- Participation – Disabled children and families are routinely involved in individual care planning and in shaping services.
- Assessment – Services are co-ordinated across agencies and are child centred.
- Feedback – Parents and children to receive feedback on a regular basis when asked their views.

(7) Parents will be surveyed on an annual basis, about whether the core offer is being delivered and this will be a PSA indicator.

### **Short –Term Breaks Pathfinder Status**

2. (1) The transformation of short breaks provision forms a central component of the wider Aiming High for Disabled Children (AHDC) change initiative. Kent County Council along with some 21 other local authorities has been selected as a pathfinder with the following implications:

- (a) Requirement to provide a two year transformation delivery plan by 30<sup>th</sup> April 2010.
- (b) To work with the PCTs to meet the Government's Full Service Offer (see attached Appendix A).
- (c) To play an active role in practice development, engagement in learning sets, and networking arrangements to support national short break service developments.
- (d) Although the application was based on the current strategy for services for disabled children it will be necessary to review the current eligibility criteria for

short-break services.

- (e) Prioritise the development of services for children with autism spectrum and/or challenging behaviour as a result of their impairment and children with complex health needs- technology dependent, palliative care, moving and handling.
- (f) Develop a work force strategy to support the development of short break services.

(2) Short term breaks are defined by the DCSF as:

- Residential – overnight, day, outreach.
- Family based overnight.
- Family based day care.
- Sessional/sitting services including support to access community activities.
- Everything else – hospice stays, family holidays, overnight at school.

(3) The funding must be aimed at increasing short term breaks within the community rather than creating a reliance on residential care. It can also be used to provide 'bridging services', such as mentoring/befriending schemes, to enable disabled children to access mainstream services. The funding cannot be given to mainstream services direct.

The DCSF will monitor expenditure which requires CFE and partners to record expenditure separately.

(4) A transformation delivery plan for first two years of the programme i.e. 2008-10 had to be submitted to the DCSF by the end of April 08. The plan was well received by the DCSF and there is an expectation that KCC will be successful.

(5) The DCSF have used the Disability Discrimination Act as a definition of disability '...someone who has a physical or mental impairment that has a substantial and long term adverse effect on his or her ability to carry out normal day to day activities'.

(6) In addition there is an expectation that local authorities identify and prioritise children who fall into the categories set out below:

- Children with autism spectrum and /or challenging behaviour as a result of their impairment.
- Children with complex health needs including those dependent on technology, those who require palliative care and those who have moving and handling needs.

The short –term break programme has to demonstrate that services are developed to meet the needs of the above groups of disabled children.

(7) There is the requirement that the Plan will be reviewed and updated towards the end of 2008-09.

### **KCC's Delivery Plan**

3. (1) The plan stresses that policy development within Kent is proceeding within a multi-agency context and that commissioning structures are already in place to ensure that both PCT's in Kent and CFE are acting in consort.

(2) The paramount objective is stated as "to improve outcomes for disabled children and their families by offering increased choice in service provision and to develop services when and where they need them".

(3) Developing joint approaches through the Children's Trust and with the independent sector in order to develop competition and choice in the market place is highlighted.

(4) The need to build on and develop joint working relationships with Local Children's Service Partnerships is stressed and in particular the role that they will play in commissioning services from a range of universal providers including from extended schools and children's centre provision.

(5) The overview of the approach to service provision refers to the on-going multi-agency development of area resource centres which operate on a "hub and spoke" model.

### **Funding Allocations**

4. (1) Kent County Council as a Pathfinder Authority is receiving the following ring fenced allocation:

	2008-09	2009-10	2010-11
Capital	£ 807,200	£1883,400	£ Nil
Revenue	£1661,900	£5361,000	£5361,000

(2) The Department of Health and the Department for Children, Schools and Families (DCSF) have announced that both West Kent PCT and Eastern and Coastal Kent PCT have received additional funding through their baseline allocations to expand short break services. However, this funding is not ring-fenced.

### **Capital**

5. (1) The DCSF has indicated that there is some flexibility in rolling over capital funding although it must all be spent by April 2011 i.e. within the period of the current Comprehensive Spending Review period.

(2) Pathfinders have been advised that the capital plans can include funding for equipment, adaptations to buildings and for the provision of transport.

(3) The funding cannot be used to:

- Fund wider early years initiatives.
- To meet compliance with other disability legislation.
- To replace capital which has already been earmarked from another source.

(4) The Delivery Plan had to be produced within a very limited time period and therefore several of the capital projects are at a formative stage. The projects are small in nature and support the revenue funding such as adaptations to existing buildings to improve manual handling capacity. The funding will also be used to adapt respite foster carers homes who are not entitled to a District Facilities Grant.

(5) During the latter part of 2007/08 KCC and the Eastern and Coastal Kent PCT jointly commissioned a feasibility study to consider the options around developing a multi-agency specialist hub for disabled children and young people living in the Ashford district on Wyvern School's secondary site. The specialist hub will promote a multi-agency approach to delivering co-ordinated assessments, interventions, reviews, training and short breaks. The feasibility study also considered the re-provision of Wyvern's Primary School, Specialist Nursery and SMILE Centre. The conclusion was that there was room for all of the new facilities and costs were identified. A business case has been submitted to the Eastern and Coastal Kent PCT to develop the multi-agency assessment and resource centre component of the specialist hub. PCT Board approval is awaited. This scheme also includes the largest amount of short break capital funding.

