

IMPROVING LIVES SELECT COMMISSION

Date and Time: Wednesday, 2nd November, 2016 at 1.30pm

Venue: Town Hall, Moorgate Street, ROTHERHAM. S60 2TH

A G E N D A

There will be a pre-briefing for all members of the Improving Lives Select Commission between 12.30 noon - 1.30 pm.

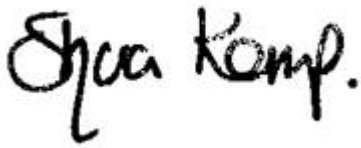
1. To consider whether the press and public should be excluded from the meeting during consideration of any part of the agenda.
2. To determine any item(s) the Chairperson is of the opinion should be considered later in the agenda as a matter of urgency.
3. Apologies for absence.
4. Declarations of Interest.
5. Questions from members of the public and the press.
6. Communications.
7. Minutes of the previous meeting held on 21st September, 2016 (Pages 1 - 12)
8. CSE Post Abuse Services Update (Pages 13 - 30)
9. National Transfer Scheme for Unaccompanied Asylum Seeking Children (Pages 31 - 38)
10. Work Programme (Pages 39 - 40)
11. Date and time of the next meeting - Wednesday 14 December 2016 at 1.30 pm

Improving Lives Select Commission membership:-

Chair – Councillor Clark
Vice-Chair – Councillor Allcock

Councillors Beaumont, Bird, Cooksey, Cusworth, Elliot, Fenwick-Green, Hague, Jarvis, Keenan, Khan, Marriott, Napper, Pitchley, Senior, Short, Tweed (18).

Co-opted members:- Ms. Jones (Voluntary Sector Consortium), Mrs. Clough (ROPF: Rotherham Older Peoples Forum) for agenda items relating to older peoples' issues.

A handwritten signature in black ink that reads "Sharon Kemp." The signature is written in a cursive, slightly slanted style.

Sharon Kemp,
Chief Executive.

IMPROVING LIVES SELECT COMMISSION
Wednesday, 21st September, 2016

Present:- Councillor Clark (in the Chair); Councillors Allcock, Bird, Cooksey, Cusworth, Elliot, Fenwick-Green, Jarvis, Marriott, Napper and Short.

Apologies for absence were received from The Mayor (Councillor Pitchley), from Councillors Beaumont, Khan, Senior and Tweed and from co-opted member Mrs. J. Jones.

19. DECLARATIONS OF INTEREST

There were no Declarations of Interest made at this meeting.

20. QUESTIONS FROM MEMBERS OF THE PUBLIC AND THE PRESS

There were no questions from members of the public or the press.

21. COMMUNICATIONS

There were no issues to report.

22. MINUTES OF THE PREVIOUS MEETING HELD ON 27TH JULY, 2016

Resolved:- That the minutes of the previous meeting of the Improving Lives Select Commission, held on 27th July, 2016, be approved as a correct record for signature by the Chairman.

23. ROTHERHAM LOCAL SAFEGUARDING CHILDREN BOARD - ANNUAL REPORT 2015-2016

Consideration was given to the 2015/16 Annual Report of the Rotherham Local Safeguarding Children Board.

The Improving Lives Select Commission welcomed Mrs. Christine Cassell (Chair of the Rotherham Local Safeguarding Children Board (LSCB)) who presented the Annual Report.

The report and accompanying presentation highlighted the following issues:-

: Children and Social Work Bill, currently being considered in Parliament, which will change the statutory guidance provided for a Local Authority's Local Safeguarding Children Board (LCSB);

: the LCSB will co-ordinate what is done by each person/organisation and promote the welfare of children and ensure the effectiveness of work being undertaken to safeguard children;

: the report of the Office for Standards in Education (2014 Ofsted Report) had concluded that the effectiveness of the Rotherham LSCB was inadequate at that time;

: as a result, the LSCB received an increase in resources to enable it to carry out its functions effectively;

: the LSCB now uses the same performance framework as the Local Authority Improvement Board, so as to monitor the effectiveness of safeguarding;

: the past year has included an increase in the number of audits; the LSCB will consider the individual audits of the safeguarding role of partner agencies and organisations; these audits are open to scrutiny and challenge;

: open meetings are held in which partners challenge each other's processes – a means of ensuring organisational transparency in respect of their work to ensure the safeguarding of children;

: there is evidence of good work being undertaken by the Evolve Team dealing with child sexual exploitation;

: there is already improved compliance with statutory guidance (eg: assessment work being completed on time);

: the Multi-Agency Safeguarding Hub (MASH), established by the Borough Council, the Police and other partner agencies is undertaking good work by sharing information and making early decisions in respect of safeguarding;

: the re-launch of the Early Help Service (in February 2016) was an important part of the Safeguarding process;

: a future challenge is to improve service quality (eg: of front-line work with families and vulnerable children and young people); such improvement will require good multi-agency understanding of the thresholds, which in turn determine the level of intervention needed for individual cases, based on the assessments undertaken;

: one LSCB priority area is to ensure that organisations take responsibility for determining the degree of Early Help required; some organisations must take the lead in respect of this aspect of safeguarding;

: the Rotherham LSCB priorities for 2016/17 are : governance and accountability; community engagement and the voice of children and young people; scrutinising front-line practice including Early Help; the safeguarding of Looked after Children; child sexual exploitation and children who go missing; Neglect (an issue which encompasses domestic abuse, alcohol and substance misuse by parents, as well as mental

health issues affecting both children and young people and their parents);

: the mantra that safeguarding is everyone's business (eg: of both the statutory and voluntary organisations and also the wider community).

Members' questions included the following issues:-

(i) the perceived gap in education (especially for secondary school pupils) in respect of child sexual exploitation and the need to address this gap – the LSCB has a sub-group which has assessed the initiatives being used in schools (eg: the use of drama/theatre groups in schools – Chelsea's Choice and Working for Marcus); there is also the provision of outreach support for school-age children and young people, which is another development introduced since April 2016;

(ii) the use of drama/theatre groups has enabled agencies to share key messages with children and young people who are not attending mainstream school (eg: they may attend pupil referral units);

(iii) the awareness of disability and long-term illness – there is an apparent increase in the number of children and young people in this category; whether this increase is accurate and/or appropriate in all individual cases; LSCB intends to ensure that those children and young people who are in this category are being properly safeguarded (although the LSCB does not itself assess the appropriateness of any individual being classified within this category);

(iv) visits to the Rotherham town centre by children and young people have reduced, because of anxiety about personal safety – this is a recurring theme from the Lifestyle Survey of Rotherham's primary and secondary school-age children and young people; there is a specific concern about being in the Rotherham Interchange (bus station), especially in the evening; the Safer Rotherham Partnership has also examined ways of providing reassurance to children and young people visiting the Rotherham town centre;

(v) meetings have taken place with schools' head teachers concerning safeguarding in schools (eg: anti-bullying policies and support for the victims of bullying) and also to engage with children and young people so that they may gain a better understanding of safeguarding issues;

(vi) assessing the incidence of female pupils being harassed in school; the Lifestyle Survey has a set format of questions which facilitates the year-on-year comparison of responses; an additional question about the harassment of female pupils may be included in the future, although the LSCB has no direct control over the contents of the Lifestyle Survey;

(vii) young people and use of alcohol; Members asked to be informed of the definition of a "large proportion" of pupils, as contained in the Lifestyle Survey;

(viii) female genital mutilation – there is national legislation concerning the requirement to report incidences of female genital mutilation; a multi-agency conference held during the Summer 2016 alerted all organisations of the need to identify young girls at risk (eg: children being taken out of school); the LSCB will keep under review the statutory reporting requirement for certain professionals and organisations;

(ix) the LSCB acknowledges that there is more work to do to ensure that the voices of children and young people are being listened to; this is known to be a national issue and will be a future priority for the LSCB, which will continue to ask for evidence from the various agencies and organisations that the voices of children and young people are being obtained;

(x) Lay members of the LSCB and their accountability – they are elected as lay members and bring that perspective to the LSCB Board, although they are not accountable in the same way as Elected Councillors are; the lay members do have accountability as full members of the LSCB;

(xi) addressing the weaknesses identified by the 2014 Ofsted Report - particularly in terms of quality assurance, learning and improvement, governance; the LSCB will ensure that further improvements are made in terms of quality assurance and that partner organisations are being transparent in bringing/sharing information and challenging each other;

(xii) it was acknowledged that the Annual Report covers 2015/16 and therefore more up-to-date information may already have been provided for Elected Members in respect of specific issues;

