

**Children and Young People
Select Committee**

**Review of Corporate Parenting
Part 2**



25 October 2007

Children and Young People Select Committee
Stockton-on-Tees Borough Council
Municipal Buildings
Church Road
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SELECT COMMITTEE – MEMBERSHIP

Councillor Harrington (Chair)
Councillor Eddy (Vice-Chair)

Councillor Broughton
Councillor Mrs Cains
Councillor Coleman
Councillor Frankland
Councillor Miss Inman
Councillor Lewis
Councillor Sherris

Parent Governor Representatives

Mr P Beach
Mr Cash

Non Voting Co-opted Representatives

Mr G Davies
Mr D Campbell
Mr RG Lupton
Mr B Percival

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The Committee thank the following contributors to this stage of the review.

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Original Brief

What are the main issues?

Are we clear about our Corporate Parenting responsibilities and how to implement them?
 Are the health, safety and wellbeing needs of children in care being met effectively?

The Thematic Select Committee’s overall aim/ objectives in doing this work is:

Assist the development of policies/strategy.
 Assist the preparation and response to the Joint Area Review and Comprehensive Performance Assessment process.

The possible outputs/outcomes are:

Improved corporate parenting
 Improved corporate awareness and service delivery for looked after children.
 Improved partnership working arrangements delivering services to looked after children.

What specific value can scrutiny add to this topic?

Assist the development of a Corporate Parenting Strategy.
 Determine and improve (where appropriate) the partnership arrangements with health service providers.

Who will the panel be trying to influence as part of their work?

Children’s Trust Board, all councillors, Council departments and partnership agencies.

What category does the review fall into?

Policy Review	<input type="checkbox"/>	Policy Development	<input checked="" type="checkbox"/>
External Partnership	<input checked="" type="checkbox"/>	Performance Management	<input type="checkbox"/>
Holding Executive to Account	<input type="checkbox"/>		

1.0 Recommendations

- 1.1 That the PCT be requested to make every effort to recruit a male health worker to increase the choice/options for young men in order to increase the number of annual health assessments taken (para 4.6)**
- 1.2 That appropriate partnerships identify LAC as a specific group within their monitoring and reporting of Be Healthy initiatives (e.g. Teenage Pregnancy Strategy, Obesity Strategy, Substance Misuse initiatives) (para 4.13)**
- 1.3 That the Council and the PCT be required to continue the high level of partnership arrangements and extend this to all necessary agencies (para 4.14)**

2.0 Introduction

- 2.1 The first stage of the Select Committee's review of Corporate Parenting examined the draft Corporate Parenting Strategy that was being developed and reported to Cabinet its support of the strategy with a number of recommendations to strengthen its introduction in the Council.
- 2.2 This second stage is a brief examination of the partnership working between the Council and North Tees Primary Care Trust (PCT) so as to assist the preparation and response to the Joint Area Review and Comprehensive Performance Assessment process.
- 2.3 Meetings therefore took place with the appropriate officers to determine the extent of partnership working arrangements in place and learn of future developments.

3.0 Background

- 3.1 Councillors, along with other professionals and agencies within Stockton, are charged with the duty of acting as corporate parents to children/young people who are looked after by a local authority and are either accommodated, in care or remanded/detained.
- 3.2 Looked After Children have historically been significantly disadvantaged by their experiences within the care system. Proportionately, Stockton has fewer Looked After Children per 10,000 than comparator Authorities. This reflects the range of effective strategies that have been developed within the Authority.
- 3.3 Looked After Children are the most vulnerable group within the borough. Statistics show that Stockton's Looked After Children are more likely to come into care at a younger age. The most common reason for children coming into care in Stockton remains neglect, this reflects the national picture. In addition, there are particularly high incidences of domestic violence and drug related issues that contribute to children being brought into care.

4.0 Evidence/Findings

- 4.1 The Children and Young People's Plan 2006-9 has the following ambition:

Improve outcomes for looked-after children: improved stability of placements, health, choice of placement, educational attainment, move into employment and training.

A small but significant number of children and young people are looked after by the local authority. Ensuring good outcomes for them is essential. Performance in terms of ensuring stability of placements both short term and long term has in the past been variable. Getting the right level of health and medical involvement has been good but needs to improve further.

