

Children, Young People & Learning



Life Chances Team Annual Report 2017-2018

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Please contact:

Policy and Research Officer

Children's Social care

Bracknell Forest Borough Council

Time Square

Market Street

Bracknell

Berkshire RG12 1JD

Email: sarah.roberts@bracknell-forest.gov.uk

Telephone: 01344 352020

Fax: 01344 351521

Minicom: 01344 352045

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BRACKNELL FOREST COUNCIL

LIFE CHANCES TEAM

ANNUAL REPORT 2017-18

1 INTRODUCTION

- 1.1 The Life Chances Team is a multi-agency team of professionals formed in 2012 but has evolved overtime into the current multi agency membership. They meet on a monthly basis. The ambition is to promote the health, education and placement stability for looked after children. The approach benefits from multi agency work to improve outcomes for children.

It is a virtual team comprised of representatives from a number of agencies and specialist services in the Children's Workforce who have a responsibility for looked after children. As well as working directly with children in care, the team supports local foster carers to care for children with more complex needs and provides more integral support for children within their educational setting.

The membership has continued to develop to take into account of the shift in the population of looked after children. Over the last 2 years there has been a strengthening of the membership which now includes CAMHS and the Specialist Social Worker for Child Sexual Exploitation.

Vision

- 1.2 To improve the quality of life and outcomes of all looked after children and young people whilst growing up and in preparation for adulthood.

Mission Statement

- 1.3 To co-ordinate professional solution focused advice and support for looked after children, whilst predicting and responding quickly to placement, health and educational issues and supporting local foster carers to care for children with more complex needs.

2 THE LIFE CHANCES TEAM (LCT)

- 2.1 Members of the Life Chances Team are accountable to their individual management streams and organisations and are mandated by their line managers to commit resources to ensure that their respective teams are clear about their responsibilities in respect of looked after children.

- 2.2 The Life Chances Team consists of the following members

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Peter Hodges	Head of Service for Looked After Children
Kashif Nawaz	Virtual School Head teacher
Clare Glennerster	Manager Leaving Care
Carolyn Carter	Under 11's Assistant Team Manger
Pip Stubbs	Special Education Needs Case Officer
Darren Berry	Youth Service
Sam Howard	Family Placement Assistant Team Manager
Emma Churchill	Family Placement Family Worker
Aphra Fisher	Youth Offending Service
Cherry Hall	Early Years and Children's Centre
Marianne Paul	Learning Achievement Manager
Marcus Nedd	Learning and behaviour coordinator
Fiona Nyquist	LAC Nurse
Jo Lee	Social Worker for CSE and Missing
Andy Brown	Educational Psychologist

A representative from the Independent Reviewing Service is invited to attend in an observing capacity. This is to ensure they have clear oversight and what support is in place for looked after children.

- 2.3 The team reports annually to the Children and Young People's Partnership, the LSCB and the Corporate Parenting Advisory Panel and is co-chaired between the Head of Service for Looked After Children and the Virtual School Head Teacher.
- 2.4 Few children or young people choose to become looked after. A high percentage enter the care system as a result of abuse or neglect, but even these children and young people usually continue to love their families and want to remain with them. Whilst many remain in the care system only for brief periods, a considerable number spend a significant proportion of their childhood in care. Since the introduction of the Life Chances Team our efforts have increased on improving the stability and quality of placements offered to them as well as educational, health and other outcomes for individual children to enhance their life chances. The key outcomes, which can be linked to the vision for all children and young people, and which should be priority areas for all of us as corporate parents, are detailed within this report.
- 2.5 There are no simple solutions for children and young people who are looked after. Needs are complex and services should be tailored to the individual. Nonetheless, the Life Chances Team has taken the approach to look more carefully at the potential for and support of carers, to maximise the range of local family placements, to look beyond the 'placement' alone and secure timely access to a range of support services to secure the best outcomes. The team have been able to identify joint areas of concern which has enabled services to be put in place promptly.

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- 2.6 Significant levels of positive impact have been noted across each area of service that is represented through the Life Chances Team. Details of how this has been achieved are described below by each team.