(xiii) the LSCB will review the skills and resources available for the Early Help service and will act appropriately if any shortage becomes apparent;

(xiv) the continuity of dealing with individual casework – a very important aspect in terms of safeguarding (acknowledging that changes of personnel do sometimes occur); the LSCB expects there to be greater stability in the workforce, especially amongst social workers; the turnover of agency social workers should reduce; the recruitment and retention of appropriately qualified staff is an important issue under the consideration of the Local Authority;

(xv) updates and reports on the work of the Early Help service are submitted regularly to the LSCB meetings, as well as reports on whether this work “is making a difference”;

(xvi) whether there is an increase in the incidence of professional staff escalating their concerns (within their organisations) about individual cases; there are examples but no data on whether there is an increasing incidence; the LSCB does support and promote the use of escalation to ensure that mechanisms are in place to allow such escalation of

concerns;

(xvii) feedback to agencies which make referrals and how this process is operating in practice; there is the use of online forms for referrals; quality audits are undertaken to assess the effectiveness of the interaction with the referring agency; a streamlining of the service will be undertaken by the MASH; currently, the feedback provided to those agencies making the initial referral is inconsistent and the MASH will carry out a review;

(xviii) Section 47 of the Children Act 1989 – the number of Section 47 assessments is high and may reflect the fact that, in Rotherham, the professionals involved in these assessments are risk-averse and ought to review the methods of weighing up the evidence before them;

(xix) there has been an increase in referrals of cases of child sexual exploitation during the months after publication of the report by Professor Alexis Jay; there has also been an increase in the number of care proceedings issued by local authorities; Rotherham has a larger number of Looked After Children than its statistical neighbour local authorities; the early and effective intervention in families with difficulties should assist in avoiding higher-level intervention later on; the LSCB will keep under review the support mechanisms available to try and prevent a child being taken into care;

(xx) child protection plans and the expectation of reducing numbers of these plans; the LSCB will undertake audits of single agencies and on a multi-agency basis and will review whether correct decisions are being made and to ensure that children are not unduly being omitted from this process; (Members of the Select Commission requested statistical information about this matter);

(xxi) Looked After Children returning to Rotherham from an out-of-authority placement – the need to ensure that there are sufficient placements available within or near to the Rotherham Borough area for this Authority's Looked After Children (although an individual's specific circumstances may require a placement much further away from this local area);

(xxii) child protection conferences – monitoring of actions identified at audit; the LSCB will take action in cases where the audit recommendations are not being implemented;

(xxiii) emergency holding/placements for Looked After Children as a consequence of specific incidents; the LSCB will review the use of emergency placements for Looked After Children as part of its 2016/17 work programme;

(xxiv) Members requested the precise definitions for children and young people who are repeat absconders and for those categorised as missing children;

(xxv) low attendance by Looked After Children at dental care appointments and ensuring the timely health assessments for Looked After Children – the LSCB will receive and consider the report of the multi-agency group which is investigating this issue; efforts will be made to ensure that Looked After Children receive these assessments; this aspect involves joint working with Corporate Parenting Panel which has a more detailed oversight of the issue;

(xxvi) return home interviews undertaken by professionals other than the child/young person's individual case worker; practice has shown that the use of an independent person is preferable for the young person concerned (the Annual Report contains case work examples);

(xxvii) Taxi licensing standards to be consistent across local authority regions – the Rotherham LSCB will confer on this issue with other authorities' LSCBs;

(xxviii) conviction rates for historical cases of child sexual exploitation – the LSCB does review historic cases and ensures that preventative work and disruption work is undertaken; it is the duty of the LSCB to examine significant cases and the LSCB will continue to ask appropriate questions about the effectiveness of the current work being undertaken;

(xxix) although domestic abuse is not shown as a priority of LSCB, there is a current focus on a few specific priorities to ensure the effective use of available resources; the domestic abuse issues will be included as part of the focus on Neglect as a priority of the LSCB;

(xxx) the incidence of forced marriages taking place in Rotherham; Members of the Select Commission will receive appropriate information as to whether any forced marriages have taken place;

(xxxii) the multi-agency risk assessment conferences – the 90% contact rate is good and Members asked how does this rate compare with other LSCBs nationally – answers to this question (and other detailed questions to be submitted to the LSCB, will be provided at a later date);

(xxxiii) children missing from care homes and the use of return interviews – whether children may be contacted again by the interviewer later on and whether children would be prepared to divulge more information at a later interview; there will be follow-up/repeat interviews offered if an initial interview is unsuccessful; this is a developing issue for continuing review by the LSCB;

(xxxiiii) the LSCB has data about children who go missing again, after they have had a return interview; the LSCB will continue to review the effectiveness of the return interviews and the impact upon the lives of vulnerable children and young people;

(xxxiv) return interviews previously being undertaken by the Safe@Last organisation, although they are now undertaken by the Local Authority's Children and Young People's Services; the LSCB sub-group will be asked to reflect upon the relative effectiveness of the two organisations conduct of return interviews;

(xxxv) the LSCB will clarify the meaning of the statistics about outstanding referrals, as shown in the Annual Report;

(xxxvi) the way in which the use of audits is helping to improve practice will continue to be reviewed by the LSCB;

(xxxvii) further details will be supplied to Members on the outcome and impact of audits and case reviews;

(xxxviii) the Prevent Strategy – the LSCB has a responsibility for the review of the effectiveness of this Strategy in Rotherham (but does not own it); currently, there is dialogue with the Home Office about the possible release of appropriate information to ensure effective working in respect of this Strategy;

(xxxix) the home schooling of children and the presence of unregistered schools in the Rotherham Borough area; the LSCB will review the extent of the statutory powers of available to local authorities to inspect the circumstances of children who are educated at home;

(xxxx) the MASH screening process has to be consistent; the LSCB has a sub-group which reviews the MASH processes and the sufficiency of guidance processes which inform the work of the MASH;

(xxxxi) what do children say about their experience of the safeguarding system? – further detail is needed to respond to this very broad question; the LSCB will consider this matter in the future, including information available from within the Lifestyle Survey;

(xxxxii) the way in which children and young people are supported to express their wishes and feelings; the LSCB is preparing guidance material for professionals so that they may assist children and young people appropriately in this matter;

(xxxxiii) the availability of evidence of systems to ensure that children and young people participate in decisions affecting their lives; the expectation is that that professional staff do listen and take account of the voices of children and young people;

(xxxxiv) providing evidence to show that agencies ensure that the voices and opinions of children and young people, about their needs, have an influence upon organisations' decision-making and service provision at a strategic level.

Members thanked the Chair of the Rotherham Local Safeguarding

Children Board for presenting the Annual Report.

Resolved:- (1) That the 2015/16 Annual Report of the Rotherham Local Safeguarding Children Board, as now submitted, be received and its contents noted.

(2) That the Rotherham Local Safeguarding Children Board be requested to:-

(a) request the inclusion within future years' Lifestyle Surveys of an appropriate questions about the harassment of female pupils in schools;

(b) furnish details of the sufficiency strategy in respect of the provision of emergency accommodation for vulnerable children and children missing from home;

(c) provide information about any unregistered schools situated in the Rotherham Borough area;

(d) request the Corporate Parenting Board to review the health assessments of the Authority's Looked After Children in order to improve both the regularity of provision and the rate of attendance at such assessments.

(3) That Members of the Improving Lives Select Commission be invited to submit further detailed questions on the contents of the 2015/16 annual report, for later response in writing from the LSCB.

(during the Select Commission's consideration of the above item, Councillor Clark vacated the Chair to attend a previously arranged meeting and the Vice-Chair, Councillor Allcock assumed the Chair for the remainder of this meeting)

24. CHILDREN LIVING WITH DOMESTIC ABUSE - INSPECTION FRAMEWORK

The Select Commission received a presentation from Mrs. M. Meggs, Deputy Director of Children and Young People's Services, about the proposed inspection framework for children living with domestic abuse.

The presentation highlighted the following salient issues:-

: the Government's definition of domestic abuse as "any incident or pattern of incidents of controlling, coercive, or threatening behaviour, violence or abuse between those aged 16 years or over, who are or have been intimate partners or family members"; this definition includes but is not limited to the following type of abuse : psychological, physical, sexual, financial and emotional;

: domestic abuse can be significant and harmful for children who witness

it and is often categorised as : emotional abuse; physical abuse; neglect.

