



Walsall Council

Corporate Parenting Board

Meeting to be held on: **Monday 15 November, 2021 AT 6.00 PM**

Meeting to be held: Council Chamber, Council House, Walsall.

MEMBERSHIP:

Chair: Councillor Wilson
Vice Chair: Councillor Worrall
Councillor Ferguson
Councillor Hicken
Councillor Murphy
Councillor M Nazir
Councillor Mazhar

ADVISOR

Alison Jones (NHS Walsall CCG)

Note: Walsall Council encourages the public to exercise their right to attend meetings of Council, Cabinet and Committees. Agendas and reports are available for inspection from the Council's Democratic Services Team at the Council House, Walsall (Telephone 01922 654369) or on our website www.walsall.gov.uk.

ITEMS FOR BUSINESS

1.	Introductions and Apologies	
2.	Substitutions	
3.	Minutes To approve the minutes of the meeting held on 6 th September 2021.	<u>Enclosed</u>
4.	Letter from Children’s Commissioner	<u>Enclosed</u>
5.	Young People Engagement To provide the Corporate Parenting Board with an update on the activities of the Children in Care Council.	<u>Enclosed</u>
6.	CAMHS A report on CAMHs provision for Looked After Children.	<u>Enclosed</u>
7.	Annual assurance report (CCG) To receive an annual assurance report from Walsall CCG.	<u>Enclosed</u>
8.	Health Passports An update on health passports.	<u>Presentation</u>
9.	Corporate Parenting Strategy To agree the Board’s shared partnership ambition for our children in care and care experienced young people.	<u>Enclosed</u>
10.	Work programme To review the work programme of the Corporate Parenting Board.	<u>Enclosed</u>
11.	Date of Next Meeting 11 th January 2022, 6 p.m.	

The Relevant Authorities (Disclosable Pecuniary Interests) Regulations 2012 Specified pecuniary interests

The pecuniary interests which are specified for the purposes of Chapter 7 of Part 1 of the Localism Act 2011 are the interests specified in the second column of the following:

Subject	Prescribed description
Employment, office, trade, profession or vocation	Any employment, office, trade, profession or vocation carried on for profit or gain.
Sponsorship	<p>Any payment or provision of any other financial benefit (other than from the relevant authority) made or provided within the relevant period in respect of any expenses incurred by a member in carrying out duties as a member, or towards the election expenses of a member.</p> <p>This includes any payment or financial benefit from a trade union within the meaning of the Trade Union and Labour Regulations (Consolidation) Act 1992.</p>
Contracts	<p>Any contract which is made between the relevant person (or a body in which the relevant person has a beneficial interest) and the relevant authority:</p> <p>(a) under which goods or services are to be provided or works are to be executed; and</p> <p>(b) which has not been fully discharged.</p>
Land	Any beneficial interest in land which is within the area of the relevant authority.
Licences	Any licence (alone or jointly with others) to occupy land in the area of the relevant authority for a month or longer.
Corporate tenancies	<p>Any tenancy where (to a member's knowledge):</p> <p>(a) the landlord is the relevant authority;</p> <p>(b) the tenant is a body in which the relevant person has a beneficial interest.</p>
Securities	<p>Any beneficial interest in securities of a body where:</p> <p>(a) that body (to a member's knowledge) has a place of business or land in the area of the relevant authority; and</p> <p>(b) either:</p> <p>(i) the total nominal value of the securities exceeds £25,000 or one hundredth of the total issued share capital of that body; or</p> <p>(ii) if the share capital of that body is more than one class, the total nominal value of the shares of any one class in which the relevant person has a beneficial interest exceeds one hundredth of the total issued share capital of that class.</p>

Schedule 12A to the Local Government Act 1972 (as amended)

Access to information: Exempt information

Part 1

Descriptions of exempt information: England

1. Information relating to any individual.
2. Information which is likely to reveal the identity of an individual.
3. Information relating to the financial or business affairs of any particular person (including the authority holding that information).
4. Information relating to any consultations or negotiations, or contemplated consultations or negotiations, in connection with any labour relations matter arising between the authority or a Minister of the Crown and employees of, or office holders under, the authority.
5. Information in respect of which a claim to legal professional privilege could be maintained in legal proceedings.
6. Information which reveals that the authority proposes:
 - (a) to give any enactment a notice under or by virtue of which requirements are imposed on a person; or
 - (b) to make an order or direction under any enactment.
7. Information relating to any action taken or to be taken in connection with the prevention, investigation or prosecution of crime.
8. Information being disclosed during a meeting of a Scrutiny and Performance Panel when considering flood risk management functions which:
 - (a) Constitutes a trades secret;
 - (b) Its disclosure would, or would be likely to, prejudice the commercial interests of any person (including the risk management authority);
 - (c) It was obtained by a risk management authority from any other person and its disclosure to the public by the risk management authority would constitute a breach of confidence actionable by that other person.

Corporate Parenting Board

Monday 6th September 2021 at 6.00 p.m.

Conference Room 2, Walsall Council House

Board Members Present:

Councillor T. Wilson (Chair)
Councillor. R. Worrall (Vice-Chair)
Councillor K. Ferguson
Councillor A. Hicken
Councillor K. Murphy
Councillor F. Mazhar

Officers Present

David Hughes	Children and Young Persons Champion
Alison Jones	Designated Nurse LAC (Clinical Commissioning Group)
Mark Tobin	Head of Service, Adoption at Heart
Jivan Sembi	Head of Service (Children in Care, Provider and Care Leaving Services)
Helena Baxter	Apprenticeship Programme Lead
Helena Kucharczyk	Head of Performance Improvement and Quality
Elise Hopkins	Director – Customer Engagement

Welcome

At this point in the meeting, the Chair opened the meeting by welcoming everyone present. He also directed members of the public viewing the meeting to the papers, which could be found on the Council's Committee Management Information system (CMIS) webpage. It was noted that a Shadow Board was held directly prior to the meeting to seek the views and experiences of young people.

The Chair asked the Children and Young Persons Champion to congratulate a young person who regularly attended the Shadow Corporate Parenting Board, as she had successfully gained a place at University to study medicine.

621 Introductions and Apologies

There were no apologies for the duration of the meeting.

7/21 Substitutions

There were no substitutions for the duration of the meeting.

8/21 Minutes

A copy of the minutes of the meetings held on 1st July, 2021 were submitted. The Chair updated the Board on actions within the report.

(see annexed)

Resolved (Unanimous)

That the minutes of the meeting held on 1st July, 2021 copies having previously been circulated to each Member of the Board, be approved and signed by the chairman as a correct record.

9/21 Young People Engagement

The Children and Young Persons Champion spoke to the report (annexed) and highlighted the salient points.

Members were informed of the following successes:

- The Children in Care Council had been involved in various interview panels. Feedback from this had been positive. Including interviews for 'personal advisors', young people would be compensated for this.
- Recruitment had taken place to the Care Leaver ambassador position.
- Face to face meetings and activities had begun to take place once again.
- The litter pick discussed at the previous meeting hadn't yet taken place, however it would still go ahead.
- There had been a trip for young people to Woodlands Outdoor Adventure centre and a park in Lichfield, and both had been a huge success.

There had been several achievements for young people who were part of the Children in Care Council. A young care leaver had gained employment in the hospitality industry, a care leaver was entering her second year at university and another had been successful in gaining entry to study medicine at university. The Chair congratulated the young people and officers for supporting them in these achievements.

The Board were informed that progress was being made to develop an app for care leavers, and Members would be updated as part of a future report. The Chair stated that it was important for the Board to consider the information collected in relation to the app as it had been raised by young people at Board several times.

The Chair discussed how more young people could be encouraged to join the Children in Care Council, the Children and Young Persons Champion explained that the team tried to make information fun, engaging and more modern.

The Chair agreed with the statement in the report that working 'with' children, capturing 'their' voice and being 'proactive' in every engagement opportunity should not be an add on to the work we do with young people but should be seen as a matter of cause and be a priority for all in shaping the support and services

provided. Young people were thanked for attending and participating in the Shadow Board.

Resolved:

That the Young People Engagement report was noted.

10/21 Walsall Children's Services Corporate Parenting Board Quarter 1

The Head of Performance Improvement and Quality introduced the presentation and highlighted the salient points (annexed). The Board were informed that the number of children in care was reducing and the percentage of children placed at distance also continued to reduce. It was noted that the percentage of children in care with three or more placements in 12 months had reduced significantly, there had also been an increase of the number of children in stable long term placements. It was clarified that in terms of the indicator 'percentage of visits taken to timescales' comparator data had been sought from regional colleagues and although this was often measured slightly differently across authorities, Walsall performed well. There was not a statutory duty to report data on this indicator to the Department of Education, however it was considered by Ofsted. The Health representative questioned if visits to care leavers were face to face, and it was confirmed that the expectation was that statutory visits were face to face, this had been the case since July, although it was appropriate for some to be virtual – 92% had been face to face.

The number of care leavers in suitable accommodation remained high and those care leavers that were not in suitable accommodation were in custody. The number of children placed for adoption was low, however there were a number of children in their adoption placements waiting for the formal process to conclude.

The importance of the child's voice in reviews was considered, and officers confirmed that where this information had not been recorded on reviews it would be followed up.

The Chair questioned health data, and it was noted that there was a discrepancy between CCG data and Local Authority data on timings of health checks - this issue was being clarified. This process would be refined in the future to align indicators and assurance was provided that weekly health check reports were shared with the CCG weekly. The Chair expressed concern that dental appointment data was low. The health representative stated that this was an issue because dentists were not accepting new patients however foster parents were being advised to travel further to secure appointments. It was suggested that NHS England could be contacted for an explanation. Social Workers were being asked to escalate any challenges with dental practices to health colleagues. The Chair asked for a briefing, at the next Board, on the issues relating to dental

services and young people in care, to identify problems and allow Members to determine any actions needed.

It was clarified that the number of care leavers who were 'NEET' often increased over the summer period as they may not have clarity over their education, employment or training destination. This indicator should improve in the next quarter.

Resolved

1. A briefing on performance data relating to dental appointments for children in care is provided to the next meeting of the Corporate Parenting Board.

2. The Walsall Children's Services Corporate Parenting Board Quarter 1 be noted.

11/21 Adoption Service Report

The Head of Service presented the report and highlighted the salient points (annexed). The Board were reminded that 'Adoption at Heart' were the regional adoption agency for the Black Country. Since its establishment the service had worked on the service identity, successful partnerships across the region, and a stable workforce with a low staff turnover. The period described within the report was the COVID-19 pandemic period, which was a challenging time, as it affected many partner agencies and slowed processes down.

The performance of Adoption at Heart was described, thirty-six children in a year had been placed for adoption. This was an increase on the period before Walsall joined the regional adoption agency.

Adoption at Heart had recruited 51 adopters in 2019/20 and 69 in 2020/21. It was noted that there was an increase in number of enquires relating to adoption in the previous year however this had not translated into conversation to adoptees.

In relation to inter-agency placement of 56%, the Chair asked if this was anticipated at the inception of the Regional Adoption Agency. The Head of Service stated that it was hoped that this would be lower, and good progress was being made against current targets (40%). It was also stressed that it was important that the best match for families and children was achieved, which sometimes meant that agencies were used.

In response to a query from a Member, the Board were informed that the use of inter-agency placements did not cause financial instability as it remained within budget.

The Director of Customer Engagement questioned if housing was a barrier to recruiting adoptive and foster parents. The Head of Service stated that the 'adoption strategy' had recently been published and included the issue

of housing. It was stressed that individuals were not able to apply to be rehoused until they had been matched with a child. It was agreed that more effective work across the sector was needed.

Foster to adopt was described and the benefits of building attachment as early as possible in a child's life. It was hoped that the number of children placed this way could be increased, however it was stressed that this was not right for all children.

A Member asked for assurance that there was adequate resource for therapeutic support. It was clarified that the in-house provision was a small resource and was not adequate, however national funding was accessed to commission therapeutic support for families however the sustainability of this funding was questioned.

The terminating of marketing activity during the pandemic was questioned, and it was clarified that this related to physical face to face information sharing activities that had been planned and could no longer take place due to national restrictions.

Resolved

That the 'Adoption at Heart 'report was noted.

12/21 Work Programme

The Board considered the work programme for the 2021/22 municipal year. It was suggested that the next meeting was a health focused meeting. It was noted that the views of the Children in Care Council would be sought on items considered by the Board.

Resolved

That the work programme was noted.

The date of the next meeting was 15th November 2021.

There being no further business the meeting terminated at 7.35pm.

12th October 2021

Councillor Timothy Wilson
Children's Services Directorate
Walsall Council

By email: Cllr.timothy.wilson@walsall.gov.uk

Dear Councillor Wilson

Thank you for your kind letter, and for the warm welcome you, the Council Team and the fantastic care leavers I met, gave me when I visited on 3rd September 2021.

It was great to meet with such an impressive and ambitious group of young people. Their concerns on the prospect of having to face early adulthood without the support networks most children have echoed those of many children and young people that I have spoken to in care. It reinforced that it is essential that there is a cohesive programme of support available for care leavers to boost their chances, particularly through guaranteed housing for care leavers by giving them priority status until the age 25, and through council tax exemptions. It was very impressive to hear how Walsall are already doing this through housing pathway.

The pandemic has had such a detrimental effect on the emotional and social development of many children across the UK, and I agree that HAF programmes have had a positive impact in improving children's wellbeing and have helped build their confidence for the next stages in their lives. I do want to see funding for the HAF programmes committed for another 3-years so the successes like the programme in Walsall can be built on. This would enable increased participation, particularly for vulnerable children and those with a history of poor school attendance as well enable providers to deliver a wider range of cultural and educational activities through the programme.

Thank you again for such an enjoyable visit. I do hope I will have the opportunity to visit Walsall again next year.

My team will be in touch shortly with how we can assist with data from the Big Ask.

Warmest Regards



Dame Rachel de Souza
Children's Commissioner for England

Young Peoples Engagement

Executive Summary:

The Council4Kids, the “Children in Care Council” (CICC), is the forum where Walsall’s looked after children, young people and care leavers are able to shape and influence the parenting and support that they receive.

This report describes some of the highlights of the CICC since the last Corporate Parenting Board on 8th September 2021.

Reason for bringing to the Corporate Parenting Board:

To provide the Corporate Parenting Board an update on the activities of the CICC which will allow the Board to offer any support to the children, in partnership with strategic management as corporate parents for looked after children.

We are keen to ensure that the CICC is encouraged to share highlights and raise any issues and concerns they may have on behalf of care experienced young people in Walsall with a view to improving services and outcome for children in the care of Walsall Council.

The Shadow Board has been put in place to ensure that the young people are fully involved in the Corporate Parenting Board and that their views are considered as part of this process

Recommendations:

The Board notes the activity and events of the Children in Care Council.

Background papers:

Previous Young People Engagement reports.

Corporate Parenting Pledges

The Walsall Promise for all Children in Care and Care Leavers

Resource and legal considerations:

Walsall is committed to ensuring that children and young people are involved in decision making and processes that directly affect their lives through.

The Children and Social Work Act 2017 introduced seven Corporate Parenting Principles and 2 of the principles focus on the involvement and participation of children and young people:

- Encourage children and young people to express their views, wishes and feelings
- Take account of a child or young person's views, wishes and feelings

Article 12 United Nations Convention on the Rights of The Child says that children and young people have the human right to have opinions and for these opinions to be heard and taken seriously and taken seriously.