LOOKED AFTER CHILDREN DATA

Number of Looked After Children in Bracknell Forest

	Mar 14 Actual	Mar 15 Actual	Mar 16 Actual	Mar 17 Actual	Mar 18
Number of Looked After Children	113	104	98	116	138
<i>Bracknell Forest rate per 10,000 U18 population</i>	<i>41.7</i>	<i>37.4</i>	<i>34.8</i>	<i>41.1</i>	<i>48.9</i>
<i>South East rate per 10,000 U18 population</i>	<i>47.0</i>	<i>49.0</i>	<i>52.0</i>	<i>Not yet available</i>	<i>Not yet available</i>
<i>England rate per 10,000 U18 population</i>	<i>60.0</i>	<i>60.0</i>	<i>60.0</i>	<i>Not yet available</i>	<i>Not yet available</i>

- 2.7 The presence of the LCT has meant that professionals working with children in care and their families are able to collaborate with others by taking on an 'informed approach' – they know who to contact and which member of the team is responsible for which area. For these young people the plan is likely to be either adoption, special guardianship order or long term fostering with an emphasis on providing safe and stable placements until they either return to their family or move on into independent living.
- 2.8 At the end of March 2018, there were 138 children and young people looked after by Bracknell Forest Council which represents an increase of 22 children from the previous year. A high proportion of this increase was in quarter 1 of 2017/18
- 2.9 Over the last 5 years, the number and proportion of children becoming looked after has increased with particular spikes in 2013/14, 2016/17 and last year. There are a variety of reasons for the upward trend including the emerging county lines issues, increase in care proceedings and children subject to a Child Protection plan leading to permanence decision of children becoming looked after. There has been greater focus on achieving permanency for children following the introduction of the Permanency Strategy in 2016. This can be in the form of legal permanence through Special Guardianship Order and Adoption and also ensuring that research based consideration is given to reunification to the care of birth family.
- 2.10 Bracknell Forest Council and other agencies have statutory or local responsibility towards vulnerable groups, including looked after children and those who have left care. The Council as a whole has a 'Corporate Responsibility' for children who are looked after and for eligible care leavers. Within the Council, Children's Social Care had overall responsibility for implementing effective care plans. Schools, Early Years

providers and the Youth Service are also measured on the impact of their services for vulnerable groups, including looked after children. The Youth Offending Service has a stake in diverting looked after children from offending; care leavers have housing rights for the provision of accommodation; the Health Service have statutory responsibilities towards meeting the physical and mental health needs of looked after children. All of these agencies are members of the LCT.

RESOURCES

- 2.11 A part time Life Chances Team Co-ordinator, managed by the Head of Service, Looked After Children, administers the team. They arrange the meetings, maintain the database, monitor and follow up performance data, minute meetings regarding looked after children and covers other administrative tasks. The Co-ordinator also supports and monitors the timeliness of health assessments, Strengths and difficulties questionnaires and dental examinations for Looked After children in order to promote physical and mental health. The impact of this is Bracknell Forest's high levels of children who have health assessments and dental checks. The co-ordinator works closely with health partners as well as Children Social Care staff and foster carers.
- 2.12 Over the last year, the support from the Educational Psychology service has been embedded. This has led to increased support from this service to Looked After Children including assessment, attendance at professionals meetings and liaison with schools to support the education of looked after children. This has been a positive impact from the Life Chances Team.
- 2.13 There has been liaison and progress in terms of children's mental health service (CAMHS) support this year. The Head of Service for Looked After Children has met regularly with senior managers from CAMHS and there is now an escalation process in place to address issues such as waiting lists, communication, diagnosis and support to children and families. There is now a named person from CAMHS for looked after children and this person continues to attend meetings. The impact of this is more effective sharing of data and ensuring services can be in place to support children in a timely way. In addition the LAC nurse has access to the CAMHS database and is able to provide some information on children open to local CAMHS.
- 2.14 The Social Worker for Missing and Child Sexual Exploitation has continued to attend this year which has continued to improve outcomes for children. This enables risk factors to be identified shared and actioned through Sexual Exploitation and Missing Risk Assessment Conference (SEMRAC) where required.
- 2.15 Every member of the LCT has access to a range of information held by various agencies on all Bracknell Forest looked after children.
- 2.16 Access to data is restricted to members of the virtual team who each sign a confidentiality agreement. Team members may share information on a need to know basis with their own team/agency but cannot download or save the document. Observers to the team meeting are required to sign a confidentiality agreement.
- 2.17 A small budget is available for an annual conference which is designed to increase the knowledge of all agencies around pertinent issues for looked after children to improve outcomes.