: the impact is on every aspect of a child's life;

- Education (including attendance at school);
- Emotional well-being (children may feel they are to blame);
- Social well-being;
- Cognitive (brain) development;

: statistics about the prevalence of domestic abuse and specific details relating to the Rotherham Borough area; referrals would usually be from the Police who have a system of assessing the incidents of domestic abuse as either low, medium or high risk;

: the serious lifelong impact of domestic abuse, including different impact upon males and females;

: the statutory agencies must take the necessary action to : protect the child; empower the non-abusing parent and hold the abuser to account (in order to end the abusing behaviour);

: the protection of the child ought to include early referral to the relevant agencies and to support services and the following actions/assessments in accordance with the needs of the individual:-

- Child Protection Plan (Section 47, Children Act 1989 assessment)
- Child in Need Plan
- Early Help

: further reading of the "In Plain Sight" document, containing the evidence from children exposed to domestic abuse, from the Co-ordinated Action Against Domestic Abuse (CAADA); Internet website link below:-

<http://www.safelives.org.uk/sites/default/files/resources/Final%20policy%20report%20In%20plain%20sight%20-%20effective%20help%20for%20children%20exposed%20to%20domestic%20abuse.pdf>

: the key questions for the scrutiny of support services responding to domestic abuse:-

- How well does the Council identify and support victims of domestic abuse?
- How well does the Council work with others to identify and support victims?

: Future actions:-

- Innovation Bid (for funding) jointly by all four South Yorkshire Councils;
- Scale-up the Doncaster MBC model – it is known that domestic abuse has begun to reduce after the introduction of this model;

- A programme of work with communities which are known to experience high levels of domestic abuse.

Members' questions referred to the following issues:-

(i) the way in which evidence of domestic abuse is obtained, in order to assess its impact upon families – the basic social work assessment will examine the circumstances in which families are living; some victims will self-identify; the Police are now empowered to progress prosecutions without the need for testimony from victims; statutory agencies being able to understand the whole perspective (of family circumstances) and therefore recognise signs and symptoms of domestic abuse;

(ii) being able to evidence coercive behaviour (eg: on a victim's personal finances); refraining from labelling people as perpetrators of domestic abuse where there is no evidence of such behaviour; the social work assessment is vital in such cases, together with the role of the Police in investigating possible criminal acts of domestic abuse;

(iii) the range of measures in place to deal with the abusers; the way in which success may be measured in terms of preventing or terminating domestic abuse; some of the pilot projects include working with offenders in the pre-conviction period, although success-rates have been inconsistent; success rates may ultimately improve if funding is eventually obtained to develop further the innovative project begun within Doncaster MBC;

(iv) the impact of domestic abuse (and neglect) upon households which may include elderly people and/or younger people with a disability, all of whom may have significant and demanding care needs; the possibility of other children and young people in the household being neglected because of the demands of those people in the household who require extensive care; - it was acknowledged that domestic abuse is a multi-dimensional issue and the Community Safety Unit within Rotherham MBC takes the lead in responding to incidents of domestic abuse; there are also specialist support services for children and young people who have a disability; there is a wide-ranging capability amongst the various agencies in respect of dealing with the impact of domestic abuse upon vulnerable children and adults; the Police also have authority to instigate prosecutions in cases where the victims of domestic abuse are reluctant to do so;

(v) it was acknowledged that published statistics may not reflect the actual incidence of domestic abuse; comparatively, there is less investment in support services for children and young people than is similar services being provided for adults, although there are also differences in methods of providing support; the Early Help Service is useful for providing support, in addition to traditional social work services; the total costs of these services ought to be quantified; a review ought to include assessments of whether the statutory agencies are the most appropriate

organisations to provide the necessary support, the overall effectiveness of the provision of support services and the value for money being achieved;

(vi) the impact upon households in which a child has complex needs and where siblings may fulfil the role of young carer (sometimes the carer for an adult victim of domestic abuse); it was acknowledged that agencies are sometimes slow to identify this type of example, which may include the young carer suffering neglect; the Local Authority's short-breaks service enables parents to spend more time with their children, by providing support for the care of children and young people who have a disability.

Resolved:- (1) That the presentation about the inspection framework for children living with domestic abuse be received and its contents noted.

(2) That consideration of the following aspects of the inspection framework for children living with domestic abuse be included within the 2016/17 work programme of the Improving Lives Select Commission:-

: a targeted review of support services to ascertain whether the levels of funding and of other resources are sufficient to meet local needs in the Rotherham Borough area;

: effective means of gathering evidence about the perpetrators of domestic violence, including evidence of the use of coercive behaviour within the Rotherham Borough area;

: after an assessment of the provision of services for victims of domestic abuse available within the Rotherham Borough area, undertaking a comparison with and study of the Doncaster MBC model of service provision, which has been validated by Central Government and is the subject of independent audit and evaluation (this study to include a visit to Doncaster should that be deemed necessary).

(3) That the Safer Rotherham Partnership be requested to carry out an initial health check of the current state of services for victims of domestic abuse available within the Rotherham Borough area, especially the methods of identifying the perpetrators of domestic abuse and a report on this health check be submitted to the meeting of the Improving Lives Select Commission to be held on 14th December 2016.

25. IMPROVING LIVES SELECT COMMISSION - WORK PROGRAMME AND PRIORITISATION 2016/17

Further to Minute No. 17 of the meeting of the Improving Lives Select Commission held on 27th July, 2016, consideration was given to a report, presented by the Senior Adviser (Scrutiny and Member Development), concerning the outline work programme for the Improving Lives Select Commission for the 2016/17 Municipal Year.

The specific topics discussed were;-

(i) the role and function of the Corporate Parenting Panel and issues concerning this Authority's Looked After Children (including the placement of Looked After Children as a consequence of the closure of this Authority's Children's Residential Homes);

(ii) alternative delivery models of social care and how this impacts on accountability, improvement and the delivery of this Authority's statutory social care duties; and

(iii) from within the Council's Forward Plan of Key Decisions, the forthcoming progress report about the Council's response to Unaccompanied Asylum Seeking Children Dispersal Scheme; it was noted that this matter was being considered from a whole region (Yorkshire and the Humber) perspective, as well as on a sub-regional basis; a decision on the Dispersal Scheme was expected to be made during January 2017.

Resolved:- (1) That the report be received and its contents noted.

(2) That the Deputy Leader (and Lead Member for Children and Young People's Services) be requested to refer the minutes of the Corporate Parenting Panel to the Improving Lives Select Commission.

(3) That the Improving Lives Select Commission shall undertake a review of the effectiveness of alternative delivery models of social care and how this impacts on accountability, improvement and the delivery of the authority's statutory social care duties (Members were asked to volunteer to join the sub-group for this review).

(4) That the report about Unaccompanied Asylum Seeking Children Dispersal Scheme be submitted for consideration at the next meeting of the Improving Lives Select Commission, to be held on Wednesday, 2nd November, 2016.

Summary Sheet

Improving Places Select Commission – 2 November 2016

Title

CSE Post Abuse Services Update

Is this a Key Decision and has it been included on the Forward Plan?

No

Strategic Director Approving Submission of the Report

Ian Thomas, Strategic Director of Children and Young People's Services

Report Author(s)

Jo Smith, Children and Young People's Services

Ward(s) Affected

All

1. Summary

- 1.1 In the wake of the Jay Report in October 2014 a number of Voluntary and Community Sector organisations with experience of working with people affected by CSE were commissioned as an interim measure to ensure that support would be available to any individual coming forward with disclosure of such issues.
- 1.2 The organisations commissioned in the short term were GROW, Rotherham RISE (Previously Rotherham Women's Refuge), Rotherham Abuse Counselling Service (RACS) formerly Women's Counselling Service, Swinton Lock, Rape Crisis and Apna Haq. A helpline was also commissioned to allow 24 hour access to telephone advice through the NSPCC which is for all ages (this will cease 31 March 2016). These interim measures have now been replaced by a suite of services which are reflective of need across the service user group (**Appendix 1 CSE Post Abuse Support Services Update**)
- 1.3 It must be recognised that the support offered is needs led and therefore dictated by the individual/family accessing it. Whilst we are actively encouraging people to come forward we recognise that it can take months or years of support and therapy before the individual is ready to take this step. Post disclosure support and therapy can again take months and years before that individual can move on with their lives.
- 1.4 Support is taking many different forms: case studies include families who have needed to relocate where support for things such as organising the logistics of relocation, settling children into new schools and changing utilities has been needed. Others have required more therapeutic intervention, counselling, group work and art therapy.