Council Corporate Plan Priorities:

- Children have the best possible start and are safe from harm, happy, healthy and learning well.
- People have increased independence, improved health and can positively contribute to their communities.

Citizen impact:

The services and the improvements play a key role in the quality of life and outcomes for the children, young people and families of Walsall. The Council and its partners as Corporate Parents make critical contributions to improve outcomes.

Environmental impact:

None.

Performance management:

The Children's Champion works with children in care and our care experienced young people to ensure that our CICC is a rich and engaging forum. Regular reports are provided to the Director of Children's Services and the Corporate Parenting Board.

Reducing inequalities:


The children in care council seeks to secure improvements in the equality of services, which, when achieved will have a positive impact on our most vulnerable children, young people and their families.

Consultation:

The CICC is one of the key forums through which services for children in care and care leavers seek to consult on service delivery and where children and young people are able to shape and influence the parenting they receive at every level.

Contact Officer:

Full Name – David Hughes

 01922 650555/ 07787 284682

Email: david-j.hughes@walsall.gov.uk

Report: Young People's Engagement and Children in Care Council

1.0 Introduction

The following items are some of the highlights that have happened since the last Corporate Parenting Board in September 2021.

1.1 Interview Panels

The CICC have been involved with some very important interviews panels:

On 1st and 2nd September we took a huge leap forward in our first face to face interview panel for the last 18 months. Three of our care leavers met with the Children's Champion the week before to decide on the questions that would be asked and a plan for how they would chair this panel indignantly with no support from our staff. They chaired two full days of interviews listening to and taking notes for candidates applying for Personal Advisor (PA) roles. They used the official council scoring sheets to take their notes and then had the opportunity at the end of each day to feedback to the managers in the Transition Leaving Care (TLC) hub.

On 13th and 14th September the CICC were involved in an interview panel to support with appointing several *Senior Practitioners (Social Workers)*. Two of our care leavers gave up their time to support with virtual interview panels these interviews. Again as above all of the questions and the structure of these interviews was decided by the care leavers themselves giving them full control to be creative.

The CICC have been involved with some very important interviews this year and are always putting the pressure on people wanting to work in Walsall. In order to give this process some consistency the Children's Champion and Care Leaver Ambassador will write up a proposal which will be considered by the Head of Service.

1.2 Face-to-face meetings

On 9th September was our first CICC meeting that took place in person. We now have the 'Green light' to go ahead with our CICC meetings so are taking advantage of this but ensuring we do this in a safe way and will continue to review this in the light of increasing infection rates.

We attempted to do this in a blended style having young people in person at the TLC hub as well as being live on Teams. This was not very successful due to the background noise in the room, the lack of a good level of sound via Teams using a laptop.

We want to include as many attendees as possible so the way we hold these meetings is under constant review so we have met both at the TLC hub and some via the online method.

1.3 Launch of new care leavers Group

Our Care Leavers Group continues to be promoted by Personal Advisors (PA's). Our first meeting was held on 30th of September with a get together at

Nando's at the Crown Wharf in Walsall. We welcomed 10 care leavers that turned up most of whom have not been involved with the CICC previously.

New friendships were made and they all regularly speak to each other now when they see each other. Helping our care leavers connect with each other has been extremely rewarding.

During this first session we gained valuable feedback on our Local Offer:

- Majority really liked the format of 2 local authorities (S and T).
- When they took a vote we had more votes for T.
- They feel that the local offer should be short but efficient and straight to the point.
- They thought that some were too lengthy and they felt they wouldn't want to look through or read this much information.
- They felt having a contents page is very useful so they can go straight to a particular section when needed.
- They also really liked the colours used in this local offer.
- They like the look and feel of local authority S- really like the pictures in this and the fact it is short and not too lengthy.



1.4 **Care Leavers Ambassador Appointment**

We are delighted to announce that Sophia Begum has joined us and she has had to hit the ground running. Sophia started this exciting position during the start of our two week Ofsted inspection. Sophia is working part time and will help compliment the important work we are doing with our CICC and our newly formed Care Leavers group. Please take a look at the October (7th) edition of our Newsletter which she has created which has been shared with this report.

We aim to appoint a second Care Ambassador in 2022.

1.5 **Coproduction with SEND**

The Children's Champion has been in discussions with Maria Kidd and Natali Borman to offer support with co-production with SEND (Special Educational Needs and Disabilities) service. They are looking to gather the voice of young people more within their work which will support them within their journey to be more inclusive from a young person's perspective. They have heard great things about the work of the CiCC and want to replicate what we do so we are more than happy to help assist them.

1.6 **Video Recording for Health Assessment**

The Children's Champion has been busy working in partnership with the Looked After Children's Nurses. The purpose of the video is to help provide information to other young people in care where one of our lovely care leavers is narrating over a visual walk through for initial health assessments and annual health reviews. This was recorded on the 14th and 21st October and we are hoping to share the video with you by the time of the November Corporate Parenting Board

1.7 **Meeting Ofsted Inspectors**

What a turn out for our Ofsted visit!

8 young people met with the Inspector at the Town Hall. They all engaged in discussions and not one of them was phased by the visit and they all took it in their stride to share many of the positive things they experience in Walsall as well as some of the things they are passionate about which they feel require change.

1.8 **Connecting with the Foster Carers Community**

The Children's Champion has been working more closely with the Fostering Service and our Mockingbird foster carers. We are strengthening our relationships and this is proving to have some success in gaining new introductions to our CiCC group who are the next generation of young people attending the Corporate Parenting Board in the future.

1.9 **Involving and widening representation of children and young people**

Our activities and engagement is beginning to attract more children and young people who have not previously been involved. We will monitor this over the next 3 months. We are actively promoting and aiming to widen our involvement of children in care and those who have left care in the CiCC and Care Leavers forum by engaging professionals, carers and our children and young people , foster carers and

1.10 **Care Leavers Week: 25th to 29th October**

Monday 25th –

We began care leavers week with a trip to the Cinema with young people joining us to watch Venom 2 and they all thoroughly enjoyed themselves. This helped provide a valuable, non-threatening social activity for care leavers who before this event may never have met.

Tuesday 26th

Walk at the Arboretum with some of our young people

Wednesday 27th -

As part of Black History Month a group of young people with their Personal Advisors went to the Liverpool to visit the International Slavery Museum.

We engaged with a fun trip to Hollywood Bowl. Five young people participated and gained some confidence and new skills in team work. We played against each other to win at bowling, pool and air hockey. This really was a wonderful

thing to be part of watching everyone have fun, interact and encourage each other.

Thursday 28th -

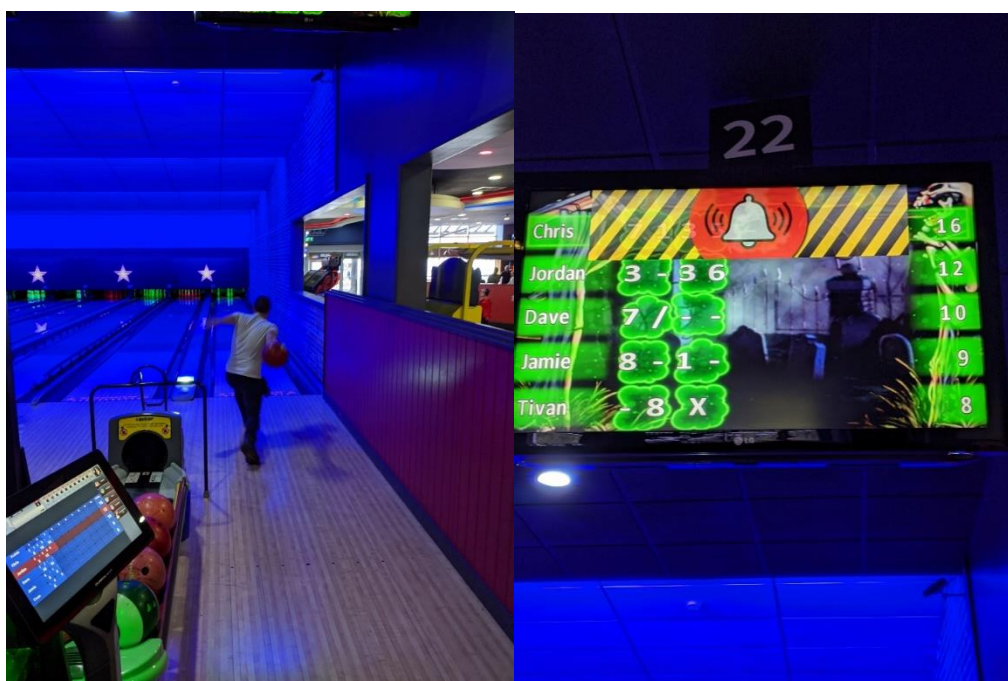
Trip to Birmingham and Mini Golf

Trip to London and as part of this young people visited Speaker's Corner and the Houses of Parliament, focusing on the importance of participation and encouraging/empowering to get their voices heard.

Friday 29th - Bloxwich Leisure Centre with a group of young people focused on access to leisure passes, eating healthy and activities available for them.

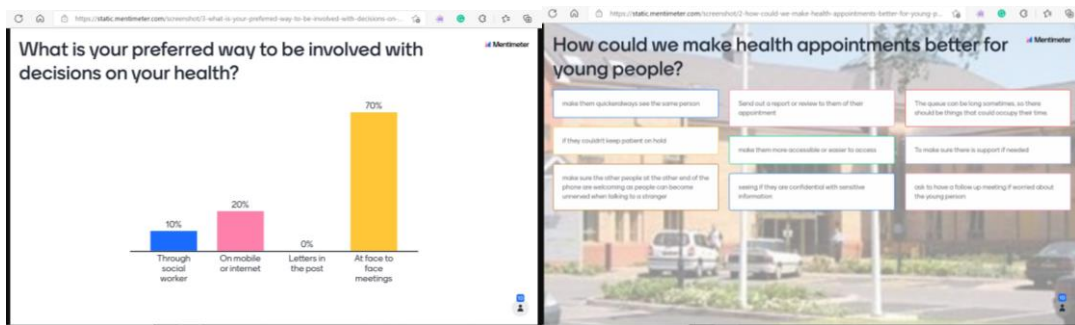
We had many laughs during this week and we hope to welcome new members.

Our plan for Care Leavers Week in 2022 is more aspirational and will be jointly developing this with our Young People over the Summer



1.11 The way we gather feedback

We have started trialing out the use of a web platform called MentiMeter as a means to gather feedback from young people. It is a very fun and interactive platform that is easily accessible and can be successful in many ways. We are hoping to use this on a larger scale in an attempt to gather the views of all of our children in care in Walsall as well as our care leavers. This can be accessed from any mobile phone, laptop or tablet and can be done on the move and is quick and easy. We hope to start creating more of these with the support from senior managers, directors and the elected members. See examples below



1.12 Celebrations and Achievements

- One of our CICC Tivan has played the Piano and sang to a live audience at a live event. We are extremely proud of her and wanted to congratulate her on this.
- Our very own Kim has started her painting and decorating apprenticeship and is now doing hands on work within this exciting trade which she is really enjoying. Keep up the good work Kim!

1.13 Dates for forthcoming events and children in care council meetings.

Meetings will continue to be held every other week using a blended approach both virtually and in person at Transition Leaving Care Hub. We will keep this under review to ensure that we remain compliant with the Council’s guidelines.

11th November – Care Leavers Group to meet with Jivan (HOS)
18th November – CICC meeting
2nd December – CICC meeting
16th December – CICC meeting

1.14 Finally I would like to remind everyone and anyone working with children in Walsall that Participation and Engagement should be at the forefront of everyone’s agenda. Working ‘With’ Children, capturing ‘Their’ voice and being ‘Proactive’ in every engagement opportunity should not be an add on to the work we do with young people but should be seen as a matter of cause and be a priority for all in shaping the support and services in which we provide.

David Hughes
Children’s Champion



Newsletter

October 2021

Welcome to our 7th edition
newsletter

Adventure!

Over the summer we took 14 of our young people to Woodlands Outdoor Adventure in Aldridge. They took part in challenging and adventurous activities such as archery, zip wire, rock climbing and assault courses. This was loads of fun and it helped our young people gain confidence as well as being able to get to know each other.



Face to Face Meetings Are Back!

It's been a tough year for the majority of us especially with the restrictions around face to face meetings however council for kids are excited to announce that our face to face visits have now returned! We have already taken part in various activities within the last few months and we look forward to many more! 😊

Let's Eat!

Who doesn't love a free meal?! September 30th, some of our youngsters came together for a cheeky nandos for the launch of the care leavers group.



Very own Care Leaver Ambassador

01st October we have had one of our former care leavers join us on an apprentice working alongside David Hughes as a care leaver ambassador. Sophia will be assisting in; Supporting the children's champion to develop and maintain the Children in Care Council and the Care Leaver's Group and help organise and support social and leisure activities

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Another Interview Panel!

In September, the CiCC were asked to be part of another interview panel. This time 3 of our care leavers came up with questions to ask potential candidates for the PA role. If you would like to have the opportunity to be involved with the next set of interviews then please contact the Children's Champion Dave or The new Care Leaver Ambassador Sophia to find out more. This is a great opportunity for your voice to be heard!



Visit from the Children's Commissioner!

On a recent visit to Walsall Council, Dame Rachel De Souza, appointed as the Children's Commissioner in March of this year, met with young people from the borough and with Council officers who work to support them.



Walsall Council

To join us contact David-J.Hughes@walsall.gov.uk

4th November 2021

Report to Corporate Parenting Board on the Child & Adolescent Mental Health Service in Walsall

1. The CAMHS Service

Walsall CAMHS work together with young people, their families or carers to ensure that their lives are as good as they can be. Young people can receive treatment for emotional, behavioral or mental health difficulties and as well as receiving treatment, we also have clinics such as our ASD or ADHD Clinic where by young people may be given a diagnosis to help better explain or understand their difficulties.

Walsall CAMHS aims to provide a specialist service for all young people in the borough. The service has many specialist teams that can meet the needs of young people, whether it be for a young person who is looked after, has a specific diagnosis such as an eating disorder or a neurodevelopmental condition, are needing crisis support or even some short term school based intervention. As well as working directly with young people, we recognise that there are significant others in young people's lives that may need support also or need to understand a young person's difficulties; we also offer support and work for families and networks supporting these young people where it is deemed appropriate. It is important to us at Walsall CAMHS that we include everyone in the journey to make recovery as viable as possible.

Walsall CAMHS are a multi-disciplinary team who have experience of working with children and young people experiencing emotional health/mental health difficulties. There are a number of satellite services which also form part of the CAMHS portfolio of services, each team offers a dedicated service to a specific cohort of young people to ensure they receive the most appropriate and timely service possible and being part of CAMHS allows for step up or step down of cases and when required.

Description of CAMHS 'satellite' teams

Reflexions – Mental health support in schools (Mild) (Tier 1.5)

The Reflexions service is a hybrid model between CAMHS and Educational Psychology which commenced in January 2020. This service is a dedicated service to work with young people in the school settings who are beginning to show signs of 'struggle' with their emotional health, this may be due to bullying, friendship difficulties or even the early identification of neurodevelopmental difficulties through behaviours displayed. In Walsall we currently work with approximately 15 schools (primary, secondary, special and PRU) (please see appendix 1) with this being increased to 30 in January 2022 with a full coverage hoped for by 2025. Each school



has an allocated mental health lead teacher who will identify the young person and refer them into the service; Reflexions work closely with partner agencies to ensure that a young person accesses the right service at the right time and it is made clear to schools that Reflexions is an 'additional' resource to those they are already accessing.