PROCESS

- 2.18 The Life Chances Team meets monthly and has maintained good attendance from agencies at each meeting. The agenda is to discuss team updates and then focus on children who have been nomination by LCT members. Following this there is a discussion on all RAG rated children (Red and Amber and Green). The referrer begins by clarifying the reasons for referral including risk factors in relation to health, education and placement. Following this, there is a discussion and an action plan for each child including clarification regarding which agencies will lead on key actions.
- 2.19 The Life Chances Team has developed and follows a detailed action plan, which focuses on the aims and objectives of the team, how these will be measured by whom and to what timescale.
- 2.20 A RAG (Red, Amber and Green) system is used to highlight the risk or concern identified by the LCT on the database. If two or more domains are highlighted as being an issue for a particular child then the child's name is given a Red status. A plan of action is identified by relevant LCT members, updated onto the database and ICS database (Mosaic) by the Life Chances Co-ordinator and reviewed by the LCT the following month.
- 2.21 Examples of when a domain is given a RED status are:

Placement

- High risk of a placement breaking down soon
- Early identification of concerns that, if not addressed now, may lead to break down
- Questions about whether the placement is meeting the current, or future needs of the child
- Action needed to promote positive progress in the placement
- Challenges in identifying an alternative placement
- Increase in missing episodes and/or Child sexual exploitation that may be impacting upon placement