- 1.5 The needs analysis 2015 undertaken by Public Health colleagues describes a breadth of support needs ranging from 'hand holding', practical support through to high level mental health intervention. This range is reflected in the suite of services now on offer. The analysis included voice and influence of individuals and groups taking into account the experiences of those who had previously been failed by the system.
- 1.6 To ensure that all communities with the Borough had a voice in the development of services Salford University were commissioned to work with a number of VCS organisations to capture their thoughts, ideas and experience post Casey and Jay Reports.
- 1.7 The Salford Report along with the Needs Analysis and other voice and influence work has helped to shape the CSE services now in place and being commissioned.
- 1.8 All Commissioned Post Abuse Services are required to include voice and influence elements to their support and this is monitored alongside other outcome monitoring arrangements.
- 1.9 There are three shared CSE priorities from the Rotherham JSNA which are reflected in the services currently offered;

PREVENT children becoming victims of CSE through education and awareness raising and assuring local communities that agencies take the issue seriously.

PROTECT children and safeguard them from risk of harm from CSE.

PURSUE the perpetrators of CSE and ensure appropriate multi-agency plans are in place to support victims and to enable them to safely disclose the abuse and provide the evidence to prosecute offenders.

Recommendations

That the report be received.

List of Appendices Included

Appendix 1: CSE Post Abuse Services Update 2016

Appendix 2: CSE Support Service Map

Background Papers

Post Abuse Support Service Specification

CSE Needs Analysis 2015

Salford Report 2015

Children's and Young People's Service Improvement Plan, 2015

RMBC Corporate Plan 2015 – 2018

Child Sexual Exploitation: The Way Forward 2015 – 2018

Rotherham JSNA 2016

Rotherham Borough Joint Health and Wellbeing Strategy 2015-2018

Rotherham's Improvement Plan: *A Fresh Start*

Child Sexual Exploitation Delivery Plan

Consideration by any other Council Committee, Scrutiny or Advisory Panel

No

Council Approval Required

No

Exempt from the Press and Public

No

Title: Child Sexual Exploitation: Post Abuse Services Update

1 Recommendations

- 1.1 That the report be received.

2 Background

- 2.1 An update report is requested to ascertain the current position of RMBC in relation to the provision of Post Abuse Support in Rotherham.

- 2.2 In the wake of the Jay Report in October 2014 a number of Voluntary and Community Sector organisations with experience of working with people affected by CSE were commissioned as an interim measure to ensure that support would be available to any individual coming forward with disclosure of such issues.

- 2.3 The organisations commissioned in the short term were GROW, Rotherham RISE (Previously Rotherham Women's Refuge), Rotherham Abuse Counselling Service (RACS) formerly Women's Counselling Service, Swinton Lock, Rape Crisis and Apna Haq. A helpline was also commissioned to allow 24 hour access to telephone advice through the NSPCC which is for all ages (this will cease 31 March 2016). These interim measures have now been replaced by a suite of services which are reflective of need across the service user group (**Appendix 1 CSE Post Abuse Support Services Update**)

- 2.4 It must be recognised that the support offered is needs led and therefore dictated by the individual/family accessing it. Whilst we are actively encouraging people to come forward we recognise that it can take months or years of support and therapy before the individual is ready to take this step. Post disclosure support and therapy can again take months and years before that individual can move on with their lives.

- 2.5 Support is taking many different forms: case studies include families who have needed to relocate where support for things such as organising the logistics of relocation, settling children into new schools and changing utilities has been needed. Others have required more therapeutic intervention, counselling, group work and art therapy.

- 2.6 There are three shared CSE priorities from the Rotherham JSNA which are reflected in the services currently offered;

PREVENT children becoming victims of CSE through education and awareness raising and assuring local communities that agencies take the issue seriously.

PROTECT children and safeguard them from risk of harm from CSE.

PURSUE the perpetrators of CSE and ensure appropriate multi-agency plans are in place to support victims and to enable them to safely disclose the abuse and provide the evidence to prosecute offenders.

4. Options considered and recommended proposals

N/A

5. Consultation

- 5.1 The needs analysis 2015 undertaken by Public Health colleagues describes a breadth of support needs ranging from 'hand holding', practical support through to high level mental health intervention. This range is reflected in the suite of services now on offer. The analysis included voice and influence of individuals and groups taking into account the experiences of those who had previously been failed by the system.
- 5.2 To ensure that all communities with the Borough had a voice in the development of services Salford University were commissioned to work with a number of VCS organisations to capture their thoughts, ideas and experience post Casey and Jay Reports.
- 5.3 The Salford Report along with the Needs Analysis and other voice and influence work has helped to shape the CSE services now in place and being commissioned.
- 5.4 All Commissioned Post Abuse Services are required to include voice and influence elements to their support and this is monitored alongside other outcome monitoring arrangements.

6. Timetable and Accountability for Implementing this Decision

6.1 N/A

7. Financial and Procurement Implications

7.1 See Appendix 1 Paragraph 7. Costs

8. Legal Implications

8.1 N/A

9. Human Resources Implications

9.1 N/A

10. Implications for Children and Young People and Vulnerable Adults

- 10.1 Children and young people have access to a range of post abuse support services in accordance with individual need.
- 10.2 Vulnerable adults who have experienced child sexual exploitation and family members affected by the exploitation has access to a range of post abuse

support services in accordance with individual need.

11. Equalities and Human Rights Implications

11.1 An Equalities Impact Assessment was undertaken when developing the Service Specification.

12. Implications for Partners and Other Directorates

12.1 Partners and other directorates, where appropriate have been consulted as part of the development of the service specification.

12.2 Partners and other Directorates are aware of the services available.

13. Risks and Mitigation

13.1 There is a risk that due to past failings that the services may not be accessed due to issues of mistrust. This risk was partially mitigated through tendering the services and ensuring delivery through trusted voluntary and community sector organisations within the borough. As convictions have been secured and awareness of support services has been raised referrals into post abuse support services has increased. It would appear that confidence in RMBC and Police is increasing in parallel with access to post abuse support.

13.2 There is a risk that as Police Operations emerge support going through the legal process and post court proceedings may exceed capacity. There is flexibility within the service specification to mitigate this risk.

13.3 Support will need to evolve in accordance with need and demand. There is flexibility within the service specification and monitoring arrangements

14. Accountable Officer(s)

N/A

15. Approvals Obtained from:

Mel Meggs Deputy Strategic Director Children and Young People's Services

Rotherham CSE Post Abuse Services Update

1 Context

- 1.1 Significant investment in the development and commissioning of CSE support services by RMBC and the Rotherham Clinical Commissioning Group (RCCG) has resulted in a very different support offer for victims and survivors to that offered following the findings in Professor Alexis Jay's report on CSE (1997-2013). As such, a comprehensive range of services now exist.
- 1.2 Following a CSE needs analysis, the longer term post CSE support services provide a range of services to meet the needs of victims and survivors of CSE and also offer choice to individuals. These services include:-
 - practical, emotional support and advocacy;
 - evidence based therapeutic interventions.
- 1.3 An open one stage European Union (EU) compliant competitive tendering process has now taken place. Eight tenders were received from four local voluntary sector organisations. Each tender at the evaluation stage was scored against a balanced scorecard based on both quality and price.
- 1.4 The needs analysis 2015 undertaken by Public Health colleagues describes a breadth of support needs ranging from 'hand holding', practical support through to high level mental health intervention. This range is reflected in the suite of services now on offer. The analysis included voice and influence of individuals and groups taking into account the experiences of those who had previously been failed by the system.
- 1.5 To ensure that all communities within the Borough had a voice in the development of services Salford University were commissioned to work with a number of VCS organisations to capture their thoughts, ideas and experience post Casey and Jay Reports.
- 1.6 The Salford Report along with the Needs Analysis and other voice and influence work has helped to shape the CSE services now in place and being commissioned.

2 The Specification

- 2.1 The service specification reflects the vision, principles and strategic objectives of the Council in relation to CSE and improving the support provided to victims and survivors of CSE in Rotherham. Keeping children and young people and Adults safe is one of the highest priorities of RMBC, the Rotherham Local Safeguarding Children's Board (RLSCB), the Safer Rotherham Partnership and the Police and Crime Commissioner.