The team will deliver 1:1 interventions if required over six sessions and will also provide psycho-education, assemblies, training and support to teachers and parents where it is needed. Coffee mornings are facilitated with parents and carers where specific subject matters are discussed to ensure they feel contained and able to manage their young person's presentation. There are pathways in place to be able to 'step down' to lower level services or 'step up' to Positive Steps or CAMHS where appropriate.

Positive Steps (Mild to Moderate) (Tier 2)

The Positive Steps Team in Walsall commenced in September 2017 and works in various ways, both individually and in groups with children and young people (CYP) ages 5-18 and their families. The Team work with early onset presentation (in the last 6 – 12 months) of emotional health needs. This means working with pre mental health diagnosis providing early intervention in areas of anxiety, low mood, low self-esteem, anger management in secondary school age young people and low level OCD. This individual work is carried out over 5 to 6 sessions. Under the umbrella of Positive Steps the team have key practitioners (CYP IAPT) who deliver 12 sessions where the need is more complex but is still pre mental health.

Children and young people can be referred into the team via an established pathway, through the GP service or Walsall School Nursing Service. Each individual referral will be screened and a decision made to either see the CYP in an initial Choice Assessment in order to conduct a full holistic assessment of the presenting emotional health needs before commencing the individual sessions.

The Team also work closely with schools in Walsall delivering on an evolving core offer, which currently includes wellbeing assemblies, parent workshops/coffee mornings, teacher workshops and stress workshops. The key element of Positive Steps is about pre mental health early intervention to help prevent the young person progressing on to having a mental health diagnosis.

Learning Disabilities (Moderate to severe) (Tier 3)

Learning Disability CAMHS is a specialist service within the generic CAMHS team. It is comprised of a multidisciplinary team that provides a service to children and young people up to 18 years old, who have a global learning disability and additional mental health difficulties.



The team often work with the family or wider system involved in the child's care. They offer assessment of a child's difficulties, diagnosis of developmental disorders; and undertake Psychological intervention and Therapeutic work with individuals, families and groups.

Youth Offending (Tier 3)

This service provides specialist assessment and interventions to children, young people and parents/carers with a range of highly complex emotional, psychological and behavioural problems in order to assess risk and identify mental health needs and appropriate intervention whilst providing advice and support to the Youth Offending Service. The aim is to help improve the mental health of young people involved in the Youth Justice System across all tiers but with a special focus on ensuring young people returning to community from the secure estate access emotional and mental health care. Liaison with Forensic services, Police, Courts and community services is an important aspect of the work completed.

FLASH inc Therapy for Residential Homes (Moderate to Severe) (Tier 3)

The Fostering, Looked-After & Adoption Supporting Hub (FLASH), is a therapeutic service that offers a range of interventions which provide support to children and young people, foster carers, residential Childrens' homes, Transitional Care leavers, adopters, and Adoption/Fostering teams.

The service is for those children and young people up to the age of 18 years of age, and the work focusses on helping adults who are responsible for directly providing care, those adults who are involved in supporting the child/young person (Social Workers/Teachers etc), and the children/young people themselves, with direct emotional/mental health support. The team offer a range of therapies in which to do this.

The work is done via professional consultations to those in the network around the children, where they will discuss how they can support everyone; direct work with children and young people to help them manage some very difficult experiences that have occurred in their lives, and they also work directly with adopters/foster carers to think about the early trauma for children, to develop an understanding of the behaviours children may present in their homes.

The FLASH team offer this support to children who are under the responsibility of Walsall Childrens Social Care only, and up to a 20 mile radius from Walsall wherever those children reside.

They are a small team of dedicated and committed professionals, who listen and think thoughtfully about what children and families need in order to reach their full potential.

Eating Disorders (Moderate to Severe) (Tier 3)



The all age eating disorders team works with young people who may have features of an Eating Disorder, this includes young people who may restrict the amount/types of foods they eat or who binge or make themselves sick. The team give advice to young people about achieving and maintaining a healthy weight, including helping them to gain weight if needed.

The team also provide physical health checks and refer young people for therapy if required, such as Family therapy or CBT. We can also offer support to young people in improving their self-esteem and body confidence which can often be affected in young people with an Eating Disorder. The Eating Disorder team works very closely with other teams, the family and schools to help young people to recover.

The Eating Disorder team is a pan trust service and works across the Black Country allowing consistency of care.

CAMHS Crisis & Home Treatment (Tier 3.5)

The CAMHS crisis and home treatment service can be involved in a young person's care for a variety of reasons:

- **Deliberate Self Harm Assessments** – ICAMHS see young people who have tried to harm themselves in some way or who are experiencing a crisis with regards to their mental health which has requested them to be admitted to A&E. ICAMHS will attend the paediatric ward at Walsall Manor Hospital to complete a mental health assessment once the young person is deemed medically fit.
- **Deliberate Self-Harm Follow Up** – Every young person assessed when seen at Walsall Manor Hospital is offered a follow up appointment within 7 days. This is to re-assess the risk post discharge following an episode of self-harm or crisis and considers either a plan of support from CAMHS, discharge from CAMHS and/or support from other services is required.
- **Priority Choice Appointments** – When a young person is referred to CAMHS and is deemed to have an increased risk to themselves or to others or if early intervention is required for the presenting symptoms ICAMHS will see a young person within 7 days of referral so that an assessment can take place.
- **Appointments and Home Visits** – ICAMHS see young people for appointments at home and sometimes at our offices. These appointments are for continuous assessment, monitoring and management or increased risk behaviours or episodes of mental health crisis that require more intensive monitoring.



2. Interventions provided

The CAMHS services have a variety of treatments and interventions they can offer to a young person, these are usually tailored to suit the need and presentation of the young person, e.g. a young person presenting with anxiety would benefit from cognitive behavioural therapy (CBT) whereas a young person presenting with trauma is more likely to engage through psychotherapy input.

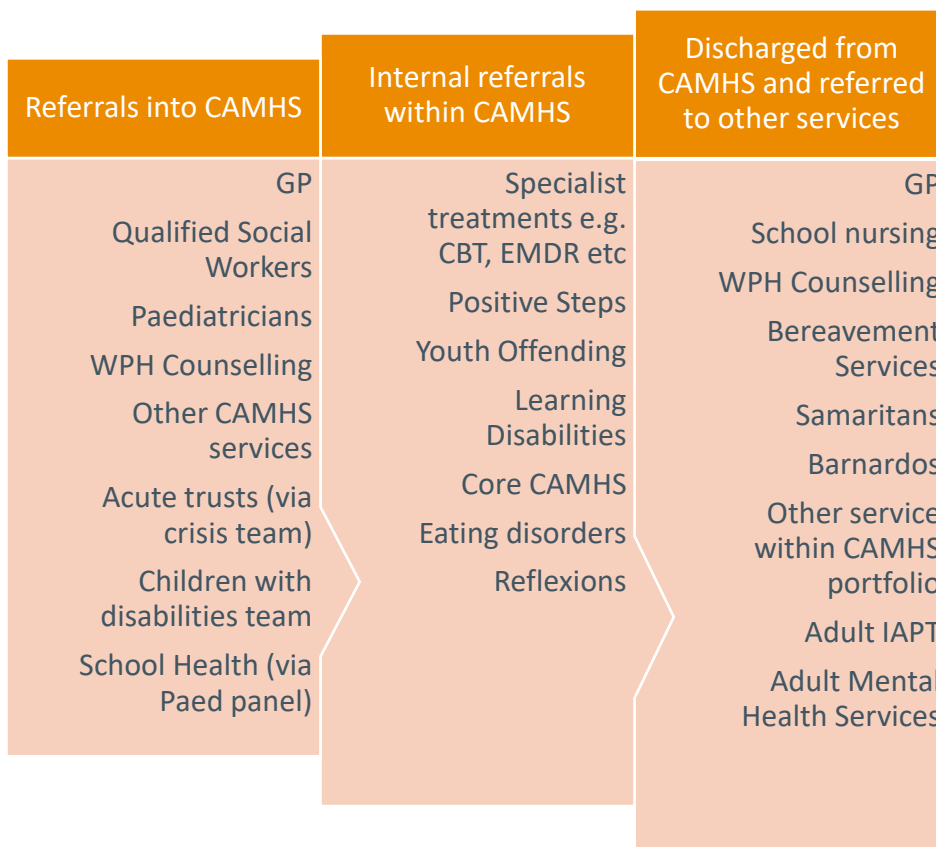
It is usual for a young person to move around within the service and be offered various interventions until the most appropriate one is identified but also on some occasions a young person may be 'held' on the caseload of more than one service at a time, this is typical if we think about a young person who has been referred for the autism spectrum disorder (ASD) clinic who as part of their journey with CAMHS may benefit from dialectical behavioural therapy (DBT) due to their high risk behaviours for example. A perfect example of this is when a young person may be referred into the FLASH team as they are on the edge of placement breakdown and through consultation and 1:1 work with the young person it is identified that family therapy is required, this would be an internal referral into that service and the young person and family/carers are offered a dual service.

3. Pathways

The CAMHS service operates within a network of other services and has pathways for referral into and out of the service as well as internal referral pathways to ensure a young person accesses all interventions required.

The diagram below demonstrates these pathways:





It is important to note that wherever possible the CAMHS service will not reject referrals from GP's but help to filter them into the most appropriate service. The majority of referrals that do not progress into CAMHS are taken to the paediatric panel for discussion and allocation, families are then notified of the service they will be accessing hence providing them with the most streamlined service.

4. Processes (including priority pathways)

Referrals received into CAMHS are screened by the duty worker(s) on a daily basis and the family are contacted to 'opt in' to an initial assessment appointment. This appointment has a national target date of 'within 18 weeks of referral' and this has a 96% compliance rate in Walsall CAMHS, there have been a total of 602 referrals received since April 2021 with only 25 not been seen within the 18weeks timeframe however these are due to 'did not attend' (DNA) or patient cancellations. On occasions we may have to manipulate the demand and capacity framework in which the team works to be able to offer more initial assessments than treatment slots and vice versa but this ensures we keep within the targeted timeframe.



Following the initial assessment it may be appropriate to offer an additional appointment to gain further information otherwise an outcome will be given, usually resulting in their suitability for the service. Where they are not suitable the CAMHS service will link with paediatric panel to ensure smooth transfer to another service however those that are suitable will then be added to the 'partnership' list (waiting list for treatment).

Presently waiting times are very long, these are attributed to by various factors:

- Impact of Covid
- Staff vacancies
- Increase in young people being referred for neurodevelopmental investigation
- Lack of other services in the Walsall locality
- Lack of post diagnostic support for ASD

In Walsall there is a particular difficulty around the lack of support for young people who have been given a diagnosis of ASD. Without support young people experience high levels of anxiety and other subsequent emotional problems which lead to them being re-referred into CAMHS for support. It was anticipated that covid would have a massive impact on young people and their social communication with others and this is an issue the CAMHS team can only forecast as deteriorating further.

There are few services available to young people with early emotional health difficulties in Walsall therefore their presentation tends to deteriorate which ultimately leads them to accessing CAMHS, many young people particularly with an autism diagnosis have gone into crisis during the pandemic and have needed to access crisis support. Once a young person is assessed for crisis they require priority allocation of a keyworker which again has an impact on the waiting list. The CAMHS team work closely with GP's in Walsall to ensure they refer into the priority pathway rather than send the young person to the Manor Hospital for assessment; only if the young person has taken an overdose or has severely self-harmed where stitching is required should referral to the acute trust be made.

Figures indicate that where the CAMHS team have priority pathways in place they have been able to deflect 43% of young people from presenting at the Manor Hospital. It is anticipated that through further communications and collaborative working with schools this percentage may increase further.

The CAMHS crisis team will respond to any deliberate self-harm referral received from the Manor Hospital and if the young person is not known to the service they are allocated in Core CAMHS unless they are a child looked after at risk of placement breakdown where they will transfer to



FLASH, a young person known to youth offending, or with a learning disability or a young person who requires lower level intervention where in this case they will be referred to the most appropriate team such as Positive Steps, CAMHS Learning Disabilities or the youth offending practitioner.

5. 24/7 Helpline

The Black Country 24/7 Mental Health Helpline is a free telephone-based service which is open 365 days of the year with no referral being required. The service has referral pathways set-up into Primary, Secondary and Third Sector voluntary organisations.

The Helpline is open access for people of all ages, available 24 hours a day, 7 days a week, providing immediate access to advice, emotional support, triage, referrals, and signposting. The service provides emotional support to callers in distress, in need of reassurance or at those times when people need to be listened to.

The introduction of this service has been very successful especially for young people who need immediate access to support, and the de-escalation skills of the staff help to alleviate any further crisis. Since April 2021 the service has received 230 telephone calls from young people or their families requiring support. Where the young person is known to the CAMHS service they are directed through to their usual CAMHS worker where the risk is of lower level or to the crisis team if they are considered higher risk. If the young person is not known to services they are referred through to CAMHS and risk assessed for urgency of treatment and allocated appropriately.

6. Future service developments

CAMHS is very much a spotlighted service mainly due to the consistent long waiting times and lack of resource. A national target of 35% of the children population accessing mental health services was applied to all health funded mental health services for young people in 2019 which has meant existing resources have been adapted to incorporate the additional demand as well as new developments have been planned for future years. The landscape is ever changing and with demand for services increasing the need for new ways of working and additional pathways is required.

- Standard service specifications have been agreed across the Black Country to reduce variations in service offer. This will include a standardised referral process and defined inclusion and exclusion criteria, standardised pathways.
- Expansion of the crisis intervention/home treatment model across the Black Country to incorporate 24/7 support and use of the section 136 suite at Penn Hospital



- A daily situation report of service users within acute settings to be developed for early escalation and monitoring. Crisis service manager will escalate any concerns
- Joint CAMHS/Adult Mental Health Services (AMHS) clinical model agreed and phase one of transition workforce is currently in development
- Multi-agency and multi-disciplinary weekly meetings commenced, hosted by acute hospitals for shared risk and decision making. Weekly catch-ups with acute wards, shared training, development of policy group
- Increased short breaks for service users and pilot residential facility
- Commence development of one front door to emotional wellbeing and mental health for CYP within the Black Country (single point of access)
- Mental Health Support Teams in schools will be embedded in schools and colleges
- Increase investment in all age model and access targets for eating disorders service
- CYPF Intensive Support Team (IST) mobilisation for CYP with autism and/or learning disabilities
- Enhancement of the Age-range in Dudley and Walsall CAMHS Core Services

7. Conclusion

The expansion of mental health services for young people is always needed however it cannot only be through the increase of staffing, the need to adapt and change the pathways and provisions in place already sometimes is required. The needs of young people also change over time and with the increase in neurodevelopmental referrals it is clear that services need to be able to manage the ever changing landscape, especially since the start of the covid pandemic which we are now starting to experience the 'fall out' from and the need for emotional/mental health support will only increase.

It is considered vital to have one system that is equitable and responsive across the Black Country that will deliver an emotional mental health and wellbeing service that accommodates the individual needs of young people and through the planned developments and adaptations this can be achieved for our families throughout the region.