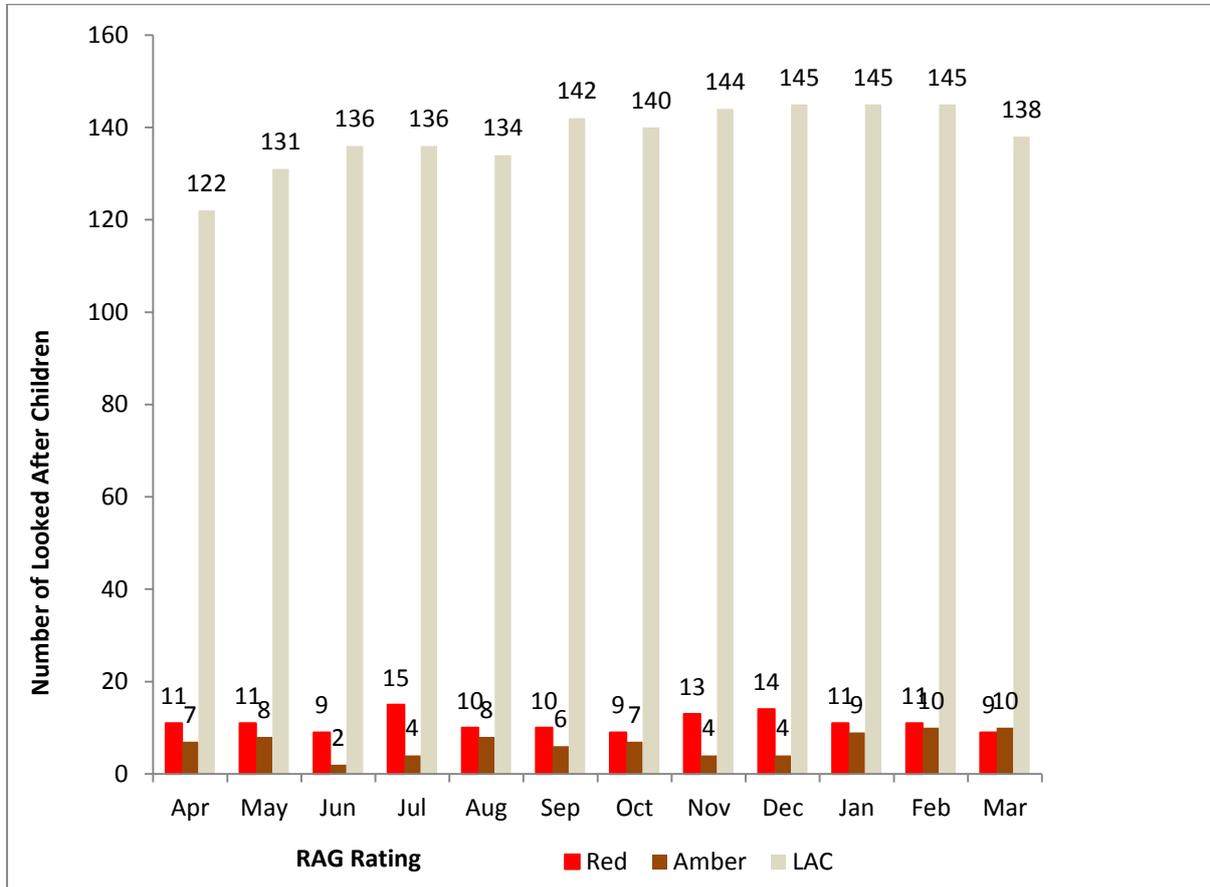
Health

- Health medicals or dental and optician checks being overdue
- Difficulties in implementing the Health plan
- Need for specific action to address need – e.g. sexual health counselling
- Unmet emotional or mental health needs
- Emotional well-being concerns that are leading to placement or educational concern.

Education

- Problems with attendance at school
- Concerns about implementing the Personal Education Plan (PEP)
- Weaknesses with the co-ordination of professional input into a school
- Issues about a carer's support for education
- Problems in education provision out of Borough

2.22 RAG Rating by Month



2.23 Above is a table showing the RAG ratings during the year. This breakdown shows a spike in July and December 2017. There was also a spike April/May and December 2017. This table also shows the steady increase of looked after children during the financial year.

3 IMPACT

3.1 One 17 year old girl who was experiencing a high level of emotional instability resulting in repeat hospital admissions has been helped by the CAMHS representative hearing more about her situation and understanding the needs for continue CAMHS support being provided, leading to the girl being offered an 'extended assessment' with a consistent worker. The CLA Nurse, with whom she has a very positive relationship, agreed to take her to initial appointments but the girl has now been able to attend on her own. The sharing of information and concerns and co-ordinated approach was key in supporting her during a very vulnerable period.

3.2 Research highlights education, employment and training (EET) are protective factors against involvement in anti-social and offending behaviour. Young people not in

education, employment or training (NEET) are five times more likely than their peers to become involved in the youth justice system and three times more likely to suffer depression, leading to longer term health problems and costs to society (Audit Commission, 2010: Against the odds).

N was a 16 year old male who had received a Youth Conditional Caution from the Police for criminal damage offences. The YOS was requested to complete an assessment to propose the conditions of the Caution to the Police. The assessment identified the factors associated with N's risk of reoffending included emotional dysregulation as a result of childhood trauma, educational needs, lifestyle and attitude towards offending. Through the LCT, funding for additional therapy with Dr Kimber-Bidlot was secured for N who engaged with this service as part of his Caution to address his emotional well-being.

Through the positive working relationships of the Life Chances Team members which have now been embedded for a number of years, There is evidence of effective jointed working to supporting N at the time and incorporated the targeted ETE work and lifestyle work was undertaking with N into the Caution to support N to remain in education and develop a positive lifestyle. This collaboration reduced the risk of overwhelming the young person with further professional involvement from others taking into account the diversity needs of the child. N successfully completed his Youth Conditional Caution, has not reoffended and is no longer in the criminal justice system.

This intervention has also led to improvements in behaviour in his placement which has culminated in him having increased stability of placement.