- 2.2 The providers will contribute to the strategic intentions in a collaborative and supportive way in relation to **Child Sexual Exploitation: The Way Forward 2015 -2018** which states Child Sexual Exploitation (CSE) is an insidious form of child abuse that has a damaging and long lasting impact on those involved. Effective multi agency partnership working is essential, where partners work to the principle that safeguarding is everyone's responsibility, and are clear on their respective roles and responsibilities. CSE is recognised nationally as one of the most important challenges facing agencies today. The serious long term and lasting impact CSE can have on every aspect of a child or young person's life, including their health, physical and emotional wellbeing, educational attainment, personal safety, relationships, and future life opportunities means that CSE must be addressed.
- 2.3 The Priorities within the Service Specification ensure all partners work together effectively to achieve the shared key strategic priorities in this area for 2015 – 2018.
- 2.4 The definition that is used in the context of the Service Specification is the NWG Network definition which is:-

Child sexual exploitation is a form of sexual abuse in which a person(s) exploits, coerces and/or manipulates a child or young person into engaging in some form of sexual activity, sometimes in return for something the child needs or desires and/or for the gain of the person(s) perpetrating or facilitating the abuse

In all cases those exploiting the child/young person have power over them by virtue of their age, gender, intellect, physical strength and or economic or other resources

Violence, coercion and intimidation are common in exploitative relationships, being characterised in the main by the child or young person's limited availability of choice, resulting from their social, economic and/or emotional vulnerability.

Grooming is the process of recruitment

Exploitation is the process of abuse

- 2.5 The three areas of service that are required within the Service Specification are:-
- Service Area 1** - Practical, emotional support and advocacy for Young People (up to the age of 25) who have experienced child sexual exploitation. This includes support to immediate family members.
- Service Area 2** – Practical, emotional support and advocacy for Adults who have experienced child sexual exploitation. This includes support to immediate family members.
- Service Area 3** – Evidence based therapeutic interventions for young people and adults who have experienced child sexual exploitation.
- 2.6 The service specified is available to individuals who have experienced child sexual exploitation whilst a resident of Rotherham or is currently a resident in Rotherham and been the victim of CSE elsewhere

2.7 All of the services commissioned will:

- a) Provide an 'open door' model of flexible and accessible service provision, enabling Service Users to build resilience and develop coping strategies.
- b) Use a range of engagement strategies with the underpinning ethos of making every appropriate effort to engage individuals to encourage them to access the post CSE support service, identify any needs and support them in order to aid recovery and build resilience.
- c) Develop a marketing plan to ensure victims and survivors of CSE and their families understand the support that is available, the approach to be undertaken and how to access the Service.
- d) Have knowledge and information about the services provided in Rotherham by both statutory and voluntary sector organisations is required to ensure victims are referred onto the appropriate service. This will be an important part of building resilience.
- e) Undertake an assessment of need, using an evidenced based model of assessment, identifying all the issues affecting the Service User including where specialist support is required e.g. mental health.
- f) Develop and agree the support plan with the Service User with achievable outcomes at an individual level and an exit strategy. The plan should include incremental measures to monitor progress in achieving the outcomes and their achievement.
- g) Actively support the service user with a range of issues and also provide a co-ordinating brokerage role for accessing other services.
- h) Ensure the service user is able to access the right element of the specialist service, seeking advice as to what is appropriate for the individual. Existing Service Provides of drug and alcohol services and specialist mental health services will prioritise referrals for specialist support from CSE victims.
- i) The frequency of the contact with the service user will depend on the needs and the intensity of the support required. The maximum timescales of involvement with the service user is 12 months unless there are exceptional circumstances.
- j) Break down any barriers such as fear and mistrust that could prevent engagement with such specialist services, such as Independent Sexual Violence Advocates, Sexual Assault Referral Centre, Youth Start, Rotherham and Child and Adolescent Mental Health Service by the brokerage of effective communication and clear pathways.
- k) Be able to identify and overcome barriers to fast track service referrals for support provided by other organisations (e.g. housing related support, benefits etc.)

- l) Identify a named key worker for each Service User as a single contact where they can build trust, whilst ensuring there is capacity to cover for staff absence.
- m) Provide advocacy support at meetings where appropriate, spending time after meetings ensuring that information is understood and what any implications may be.
- n) Identify, understand and respond to vulnerability and risk factors associated with CSE e.g. persistent absence and exclusions, substance misuse, domestic abuse to enable a targeted Service response.
- o) Deliver services in line with RMBC's key priorities. In addition, the Service should deliver relevant outcomes against the priorities of the Joint Health and Wellbeing Strategy 2012 – 2018, the Early Help Strategy and the CSE Strategy.
- p) Respond appropriately to the specific needs of the diverse minority groups in Rotherham including those needs identified in the CSE Needs Analysis (Salford University).
- q) Implement the exit strategy developed for each service user which should include details of referrals made for ongoing support and contact details for any future or further recurrence of issues.
- r) Specifically engage local communities where it is known there is under-reporting of CSE, specifically Asian communities in relation to boys and men. Identifying the barriers to accessing support should enable actions to remove these barriers to be undertaken.

3 The Providers

3.1 GROW

Delivering:

Service Area 1 - Practical, emotional support and advocacy for Young People (up to the age of 25) who have experienced child sexual exploitation. This includes support to immediate family members.

Service Area 2 – Practical, emotional support and advocacy for Adults who have experienced child sexual exploitation. This includes support to immediate family members.

GROW deliver an outreach approach to support adults, children, young people and families. They work in partnership with EVOLVE and other providers receiving referrals for people as both new victims and to those survivors who are now coming forward and disclosing historical abuse. These workers also provide support to the survivor's family to enable their recovery, and their ability to be a protective factor for their child/young person.

3.2 Rotherham RISE (Formerly Rotherham Women's Refuge) – Project Survive

Delivering:

Service Area 1 - Practical, emotional support and advocacy for Young People (up to the age of 25) who have experienced child sexual exploitation. This includes support to immediate family members.

Service Area 2 – Practical, emotional support and advocacy for Adults who have experienced child sexual exploitation. This includes support to immediate family members.

Service Area 3 – Evidence based therapeutic interventions for young people and adults who have experienced child sexual exploitation.

Building on their experience of providing support for women and their children where domestic abuse has been a feature RISE utilise this experience and approach to enable the delivery of specialist support for survivors of Child Sexual exploitation (CSE). They work with young people 12- 18 and aged 18 +, also offering family support and counselling.

3.3 Rotherham Abuse Counselling Service (RACS) – formerly Rotherham Women's Counselling Service and Pit Stop for Men

Delivering:

Service Area 3 – Evidence based therapeutic interventions for young people and adults who have experienced child sexual exploitation.

RACS & Pit Stop for Men provide one-to-one specialist trauma counselling for adults and children over the age of 12 years. They also offer therapeutic group counselling for those who choose this while they await one-to-one counselling, or following the ending of their counselling sessions. This professional counselling service offers the individual the opportunity to reach a greater understanding of how past abuse has affected them and enable survivors to make informed choices whilst minimising the cycle of abuse.

3.4 Swinton Lock

To enable continuity in supporting the individuals and families that Jayne Senior is currently working with, a contract has been directly awarded to Swinton Lock to provide practical, emotional support, advocacy and signposting from the 1st July, 2016 for 12 months.

4 Monitoring and Evaluation arrangements

4.1 Contract Performance and Financial Monitoring Arrangements

- a) Evidence for activity which has taken place against contractual requirements must be submitted to the Local Authority on a monthly basis.

- b) A financial report is also provided on a monthly basis detailing costs incurred and activity still to be delivered in line with the cost work book submitted in the Invitation to Tender.
- c) Progress towards achieving the agreed outcomes with each individual Service User is recorded and reported monthly along with the actual outcomes achieved.
- d) Activity is monitored and reviewed by the Local Authority and any required interventions to address any concerning shortfalls or changes to delivery are discussed at the contract performance monitoring meetings. Providers will be required to submit re-profiled outputs following any shortfall or change to delivery.
- e) The Local Authority undertakes monthly performance monitoring visits to the service Provider to review performance, quality assurance and expenditure. The visit may include an observation of how Service Users interact with the Service Provider and to gather their views on the service.

4.2 Performance Monitoring Visits

- a) The Quality Benchmarking Assessment Framework is a tool which we have designed to help us to work closely with delivery agents.
- b) As Commissioners we need to have a better knowledge and understanding of the services we commission.
- c) We are developing our working relationships to ensure that we are offering support to development of individual services and of the market, responding to the emerging needs of our client groups.
- d) This benchmarking tool will enable self-assessment and support improvement; it will clarify our expectations and ensure that we are a child centred borough.

The Headings of each area for assessment are as follows:

- Assessment and Support Planning
- Security, Health & Safety, Staff & Workforce CPD
- Voice, Influence, Safeguarding and Protection from Abuse
- Service User Journey, Fair Access, Diversity and Inclusion
- Client Involvement and Empowerment
- Service Improvement, Innovation and Contingency Plans

Alongside the scheduled monitoring visits Children and Young People's Services Commissioning Team are undertaking 'spot checks' on all services. The 'spot checks' are themed and will support improvement and development of services in line with emerging needs

of service users.