Appendix 1

Walsall	Dudley	Sandwell	Wolverhampton
Chuckery Primary School	Hawbush Primary	The Phoenix Collegiate	Castlecroft Primary School
Bluecoat Federation inc Bluecoat Infants Bluecoat Juniors	Wrens Nest Primary	Bristnall Hall Academy	Uplands Primary School
Delves Federation inc Delves Infants Delves Juniors	Jessons Primary	Harvills Hawthorn Primary School	The King's CE School
Shortheath Federation inc Lane Head Nursery Rosedale infants Shortheath Juniors	St Mary's RC Primary	Old Park Primary School	Woodthorne Primary School
The Ladder School	Queen Victoria Primary	Brickhouse Primary School	Smestow School
Shelfield Ormiston Academy	Ellowes Hall	Ormiston Forge Academy	St Anthony's Catholic Primary Academy
Grace Academy	St James Academy	Timbertree Academy	St Michael's Primary School
Phoenix Academy	Link Academy	Ferndale Primary School	St Judes CofE Primary School
Ryders Hayes Primary School	Pegasus Academy	Springfield Primary School	St Edmund's Catholic Academy
Lower Farm Primary School	Beacon Hill Academy	Westminster School	Oak Meadow Primary School
Fibbersley Park Primary School	Old Swinford Hospital School	Hargate Primary School	Ormiston New Academy
Pheasey Park Farm Primary	Cherry Tree Short Stay School	St Gregory's Catholic Primary School	Wednesfield High Academy
Cooper & Jordan Primary School	Dudley College	Crocketts Community Primary School	Perry Hall Primary School
	Sycamore Short Stay School	Perryfields High School	Rakegate Primary School
	Netherton CoFE School	Virtual School	Elston Hall Primary School
	Thorns Primary	Langley Primary School	Christ Church CofE Junior School
	Bromley Pensnett	George Salter Academy	
	Priory Primary School	Albright Education Centre	
	Dingle Community Primary School	Lodge Primary School	





Black Country Healthcare

NHS Foundation Trust

	St Marks CofE Primary School	Galton Valley Primary School	
	Brockmoor Primary School	Shireland Collegiate Academy Trust / Tameside Primary Academy	
	Rufford Primary School	The Holy Trinity	
	Wallbrook Primary School	Tameside Primary School	
	Dormston School	St James CE Primary School	
	Windsor High School	Wodensborough Ormiston Academy	
	Bishop Milner Catholic College	Lightwoods	
	The Kingswinford School & Science College	Perryfields Primary School	
	The Sutton School & Specialist College	Summerhill Primary School	
		Jubilee Park Academy	
		Joseph Turner Primary School	
		Health Futures UTC	
		Q3 Academy Great Barr	
		Glebefields Primary School	
		Tividale Hall Primary	
		Hall Green Primary School	



WALSALL CLINICAL COMMISSIONING GROUP

Corporate Parenting Board

**Health Services for Looked After Children (LAC) Assurance Report
April 2020 – March 2021**

Date of Meeting: Monday, 15th November 2021

TITLE OF REPORT:	Health Services for Looked After Children Assurance Report 2020/21
PURPOSE OF REPORT:	To provide assurance to members of the Corporate Parenting Board that action is being taken to deliver on-going statutory responsibilities health for LAC.
REPORT WRITTEN BY:	Alison Jones Designated Nurse Looked After Children alisonjones10@nhs.net Dr Manju Kannath Designated Dr Looked After Children manju.kannath@walsallhealthcare.nhs.uk
REPORT PRESENTED BY:	Alison Jones/ Dr Manju Kannath
KEY POINTS:	The report was collated with information provided by Walsall Healthcare Trust and Black Country Healthcare Trust.
Report Purpose	An overview of the statutory health responsibilities of the CCG in relation to children in care, including performance of these responsibilities. To provide assurance to members of the Corporate Parenting Board that action is being taken to deliver on-going improvements to health outcomes for LAC.

	<p>To include: Adult and children's medicals for Fostering and Adoption</p> <p>Leaving Care Summaries/Health passports. Health Priorities 21/22</p>
RECOMMENDATIONS:	
CORPORATE PARENTING BOARD ACTION REQUIRED:	<p>Decision Approval ✓ Assurance</p>

Main Report

1.0 Introduction

Most children become looked after because of abuse and neglect. Although they have many of the same health issues as their peers, the extent of these is often greater because of their life experiences. The NHS has a major role in ensuring the timely and effective delivery of health services to looked after children (and, by extension, to care leavers) by commissioning effective services, delivering through provider organisations, and through individual practitioners providing coordinated care for each child (Promoting the health and well-being of looked after children 2015). There may be some use of interchangeable terms for Looked After Children/Children in Care in this report.

1.1 Leadership

Statutory guidance states that CCGs should have access to Designated Doctors and Nurses for looked after children whose role is to assist commissioners in fulfilling their responsibilities to improve the health of looked after children. Providers of health services are expected to identify a Named Doctor and Named Nurse for Looked After Children to coordinate the provision of services for individual children and provide advice and expertise for fellow professionals.

The Designated Doctor for Looked After Children participates in Black Country wide Safeguarding forums and the Designated Nurse for Looked After Children is the deputy chair of the regional Designated Nurses for Looked After Children Forum. This group influences care of looked after children as there are some challenges which are regional issues in some commissioning arrangements.

2.0 An overview of the statutory responsibilities of the CCG in relation to children in care, and the performance of these responsibilities.

2.1

Promoting the Health and Well-Being of Looked-After Children (2015), provides statutory guidance for local authorities, clinical commissioning groups and NHS England.

The NHS contributes to meeting the health needs of Children in Care by:

- Commissioning effective services.
- Delivery through provider organisations.
- Individual practitioners providing co-ordinated care for each child, young person and carer.

The core activities that require commissioning from the CCG for Looked After Children relating to statutory duties are:

- **Initial Health Assessments** - The IHA should take place in time to inform the child's first LAC review within 20 working days of entering care.
- **Review Health Assessments** - The review of the child's health plan must take place once every six months before a child's fifth birthday and once every 12 months after the child's fifth birthday.
- **Care Leaver Summaries/Health History documents** - Care leavers should be equipped to manage their own health needs wherever possible. They should have a summary of health records (including genetic background and details of illness and treatments), with guidance how to access a full copy if required.
- **Adoption Reports** - the collation of reports for adoption and fostering panel.

3.0 Current Commissioning Arrangements

3.1

The Designated professionals for LAC recommend that Black Country and West Birmingham Clinical Commissioning Group, Walsall place, (BCWBCCG) commission a service that ensures appropriate arrangements and resources are in place to meet the physical and mental health needs of all Walsall looked-after children regardless of where they are placed.

3.2

The current health provider service in Walsall is Walsall Healthcare Trust, the Trust delivers statutory health assessments for Walsall Children in Care placed within 20-mile radius and hosted children from other areas.

3.3

The CCG commission health assessments for those LAC placed further afield. The reliance on other areas comes with some challenge, which includes the timeliness and quality of interventions. All health assessments are quality assured by the Named Nurse/Designated Nurse against the national screening tool before being approved and shared with the local authority. Challenges remain around meeting statutory timescales, particularly for those children placed further afield. The Named Nurse continues to monitor and escalate individual cases where there are significant delays by liaising with the LAC health team and Designated Nurse who will contact the designated leads where the child is placed.

3.4

The LAC Health Team consists of a Named Nurse for LAC, who has the responsibility for coordinating provision of clinical services for children, providing advice and expertise to fellow professionals. There are also two Nurse Advisors, one of which works with primarily supporting transition and leaving care.

The team not only complete and follow up on the health needs of children but some of their other duties include:

- Support training and supervision for health care staff on the needs of Children in care.
- Quality Assurance of health assessments.
- Audit and performance monitoring.
- Report writing and analysis.
- Development of key policies and pathways with multi-agency professional
- Support Children and young people to access health services
- Offer support to foster carers/residential settings
- Offer expert health advice and signposting
- Offer emotional health support programmes, and work in association with other health services, school health, sexual health and teen pregnancy advisors.

4.0 Statutory Responsibilities.

Initial and Review Health Assessments (IHA & RHA) are commissioned from Walsall Healthcare Trust (WHT) as the Health Provider by Walsall CCG. However, the process requires close working between health and Local Authority colleagues in relation to information sharing, supporting attendance at appointments and reporting. The agreed Key Performance indicators with WHT stipulates the delivery of 80% of IHA's and 90% of RHA's within statutory timescales. RHA's service provision for children placed out of the borough is commissioned from external providers over a 20-mile radius with the WHT LAC Team coordinating requests and assuring quality.

Numbers of Walsall Children Entering Care 2020-21

WHT LAC Health team were notified by Walsall Local Authority of 166 children entering care from 1st April 2020 – 31st March 2021

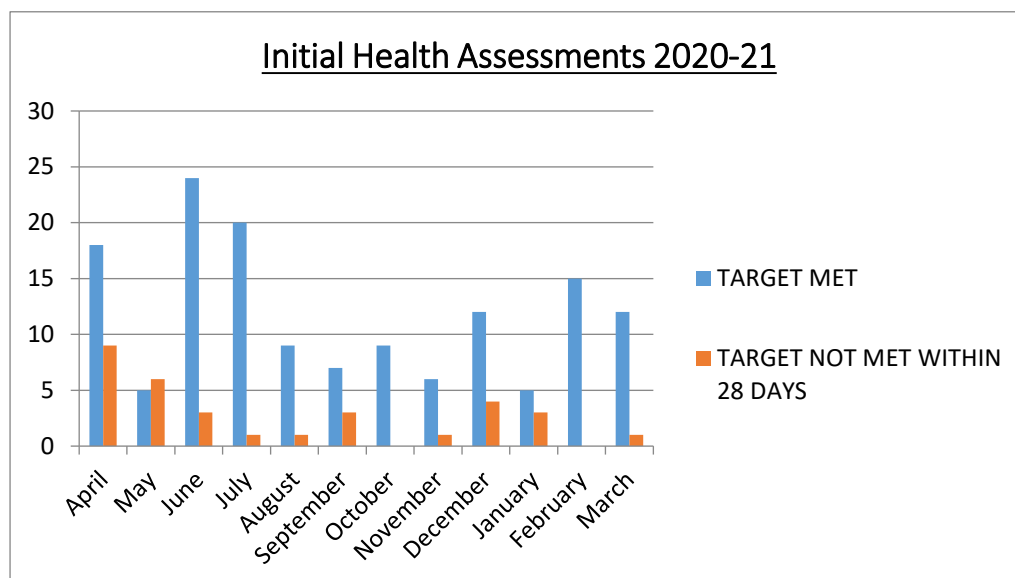
IHA Data 20/21

Numbers of children requiring an initial Health Assessment 2020-21 (WHT Data)

Month	IHA Clinic Cohort	Target Met	Target not met within 28 day's	Percentage
Apr-20	27	18	9	66.67%
May-20	11	5	6	45.45%
Jun-20	27	24	3	88.89%
Jul-20	21	20	1	95.24%
Aug-20	10	9	1	90.00%
Sep-20	10	7	3	70.00%
Oct-20	9	9	0	100.00%
Nov-20	7	6	1	85.71%
Dec-20	16	12	4	75.00%
Jan-21	8	5	3	62.50%
Feb-21	15	15	0	100.00%
Mar -21	13	12	1	92.31%
Total	174	142	32	81.61%

As previously indicated, current commissioned requirements are targeted at 80% of the Initial health assessments within 20 working days (28 days total of entering care), of coming into care, this target is set to be increased to 85% for 21/22 across the black country CCG. The cohort seen within 20 working days of entering care is currently at 81.61% over the year in Walsall.

Completion rates are reported monthly to the CCG via contract performance reports and this is reviewed by the Designated Nurse for LAC. Exceptions are all reported to the CCG if children and young people are not seen within the 20 working day requirement with full detail of the reasons and any mitigation.



There were some children not seen with the timescales. There are sometimes challenges in meeting the requirements, this year to date this has included-

- late notifications of entering care (not within 5 days)
- Carers overlooked the appointment
- children absconded/missing/refused
- extended hospital stay
- children cancelled due to CV19 (originally booked within timescale)
- Increase in numbers of Children coming into care (20 clinic slots per month)

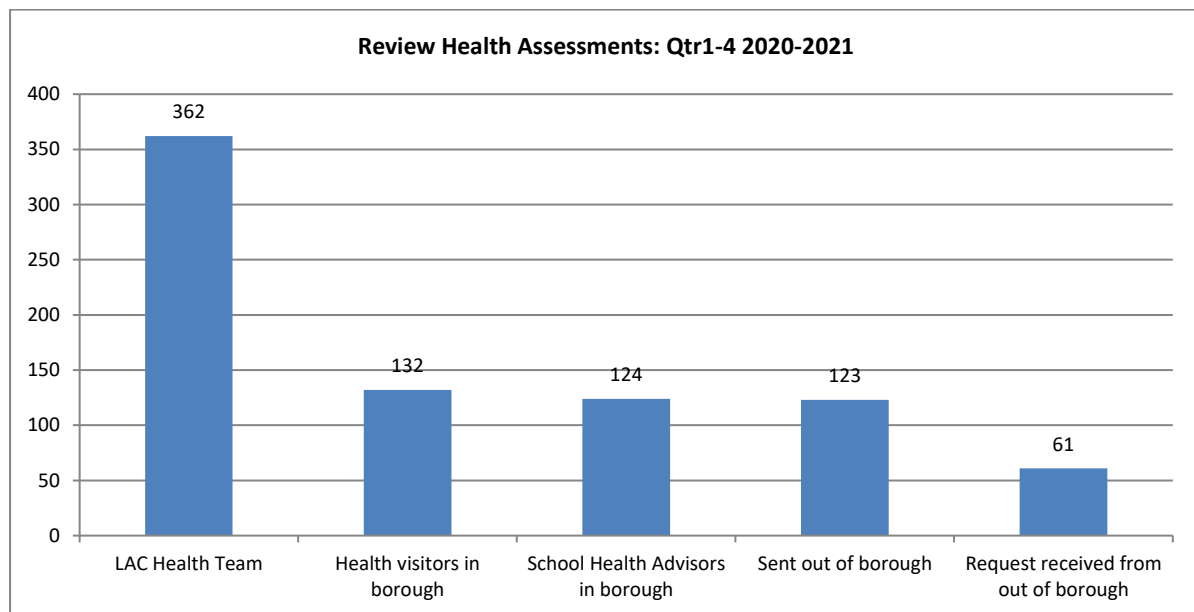
Review Health Assessments

In Walsall, the model for Review Health Assessments(RHA's) is that children and young people of 5 years and over are seen annually by a School Health Advisor or Nurse Advisor from the LAC health Team. Children under the age of 5 years old are seen by a member of the health visiting service every 6 months. This provides a degree of choice for young people and assists in accessing some of the harder to reach and non-engaging children and young people. The RHA performance of the commissioned target of 90% previously strong has shown a decline during 20/21. Although the quality of both IHA and RHA has remained high, the timeliness within which RHA has not always been achieved. This has largely been related to the COVID Pandemic, where in some areas staff were redeployed, review health assessments were not completed. Walsall LAC health team completed the health assessments virtually in these instances. There were 802 review health assessments required in 2020/21, all were completed see data below.

A dashboard has been developed by the Black Country and West Birmingham Designated Nurses for LAC, which reflects the KPI's for services commissioned by the CCG, this has been implemented for the purposes of reporting in 21/22 across the Black Country in order to standardise reporting and reduce variation.