## Revenue

6. (1) The breakdown of the KCC revenue allocation of £1661.9K for 2008-09 is as follows:

Residential overnight stays	£ 84.0k
Family based overnight stays	£433.6k
Family based day provision	£221.0k
Group based specialist day provision	£366.0k
Group based non-specialist day provision	£107.0k
Direct payments	£114.0k
Management and administration	£158.3k
Consultancy	£ 40.0k
Promotion and advertising	£ 20.0k
Training and workforce development	£ 83.0k
Miscellaneous	£ 35.0k

(2) It should be noted that the intention is for services to be diversified and that the creation of additional residential beds is thus not seen as a priority. However, there are proposals for the current provision to be changed so that there will be a greater take up of beds from children with complex needs - as required by the DCSF.

(3) The funding allocation is considerably larger in years 2 and 3- with most of the 1<sup>st</sup> year developments being part funded.

(4) It is anticipated that the level of funding for non-specialist provision i.e. the greater use of universal facilities will significantly increase from the 2<sup>nd</sup> year onwards with Local Children's Service Partnerships playing a key commissioning role.

## **Service Developments and Associated Strategic Initiatives**

7. (1) The areas of service provision for the 1<sup>st</sup> phase of the plan together with wider policy and strategic initiatives were agreed by SMT.

(2) It will be noted these are categorised within 12 work streams which have been identified to carry the plan forward to its implementation phase. A Programme Board has been established and a Programme manager appointed to oversee the implementation of the delivery plan.

(3) A list of the specific milestones and targets detailed in the delivery plan have been cross-referenced for each development to ensure that all the necessary actions are initiated to implement the plan in full.

### **Recommendations**

8. Members of the Children's Champion Board are asked to:

Note the contents of the report

Liz Totman  
Head of Specialist Children's Services  
01233 652130  
liz.totman@kent.gov.uk

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*Background Documents:*

*Other Useful Information:*

Aiming High for Disabled Children DCSF 2007

## Annex A

### Full Service Offer

A short breaks service should:

- be based on an assessment of need, taking into account the voice of disabled children, young people and their families;
- offer a significantly greater volume of short break provision set against a 2007-08 baseline, and which reflects the additional funding levels available from Government;
- use fair, understandable and transparent eligibility criteria that enable short breaks to be used as a preventative service and which do not restrict provision to those threatened by family breakdown or other points of crisis;
- offer a wide range of local short break provision, tailored to families needs and including:
  - a) support for disabled children and young people in accessing activities in universal settings, delivered through the following:
    - the support of a befriending, sitting or sessional service;
    - measures that build the skills of universal service providers;
    - measures specific to severely disabled children that are undertaken to meet their physical access requirements in universal settings. These would build on and exceed DDA compliance and ensure that the most disabled are not disadvantaged.
  - b) overnight breaks, with care available in both the child's own home and elsewhere.
  - c) significant breaks during the day, with care available in the child's own home and elsewhere:
- provide positive experiences for children by promoting friendships and by encouraging social activities, new experiences and supportive relationships with carers;

- provide culturally appropriate provision that meets the racial, cultural, linguistic and religious needs of disabled children and their families;
- ensure that provision is available on a planned and regular basis and at the times when families and young people, need breaks - this should include evenings, weekends and holiday provision, and have the capacity to respond to urgent care requirements;
- provide age appropriate provision which ensures the following groups are not disadvantaged in accessing short breaks:
  - children and young people with ASD<sup>1</sup>. These are likely to have other impairments, such as severe learning disabilities or have behaviour, which is challenging. Not all children on the Autistic Spectrum will require specialist additional short break services
  - children and young people with complex health needs which includes those with disability and life limiting conditions who have reached the palliative care stage of their life cycle as well as other and young people with complex health needs as well as other impairments – physical, cognitive or sensory impairments.<sup>2</sup>
  - children and young people aged 11+ with moving and handling needs that will require equipment and adaptations. These children are likely to have physical impairments, and many of them will also have cognitive impairments and / or sensory impairments;

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<sup>1</sup> An autism spectrum disorder (ASD) is a lifelong developmental disability characterised by difficulties in three areas: social communication, social interaction and social imagination, sometimes known as the triad of impairments. Children with ASD and accompanying severe learning disabilities have often missed out on short breaks.

<sup>2</sup> These children require support, often including clinical and / or invasive procedures in order to maintain their optimum health on either a regular basis or in an emergency. Some of these children may be dependent on technology e.g. ventilation; tube feeding, dialysis. The need for advanced planning and preparation for technology dependent children cannot be under-estimated. To ensure the short break provision is provided safely it is crucial that this provision is developed in partnership between local authorities and PCT's. A significant requirement is the need to train sufficient staff to ensure they are competent to deliver safe care. The training implications for these staff are significant.

- children and young people where challenging behaviour is associated with other impairments (e.g. severe learning disability). Children in this group will display behaviour which challenges services or behaviour which causes injury to themselves or others;
- young people 14+. The young people who fall into this group are young people who are severely disabled and require services that are appropriate to their age.
- utilise the service provider that offers the best possible combination of skills and experience to deliver services of the highest possible quality to meet individual needs at the most efficient cost;
- promote information about available provision to the public, including details of eligibility and routes to accessing the service.

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