Monthly data feeds into performance monitoring against the RMBC Corporate Plan.

5 Gaps in Provision

- 5.1 Since currently commissioned services have been in place the only gap in provision identified was a need for 24 hour on call support. This was raised as an issue by Swinton Lock. When further investigation was undertaken to determine whether this was the experience of other providers it proved to apply only to the provision of Swinton Lock. As a result we have asked that out of hours issues be monitored by the service. Other services felt that they are managing expectations of service users within normal working hours and that the issues and risks engendered as a result of undertaking out of hours visits is not supportive of recovery and independent living and is not a cost effective way of offering support and should be addressed by the appropriate emergency services (Police, Crisis Team or hospital. It should be noted that all service users who present as potentially being in crisis out of hours are made aware of emergency services)

6 Uptake of Services

3.1 Counselling Services

Organisation	Total victims & survivors	Gender	Ethnicity	Victims aged						
				under 18	18-24	25-34	35-44	45-54	55-64	65-69
Rotherham Abuse Counselling Service	52 CSE 125 CSA	135 female 26 Male	4 Asian/ Asian British Pakistani 1 Black / Black British - African All others White / British	0	30	45	29	37	30	4
Rotherham Rise	64	59 female 5 male	17 White British 2 Dual Heritage 1 Asian	11	19	15	9	8	1	0

3.2 Practical, Emotional support and Advocacy

Organisation	Total victims & survivors	Gender	Ethnicity	Victims aged							
				under 18	18-24	25-34	35-44	45-54	55-64	65-69	Parents & Siblings
Rotherham Rise	48	45 female 3 male	White British 1 Indian 1 Pakistani	19	6	14	3	2	2	2	nil
GROW	58	all female	1 Asian 2 Black Congo 3 Mixed Race 1 Slovakian All others White / British	12	28	10	6	3	0	0	9 parents / family members
Swinton Lock	87	65 female 4 male	3 Black 1 Asian All others White / British	14	27	34	7	2	0	0	65 family members : child 51 Family Members 48
Base Project	90			9 (5-12) 35 (13-18)	37 (19-35)	9 (35-55)					70 family members

7 Costs

Specific Areas	Indicative maximum 100% funding available 2016/2017 (9 months)	Indicative maximum 100% funding available 2017/2018	Indicative maximum 100% funding available 2018/2019
Service Area 1 – Practical, emotional support and advocacy for young people (up to the age of 25)	Provider 1 £28,237 Provider 2 £28,237	Provider 1 £21,300 Provider 2 £21,300	Provider 1 £19,050 Provider 2 £19,050
Service Area 2 – Practical, emotional support and advocacy for adults.	Provider 1 £28,237 Provider 2 £28,237	Provider 1 £19,200 Provider 2 £19,200	Provider 1 £13,950 Provider 2 £13,950
Service Area 3 – Evidence based therapeutic interventions	Provider 4 £49,500 Provider 1 £49,500	Provider 4 £45,000 Provider 2 £45,000	Provider 4 £33,000 Provider 1 £33,000
Total for Year	£211,948	£171,000	£132,000

8 Additional support

In addition to Statutory Services delivered via Evolve and Vulnerable Adults Services other identified needs have been addressed through the following:

8.1 Clinical Psychotherapist

The CCG has commissioned a Clinical Psychotherapist to work for 2.5 days per week with adult victims and survivors needing acute intervention and 2.5 days with children and young people. The Psychotherapist also offers clinical case supervision to staff delivering post abuse services.

8.2 PACE Parent Liaison Worker

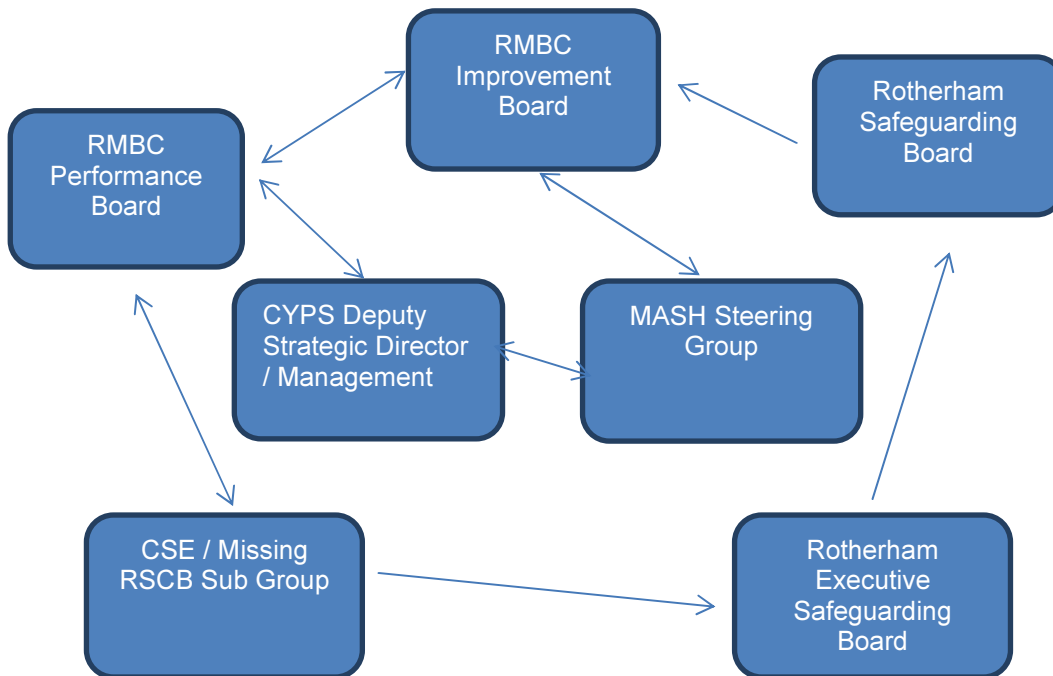
The Parent Liaison Worker has joined the Evolve Team to ensure that parents and carers of current victims of CSE are offered support throughout the process.

9 Voice and Influence

- 9.1 The needs analysis 2015 undertaken by Public Health colleagues describes a breadth of support needs ranging from 'hand holding', practical support through to high level mental health intervention. This range is reflected in the suite of services now on offer. The analysis included voice and influence of individuals and groups taking into account the experiences of those who had previously been failed by the system.
- 9.2 To ensure that all communities within the Borough had a voice in the development of services Salford University were commissioned to work with a number of VCS organisations to capture their thoughts, ideas and experience post Casey and Jay Reports.
- 9.3 The Salford Report along with the Needs Analysis and other voice and influence work has helped to shape the CSE services now in place and being commissioned.
- 9.4 All Commissioned Post Abuse Services are required to include voice and influence elements to their support and this is monitored alongside other outcome monitoring arrangements.
- 9.5 Jersey Safeguarding Board has invited one of the Rotherham CSE Survivors to Speak at a conference they are hosting in January 2017. The Survivor will describe her personal journey and experiences of services past and present.
- 9.6 There are a number of Survivor groups which have been set up independently. These groups are having a voice at local, regional and national level.