Review Health Assessments (In care 12 months on 31 March)	England	SNs	West Midlands	2018-19	2019-20	2020-21
Number of children who had their annual health assessment	90%	91%	87%	83.0%	80.0%	84.7%

The table below demonstrates individual team activity in relation to RHA's during 2020-21

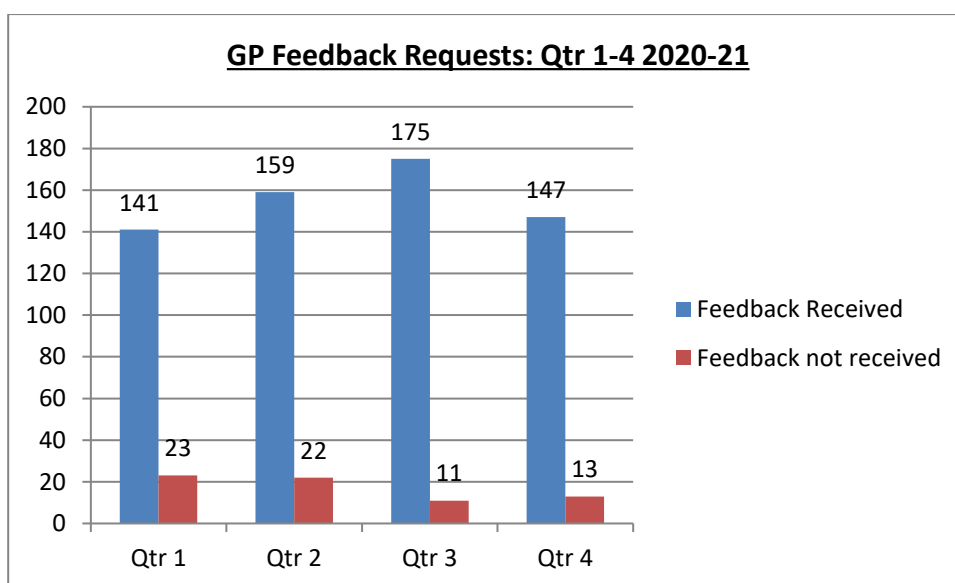


Due to the Covid 19 pandemic a number of Looked After Children Health Teams within surrounding areas have had reduced capacity to undertake health assessments for Walsall looked after children, WHT LAC health team have therefore used a proactive rather than reactive approach. The assessments have been recalled and WHT LAC health team have negotiated overtime payment with Walsall CCG to complete Walsall LAC RHA's for these assessments so as not to incur further delays in addressing health needs of Walsall LAC children placed out of borough. This is monitored to ensure that as capacity improves; health needs are assessed locally.

NB: 58 RHA's were recalled to WHT LAC Health team equating to 420 RHA's completed by the team over the year 2020-21. This was due to other areas redeploying staff and being unable to complete the RHA's.

5.0 Information sharing across the Health Economy

Data is collected on the input of health information from General Practitioners. The provider received 531 completed requests from GP's of shared health information to inform the health assessment. The feedback received was 89% which is a small decline compared to last year. However, with the pressures in primary care from Covid this has been a positive input to the health assessments of the cohort.



90% of GP information was received in timeframe to support the Childs IHA/RHA

Developments and improvements of processes in practice.

- Electronic requesting of health assessments by the Local Authority to improve timeliness is in place.
- Good access to the Local Authority dashboards by LAC health team to improve information gathering is in place.
- Health and Social Care have monthly meetings to address reporting issues -this has meant that even in lockdown and despite the restrictions numbers of children having IHA's within timescales are beginning to improve with joint processes being adapted.
- The provider has given assurance to the CCG that there is more capacity to be flexible if numbers of Children coming into care increase above the current allocated clinic slots.

6.0 Health of Looked After Children Strategic Group.

6.1

This group meets to monitor and improve the delivery of health outcomes for looked after children. Its aims to ensure Walsall CCG are meeting statutory duties under the 'Promoting the Health and Well-being of Looked-after Children' (2015) statutory guidance. It focuses, on not only children placed locally but also the health needs of LAC placed outside of area/borough and that their needs are being met. All partners, providers and relevant commissioners attend meetings as agreed, in order to provide a holistic system for the provision of health care for Looked after Children. Due to the Covid Pandemic and sickness, two meetings were cancelled.

6.2

The Designated Doctor and Designated Nurse for Looked After Children have identified Priorities for the next 12 months 2021/2022 for consideration at this forum.

- 1- Review Pathways for transition to adult services for care leavers.
- 2- Develop a pathway with regards to young people placed in therapeutic care homes to assess the suitability of those placements from a health perspective.
- 3- Strengthening the relationship between LAC and Primary Care including support of medicals for fostering and adoption.
- 4- Development of creative and interactive health passport promoted and introduced at an earlier age to support the young person to access the appropriate health services. (Registration with Dentist, Optician, GP and Immunisations).
- 5- Strengthening the Looked after Children Health Assessment and Special Education Needs pathway (Education and Health Care Plan). Working with Education to have health inputting directly onto the PEP system.

6.3

The Designated Nurse LAC is vice chair of the regional LAC forum, and a member of the NHSE National Group. Attendance at this forum will enable Walsall CCG to:

- Participate in clinical service planning and delivery for our LAC cohort on a national level.
- Debate and be involved in developing clinical recommendations that improve services for LAC nationally.
- Be involved in innovate new models of care and service delivery

7.0 Covid-19 Pandemic

7.1

The Covid-19 has had a significant impact on the way in which services across the whole health economy operate. With regards to Looked After Children, this has meant implementing virtual health assessments and finding new ways of engaging with and assessing young people.

7.2

There have also been changes in guidance concerning fostering and adoption medicals, including the use of self-declaration health forms where required. Other than this, adoption and fostering processes within Walsall have remained the same. Adoption at Heart and the Black Country and West Birmingham CCG has produced some guidance for Gp's to advise on maintaining services as much as possible.

Professionals have had to work in dynamic and forward thinking ways to ensure the health needs of LAC in Walsall receive the health care they require.

7.3

During the Covid-19 pandemic, the usual practice of face-to-face health assessments for Looked after Children (LAC) temporarily ceased. These were replaced with virtual health assessments that took place in a variety of forms – telephone, video calls and conference calls. Engagement with this process was good and health assessments continued to be completed to a high standard.

7.4

Through Consultation with Designated and Named Doctors, any further assessment required was fast tracked into face-to-face clinics the following week.

7.5

From the 1st of April 2021 Walsall healthcare Trust Implemented a full restoration plan to get services back to face-to-face. All initial health assessments are face to face, with recommencement of home visits and face to face review health assessments from the beginning of September 2021. Some out of borough areas have not had the capacity to complete RHA's due to redeployment of staff members. Whereas other areas are continuing to offer RHAs virtually, therefore there has been an inconsistent approach. Walsall LAC health team have maintained services for all children and young people in care whether a local child or hosted in the area. The CCG has also commissioned the team to see some Walsall children placed over the 20-mile radius to ensure assessments were completed in a timely manner and ensure all health needs are addressed.

8.0 Dental health

8.1 The percentage of up to date dentals checks completed has been declining as a result of the current situation regarding Covid-19. No child however should experience any discomfort and Carers should follow national guidance around when to seek help. This continues to be closely monitored through statutory health assessments, and 100% of cases identified where a child needs a dental intervention are addressed and actioned within their health plan. Any issues that have arisen and in need of escalation have been addressed by the Designate Nurses across BCWB, who have liaised directly, and effectively, with dental practises. NHS England have been doing work around LAC pathways generally, although access is still very challenged at present in both primary care and community services and they are still unable to prioritise routine check-ups over children in pain. NHSE have also been in communication with all Dentists to reiterate the importance of seeing Looked after children.

Dental checks(In care 12 months on 31 March 2021)	England	SNs	West Midlands	2018-19	2019-20	2020-21
Number of children who had their teeth checked by a dentist	86%	89%	82%	96.0%	92.0%	43.1%

9.0 Immunisations

9.1 All health assessments for children and young people will record immunisation status, any immunisations required will be chased with the relevant health agencies.

Immunisations (In care 12 months on 31 March 2021)	England	SNs	West Midlands	2018-19	2019-20	2020-21
Number of children whose immunisations were up to date	88%	93%	89%	86.0%	88.0%	91.5%

10.0 Adoption/Fostering Medicals

10.1

The Named Doctor and Designated Doctor for LAC are Medical Advisors and provide advice to prospective adopters, adult health reports for fostering and adoption, Child adoption medical reports, and attend adoption panel as expert health advisors.

See below the current adoption reports to date for Initial medicals, reviews, and prospective adopters discussions.

Adoption, Review Medicals & Prospective Adopter consultations April 2020 to March 2021

Current data -

Date	Initial	Review	PA	Total
April 20	11	-	2	13
May 20	-	3	2	5
June 20	6	-	-	6
July 20	4	1	2	7
August 20	6	-	-	6
September 20	3	2	3	8
October 20	5	2	2	9
November 20	7	3	2	12
December 20	9	2	2	13
January 21	4	2	-	6
February 21	3	5	-	8
March 21	4	8		12
Total	58	20	15	115

General practitioners complete adult adoption and foster carer medical forms. Following completion of the medical forms, these are reviewed by the medical advisor and a summary report and recommendation for the suitability to become an Adopter/foster carer is made. In 2019/20, an audit was completed on the quality of these assessments and this was presented at the GP forum by the medical advisors. In 21/22 there will be a review audit will be undertaken.

There have been some challenges in getting general practitioners to complete these forms since the Covid Pandemic. However, the CCG has worked closely with Adoption at heart and the local authority to ensure these processes have remained business as usual. (Leaflet)

11.0 Mental Health Services Offer for Children and Young People in Care

11.1

The emotional wellbeing and mental health of Children in Care is of paramount importance. It is widely documented that Children in care are likely to experience increased susceptibility to mental health difficulties other than the general population due to being exposed to early adverse childhood experiences.

Specialist and targeted mental health services for children and young people in Walsall are provided by Black Country Healthcare NHS Foundation Trust. This comprises of Core

CAMHS (Tier 3), iCAMHS (Tier 3 Crisis/Intensive Outreach service), Positive Steps (Targeted MH services at Tier 2 using the CYP IAPT approach), LD CAMHS (Specialist offer for CYP with Learning Difficulties and co-morbid mental health diagnosis), and Mental Health Support Teams in Schools (Targeted mental health and early intervention service). Mental health services are prioritised for those most in need, at risk and with moderate to severe mental health problem taking into account their vulnerability and personal/family circumstances. Children and young people at risk of being looked after or in care, along with other vulnerable group are be prioritised if they meet the threshold and are in need of targeted and specialist mental health services.

Please see CAMHS report.

12.0 Mental Health Outcomes (SDQ scores)

The SDQ (Strengths and Difficulties Questionnaire) is a brief behavioural screening questionnaire about 4-16 year olds. All versions of the SDQ ask about 25 attributes, some positive and others negative. These 25 items are divided between 5 scales: SDQs are completed by the local authority for Looked after Children aged between 4 and 16 to evidence that they are taking into account the potential emotional and behavioural difficulties of children. The higher the score, the more pronounced difficulties that child will face: emotional symptoms, conduct problems, hyperactivity/inattention, peer relationship problems, and behaviour. The SDQ generates a score and this can be used to inform Clinical assessments. It is recognised that a robust process for the completion of SDQs is required in order to improve the completion rate. There are plans to implement a joint pathway across health and social care to ensure SDQs are completed in preparation for health assessments.

Children looked after for at least 12 months aged 4 to 16 with an SDQ score	81%	81%	77%	92.0%	95.0%	96.6%
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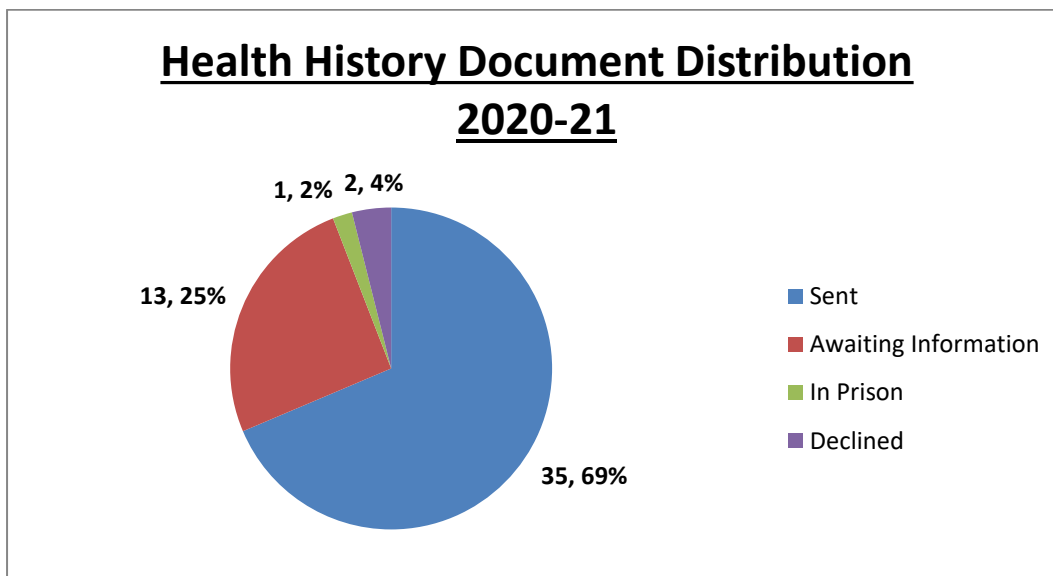
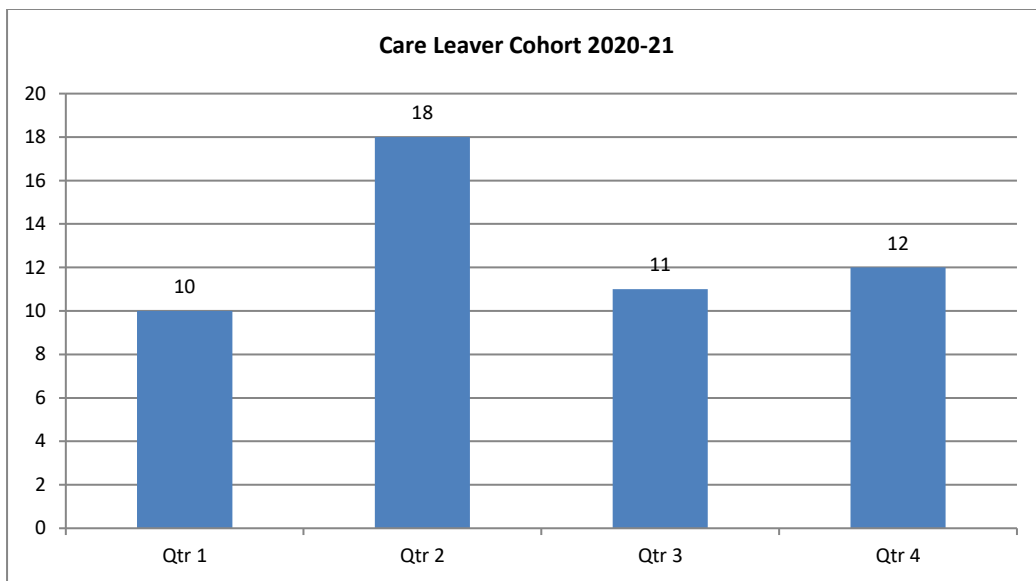
13.0 Exploitation

13.1

Looked after Children who have been taken into local authority care are at greater risk of becoming victims of Exploitation - Child Sexual Exploitation (CSE), Contextual Safeguarding including county lines, and association with substance misuse. The CCG host the Health Exploitation group, the transition nurse from the LAC health team is a member of this group and attends other multi-agency meetings to promote the needs of Looked After Children and young people. The Health Exploitation group has attendants from all areas of the health economy.

