

## KENT COUNTY COUNCIL

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### CORPORATE PARENTING PANEL

MINUTES of a meeting of the Corporate Parenting Panel held in Darent Room, Sessions House, County Hall, Maidstone on Friday, 14 December 2012.

PRESENT: Mrs A D Allen (Chairman), Mr M J Vye (Vice-Chairman), Mrs T Carpenter, Mrs P T Cole and Mrs J Whittle

IN ATTENDANCE: Ms M MacNeil (Director, Specialist Children's Services), Mr P Brightwell (Performance and Quality Assurance Manager, LAC) and Miss T A Grayell (Democratic Services Officer)

#### UNRESTRICTED ITEMS

#### **17. Membership - to report that two of the co-opted Members - Anthony Duncan and Graham Razey - have left the Panel.**

*(Item A1)*

1. The Chairman reported that Anthony Duncan and Graham Razey had left the Panel; Mr Duncan as his Apprenticeships with Virtual School Kent had ended and Mr Razey as his changing professional role - eg he is no longer the Chair of the local Young Care Leavers in Post Compulsory Education (YCLPE) Group – had made his membership less relevant.
2. She read a note from Mr Razey saying how much he had enjoyed his time on the Panel and how impressed he had been by the commitment displayed by Panel Members. Members asked to be told how Mr Duncan is getting on, and Mr Brightwell undertook to find out and advise the Panel outside the meeting.
3. RESOLVED that the departures be noted and that replacement Members be sought.

#### **18. Minutes of the meeting held on 26 October 2012**

*(Item A3)*

RESOLVED that the Minutes of the meeting held on 26 October 2012 are correctly recorded and they be signed by the Chairman. There were no matters arising.

#### **19. Cabinet Member's Oral Update**

*(Item A5)*

1. Mrs Whittle gave an oral update on the following:-
  - **Adoption Summit in early December:** this had been well attended, and good news stories had arisen recently from media coverage.
  - **Our Children and Young People's Council (OCYC) meeting on Saturday 8 December,** which Mrs Whittle had attended with Ms MacNeil. Social worker recruitment is an ongoing issue. The aim is to achieve permanent, qualified social workers making up 90% of the workforce.

Young people with a positive experience of the social work process are helping with the recruitment campaign, and positive media coverage is being sought.

- **Support for Care Leavers:** there will be a TV programme about this issue on 17 December, and Mrs Whittle will also take part in radio coverage of the issue. Care leavers report varying experiences, but social worker recruitment is a shared and ongoing issue. There are 1,000 care leavers in Kent. The average age at which a young person comes into care is 12-and-a-half, so the care period covers the most difficult teen period and many emotional issues.
- **Funding of Boarding School places** will be the subject of focus in the next few months. Three new placements are currently being considered. The scheme needs to catch young people who are on the edge of care, and flexible (eg part-time) fostering is a vital part of this.

2. Mrs Whittle and Ms MacNeil responded to questions and comments from Members and the following points were highlighted:-

- Social worker recruitment – is the pool of social workers with sufficient training too narrow, and how can this be addressed? What on-the-job training is given? *Kent has many good social workers but the 'burn-out' rate is very high, so there is always some turnover. Raising the profile of social work study would help – eg establish a social work 1st degree. Radio Kent did some good work a year ago with a series of sound bites about the role of social workers, foster carers, adopters, etc. KCC needs to feed the media good news stories, otherwise coverage given will be of bad news that the media finds for itself. Children and Families social work is a very difficult job and does not suit everyone. Many students study social work at University but few are interested in Children and Families, and those who are interested may not necessarily prove suitable; they need help to see the reality of the role. Mrs Whittle will meet soon with the University of Kent at Canterbury about their Child Protection course, and in-house training can be refined and developed.* If a change of social worker for a young person cannot be avoided, then a handover period would help, and changes should be avoided at vital times (eg around exams) unless absolutely necessary. Young people get a good service from social workers but it is not consistent.
- Support for Care Leavers – a Foster Carer on the Panel gave examples from her experience: one young man came late into care and has struggled with learning difficulties but has a strong work ethic, while another came into care at the age of 7 and has had a better experience, going through University successfully. The latter is still living with his foster family at 22. Correct support is vital, and needs to be flexible and tailored to the young person – eg supported lodgings can be difficult if a young person is not sufficiently prepared. In Kent's Pledge, care leavers get a higher education study bursary of £1,000 per year for 2 years, and there is also a commitment to support young people in low paid jobs up to the age of 21. Members were reminded of the example quoted at the October Panel meeting - of the support being sought being included in the Pledge but a social worker advising the foster carer that it wasn't. This issue needs to link to good training for social workers so they give correct message and support. *Ms MacNeil repeated her commitment to check social workers' awareness of facts so that foster carers are properly advised. The Children's Minister has urged all local authorities to*

