

Peoples Directorate



Life Chances Team Annual Report 2018-2019

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BRACKNELL FOREST COUNCIL
LIFE CHANCES TEAM
ANNUAL REPORT 2018-19

1 INTRODUCTION

- 1.1 The Life Chances Team is a multi-agency team of professionals formed in 2012 and has evolved over time into the current multi agency membership. They meet on a monthly basis. The ambition is to promote the health, education and placement stability for children looked after. The approach benefits from multi agency work to improve outcomes for children.
- 1.2 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 children looked after. 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.
- 1.3 The membership has continued to develop to take into account the shift in the population of children looked after and contextual safeguarding. 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

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

Mission Statement

- 1.5 To co-ordinate professional solution focused advice and support for children looked after, 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

Peter Hodges	Head of Service for Life Chances
Kashif Nawaz	Head of Children's Support Services Virtual Schools Head Teacher
Clare Glennerster	Manager Leaving Care
Carolyn Carter	Family Safeguarding Team, Assistant Team Manger
Pip Stubbs	Special Education Needs Case Officer
Darren Berry	Youth Service
Clair Norwood	Family Worker, Family Placement Team
Jo Salmon	Children Looked After Assistant Team Manager
Aphra Fisher	Youth Offending Service, Social Worker
Cherry Hall	Locality Manager
Marcus Nedd	Learning and behaviour coordinator
Ceri Clarke	Education Support Officer Looked After Children
Fiona Nyquist	LAC Nurse
Lilian Dickinson	Social Worker for Exploitation and Missing
Andy Brown	Educational Psychologist
Nicola Church	Systemic Psychotherapist (CAMHS)

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 children looked after.

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 Life Chances and the Head of Children's Support Services 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.
- 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 15	Mar 16	Mar 17	Mar 18	Mar 19
Number of Looked After Children	104	98	116	138	158
<i>Bracknell Forest rate per 10,000 U18 population</i>	<i>37.4</i>	<i>34.8</i>	<i>41.1</i>	<i>48.9</i>	<i>56.3</i>
<i>South East rate per 10,000 U18 population</i>	<i>49.0</i>	<i>52.0</i>	<i>51.0</i>	<i>51.0</i>	<i>Not yet available</i>
<i>England rate per 10,000 U18 population</i>	<i>60.0</i>	<i>60.0</i>	<i>62.0</i>	<i>64.0</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.

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- 2.8 At the end of March 2019, there were 158 children and young people looked after by Bracknell Forest Council which represents an increase of 20 children from the previous year. The increase falls into line with statistical neighbours.
- 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 the last 2 years. 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.
- 2.10 Bracknell Forest Council and other agencies have statutory or local responsibility towards vulnerable groups, including children looked after 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 children looked after 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, Life Chances, administers the team. They arrange the meetings, maintain the database, monitor and follow up performance data, minute meetings regarding children looked after 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 children looked after to promote physical and emotional 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 children looked after including assessment, attendance at professional's 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 Life Chances has met regularly with 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. However, the emotional health of children looked after remains a concern and there are further plans in place to address this. There is a named person from CAMHS for children looked after 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 can provide some information on children open to local CAMHS.
- 2.14 The Social Worker for Missing and Exploitation has continued to attend this year which has continued to improve outcomes for children. This enables risk factors to be

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identified shared and actioned through Multi Agency Child Exploitation (MACE) meetings where required.

- 2.15 Every member of the LCT has access to a range of information held by various agencies on all Bracknell Forest children looked after.
- 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 nominated 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