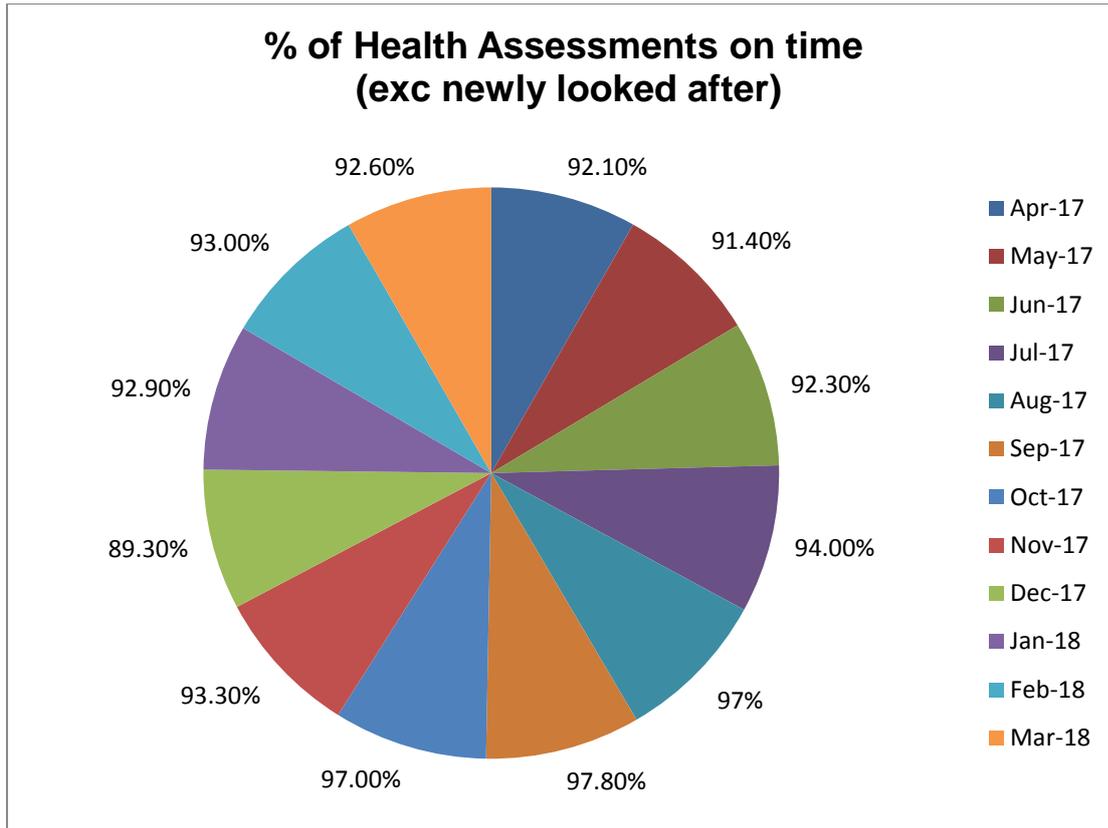
- 3.3 M had been through a year of instability in relation to her placement, education and emotional health and wellbeing. As a result of ongoing discussion at Life Chances, we have been able to secure her a semi-independent placement and ensure appropriate support has been co-ordinated and put in place to make this a success. This has included addressing her emotional health and well-being issues resulting in her accessing CAMH's appropriately, rather than accessing mental health services on an emergency basis. It has also included support and understanding in relation to her college placement allowing her to re-access her course and complete the academic year. She continues to develop appropriate independent living skills with input and support. Ongoing discussion within Life Chances Team has ensured that this has been maintained and that MC continues to progress.
- 3.4 A year 10 student going through a difficult time was out of school and refusing to work with the offered support. The situation was nominated at a Life Chances meeting. As a result, residential home staff, Children's Social Care (CSC), Educational Psychologist's (EP), the Independent Reviewing Officer (IRO) and The Virtual School provided an education package including attending a music production course, radio show production and 1-2-1 home tuition. The Virtual School worked with the education provider and successfully reintegrated in time for the start of year 11 and the young person is predicted four GCSE's. In addition, the family has been reunified and signs are good. On recent feedback the young person described the support received as 'life changing'.
- 3.5 A year 11 student with low school attendance had changed home address due to frequent missing episodes and other difficulties. A Life Chances member nominated the situation. As a result, CSC, EP's, SEN and The Virtual School provided a 'mentor' package, 1-2-1 tuition and careers advice and guidance allowing the young person to sit 2 GCSE exams, attend a construction course at college and is now

employed. Also, the young person has settled into a new home address. The young person recently described their support as 'always there when I need it'.