*sign up to the Care Leavers' Charter, the principle of which is that local authorities will take a life-long interest in young people previously in their care. The Charter content is good but some areas are a bit vague to commit to, and Kent already exceeds much of what the Charter says. Part of the life-long interest would include support for young people learning about parenting, as many have no good parenting role model. Long-term support needs to be correct and discreet.*

3. The oral updates were noted, with thanks. A written bullet point update on Virtual School Kent, prepared by Mr Doran, was tabled.

## **20. Update on Adoption Service** *(Item B1)*

*Ms Y Shah, Coram/KCC Project Manager, was in attendance for this and the following item.*

1. Ms Shah introduced the report and highlighted key points, as follows:-
  - a) the report had been prepared using figures taken in October, and figures were updated orally, as follows:-
    - the number of children adopted so far this year had risen from 57 to 75
    - the number of children placed for adoption in the same period had risen from 73 to 105 (compared to 66 for the whole of 2011/12);
  - b) children make great progress once they are placed for adoption, and the earlier they can be placed and adopted, the better it will be for them;
  - c) she thanked the County's Childcare Social Work staff for their positive and constructive approach to working with Coram to improve the Adoption service. Good news stories, such as those in the statistics listed above, should be celebrated;
  - d) matching children with adopters is an ongoing challenge, and when adopters have a choice of children, it is always those who are older, disabled, from an ethnic minority or with siblings who are last to be placed;
  - e) Kent has established the innovative Family Finding team. Every child awaiting adoption has an allocated Family Finding worker, and these workers take the family finding role from busy social workers and free them up to work on court proceedings;
  - f) Kent is the largest local authority in the UK to pilot a scheme which links the KCC to adoption partners, to address the issue of hard-to-place children;
  - g) although much progress has been made, there is still much work to be done in terms of cultural change. The most experienced social workers can also be the most entrenched; and

- h) the aim is to approve 83 new adopters this year (compared to 44 in 2011/12), and this target is achievable.

2. Ms Shah and Ms MacNeil responded to comments and questions, as follows:-

- a) Coram's work will continue until 2014, and Members sought assurance that the progress made so far will be sustainable once their work has finished. At every Panel meeting until then, Members should ask about the sustainability of improvements. *Ms MacNeil and Ms Shah assured Members that sustainability was always the aim of the changes currently being put into place, and mechanisms would be left in place to ensure that sustainability;* and
- b) it is vital to have permanent managers in place to carry forward the changes and make sure they work. *The interim manager posts which have covered the period of change have helped make the necessary cultural changes. The appointment of good interim managers also avoids posts staying vacant if permanent candidates of suitable quality do not come forward. Kent's large size and diverse nature make its recruiting challenges different from those faced by some smaller local authorities.*

3. Mrs Whittle thanked Ms Shah and Coram for the excellent work they had done to turn around Kent's Adoption service. It had become clear during their work that improvement is not about resources but the way in which those resources are used. 2013 and 2014 will show the outcomes and impact of the improvements made.

4. RESOLVED that:-

- a) the information set out in the report and given in response to comments and questions be noted, with thanks; and
- b) Coram be thanked for the excellent work they have put in to improving Kent's Adoption service, and the progress they have made in a relatively short space of time.