14.0 Leaving care Health Summaries.

Care Leaver Summaries/Health History documents - Care leavers should be equipped to manage their own health needs wherever possible. They should have a summary of health records (including genetic background and details of illness and treatments), with guidance how to access a full copy if required. Walsall had 57 young people leave care in 20/21, the cohort has increased by 11% this year.



15.0 Health History Document Distribution

- 35 Health history documents have been distributed to the cohort 2020-21 equating to 69% to date
- 13 Health history documents are in progress awaiting further information from the Child Health record, which is currently unavailable to view due to a current change in the record keeping systems. (This will be completed by the end of November.)
- There were 2 Health history documents declined
- One young Person has a completed health history document, which has not been distributed to date due to the Young Person serving a Prison sentence; this will be forwarded to the Young Person upon discharge from custody.

15.1

A report was shared with corporate parenting board in December 2020, following a service user audit with care experienced young people reviewing the Health History summary document. As a result, the provider have completed a three yearly review of the document and acknowledged the views of the young people.

15.2

The provision of leaving care summaries to all looked after young people prior to leaving care at 18 years of age is not currently monitored at a national level but is outlined in guidance. (Promoting the health and wellbeing of Looked after Children 2015) There is now a KPI added to the performance-reporting dashboard to gather this data for 21/22.

See PowerPoint presentation/Report WHT



Health%20History%20Powerpoint.pptx

16.0 Placement Provision for Children with complex health needs.

There continues to be ongoing work with the local authority in relation to joint funding for specialist placements for LAC with complex health and social needs placed in and out of Walsall, this has continued to be a focus during 2020-21. System led operational and strategic panels are in place, designed to ensure the most appropriate decision is made regarding placements to meet the complex health needs of LAC.

17.0 Send

CCG with health partners embarked on SEND Health Review between November 2020 and March 2021 to inform the Ofsted/CQC Written Statement of Action (WSOA) judgement in February 2018 and future SEND Partnership. The areas of review covers joint commissioning, Health EHCP processes, clinical pathways, case management/coordination, SEND Designated Medical Officer (DMO) functions. The SEND Health Review highlighted where gaps in existing service provision have been identified plus recognising success and good practice progress. The analysis was completed through engagement, managed conversations and workshops with providers and clinical service leads.

Review findings were grouped into these thematic areas:

Partnership, Governance and Safeguarding

- Ensuring SEND is a corporate priority for all organisations and has the appropriate reference and leadership throughout each organisation

Coordination and Case management

- Partner organisations and pathways should consider improvements to multiagency case management and coordination

Data and Quality

- Develop a SEND dashboard and agree common datasets

Outcomes and Impact

- Ensuring there are Outcome orientated plans and reports

Coproduction

- Revitalise coproduction plans and embed in organizational culture

Therapies

- Specific service actions and care pathway improvements plus cross border arrangements

Paediatrics and Nursing

- Specific service actions and care pathway improvements

Continuing Care (CC) and Palliative care

- Harmonisation of CC policy and arrangements for clinical case management and coordination within Walsall and across the Black Country

Autism and Neurodevelopment (Area of Priory)

- There are various local improvements and Black Country developments associated with different aspects of strengthening the autism offers and pathways for children and young people; pre- and post-diagnosis, focus on the diagnostic assessment pathway with better information plus embedding coproduction and at the heart using and hearing from the lived experience of children and adults with autism, those on the assessment journey and their families. (More details can be supplied).

Mental health and emotional wellbeing (Area of Priority)

- (Refer CAMHS/CYP Mental Health report)

Transition

- Renewed focus on post 16-25 pathways and health offers with adult health services

Workforce and training

- Improved Clinical and operational leadership in each organisation

Commissioning

- Development of Collaborative (joint) commissioning statement, plan and joint protocols

The review excluded but will take account of the following areas when considering any future strategic thinking and subsequent outcomes:-

- Review of accommodation options for CYP with SEND; residential, foster care or supported living
- Specific review of forensic and acute services commissioned by Specialist Commissioning, NHS England or Regional Provider Collaborative
- Health offer for people over 18 years
- Delivery of acute, inpatient health services for CYP with SEND

Furthermore, the CCG is establishing a SEND Assurance Board to review, monitor all aspects of SEND from health services/sector perspective as per our statutory responsibilities.

18.0

Key Achievements 2020-21

- ✓ Maintenance of the robust delivery of the operational service ensuring the safe delivery of health assessments despite restrictions in place. No redeployment of the Lac health team occurred and this service was prioritised.
- ✓ Continuation of the service during coronavirus pandemic (March 2020).
- ✓ Refresh of care leavers health passport document.
- ✓ Strategic input into the Corporate Parenting Board.
- ✓ The Designated Nurse for LAC Chairs is the co-chair of Regional LAC Health Group and represents the Midlands Region at National Meetings.
- ✓ Audits continued to be completed demonstrating high quality standardised practice.
- ✓ Development of resources to support GP's.
- ✓ Maternity services to develop "The Not forgotten Boxes", they are provided to women who are having or are at risk of having their baby taken into care. It was the purpose of the initiative to positively acknowledge that the women have become mothers even without the presence of their child. The loss of a child by this means is not viewed as any other child loss. In order to help women mourn the loss of their child and support them the idea of the Not Forgotten Boxes was born. All women who have had a child removed/potentially removed are offered a box, which contains items to support positive memories of their child.

18.1

Key health priorities for the coming year, 2021-2022 are:

- ✓ Delivery of CCG statutory duties as a Commissioner and a host CCG for LAC in Walsall.
- ✓ Walsall Healthcare trust to continue to monitor any performance issues and to ensure partnership working and engagement with Commissioners (CCG and Public Health) to achieve mutual KPI's
- ✓ Inform the Walsall Joint Strategic Needs Assessment (JSNA).
- ✓ Delivery of all aspects of the Looked after Children's Physical service specification by Walsall Healthcare Trust. Participation in the Pre-Looked after Children pathway/ vulnerable women's pathway to ensure the health needs of children are known and to inform placement planning.
- ✓ Strengthening the Looked after Children Health Assessment and Special Education Needs pathway (Education and Health Care Plan). Working with education to have health input on the pep system.
- ✓ Strengthening the Partnership meetings to improve the health outcomes of Looked after Children Health of Looked After Children Strategic Group and Corporate Parenting Board.

- ✓ Develop adequate robust data regarding the health needs of Looked after Children to inform the Joint Strategic Needs Assessment (JSNA) and appropriate commissioning decision making.
- ✓ Health Exploitation meeting – Continue to raise awareness of any themes and trends identified to specifically LAC cohort.
- ✓ Facilitate and collate specific service user feedback regarding the health provision for LAC and develop plans for health champions in partnership with the local authority.
- ✓ Embed the use of more SDQ's and make sure that they are considered as part of every child's annual health assessment, to assess and provide for mental health needs, including care leavers.
- ✓ All children to have health regularly checked, and continue to enhance our monitoring of emotional well-being and health trends to inform on-going healthcare provision.
- ✓ Continue to support the sexual health needs of children or inclusion of details regarding teenage pregnancy and teenage parenthood (girls and boys).
- ✓ Support the specific needs of Unaccompanied Asylum-Seeking Children- to review current pathway

19.0

Service user engagement and feedback – Health Champions

The Designated Nurse for LAC is currently developing plans with the Children's Champion to create a health champions group. This group will focus on inspiring children and young people to develop aspirations to work in the NHS. The group will also be asked to support with service user feedback and direction when health services are looking to change current ways of working.

The LAC health team will be attending the Mini Influencers and the Influencers group on a monthly basis to offer their clinical support and advice to these children and young people.

The Designated Nurse for looked after children was recently able to attend a children in care council meeting where questions about health services were posed. The children and young people were able to answer and give anonymous feedback, see example below using the mentimeter. This feedback can help shape and develop health services for our children and young people.



Vision for the Future.

Health Partners across Walsall are committed to improving the health and wellbeing of our Looked After Children and young people whether they live in Walsall or further afield. We aim not just to meet these standards but also to pursue excellence in order to give our children and young people the opportunities they need to grow and develop into adults with fulfilling lives.

<p>Corporate Parenting Board November 2021</p>	<p>Agenda Item No. 9</p>
<p>Corporate Parenting Strategy 2021-2024.</p>	
<p>Executive Summary:</p> <p>The council works hard and in partnership with others to support families who need support in the community to care for their children within their family and family network. For some children this is not possible and they become children in our care.</p> <p>Every councillor and officer within a council has a statutory responsibility to make good decisions for children in our care and care experienced young people (also known as care leavers) as a parent would for their own child, in this context councillors are Corporate Parents.</p> <p>The corporate parenting strategy sets out our ambition for our children in care and care experienced young people, and how this will be achieved. The Corporate Parenting Action Plan will make the ambition in the strategy a reality.</p>	
<p>Reason for bringing to the Corporate Parenting Board:</p> <p>To agree the Board’s shared partnership ambition for our children in care and care experienced young people</p> <p>To support Walsall Council in meeting its legal responsibilities in regard to our children in care and care experience young people.</p> <p>Recommendations:</p> <ol style="list-style-type: none"> 1. The Board committee notes the final draft of the Corporate Parenting Strategy 2. The Board members are asked to: <ul style="list-style-type: none"> • Comment on the draft Corporate Parenting Strategy (“the strategy”) • Agree the priority areas for the delivery of the strategy • Agree that the delivery of the strategy is regularly monitored through the work plan of the Board. 	
<p>Background papers:</p> <p>None</p>	

Resource and legal considerations:

There are no resource implications associated with the development of the strategy.

Council Corporate Plan Priorities:

- Children have the best possible start and are safe from harm, happy, healthy and learning well.
- People have increased independence, improved health and can positively contribute to their communities.

Citizen impact:

The services and the improvements play a key role in the quality of life and outcomes for the children, young people and families of Walsall.

The Council and its partners as Corporate Parents make critical contributions to improve outcomes.

Environmental impact:

There are no environmental implications associated with the development of the strategy.

Performance management:

The delivery of the strategy will be monitored through the Corporate Parenting Board and the Directorate Management Team.

Reducing inequalities:


Successful delivery of a strategy to improve outcomes for children in care and care leavers will have a significantly positive impact on the outcomes of one of the most vulnerable groups.

Consultation:

The children in care council is one of the key forums through which services for children in care and care leavers seek to consult on service delivery and where children and young people are able to shape and influence the parenting they receive at every level.

Contact Officer:

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1.0	Background
1.1	The Walsall Council Corporate Parenting Strategy was published in 2017, following the approval of the Corporate Parenting Board. Building on the foundations of the existing strategies vision, aims and priorities, the council has developed a proposed corporate parenting strategy which aligns with the Corporate Plan and the changed legislative and national policy context.
1.2	In addition to the work done previously to understand the views and experiences of our children and young people, the development of the new strategy seeks to understand and respond to our intelligence on the significant impact of Covid-19 Pandemic the health, wellbeing, educational and social development of our children and young people.
	Policy, Legislative & Regulatory Context
1.3	Since the publication of the last strategy there has been a significant shift in the national policy context in relation to corporate parenting. This has included changes set out within the DfE Strategy Keep on Caring 2016, the Children and Social Work Act 2017, the 2018 Statutory Guidance. Applying corporate parenting principles to looked-after children and care leavers and the revised Ofsted Framework the Inspection of Local Authority Children Services Framework, the ILACs, published in 2018.
1.4	A primary intention of Keep on Caring was to “make corporate parenting everyone’s responsibility” this was to be delivered by the introduction of corporate parenting principles which require all departments within a local authority to recognise their role as corporate parents, encouraging them to look at the services and support that they provide through the lens of what a reasonable parent would do to support their own children. These principles were subsequently set out in the Children and Social Work Act 2017.
1.5	The Children and Social Work Act 2017, and the 2018 guidance defines, for the first time in law, the role of corporate parents, in addition to expanding and extending support for care leavers, for example through the publication of a ‘local offer for care leavers’ and making personal advisers available for care leavers up to the age of 25.
1.6	<p>Central to the strategy are 9 principles, set out below. The new strategy sets out to embed these principles within the council and beyond into our Partners and broader community The principles underpin everything we will do and explain how the collective ambitions for children and young people will be made real.</p> <p><i>“In order to thrive, children and young people have certain key needs that good parents generally meet. The corporate parenting principles set out seven principles that local authorities must have regard to when exercising their functions in relation to looked after children and young people, as follows:</i></p> <ul style="list-style-type: none"> • <i>to act in the best interests, and promote the physical and mental health and wellbeing, of those children and young people</i> • <i>to encourage those children and young people to express their views, wishes and feelings</i> • <i>to take into account the views, wishes and feelings of those children and young people</i>

	<ul style="list-style-type: none"> • <i>to help those children and young people gain access to, and make the best use of, services provided by the local authority and its relevant partners</i> • <i>to promote high aspirations, and seek to secure the best outcomes, for those children and young people</i> • <i>for those children and young people to be safe, and for stability in their home lives, relationships and education or work; and</i> • <i>to prepare those children and young people for adulthood and independent living.”</i>
1.9	<p>The new strategy adopts the wider vision of the council for Children and Young People:</p> <ul style="list-style-type: none"> • Children have the best possible start and are safe from harm, happy, healthy and learning well. • People have increased independence, improved health and can positively contribute to their communities
1.10	<p>To achieve this vision we propose 5 key strategic priorities</p> <p>Our priorities respond directly to Our Promises, a list of commitments to children and care leavers, developed and agreed by the young people themselves and endorsed by the Corporate Parenting Board.</p> <ul style="list-style-type: none"> • Safety and Permanency <i>All of our children and young people will be safe from harm, with stability provided through secure homes and excellent carers.</i> • Mental and Physical Health and Wellbeing <i>We will educate our young people to encourage a happy and healthy lifestyle, making sure that professionals work together to ensure that all their health needs are met.</i> • Education and Employment <i>We will champion our young people and help them succeed in education and training, supporting lifelong learning and the pursuit of their interests.</i> • Transitions and Independence <i>Our young people will be prepared for the world of work and supported to become active citizens when they leave care. They will be prepared for independence in the best way possible.</i> • Influence and Involvement <i>Children and young people are at the heart of service design, delivery and evaluation</i>
1.11	<p>At the core of the strategy is our intention to drive the corporate parenting principles and delivery for our children, young people, and young adults into all areas of the Council and or Partners, and to unashamedly leverage all opportunities to improve the life chances of children in care and those who have left care. It reflects the high aspirations that we have and what can be achieved by working with Partners.</p> <p>It is an aspirational strategy, which will be delivered through the development of a</p>

	delivery plan and by championing this work across the whole Council and with the wider community of Partners across Walsall who can make a difference to the lives of our children and young people.	
1.12	Delivery Plan	
	The following delivery plan sets out the timescale for the completion and publication of the strategy	
	Corporate Parenting Board	15 th November 2021
	Further Consultation & Engagement with children in care and care leavers	December 2021
	Publication	December 2021
	Delivery Plan	2021/2024
1.13	Summary	
	Walsall has a significant record of investment in services for our children in care and our care leavers, we have a partnership that is committed to achieving improved outcomes for our children. The draft strategy sets a high ambition for how we can continue to build on that investment and see meaningful transformation in the life chances of the most vulnerable in society.	