- 4.2 Guidance on the health of looked after children has been provided by the Department of Health (Promoting the health of looked after children). Local authorities, PCTs and strategic health authorities have a duty to ensure that every child in care has a health assessment and a health plan that is reviewed regularly. Specifically looked after children must have yearly health checks, which comprise of

- a yearly examination by a doctor; a yearly dental inspection and their immunisations should be up-to-date.
- 4.3 The newly adopted Corporate Parenting Strategy highlights the specific health support initiatives targeted towards looked after children in Stockton which include:
- A Service Level Agreement with a dental service to support hard to reach young people (e.g. those in children's homes).
 - A looked after children nurse, whose responsibility it is to coordinate services for LAC and hard to reach young people.
 - A sexual health worker who is linked into the youth and leaving care team and children's homes.
 - A drugs support worker who links with children's homes and foster carers.
 - Dedicated time identified within Child and Adolescent Mental Health Services (CAMHS) specifically for looked after children.
- 4.4 The Select Committee supported the introduction of the strategy (see CYP Select Committee report *Review of Corporate Parenting 1*) and was therefore keen to learn from officers representing children's social care and the primary care trust (PCT) what each service was doing to improve the needs of looked after children as stated above.
- 4.5 The Committee agree that the health of looked after children is a high priority within the Borough and learned that during the year ending 31 March 2007, 96.4% of Looked After Children (LAC) had annual health assessments and dental checks. This was a significant improvement on the previous year and above national comparators.
- 4.6 It is recognised that there will always be a small cohort of children and young people, in particular boys and young men who, for a variety of reasons are reluctant to see a health professional or dentist. A number of initiatives are being considered to ensure wherever possible that looked after children are able to easily access professional health workers. This includes utilising the skills of development workers and a vulnerable health case worker to ensure all looked after children take advantage of annual health assessments and dental checks. It is recommended **that the PCT be requested to make every effort to recruit a male health worker to increase the choice/options for young men in order to increase the number of annual health assessments taken.**
- 4.7 Joint funded posts between Stockton-on-Tees Borough Council and North Tees PCT are not only enabling closer working arrangements and greater understanding of the different organisations but also areas of pooled resources. Evidence given to the Committee suggests that SBC has gained an advantage over other local authorities that do not have such joint arrangements.
- 4.8 Developments can, however, continue to be made irrespective of the level of shared responsibility undertaken by the lead organisations. A limitation identified by PCT officers was the size of the team able to undertake health provision to looked after children. Follow-up work is currently carried out by community nurses but it was suggested that this might become a community workers' role.
- 4.9 Dentistry was also raised as a specific issue as problems had occurred accessing this service. This has previously been recognised by Stockton Council's Health Select Committee which reviewed the issue as it affected all residents in the

borough. The CYP Select Committee was reassured that robust systems are now in place and that children have access to school dentists and NHS provision as provided for by the PCT.

- 4.10 Although the Committee did not take direct evidence from CAMHS Members were assured that the mental health of looked after children is being dealt with by the services of the Tees, Esk and Wear Valleys Mental Health Trust (TEWV) with a specific ring-fenced designated service.
- 4.11 Reassurance was given that clear referral protocols are in place for looked after children with mental health issues although it is not reported that such children have any problems specific to their 'group'. If children undergo or have undergone annual health assessments then any problems could mean their problems are identified earlier than children not in care.
- 4.12 The Committee was interested to determine the amount of data held regarding looked after children's health and where that is stored. It learned that a database of information is compiled by the PCT and that information is shared with appropriate social care staff in order to gather performance information.
- 4.13 Such performance information is vital to determine the effectiveness not only of the Corporate Parenting Strategy but more importantly the level of service received by looked after children. The Committee therefore recommend that **appropriate partnerships identify LAC as a specific group within their monitoring and reporting of Be Healthy initiatives (e.g. Teenage Pregnancy Strategy, Obesity Strategy, Substance Misuse initiatives).**
- 4.14 The Committee believes that officers from Stockton-on-Tees Borough Council and North Tees PCT involved with looked after children have established good partnership working arrangements to deal with the issues presented by looked after children. The Committee expect that such arrangements will strengthen through the development of integrated service planning and delivery and recommend **that the Council and the PCT be required to continue the high level of partnership arrangements and extend this to all necessary agencies.**

5.0 Conclusion

- 5.1 This was always intended to be a very short review following up from the Committee's initial work examining the Corporate Parenting Strategy prior to its implementation.
- 5.2 The information and understanding the Committee has gathered will provide Members with a background of the services provided for looked after children which will inform the monitoring of the services in the future that this Committee will undertake, including examination of appropriate performance data.