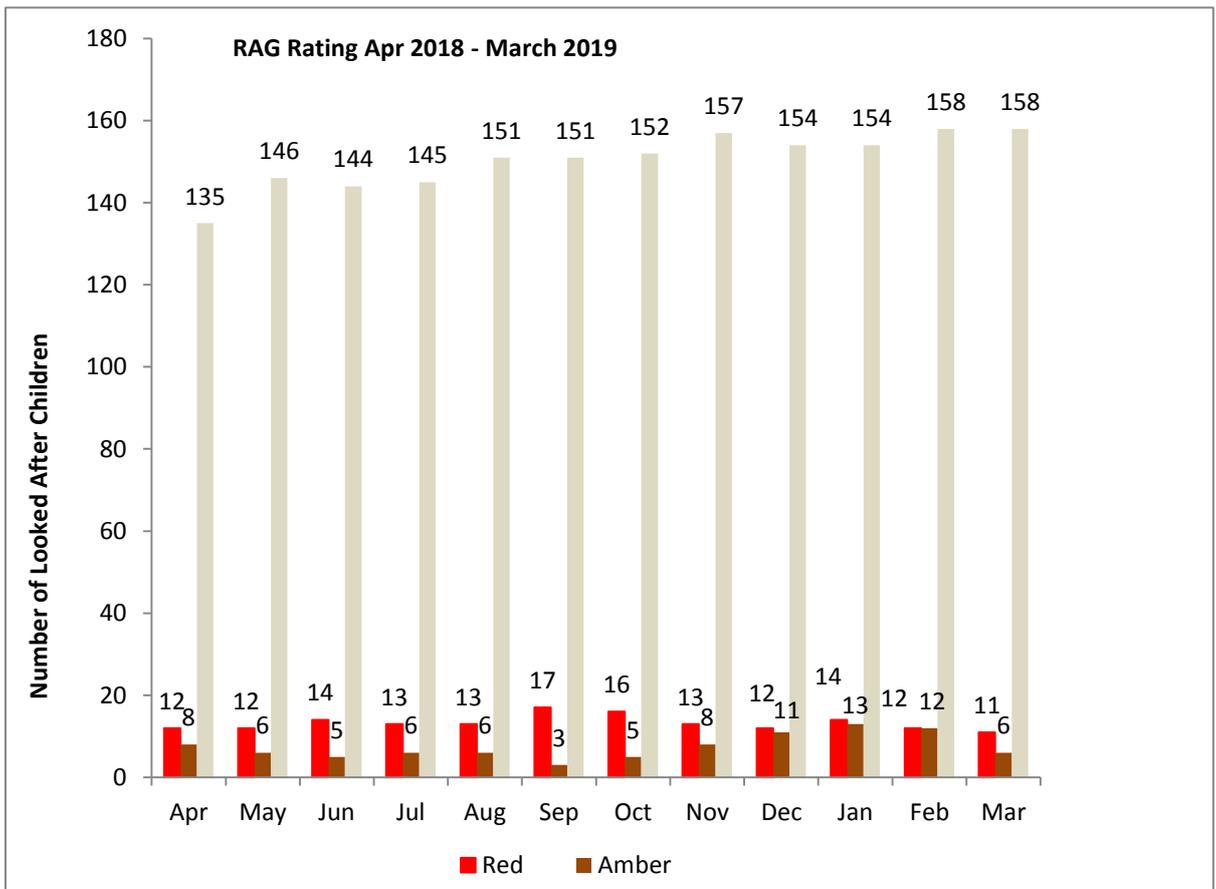
Health

- 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 September and October 2018. This correlates with the start of the academic year where there were a number of children where there were concerns around their

education. This table also shows the steady increase of children looked after during the financial year.

3 IMPACT

- 3.1 Regular discussion at the Life Chances Team with follow-up by the CAMHS representative has ensured that the process of ensuring assessment information required for planning suitable therapeutic support for a 16 year old girl has progressed in a more timely manner than would have been the case without this input. The CAMHS representative is often able to provide key updates regarding the status of referrals and likely waiting time for CAMHS support to be provided. The therapy in place has enabled the placement with foster carers to stabilise.
- 3.2 A 16 year old male was discussed at the Life Chances Team regarding concerns that the young person was at risk of a custodial sentence, he was vulnerable in terms of his diversity needs and it was agreed that a separate planning meeting should take place between the Head of Service for Life Chances, the social worker, YOS worker. From this joint up working, funding was agreed for the placement up until the young person's 18th birthday. As a result of this joint up working, a non-custodial sentencing option was put to the Court which included the young person residing at the placement which the Crown Court Judge accepted was the best option taking into account the child's welfare needs. A custodial sentence would have been detrimental to this young person who would not have received the therapeutic and rehabilitative support he requires which he has continued to access at the specialist placement.
- 3.3 A 16 year old child looked after requested to have his ASD/ADHD diagnosis reassessed however the YOS were informed by the out of area placement there was a 2 year waiting list for CAMHS assessments. It was identified that the out of area YOT had a CAMHS worker. This young person was nominated together with their wishes and the issue of a two-year waiting list at the Life Chances Team. As a result, the LCT CAMHS representative made contact with the out of area YOT CAMHS worker, provided information regarding the young person's involvement with CAMHS whilst he was a resident in this area (the out of area CAMHS would not have access to this information). From this, the out of area YOT Worker made a referral to their local CAMHS team requesting an assessment and it has helped to prioritise the young person on the out of area CAMHS waiting list for an assessment.
- 3.4 Young person left school with no qualifications and was not attending college. Following discussion at the Life Chances Team Meeting a proactive plan was put in place to engage him alongside other activities. As a result he began engaging with college and gained qualifications which are a route into employment opportunities.