Corporate Parenting Strategy 2021-2024

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Foreword:

In Walsall we want all children to live happy, healthy lives and achieve the best possible outcomes they can. Whilst most children and young people are able to do this, we know that at times families require support to overcome difficulties and challenging circumstances.

Our priority will always be the safeguarding of our children and young people, ensuring that they are happy, safe and well-prepared for adult life. If ever we suspect harm or potential danger, we take full responsibility for their protection. This sometimes means finding them another home where their security and sense of belonging can be assured.

We know that there is no greater responsibility than as a corporate parent to our looked after children and care leavers.

When a child comes into care, the council becomes their corporate parent and in Walsall we expect everyone, in every agency, our partners and across every service, to go the extra mile to safeguard our looked after children and young people. This means ensuring that they are at the centre of our work and have all the support they need.

Looking after and protecting children and young people is one of the most important jobs we do, if it is not safe for a child to stay at home the local authority will step in to give them the care, support and stability that they deserve .

Our commitment is to deliver well-rounded support services that respond to the changing needs of our children and allow them to achieve their full potential. We believe in an empathetic relational model and design our services around the needs of children. We also recognise that each young person has a unique identity that requires tailored support. This means listening, learning and constantly challenging ourselves to improve as corporate parents.

Where possible, we do everything we can to help young people stay safe and at home with their families. We're fully committed to building resilience in families and shaping our services to provide better methods of early intervention. We will always support parents to keep their children safe and ensure they have the best chance in life when this happens we work with families, offering targeted interventions to support them to stay together.

The Children and Social Work Act 2017 defines in law our responsibility as corporate parents to secure nurturing and positive experiences for the children we look after, whilst extending the support we offer to our care leavers. As corporate parents, we take our duties toward Looked after Children and care leavers very seriously and are committed to providing the best possible support to meet their individual needs.

We understand that each child in our care is an individual and our approach reflects this. To do this, we listen to the voice of the child. We track and support a child's progress through school, look after their health and wellbeing and strive to make sure they have the same opportunities as their friends and peers. We are ambitious for every child in our care and will encourage them to achieve their full potential, by overcoming challenges to progress well in education, learning and training. We want children and young people to establish trust based relationships with their social workers and personal advisers.

We continue to be aspirational as a corporate parent, encouraging our children and young people to achieve the best they can and continually celebrate their achievements. This strategy is not just about informing Looked after Children and Care Leavers on how we will support them, but also informs our partners on our ambitions for the children and young people in Walsall.

Councillor Wilson Chair of Corporate Parenting Board & Sally Rowe, Executive Director Children's Services

Introduction

Walsall's Corporate Parenting Board brings together all these people and provides a welcoming forum for our children and care leavers to discuss and influence the full range of services available to them.

Alongside our corporate parenting principles, there are a number of priorities that underpin this strategy and the services that both ourselves and our partners provide and offer to the children and young people in our care. This strategy outlines our priorities for supporting looked after children and sets a framework for the council and partners to be held accountable on their promises. Delivery against our commitments will be monitored diligently by the Corporate Parenting Board.

We know all children are unique and have individual needs and circumstances. We work closely with children in our care to understand individual needs and ensure that their 'Voice' is truly heard. Members will listen to young people and check that they are happy and healthy, receiving a quality education and have access to training and employment opportunities, as well as their own home to go to when the time comes to live independently.

Our relational approach means we engage directly and routinely with our children, their carers and care leavers as well as our staff who support them, encouraging them to share experiences so that we can better understand the issues they face and adapt services to meet their needs. Children's experiences will always form the centre of our approach in Walsall.

This means it is our responsibility as Corporate Parents to

- Keep our cared for children safe and secure, we stick with them and go the extra mile for them
- Create a culture where we know and believe in all our children and young people. We help them to achieve their goals and ambitions - by recognising their needs, talents and aspirations
- Listen and make our children and young people's ideas happen, ensure their lived experiences improve practice and make sure they know and understand their story and their plans
- Believe in our children and young people and help them to be the best they can be both now and, in the future
- Embrace and celebrate the individuality of our children and young people
- We want our children and young people to be healthy and happy
- We will listen to our children and young people's worries and work with them to find solutions
- We want our care leavers to become confident and resilient adults living within their own community with support from trusted adults

To be effective corporate parents, we need a collective commitment from the whole Council, all elected members, council employees, as well as our partners, i.e. Health, Police, other councils and the voluntary sector, all acting as good parents, committing resources and working together to improve the lives of all children and young people in our care and care leavers.

Children and Social Work Act 2017 – Corporate Parenting Principles Act

When a child becomes looked after, Walsall Borough Council becomes the 'Corporate Parent'. The Children and Social Work Act 2017 sets out 7 Corporate Parenting Principles to achieve the best possible outcomes for Looked after Children and Care Leavers.

When our children move to adulthood, we follow the principles to ensure we provide our care leavers with the support and stability that any child would expect as they prepare to leave the family home.

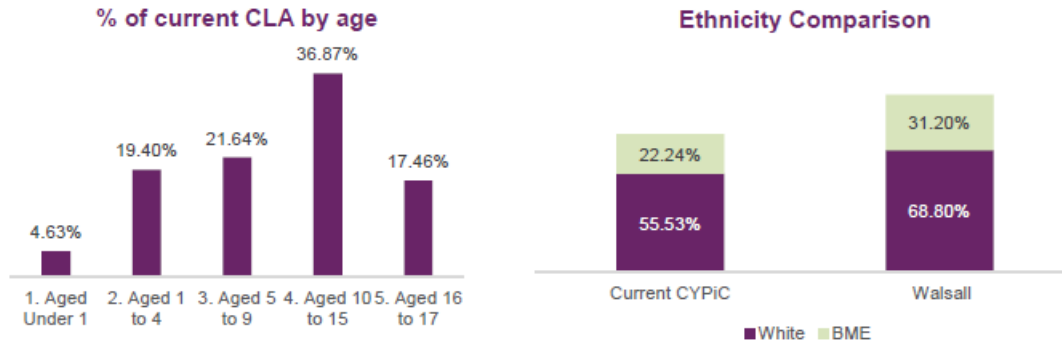
Draft Strategy to be approved by Corporate Parenting Board – November 2021

- To act in the best interests, and promote the physical and mental health and wellbeing, of those children and young people.
- To encourage those children and young people to express their views, wishes and feelings.
- To take into account the views, wishes and feelings of those children and young people.
- To help those children and young people gain access to, and make best use of, services provided by the local authority and its relevant partners.
- To promote high aspirations, and seek to secure the best outcomes, for those children and young people.
- For those children and young people to be safe, and for stability in their home lives, relationships and education or work.
- To prepare children and young people for adulthood and independent living.

As an authority and corporate parent, we realise we cannot secure the best for Looked after Children and care leavers alone. In order to secure the best possible outcomes for our young people we need the support of other agencies. This includes working in partnership with colleagues from the National Health Service, Police, Probation, Housing Providers, Schools and Colleges and Voluntary sector.

Walsall’s Looked After Children - high level data at 31.03.2021

As at 31st March 2021 there were 671 (97.3 per 10,000 population aged 0-17) children in care and 160 Care Leavers (aged 19-21)



- Throughout 2020-21 163 (23.6 per 10,000 population aged 0-17) children entered care, a 31% decrease on the previous year.
- 159 (23.1 per 10,000 population aged 0-17) children ceased to be looked after
- 75% of children in care were placed with foster parents and 8% were placed at home with their parents.
- 51.3% of Care Leavers (aged 19-21) were in education, employment or training
- 89% of Care Leavers (aged 19-21) were in suitable accommodation.

The Walsall Promise to Children in Care and Care leavers

Our Promise is a list of commitments developed by young people and children’s services decision makers to ensure that all our children in care and care leavers get the right services and support. By listening to our care experienced young people, we have developed a list of ‘Promises’ that form our Pledge to you as children in our care and care leavers. A pledge is an important part of running a service for Looked After Children and Care Leavers. It tells Children and Young People what we promise to do for them as their Corporate Parents

Young people and care leavers aged 16 to 25 years	Children aged 11 to 15 years	Children up to the ages of 10 years
<p>Education, Training and Employment.</p> <ul style="list-style-type: none"> We promise to help you with your education and with finding the right employment and training opportunities. We promise to encourage and support you into college or university and give you clear information about the support you can expect. We promise to ensure that you have opportunities for work experience and employment such as apprenticeships and traineeships. We promise to support you to have different experiences and access to activities that may interest you <p>Keeping you safe</p> <ul style="list-style-type: none"> We promise to help you to decide where you want to live and will help to keep you safe and comfortable We promise to help you to stay with your foster carers if this is possible. 	<p>Education and Training</p> <p>We promise to make sure that you have the best education possible and help you to plan for your future</p> <p>We promise to help you to enjoy new experiences and develop your own interests and hobbies</p> <p>We promise to celebrate your achievements and tell you how proud we are of you</p> <p>We promise to try and make sure that you don’t have to change school</p> <p>We promise to make sure that you get all the help and support you need to learn, achieve and succeed</p> <p>Keeping you safe</p> <p>We promise to provide you with a safe and comfortable place to live</p> <p>We promise to listen to you and involve you in decisions that affect your life.</p> <p>We promise to help you feel safe, both in and out of your home.</p> <p>We promise to encourage and support you to express your views</p>	<p>Education</p> <p>We promise to help you to play and learn at a school that is right for you</p> <p>We will help you join clubs and after school activities near to where you live</p> <p>We will help you to make friends</p> <p>We will tell you how well you are doing and let you know how proud we are of you</p> <p>Keeping you safe</p> <p>We promise to make sure you live somewhere safe where there will always be someone to take care of you</p> <p>We will make sure you can keep things that are important to you like your favourite toys.</p> <p>We will make sure you always have someone that you can talk to when you are feeling sad</p> <p>We will listen to what you like and don’t like</p> <p>Keeping you healthy</p> <p>We will make sure you stay well and can see a Doctor when you are poorly</p>

Young people and care leavers aged 16 to 25 years	Children aged 11 to 15 years	Children up to the ages of 10 years
<ul style="list-style-type: none"> • We promise to help you to manage your money and ensure you have financial stability ready for your future • We promise to help you to get important documents like passports and driving licence • We promise to pay for your council tax, even if you live outside of Walsall Council • We promise to provide you with opportunities to build your confidence so that you are able to make your own decisions about your safety <p>Keeping you healthy</p> <ul style="list-style-type: none"> • We promise to help you to access health services and have access to your health passport • We promise to go with you to health appointments and support you if you need it • We promise to help you to access local leisure facilities to help you keep fit and well. • We promise to make sure you have someone to talk to or can access support with your mental wellbeing <p>Keeping in touch</p> <ul style="list-style-type: none"> • We promise to help you to keep in contact with people that are important to you • We promise to celebrate your achievements with you • We promise to respect you as individuals and have high aspirations for your future • We promise that you will always have someone to contact 	<p>We promise to provide you with a trusted adult that can help you if you are feeling worried</p> <p>We promise not to do anything that will make you stand out as a child in care</p> <p>Keeping you healthy</p> <p>We promise to support and encourage you to have a healthy lifestyle</p> <p>We promise to make sure you are cared for by people who can keep you safe and healthy and will teach you how to learn to look after yourself as you get older.</p> <p>We promise to help you to access a range of leisure activities</p> <p>We promise to listen to any health issues you may have and will help you to get the support you need</p> <p>Keeping in touch</p> <p>We promise to help you to understand the reason why you are in care</p> <p>We promise to help you keep in touch with your family and friends, if it is safe to do so.</p> <p>We promise to respect you as individuals and listen to what you want</p> <p>We promise to help you keep a record of important events, achievements and people in your life that are important to you</p> <p>We promise to help you take part in things you want to do such as school trips and fun activities</p>	<p>We will help you to eat healthy food and drinks that will make you grow big and strong</p> <p>We will help you to be happy and feel good about yourself</p> <p>We will help you to play safely outside and enjoy exercise</p> <p>Keeping in touch</p> <p>We promise to help you to understand the reason why you are in care and will keep a story of your life for you to look at</p> <p>We promise to help you keep in touch with your family and friends, if it is safe to do so.</p> <p>We will help you stay in touch with Foster Carers and friends if you want to and will tell you if this can't happen</p> <p>We will make sure that you have a social worker that you can talk to</p>

Our priorities

Our priorities respond directly to Our Promises, a list of commitments to children and care leavers, developed and agreed by the young people themselves and endorsed by the Corporate Parenting Board.

- Safety and Permanency
- Mental and Physical Health and Wellbeing
- Education and Employment
- Transitions and Independence
- Influence and Involvement

Safety and Permanency

All of our children and young people will be safe from harm, with stability provided through secure homes and excellent carers.

Walsall works hard to ensure the right support is provided at the right time so that children can remain with their families. We always celebrate our family successes and we will support children to remain at home if it is safe to do so. However, if concerns about safety or wellbeing persist, swift action is taken to ensure the child has a safe and secure place to live, even if this means having to go into the care of the Local Authority.

We have a duty to ensure to ensure our young people have a safe place to stay. As corporate parents, we listen to and train our carers to have all the tools they need to be the best carers to our young people. We also understand the importance of support networks and make sure our young people have adults that they can rely on and provide as much stability as possible.

We know that uprooting children from their homes or having to change placements can be tough, so we work hard to find long and suitable families and homes for our young people that will allow them to flourish and make a success of their lives.

We commit to:

- Provide young people with a safe home to live with carer who are suitable and well trained. Young people will be happy and taken care of, and only moved again if absolutely necessary.
- Our Turning Point service will continue to make a direct contribution to helping children to remain with their families
- We will ensure that social work plans are child focused, culturally informed and consider the perspectives of partners in health and education.
- We will continue to help our children find stability, build trust with professionals and identify risks early to avoid young people entering the criminal justice system.
- We will give our young people all the information we can about their new family, home and where they will be living. They will be given information about the support available from youth services, including on education, training and careers.
- Ensure continuity of care for our young people so that they maintain a sense of stability and do not experience too many different professionals.
- We'll draw on the rich experience of our foster carers and enable them to provide best possible care for looked after children and young people.
- We will continue to challenge ourselves to offer the best services and develop our approaches.
- Continuing to explore family and friends in order for children to return to family and not remain in care for longer than necessary if appropriate.

- Promote and champion the specific needs of unaccompanied and separated young people including support with acquiring citizenship.

Physical and Mental Health and Wellbeing

We will educate our young people to encourage a happy and healthy lifestyle, making sure that professionals work together to ensure that all their health needs are met.

Often our children have had tough starts in life and many children and young people experience the trauma of being separated from their families and communities. Being happy and confident in identity is a key factor in looking after our mental wellbeing, particularly when it comes to race, sexuality, disability and gender. It's therefore crucial that we encourage our young people to be comfortable in who they are and demonstrate sensitivity and inclusivity of difference for our young people to thrive.