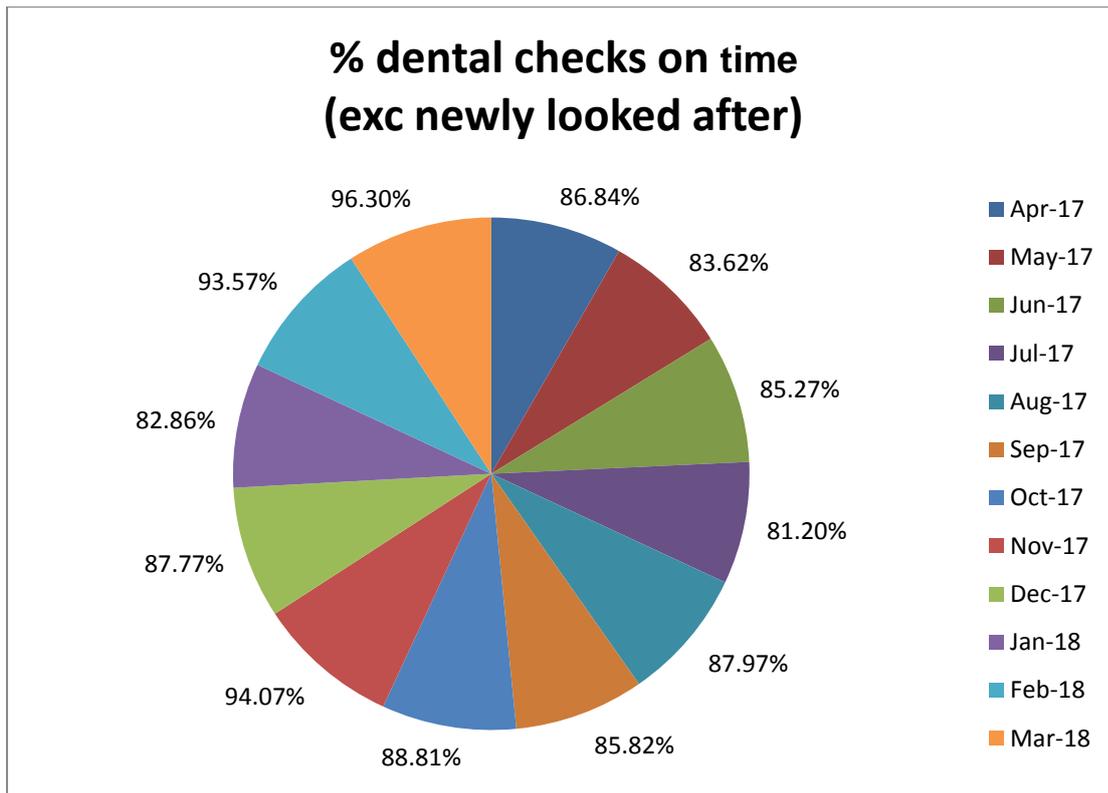
- 3.6 A year 10 student out of school, whose home address broke down, was refusing to work with the offered support. It was brought to a Life Chances meeting. As a result, residential staff, the EP, CAHMS, the IRO, CSC and the Virtual School provided a therapeutic package including boxing, a previous care leaver as a 'mentor', It was a positive 'ending' at the last address and the young person is now settled in a new semi-independent home. The young person receives a home education package and will sit Functional Skills Level 2 maths and English exams this year.