4 HEALTH

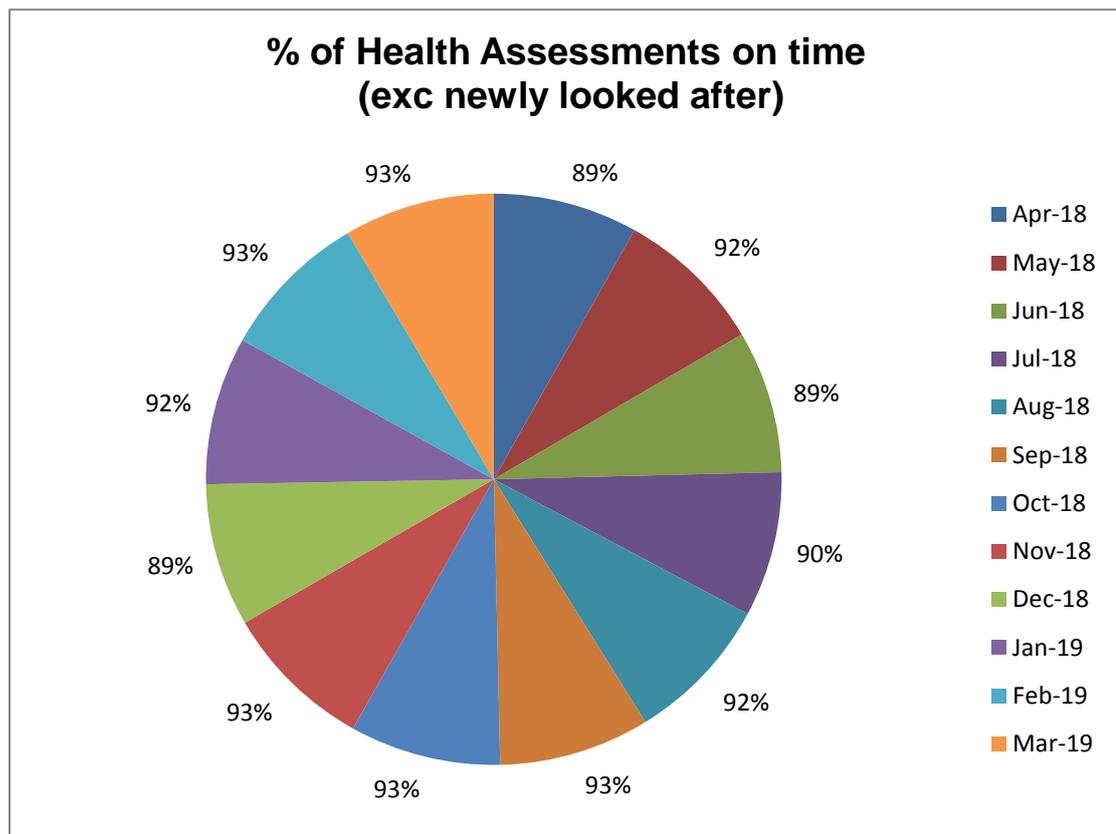
- 4.1 The Looked After Children and Young People Health Team covers East Berkshire. Bracknell Forest has a part time Specialist Nurse dedicated to the health needs of Bracknell's Children Looked After. The Specialist Nurse undertakes all Review Health Assessments for Bracknell Forest Children Looked After 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.