## **21. Six-Monthly report by Independent Chairs of Kent's Adoption and Permanence Panels**

*(Item B2)*

1. Ms Shah introduced the report and highlighted key points, as follows:-

- a) key weaknesses of the present Adoption Panel system is the style of reporting, quality assurance and the need for reporting to be supported by solid rather than anecdotal evidence;
- b) the former 7 Panels will be reduced to 4, but the current total is 5. The outcome of the Panel reduction exercise should be known soon;
- c) it is suggested that the membership of Adoption Panels be broadened to include care leavers and a representative of Virtual School Kent, and have links to the CAMHS service and senior childcare managers; and

- d) it is suggested that the Panel Chair should write their own reports and be responsible for their own professional development and the Panel's development.

2. Ms Shah and Ms MacNeil responded to Members' comments and the following points were highlighted:-

- a) the quality and skill of the Panel Chairman is vital, and the Panel membership needs to have a range of strengths. *A Panel Chairman needs to understand the role of the Panel and its relationship to other bodies (eg the adoption agency), what information each has and how that information is handled; and*
- b) *the review has been difficult, with cultural change being required. The Panel system needs to be professional and consistent, with no regional variations.*

3. RESOLVED that the information set out in the report and given in response to comments be noted, with thanks.

## **22. Update on Trafficking and Unaccompanied Children** *(Item B3)*

*Ms T Gallagher, County Manager, Unaccompanied Asylum Seeking Children (UASC), was in attendance for this item.*

1. Ms Gallagher introduced the report and highlighted the following:-

- a) the number of young people going missing has reduced since last year, which is to be welcomed;
- b) patterns of behaviour can be identified from studying the cases of young people of different nationalities, a summary of which is included in the report, but the key is to find out why the patterns recur and address them;
- c) a trafficking assessment calculates the likelihood of a young person having been trafficked, but unfortunately the possibility of trafficking can never be ruled out completely; and
- d) KCC is discussing with the UK Border Agency the need to make an immediate referral for any young person who goes missing.

2. Ms Gallagher responded to comments and questions from Members and the following points were highlighted:-

- a) a new jobskills initiative is being run by partners, including the UK Border Agency, the University of Kent and voluntary organisations, to train those young people who have exhausted all rights (ARE) to stay in the UK. This seeks to make the best use of the time they spend awaiting repatriation as well as improve their chances of finding

employment when they return home. It is hoped that at least half of the current cohort of 27 young people in this category can be signed up and benefit from this initiative;

- b) a 'buddy' scheme has been set up to support those who have emotional (but not necessarily mental health) difficulties to cope with the pressures they face. A review of the pilot scheme after 18 months will assess the effectiveness of the support given and see if any other type of support is needed; and
- c) Kent is running these initiatives at a local level to address the particular problems that it encounters. Although the immediate effect of these schemes on the national problem might seem limited, they do attract media coverage and generate discussion, which might help and inspire other local authorities to try something similar. The aim is to make the best use of Kent's available resources to address its local problems to the best of its ability.

3. RESOLVED that:-

- a) the information set out in the report and given in response to comments and questions be noted, with thanks; and
- b) a further update report be made to a future meeting of the Panel.

**23. Performance Scorecard for Children in Care**  
(Item B4)

1. Mr Brightwell introduced the report and explained that comments made by Panel Members at the previous meeting about the content and style of the scorecard had been taken into account. The format of Kent's scorecard has been admired and the National Children's Bureau has asked to use it as a model of best practice to share with other local authorities. The scorecard is dynamic, responsive and evolving, and Members are asked for ongoing input regarding its content. The priority now is to move from the process of preparing it to focus on the quality of recording, and current challenges are how to reflect young people's views on their care and how to capture the various routes towards permanence. The scorecard can now be accessed by the CAMHS service, and will shortly include the outcomes of exit interviews with young people leaving care.