4 HEALTH

- 4.1 The Looked After Children and Young People Health Team covers East Berkshire. Bracknell Forest has a part time Specialist Nurse dedicated to the health needs of Bracknell's Looked After Children. The Specialist Nurse undertakes all Review Health Assessments for Bracknell Forest Looked After Children and Young People placed within a twenty mile radius of the Berkshire border. This has led to better understanding and involvement with any children and young people placed within this radius, ensuring their health needs are met in a timely manner. The Specialist Nurse continues to find creative ways in encouraging young people to have their routine annual health assessments, which they may have previously declined.
- 4.2 Life Chances Team continues to help the health representative to keep up to date regarding any issues that are raised as a concern at an early stage. It also allows open discussion and the opportunity to share any concerns regarding individual cases within a multi-agency setting. This allows health to have a better knowledge of the Looked After Children and young people within Bracknell Forest along with any needs they present with, resulting in more effective early interventions.
- 4.3 In view of their earlier experiences, looked after children can have a higher need for health care than their peers. It is important that health assessments and plans are reviewed regularly (annually for children over five years and twice a year for under 5 year olds). The LCT Coordinator plays a valuable role in the process of both initial and review assessments ensuring checks are followed up in a timely manner.
- 4.4 **Health Assessments**
The below table shows the percentage of looked after children per month who had an annual health assessment on time. These figures are better than the other Berkshire authorities as reported by Heath when they attended Corporate Parenting Panel in September 2017. Part of the reason they are as high is due to the work of the life chances co-ordinator. There will always be a small number of children who refuse an annual health assessment in spite of encouragement from social care and health professionals.



4.5 The pie chart below shows the percentage of children who have had an up to date dentist check. These are again strong as a result of the work from the life chances team co-ordinator. The Life Chances Coordinator and the LAC nurse work effectively in partnership to monitor compliance with statutory timescales. The slight reduction throughout the year is as a result of an increase in the overall number of adolescence coming into care that refuses, in spite of encouragement to see a dentist. Work continues to try and encourage these children to visit a dentist.



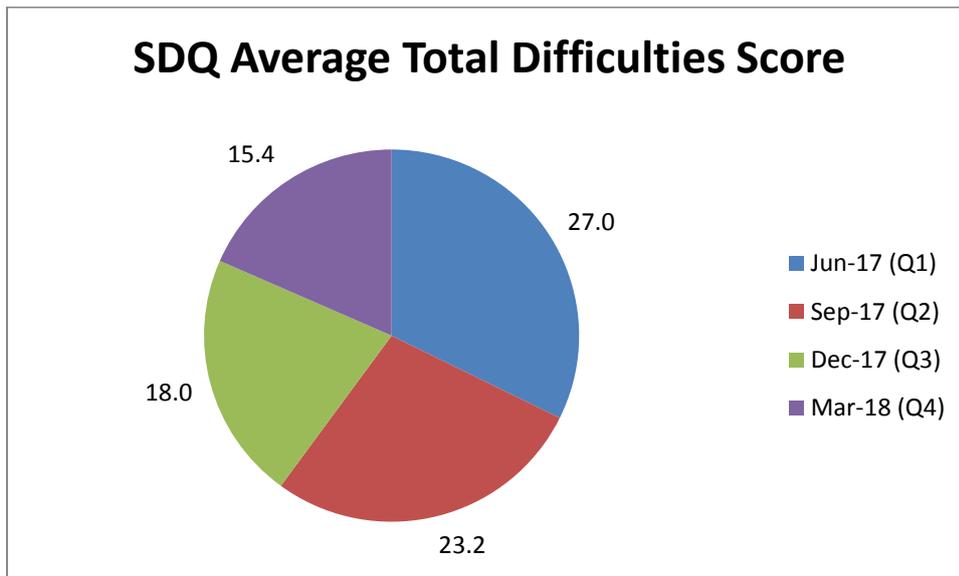
- 4.6 Health Services attended the Corporate Parenting Advisory Panel in September 2017 and were very positive around the impact of the Life Chances Coordinator role and the support in improving the health of Looked After Children. In addition, Bracknell Forest Children were involved in the creation of a Health Passport which is being rolled out across Berkshire.