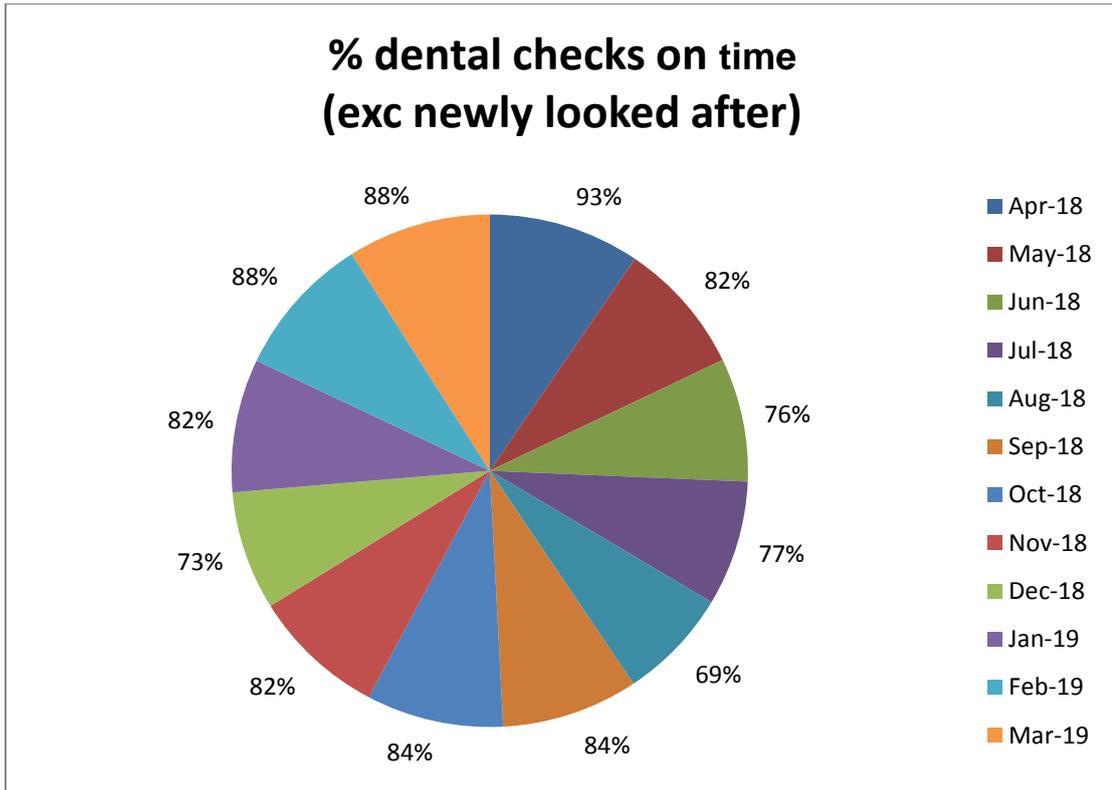
4.3 In view of their earlier experiences, children looked after can have a higher need for health care than their peers. It is important that health assessments and plans are reviewed regularly (annually for children over five years and twice a year for under 5 year olds). The LCT Coordinator plays a 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 children looked after 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 2018. 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.



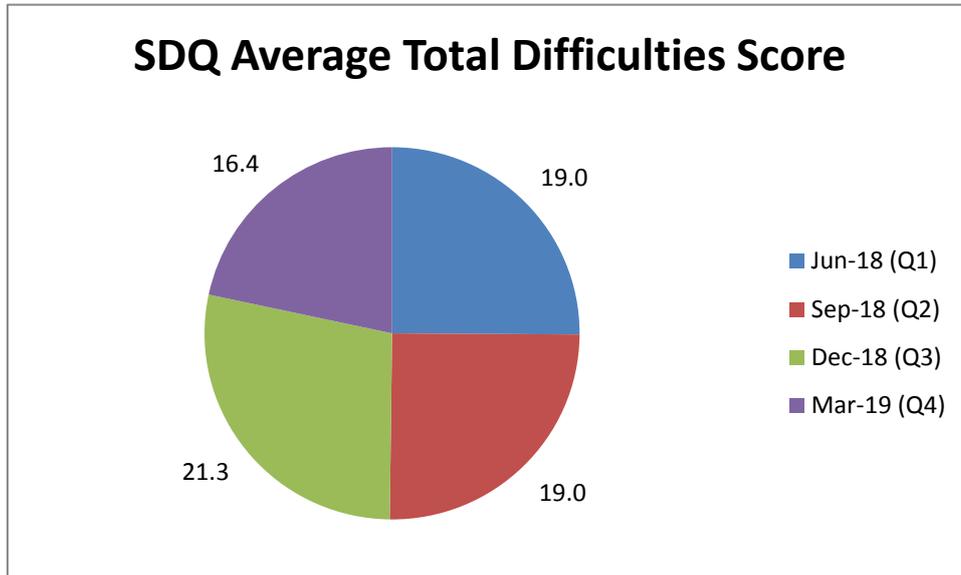
4.6 Health Services attended the Corporate Parenting Advisory Panel in September 2018 and were very positive around the impact of the Life Chances Coordinator role and the support in improving the health of Children Looked After. In addition, Bracknell Forest Children were involved in the creation of a Health Passport which is being rolled out across Berkshire.