2. Mr Brightwell and Ms MacNeil responded to comments and questions from Members, and the following points were highlighted:-

- a) frequency of change of social worker should be added to the scorecard, as part of the ongoing review of its content and style;
- b) it is difficult to measure and record how Members listen to young people and respond to the points they raise. It is important to get the questions right, but this is difficult to show on a scorecard, although quality assurance reports will show up how the KCC has responded to issues raised;

- c) young people could be asked what '10 questions' they would ask if they were the Corporate Parenting Panel;
- d) the Apprentice scheme offered by Virtual School Kent could be used as a template for other KCC services to offer work experience to young people, and the value this would add to their CV would help them to compete with their peers. An annual scheme of eight-week placements offers 16- and 17-year olds a chance to gain work experience, and those who shine on this scheme are offered summer work and marked out as good candidates for future Apprenticeships;
- e) targets showing red performance ratings show that progress has not been as good as had been wished, and the small number of such targets are subject to close attention and investigation by the Kent Corporate Parenting Group. Kent sets itself very challenging, aspirational targets, so there is always the chance that a few aspects will fall short of the desired level; and
- f) many of the targets being measured affect only a small number of young people, so a change affecting only one young person can make a substantial impact on performance figures. Targets can be viewed as a very useful indicator of progress in the long-term.

3. RESOLVED that:-

- a) the information set out in the report and given in response to comments and questions be noted, with thanks; and
- b) Members' comments and suggestions in paragraphs 2 a) and c) above be taken forward.

**24. CAMHS Update**

*(Item B5)*

*Ms H Jones, Head of Commissioning, Specialist Children's Services and Mr I Darbyshire, NHS Commissioning Manager, were in attendance for this item.*

1. Ms Jones and Mr Darbyshire introduced the report and explained that the new commissioning process and contracts which had started on 1 September 2012 will provide one single pathway to services for the first time ever. This will allow more young people to access mental health services, and some to access them for the first time. There is a predicted backlog and waiting list of young people needing to access services, which is a result of past access problems, but the new contractors are working hard to clear this. Waiting times in East and West Kent differ. In East Kent, the time between referral and first appointment is down to 4 – 6 weeks, with some young people with ADHD and ASD waiting a little longer for a first appointment, while in West Kent the aim is to reduce this same period to 18 weeks by the end of December 2012 and to 4 weeks by the end of the 2012/13 financial year.

2. Ms Jones and Mr Darbyshire responded to comments and questions from Members and the following points were highlighted:-

- a) waiting times depend to some extent on the type of treatment needed. For example, there are very few practitioners offering cognitive behavioural therapy, but this treatment, when accessed, is of great benefit to many young people;
- b) Kent has had a poor reputation for its CAMHS waiting times, and there is still a way to go to overcome this;
- c) many referrals are still received from GPs, although anyone can refer a young person to the CAMHS service. The single pathway for all mental health referrals will include screening and referral either to CAMHS or multi-agency provision;
- d) some CAMHS referrals could be a result of poor parenting. Approximately 41% of the waiting list for assessment is made up of young people with 'behavioural problems', and it is important to be able to distinguish what is and isn't a mental health referral and to divert appropriately those which are not. The design of the new system will seek to link CAMHS to mainline services so it is not working in isolation;
- e) for some young people, using mental health and wellbeing services still carries a stigma, and they try to avoid becoming labelled. The service seeks to break down this stigma by offering early advice by telephone, to prevent challenges escalating into problems. Educating schools, GPs and Health Visitors about criteria and thresholds can also help them make appropriate referrals;
- f) alongside making it easier for young people to access specialists is a drive to assess and optimise the effectiveness of these appointments. While reducing waiting lists, the service also needs to increase the quality of assessments and interventions. To do this, young people's perceptions of the service are assessed at the start, part-way through and at the end of their involvement with it; and
- g) transition from CAMHS to adult mental health services is still a challenge, and the Panel could make a recommendation to the Cabinet Member for Adult Social Care and Public Health about the need to improve this transition.

3. RESOLVED that:-

- a) the information set out in the report and given in response to comments and questions be noted, with thanks;
- b) a further update report be made to a future meeting of the Panel; and
- c) the Panel consider making a recommendation to the Cabinet Member for Adult Social Care and Public Health about the need to improve transition from CAMHS to adult mental health services.