We are commit to:

- Care planning will consider the physical and mental health and wellbeing of our children and care leavers
- We will support our children and young people to understand the importance of their health assessments and ensure that no one misses out on healthcare, with regular assessments to help identify need.
- We'll encourage all young people to attend their assessments by offering flexible arrangements both face to face and virtual appointments. Medical appointments will be kept even if the young people live outside of Walsall.
- Provide a holistic health assessment within four weeks of a child entering care, and annually thereafter (or six-monthly for Under 5's). Our health team will listen to their problems and understand their needs, reviewing their physical health, growth and development.
- We will ensure and promote access to mental health services. For those with specific needs will be offered support from the FLASH Team for those who live within Walsall or within 20 miles. We will work with Child and Adolescent Mental Health Services (CAMHS) or other providers to secure support.
- We will educate our young people and encourage a happy, healthy and active lifestyle, providing free access to leisure facilities. Maintaining an open dialogue about all aspects of their health; from healthy eating, exercising and staying safe, to sexual health, smoking, alcohol and substance misuse.
- We will support young people with substance misuse issues and intervene early to provide all the support they need.
- We will ensure that our children and young people know how to access their health records.
- We will ensure that the information about their health is kept confidential and only shared with people who need to know.

Education and Employment

We will champion our young people and help them succeed in education and training, supporting lifelong learning and the pursuit of their interests.

Ensuring that our children in care and care leavers are in good education, employment, apprenticeships and training will always be a priority for us as we know they offer the greatest opportunities for our young people to build a successful career.

All our young people are unique and have different interests and hobbies which provide opportunities to improve confidence, mental wellbeing and feel connected to something they love. In Walsall we maintain high aspirations for our young people and help them to make the most of their talents.

Walsall's Virtual School has high expectations and helps the children in our care and leaving our care to achieve the very best. Although the pupils attend many different schools and settings, we operate as if they all attend one school. We have high aspirations for their education, employment and training and we expect schools and settings to provide a quality learning environment which meets their needs and encourages and develops their ambition.

Virtual School monitors, supports and challenges academic achievements and attainment in partnership with schools, carers, social workers and personal advisers. We hold schools to account for the impact of the provision on pupil's progress through the education system using Personal Education Plans and monitoring the use of Pupil Premium plus .

The Virtual School is committed to ensuring that the Voice of the child will be reflected in our planning to effectively support all pupils and their views are sought at every Personal Education Plan meeting.

Virtual School deliver a variety of out of school activities throughout the year for children and young people of all ages. Some examples of the positive activities provided through the School are Summit2success Programme, Aspire to University and our Year 6 residential. We use pupil premium to fund sport, art and music activities and provide 1:1 tuition and other bespoke educational packages when needed. We celebrate the success of our children and young people through annual celebration events.

We have a Governing body, like any school, we provide reports on the work of the school and the progress and achievements of the children.

We commit to:

- Social workers and personal advisors working with our Virtual School, which ensures monitoring, support and advice for young people throughout the year.
- We'll help to ensure all children and young people achieve their full potential through education, training and good quality employment, making the most of their talents.
- We will identify any Special Education Needs (SEN) and meet these needs through an Education Health Care Plan or other SEN support, helping our young people overcome barriers to education attainment.
- Making sure they have a place at a good school or college and attend regularly.
- We will guarantee that every young person has access to digital devices, study resources, tuition and a high quality Personal Education Plan. They will also have excellent support from a Designated Teacher at their school.
- Ensuring our care leavers have a Pathway Plan that has clear information about what support is available once they leave care, go to university or undertake vocational training and apprenticeships. Also connecting them into training, coaching and other opportunities through *Endless Possibilities* and *Walsall Works*.

Transitions and Independence

Our young people will be prepared for the world of work and supported to become active citizens when they leave care. They will be prepared for independence in the best way possible.

Leaving care, like leaving home, is a critical transition for our young people and supporting them through this transition into adulthood is a major responsibility for us as corporate parents. This is not simply a matter of helping young people acquire a checklist of life and independent living skills – although it is those things – but also helping young people develop resilience, have a comfortable sense of self and have options for their futures. We recognise that young people mature at different paces and that some young people will struggle to gain independence and struggle in independence.

Working with our partners in health, education and CAMHS and Walsall Housing Group we are developing services so that young people remain living in the borough where they grew up with access to wrap around support while developing their independent living skills.

In Walsall we listen carefully to our care leavers and assess their needs to make sure they have all the services required for a successful transition into adult life. This includes making sure they have suitable accommodation while preparing for independence.

We commit to:

- Ensure that all young people in our care over the age of 16 years have a pathway plan specific to their needs and aspirations.
- We will make every effort to help young people remain living with their foster carer after 18 and up to the age of 21 if they wish (Staying Put)
- Once a young person leaves school, we will help them to make the most of their opportunities in training, further education and employment.
- From the age of 18, they will have a personal advisor to help them to become independent. Care leavers can continue with this support up until the age of 25 if they wish to do so.
- Care leavers will have the best housing and support offer we can give them as their corporate parent. We want all our young people to live in our borough and have access to our communities
- We will ensure our care leavers are given as much help as possible to find suitable housing, supported to move and settle into their new home, with provisions made to ensure they're happy, safe and are able to sustain the tenancy.
- We will help our care leavers learn the practical skills needed to live independently, such as managing budgets and applying for jobs.
- We will ensure that individual needs are taken into account and the needs of young parents are supported through their transition.
- We will ensure that young people know what their entitlements are and provide leaving care financial support, grants (eg setting up home) and other forms of financial relief (eg from council tax) to care leavers in line with our financial assistance policies.
- We will ensure that all young people understand and have access to our local offer
- Young people will continue to receive advice as they gain independence; developing personal resilience as they journey into adulthood.
- Fully support any young person who wishes to pursue higher education to obtain places and apply for student loans. We will fund vacation accommodation for young people as necessary.
- Continue our work with further education colleges, employment training providers, Walsall Works and Endless Possibilities to help young people access high quality training and apprenticeships.
- Challenge ourselves and our partners to provide specific internship, apprenticeship and employment opportunities for our looked after young people and care leavers.

Influence and Involvement

Children and young people are at the heart of service design, delivery and evaluation

Children and young people's Voices must be at the centre of our approach to corporate parenting. We want mutually respectful and collaborative relationships with our children and young people. This means embedding a culture of fully involving young people in all matters affecting them, welcoming and encouraging their participation, actively listening to and genuinely taking account of their views.

The Children in Care Council (CiCC) is a voice group for children in care and care leavers in Walsall. They meet every month to discuss what improvements need to be made to the support young people receive, particularly those in care or care leavers. The CiCC meets and invites the Director of Children's Services, senior managers and Councillors to let them know what they are doing and ensure that young people are consulted on matters which affect their lives. The CiCC is regularly involved in decision making at various levels and hold decision makers to account. With the direct purpose of representing Walsall's children in care and care leavers the CiCC has had a clear and effective impact on the support that our children receive.

As Corporate Parents, we know that we cannot make effective decisions for young people and provide the support they need without their help, thoughts and views.

We commit to:

- An active Children in Care Council ensuring that the voices of children and young people is central to our work
- Appoint Care Ambassadors to strengthen the voices of children and young people
- We will ensure that children in care and care leavers participate in their planning and reviews
- We will ensure we learn from complaints received from young people
- We will ensure care leavers are engaged in their pathway planning and reviews
- Our independent reviewing officers will meet our children and young people
- We will enable access to advocacy

Leadership

Our Corporate Parenting Board will take lead responsibility for the delivery of the Corporate Parenting Strategy and action plan in each of the five key priorities.

The Board will:

- Be a forum for regular, planned and detailed discussion of thematic presentations
- Be a positive link with cared for children and care leaver forums
- Be a mechanism to listen to our cared for children and care leavers; to promote their voice and have influence in decision making
- Receive regular progress reports and performance reporting aligned to the corporate parenting plan and service plans for cared for children and care leavers
- Consider areas of good practice and areas for development and make recommendations to support continued improvement and development
- Provide a governance structure for corporate parenting
- Provide challenge and scrutiny

Measures of success

The Board will seek to ensure that current and future priorities and decisions and deployment of resources will reflect the needs of cared for children and care leavers. The first question the Board will ask of themselves, is, “would this be good enough for my child?”

The Corporate Parenting Strategy will be monitored and evaluated by the successful delivery of the corporate parenting plan through:

- Performance data will be provided to support and evidence progress on the five priorities
- Children and young people feel valued and able to shape and influence services
- Our audits telling us about the lived experience of children and young people
- Assurance reports for:
 - Annual Independent Reviewing Officer Report
 - Annual Fostering Report and Statement of Purpose
 - Annual Adoption Report
 - Annual Report of the Virtual School
- Annual health of Looked After Children Report
- Improved placement stability and reduction in unplanned endings
- Foster carer recruitment and retention
- Increased number of care leavers entering education, training or employment
- Review and revise our Local Offer for Care Leavers

Our Action Plan

Our priorities	What will we	How will we do it	How will we measure success	Who will do it	Timescales
Leadership	a. Increase awareness and understanding of corporate parenting responsibilities with elected members.	Revise and offer Respect Training in conjunction with Children in Care Council	Number of Councillors completing mandatory induction programme	Group Manager Corporate Parenting	March 2022
Safety and Permanency	b. Review of Staying Put Policy	Children and young people remaining with their foster carers	% and Number young people remain in Staying Put arrangements	Head of Service for Children in Care	December 2021
	c. Ensure children secure permanence in line with their care plans	Permanence tracking and care planning which focuses on permanency planning to ensure children do not remain in care longer than is in their best interests.	% and number of children reunified with parents, special guardianship, FfA and adopted	Head of Service for Help and Protection and Children in Care	Ongoing
	d. Review of Sufficiency Strategy	Setting out some of the key things we know about Looked After Children and Care Leavers in Surrey, including their particular needs, the data surrounding this and how this changes over time Exploring what sufficiency of provision we have available in Walsall and elsewhere to meet these needs, the quality of that provision and how much it costs.	The strategy will set out the key measurable outcomes.	Commissioning Manager Head of Service	March 2022

Draft Strategy to be approved by Corporate Parenting Board – November 2021

Our priorities	What will we	How will we do it	How will we measure success	Who will do it	Timescales
		<p>Understanding the connection between our social care practice and demand within the system.</p> <p>Identifying key issues, priorities and intentions for our commissioning and development of sufficient provision and the practice that underpins this.</p>			
Mental and Physical Health and Wellbeing	e. Ensure the health needs of our looked after children are met	<p>Completion of health assessments within statutory timescales</p> <p>Effective and timely liaison with colleagues to ensure needs of children placed out of Borough are met and smooth transition of services if children move placements</p>	Compliance with timescales for completion of health assessments	Social Workers, Looked After Children Health Team (Walsall Health Trust), Walsall CCG	Quarterly reports to CPB
	f. Enable care leavers to understand their health needs and how to access additional support when they need it.	<p>Ensure all care leavers receive their health passport and a copy is kept on their file</p> <p>Review and reset regular drop-in advice service for children in care aged 16+ and care leavers</p>	% and number of care leaver receiving their health passport	Looked After Children Health Team (Walsall Health Trust) and Walsall CCG	
Education and Employment	g. Increase the number of children in care and care leavers in education, employment or training	Ensure care leavers are supported to access supported internships and traineeships as opportunities develop	% of looked after children and care leavers who are EET at age 19 and 21 is better than national average and improves	Transition and Leaving Care Service; Impact. Walsall Together Endless Possibilities	Quarterly Performance

Draft Strategy to be approved by Corporate Parenting Board – November 2021

Our priorities	What will we	How will we do it	How will we measure success	Who will do it	Timescales
		<p>as appropriate</p> <p>Embed the pre-apprenticeship support offer for care leavers</p> <p>All young people who are available for work are reviewed each month.</p>	<p>each year taking account of the impact on the pandemic.</p>	<p>Virtual School</p>	
Transitions and Independence	<p>h. Improve the quality and consistency of support provided to looked after children and care leavers to transition to adulthood and develop their independent living skills</p>	<p>To jointly review housing pathway and simplify the nomination and referral documentation for care leavers, ensuring that that the language used is more reflective of the needs of care leavers</p> <p>Review joint Housing Protocol for Care Leavers between Children’s Services and Money Home Job and WHG</p> <p>Review and develop preparation for independence support for care leavers.</p>	<p>Pathway and documentation is updated.</p> <p>Revised Housing Protocol</p> <p>Revision of toolkit and support offer set up.</p>	<p>Head of Service for Children in Care and Money Home Job</p> <p>Group Manager Corporate Parenting</p>	<p>December 2021</p> <p>December 2021</p>
	<p>i. Young People with complex disabilities/ needs/risks will have access to timely referrals / assessments to support their transition to adulthood.</p>	<p>To develop an All Age model setting out Pathways to Adulthood which will review transition processes and pathways between children’s services and adult social care services to support young people’s transition to adulthood.</p>	<p>Pathways to Adulthood Policy agreed across Children and Adults Directorate Management Team</p>	<p>Group Manager, Resource Adults Social Care and Group Managers Head of Service</p>	<p>March 2022</p>

Draft Strategy to be approved by Corporate Parenting Board – November 2021

Our priorities	What will we	How will we do it	How will we measure success	Who will do it	Timescales
	j. Review and revise our Local Offer for Care Leavers Annually	Consult with our care leavers to revise our offer in line with best practice.	Local Offer is available and updated annually	Group Manager Corporate Parenting	September 2021
	k. Maximise the benefits of the Care Leavers Covenant Regionally.	Engage with Care Leavers Covenant to continue to strengthen our offer to Care Leavers. Raise awareness of the Covenant with Members.		Group Manager Corporate Parenting Children's Champion	Ongoing
Influence and Involvement	l. Children in Care Council (CICC) so that it is able to represent the voice of all children in care and is able to hold the Corporate Parenting Board to account	Increase numbers of children and young people involved in the CICC. Ensure CICC is enabled to engage fully with the work of the Corporate Parenting Board Develop, recruit and appoint 2 posts for Care Ambassadors Apprenticeships	% of looked after children who engage with CICC Young people attending Shadow CPB Report to each meeting of Corporate Parenting Board No of Care Ambassadors Appointed	Children's Champion, Children in Care Council, Corporate Parenting Board	Ongoing March 2022

Corporate Parenting Board Work Programme 2021/22

	<i>Report to AD</i>	<i>18th June</i>	<i>20th August</i>	<i>1st November</i>	<i>27th December</i>	<i>7th February</i>	<i>21st March</i>
	<i>Report to Democratic Services</i>	<i>22nd June</i>	<i>25th August</i>	<i>4th Nov</i>	<i>31st Dec</i>	<i>10th Feb</i>	<i>24th March</i>
	<i>DMT for noting</i>	<i>24th June</i>	<i>26th August</i>	<i>11th November</i>	<i>13th January</i>	<i>10th February</i>	<i>24th March</i>
Lead Officer	Board date	1st July	6th Sept	15th Nov	11th Jan	21st Feb	4th April
David Hughes	Young People Engagement						
Alison Jones	Health Passports						
Mick McCarthy	Local Offer						
Jivan Sembi	Housing Report						
Mark Tobin Adoption @Heart	Annual Adoption Report						
Mark Burrows	Fostering Annual report						
Helena Kucharczyk.	Performance Monitoring	Q4	Q1		Q2	Q3	
Lorraine Thompson	NEET						
Alison Jones	CAMHS and emotional wellbeing of Children in Care and Care Leavers						
Lorraine Thompson – not required to attend.	Assurance report – virtual school	Information.					
Alison Jones	Assurance report –CCG						

Corporate Parenting Board Work Programme 2021/22

Mick McCarthy	Corporate Parenting Strategy						
Debbie Sylvester with CGL	Independent Visiting Service Annual Report						
Mick McCarthy	Increasing Employability for Care Experienced Young People						