EMOTIONAL AND BEHAVIOURAL HEALTH OF CHILDREN LOOKED AFTER

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 19 in quarter 1 to 16.4 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 be completed in advance of each CLA review and discussed in the review. Any child where the score is above 14 will be sent to the CAMHS representative and the actions around this discussed at the next 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 6th annual Life Chances Team conference was held on the 27th March 2019 at Easthampstead Baptist Church. The title for this year's event was 'Understanding Complex Trauma and its Psychological Impact led by Dr Deborah Lee, Consultant Clinical Psychologist, Head of Berkshire Traumatic Stress Service, Berkshire Healthcare NHS Trust.

The session focussed on –

- The signs and symptoms
- Ripple effect of trauma
- Developing trauma aware practice

It was an interactive morning sharing candidates understanding of Complex Trauma. The event was well attended with 90 attendees from schools, the Council, Elected Members and foster carers.

- 5.1 Feedback was overwhelmingly positive, some examples of which are below

5.1.1 The event was clear, informative, well delivered and very worthwhile taking the time out from my schedule to attend. It will result in a different approach to working with traumatised young people.

5.1.2 I could have listened to Dr Lee all day the entire event was very helpful.

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- 5.1.3 The breathing exercise was really helpful; it is something I will use.
- 5.1.4 Fascinating. Lots of useful information for working with vulnerable children.
- 5.1.5 All theories, knowledge and experiences shared were invaluable and I have learnt an awful lot. I work one on one with some pupils who have suffered early trauma and I now feel I have a better understanding of how I can best help them. Thank you.
- 5.1.6 It was amazing, the best we have ever had. Dr Deborah Lee was so interesting. She made it very easy to understand and relate to. Very enjoyable.
- 5.1.7 A logical presentation where complex theory was presented from first principles to conclusions.
- 5.1.8 Good discussion about how to work with traumatised children and how to rebuild their soothing system.
- 5.1.9 Being compassionate in my own practice and thinking more about this in terms of behaviour systems in place.
- 5.1.10 Discussion around health attachment and how trauma affects the areas of sadness and anger within a child. Reminder of how the brain works and how compassion can help the effects of a brain conditioned by trauma.
- 5.1.11 Gives thought to how we can respond to anger/challenging behaviour without blame or shame.
- 5.1.12 Breathing – I will teach my students to breath properly to detoxify their system.
- 5.1.13 Fantastic event and Dr Lee truly amazing and inspirational. We all need to be more compassionate in the work we do – both with traumatised children, who have already for many of them been through so much – but also understand this was most likely the case for their parents – very much food for thought.

6 OTHER LIFE CHANCES TEAM ACTIVITIES 2018-2019

- 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 Children Looked After Achievement Award ceremony held in December 2018. Awards for 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 THE LIFE CHANCES SERVICE

- 8.1 The creation of the Life Chances Service incorporating the Children Looked After, Leaving Care, Family Placement and Youth Offending Teams. This provides an opportunity for us to consider how we use this meeting to focus not only children who are looked after but also plans for permanence through transition into care leavers and as a result there will be a planned review of the terms of reference of the Life Chances Team Meeting in 2019/20

9 ACTION PLAN FOR 2018/2019

Review of SDQ process to ensure these are discussed where the score is 14 or higher	Peter Hodges	June 2019
Review terms of reference and membership to consider transition and care leavers.	Peter Hodges	July 2019
2020 Annual Conference to focus on Adolescent Mental Health as this is a key area	Peter Hodges	March 2020

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