EMOTIONAL AND BEHAVIOURAL HEALTH OF LOOKED AFTER CHILDREN

- 4.7 One of the measures used to monitor the wellbeing of looked after children are the completion of a Strengths and Difficulties Questionnaire (SDQ) by the carer. This is given a score, the higher the score the greater the concern. The result of the questionnaire is a factor which can lead to a concern being raised in the LCT meeting.
- 4.8 The SDQ scores have decreased from an average of 27 in quarter 1 to 15.4 in quarter 4. However, these scores are not entirely reliable as even though SDQ's are already sent out for all children, the SDQ has not been returned for every child, the score can depend on the time when the questionnaire has been undertaken or the person undertaking it. In order to seek to make this data more reliable, there has been a review of the process for next year. SDQ's will now be sent out in advance of the annual health assessment so can be considered at the health assessment and then will be discussed at the following life chances meeting.

Strengths and Difficulties Scores

- 4.9 All looked after children will have experienced a level of physical or emotional trauma at some point. There are also approximately 10 children at any one time who are living at home but are at high risk of becoming looked after and are provided with services to divert them.



5 LIFE CHANCES CONFERENCE

The 5th annual Life Chances Team conference was held on the 20th March 2018 at Easthampstead Baptist Church. The title for this year's event was 'Attachment and Developmental Trauma'. Dr Sarah-Jane Knightley a Clinical Psychologist lead on the session which focussed on:-

- What are the signs and symptoms?
- Models to help us understand it
- Diagnostic issues
- Therapeutic approaches

It was an interactive morning sharing candidates understanding of attachment issues and developmental trauma and strategies to help. The event was well attended with 91 attendees from schools, the Council, Elected Members and foster carers.

With feedback being overwhelmingly positive, the Life Chances Team will continue to work in partnership with others to achieve positive outcomes for our looked after children

- 5.1 Feedback from the conference included:

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- 5.1.1 Great to share practice and to unpick particular unwanted behaviours. Trainer very interesting and knowledgeable.
- 5.1.2 Thank you for organising this training would be interested in what next – loved the video at the end – very helpful clear and simple.
- 5.1.3 Really interesting and relevant, especially thought-provoking with the transformation of services.
- 5.1.4 This is an area I am really passionate about and feel should be rolled out across the board. We are all therapeutic agents.
- 5.1.5 Really helpful – cannot single out a particular section. Just keeping getting the experts in.
- 5.1.6 Helpful, we are seeing more children and parents who have had traumatic childhoods and poor attachments within children's centres, so increasing professional knowledge and awareness will enable us to recognise it and put appropriate strategies in place to support.
- 5.1.7 More training and information like this!

6 OTHER LIFE CHANCES TEAM ACTIVITIES April

2017 - 2018

- 6.1 The Life Chances Team linked more closely with the Children in Care Council to enable greater learning to be shared and their 'Voices' heard. The Family Placement Team family worker attended the SiLSiP meetings and fed back issues raised by the Council for response by the LCT.
- 6.2 The LCT organised the annual Looked After Children Achievement Award ceremony held at The Easthampstead Park Conference Centre in December 2017. Awards for academic and social achievements were presented to children between 4 and 18 years.

7 WHAT OFSTED SAID?

- 7.1 *Bespoke targeted work by the well-established multi-agency 'Life chances' team (LCT) has significantly contributed to improved placement stability. The number of children who have had three or more placement moves is decreasing. In responding quickly and allocating tasks to the most appropriate worker or agency, the LCT is helping to support foster carers by increasing their emotional resilience and practical skills in caring for vulnerable adolescents. This is enabling children, particularly adolescents with complex needs, to remain in the same placement.*

OFSTED, Single Inspection of Local Authority Children's Services (July 2017)

8 ACTION PLAN FOR 2018/2019

Children Looked After pod to attend life chances Peter Hodges June 2018

All Children's Social Care staff to observe Life Chances Team as part of their induction Peter Hodges July 2018

2019 Annual Conference to focus on Adolescent Mental Health as this is a key area Peter Hodges
Kashif Nawaz March 2019

Contact for further information

Peter Hodges
Head of Service
Looked After Children
Tel: 01344 351532
Email: Peter.Hodges@bracknell-forest.gov.uk

Kashif Nawaz
Virtual School Head
Tel: 0118 936 6431
Email: Kashif.nawaz@bracknell-forest.gov.uk

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