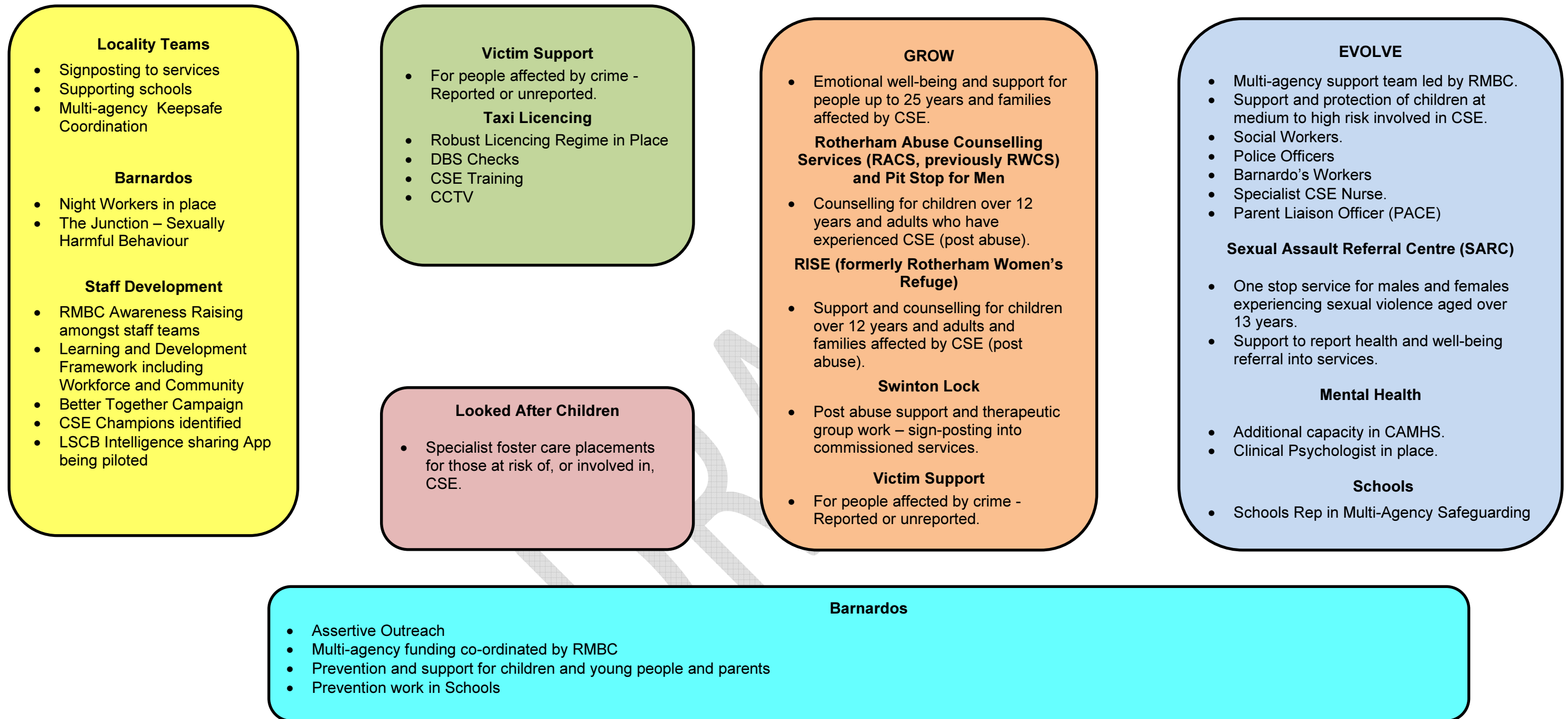
10 Governance

Rotherham CSE Governance Structure



11 Conclusion

- 11.1 There is clear evidence that the services provided are now being accessed and utilised. This would indicate a growing confidence in both the Council and Police in parallel with increased confidence in services on offer. Increase in convictions and high profile Police operations alongside successful support of victims and survivors in Rotherham are instrumental in changing the narrative over the past 12 months from one of failings and lack of provision to one of optimism and belief in a way forward.
- 11.2 Victims and survivors of historical abuse who have previously been vocal in their criticism of the Authority and Police are now articulating the shift in culture and voicing approval of the changing face of support for victims and survivors in the borough.



Governance Arrangements

Rotherham Local Safeguarding Children Board
 Multi-Agency Risk Panel - Interventions solutions for high risk individuals (perpetrators or victims and geographical areas)
 CSE/ Missing Sub Group
 Children's Improvement Board
 Multi-Agency Post Abuse Programme Board

Enforcement (RMBC and South Yorkshire Police)

- | | |
|--|--|
| <ul style="list-style-type: none"> • Licensed Premises - Robust policing in conjunction with RMBC. • Private Hire Policy. • Intelligence gathering and sharing. • Education for organisations presenting risk. | <ul style="list-style-type: none"> • Risk of Sexual Harm Orders. • Abduction Warnings. • Criminal Behaviour Orders. |
|--|--|

DRAFT

Summary Sheet

This report was considered at the Cabinet and Commissioner Decision Making Meeting on 10 October 2016.

Improving Lives Select Commission – 2 November 2016

Title

National Transfer Scheme for Unaccompanied Asylum Seeking Children (UASC)

Is this a Key Decision and has it been included on the Forward Plan?

No

Strategic Director Approving Submission of the Report

Ian Thomas, Strategic Director, Children and Young People's Services CYPS

Report Author(s)

Mel Meggs, Deputy Strategic Director, CYPS

Ward(s) Affected

All

Summary

Unaccompanied Asylum Seeking Children (UASC) in the United Kingdom (UK) are children who are outside their country of origin to seek asylum in the U.K, are separated from parents and relatives, and are not in the care of someone who is responsible for doing so.

The government has legislated (1st July 2016) to introduce a national dispersal for UASC; named the National Transfer Scheme.

The report provides information about the National Transfer Scheme, the regional approach and implications for Rotherham Metropolitan Borough Council (RMBC).

Recommendations

This recommendation was agreed by Commissioner Bradwell on 10 October 2016:

- It is recommended that the proposed voluntary arrangements to discharge the Council's statutory duties for the dispersal of UASC, through a regional scheme is approved.

List of Appendices Included

None

Background Papers

None

Consideration by any other Council Committee, Scrutiny or Advisory Panel

Cabinet and Commissioners' Decision Making Meeting – 10 October 2016

Council Approval Required

No

Exempt from the Press and Public

No

Title: National Transfer Scheme for Unaccompanied Asylum Seeking Children (UASC)

1. Recommendation

- 1.1 It is recommended that the proposed voluntary arrangements to discharge the Council's statutory duties for the dispersal of UASC, through a regional scheme is approved.

2. Background

- 2.1 The National Transfer Scheme has been introduced in legislation to respond to the government's pledge to support child refugees. The scheme sets out to achieve a fair, equitable and transparent approach for the resettlement of child refugees across all Local Authorities in England.
- 2.2 Government wrote to authorities in May 2016 and again in September 2016 with information on the resettlement scheme for unaccompanied children, to include the resettlement of UASC, children deemed at risk from countries around Syria and children from other European countries into the UK.
- 2.3 Before addressing the wider issues in respect of unaccompanied asylum seeking children within the United Kingdom, it is important for there to be some clarity as to who would fit into the legal category of being an unaccompanied asylum seeking child.
- 2.4 An unaccompanied asylum seeking child is a person, who at the time of making the asylum application:
- Is under the age of 18 or in the absence of documentary evidence appears to be under 18
 - Is applying for asylum in his or her own right
 - Has no relative or guardian to turn to in this country.
- 2.5 The reasons why children seek asylum are many and varied. They can include the child having been trafficked into the United Kingdom and having managed to flee from the trafficker. Some children will be fleeing child specific persecution, by way of example; forced marriage, child soldiering and others will seek asylum in the UK because they are experiencing persecution in their home country or in an attempt to flee armed conflict. Some young people will have become displaced from adult carers who had commenced the journey with them.
- 2.6 All local authorities in England and Wales have a legal duty to provide support for children and young people who seek asylum. Section 17 of the Children act 1989 provides a duty on every local authority to safeguard and promote the welfare of children in need within their area by providing appropriate resources to them, whilst section 20 requires every local authority to provide accommodation for children in need if

they have no person with parental responsibility and/or the child has been lost or abandoned.

- 2.7 The Home Office provides financial support to local authorities by meeting reasonable additional costs for those local authorities taking on responsibility for the care of UASC. The current rates paid to local authorities under the national transfer scheme are set out in section 7. The new scheme commenced in July 2016. The scheme has been funded on a per place basis but the costs are a contribution only towards the costs of a placement and do not cover the real costs to all agencies for caring for these children. The scheme does not specify how many children will arrive or when, however, it does make provision for when they arrive for them to receive “looked after” status.
- 2.8 The scheme has a distribution based on a proportion of the child population (0.07%) which equates to 726 children for the Yorkshire and Humber region and 39 Children for Rotherham. The Home Office encourages a regional response and is providing up to £60,000 to fund administrative arrangements to facilitate the development of regional approaches.

3. Key Issues

- 3.1 Colleagues across all local authorities report significant pressures on overall children in care numbers and a lack of appropriate placements.
- 3.2 The experience and risks of conventional approaches to receiving UASC have not always been positive either for the young people, their carers or the responsible authorities. These include:
- Duplication of processes and inconsistency in responses between local authorities
 - Inter local authority competition for service resources (translators, trauma specialists, placements)
 - Lack of coordination that risks further worsening outcomes for children such as separating siblings/peers
 - Bias towards process driven approaches that try to fit UASC into existing systems.
- 3.3 Migration Yorkshire have been working with the local authorities in the Yorkshire and Humber region, and with the Home Office, Department for Education and Department for Health, to develop a regional approach which brings together the specialist knowledge and skills to appropriately support these vulnerable children. The region is seeking an approach that:
- Does not rely on an already overburdened placement system
 - Recognises the unique experience and needs of these children and develops tailored packages of care
 - Maximises the collective resources of the region
 - Develops regional coordination at every stage of the child’s care
 - Benefits from explicit flexibilities and freedoms to deliver

- care/education and health services differently
 - Uses shared intelligence to ensure that young people are placed and supported in a way that maximises any community risks
 - Pools sparse specialists and resources to ensure a consistent offer.
- 3.4 A proposed outline regional model for the delivery of sustainable, young person centred health, education and care for the Yorkshire and Humber region has been developed, based on the following principles:
- Provide a consistent, warm, safe welcome
 - Provide health, care and education tailored to specific needs
 - Provide a service that minimises further separation and loss
 - Provide equitable access to legal advice and support
 - A system owned by the region, sharing cost, risk and pressure.
- 3.5 The proposed model for the region describes several shared functions at each stage of a UASC journey from pre-transfer to settled care:
- Stage 1: Pre-transfer – a central point of contact for the Yorkshire and the Humber region would receive early information on the details of UASC destined for the region to prepare for arrival, including language, health care, disability and other needs.
 - Stage 2: Transfer – three sub-regional centres in the north, south and west of the region would be established to undertake appropriate education, health and care needs assessments over a period of weeks.
 - Stage 3: Placement – matching the needs of each UASC to regional placement resources.
 - Stage 4: Settlement – a sustained point of contact with sub-regional centres would be provided to access advice and support and track UASC.
- 3.6 In Rotherham the sufficiency strategy is being further developed to ensure the council is able to respond to a diverse range of children and young people including UASC. Given the maximum numbers expected above, it is anticipated that a new framework in place with Independent Foster Care Agencies, together with supported housing options will enable placements to be made without having an adverse impact on LA foster carer capacity.

4. Options considered and recommended proposal

- 4.1 **Option 1: Not to enter into the proposed voluntary arrangement**
The Council would still have statutory responsibilities for UASC who present within the borough. If a Local Authority refuses to engage in the voluntary arrangements, then the Secretary of State has been awarded new powers under the Immigration Act 2016, which will allow for the dispersal of UASC to be imposed on local authorities. Given the Secretary of State powers to direct the local authority, resistance to the national scheme is not recommended
- 4.2 **Option 2: Rotherham receives UASC outside of the regional model**
Rotherham would need to plan for 39 additional children in care who

have multiple needs different to that of existing children in care. This would put further pressure on the child protection system, and present risks of a lack of coordination with regional local authorities, and duplication of resources. Therefore, this is not the preferred option.

4.3 Option 3: Rotherham participates in a regional model for UASC

The anticipated 726 UASC would be received, assessed and placed as a region, in three regional centres (expected to be in the larger cities) thus maximising collective resources, ensuring coordination and reducing duplication between local authorities. The 'Parental Responsibility' (PR) status for each child will be allocated using a fair and equitable process agreed by all parties. The region has a well-established track record in collaborative working supported by the 'Sector Led Improvement Programme' and this approach would extend this to health partners. The approach would be led by the regional Association of Directors of Children's Services. This is the recommended option.

5. Consultation

- 5.1 The proposed model has been developed by the regional safeguarding Assistant Directors group of the Association of Directors of Children's Services (ADCS).
- 5.2 Officers from local authorities across Yorkshire and the Humber along with colleagues from Migration Yorkshire met with the Home Office and the Department for Education to discuss the proposed model on 31st August 2016, with support received for the proposed model.

6. Timetable and Accountability for Implementing Decision

- 6.1 A working group will be developed to establish the model for a pilot group of children; this will include the decision on where to place the Welcome Centres. It is likely that the larger cities in the region would be the most appropriate places.

7. Financial and Procurement Implications

- 7.1 The Home Office provides financial support to local authorities taking on responsibility for the care of UASC through a national transfer scheme (see table 1).

Table 1: National transfer rates for 2016

Age Profile	Rates for LAs accepting Kent's UASC: 1 st April – 30 th June 2016	National Rates: 1 st April – 30 th June 2016	New National Transfer rates: 1 st July – 31 st March 2017
Under 16	£114 (daily)	£95 (daily)	£114 (daily)
16 – 17	£91 (daily)	£71 (daily)	£91 (daily)
Leaving Care	£200 (weekly)	£150 (weekly)	£200 (weekly)

7.2 The scheme has been funded on a per place basis but the costs are a contribution only towards the costs of a placement and do not cover the real costs to all agencies for caring for these children.

7.3 There is not currently a fully-costed model for a regional approach, and as such this report seeks approval for the principles of a regional model, with funding to be negotiated with the Home Office and other government agencies. Costing assumptions will need to be based on the profile and need of the children and young people requiring settlement. Therefore any costing assumptions can only be developed once Migration Yorkshire better understand the cohort.

8. Legal Implications

8.1 The actions recommended in this report would support compliance with the Immigration Act 2016. Each local authority has a statutory obligation to take PR towards UASC, depending on where the child first presents. However, Section 69 of the 2016 Act facilitates the voluntary transfer of responsibility for caring for UASC where one local authority agrees to comply with another authority's request for that transfer. However, if the request is refused then the Secretary of State can require the refusing authority to provide written reasons for the refusal. Ultimately if the Secretary determines that the voluntary scheme does not provide the desired outcomes, then s/he may seek to use what are known as reserve powers under the 2016 Act. Those powers create a mechanism for the Secretary of State to prepare a scheme which directs local authorities to cooperate in the transfer of UASC from one authority to another. The Secretary of State also has the power to direct local authorities to provide information about the support and accommodation provided to children in their care, in order to inform arrangements for the transfer of UASC children from local authority to another. Clearly the Council would not wish to be subjected to the Secretary of State's reserve powers.

9. Human Resources Implications

9.1 There appears to be no obvious HR implications, however, if there are implications resulting from extra staffing being required or in the event of a sub-regional welcome centre being set up, a potential TUPE transfer of staff, this will be supported appropriately.

10. Implications for Children and Young People and Vulnerable Adults

10.1 In line with statutory guidance and RMBC's ambition to become a 'Child Centred Borough' unaccompanied asylum seeking children are children who are entitled to the same high quality provision as that which is afforded to all children within the borough, particularly those who are in need of protection and care. Rotherham Council continue to strive towards becoming an outstanding authority, which takes its responsibilities to those most vulnerable of children as a priority. A voluntary acceptance of the government proposals would go some way in affirming RMBC's ambitions. In agreeing to be part of a regional response, the council continues to place the best interests of all children as being the guiding principle of practice within a national framework, that ensures an equitable, regionally managed allocation of responsibilities.

11. Equalities and Human Rights Implications

11.1 UASC are recognised as having protected characteristics, under the Equality Act 2010.

12. Implications for Partners and Other Directorates

12.1 Health partners have been engaged in this process.

13. Risks and Mitigation

13.1 As detailed in the report key issues.

14. Accountable Officer(s)

Mel Meggs, Deputy Strategic Director

Approvals Obtained from:

Director of Finance:- Mark Chambers

Director of Legal Services:- Neil Concannon

Head of Human Resources :- Theresa Caswell

This report is published on the Council's website or can be found at:-
<http://moderngov.rotherham.gov.uk/ieDocHome.aspx?Categories=>

Improving Lives Select Commission – 2 November 2016**Title: Improving Lives Select Commission work programme****Is this a Key Decision and has it been included on the Forward Plan?**

No

Strategic Director Approving Submission of the Report

Democratic Services Manager

Report Author(s)

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Ward(s) Affected

All

Summary

This paper provides Members with an updated work programme. Members are also asked to consider the relevant sections from the Forward Plan of Key Decisions to determine if there are items they wish to refer to OSMB for consideration at their Pre-Decision Scrutiny meetings or schedule at a future meeting of Improving Lives Select Commission.

Recommendations:

1. That consideration be given to the prioritised items within the Improving Lives Select Commission's work programme 2016/17;
2. That consideration be given to the relevant sections of the Forward Plan of Key Decisions (http://www.rotherham.gov.uk/downloads/download/248/forward_plan_of_key_decisions) to determine if there are items Members wish to refer to OSMB or schedule at a future meeting of Improving Lives Select Commission;

List of Appendices Included

Appendix 1 – Improving Lives Work Programme 2016/17

Background Papers

Nil

Consideration by any other Council Committee, Scrutiny or Advisory Panel

N/A

Council Approval Required

No

Exempt from the Press and Public

No

Appendix 1

Meeting date	Agenda Item
September 21, 2016 - COMPLETED -	Local Children's Safeguarding Board Annual Report Scrutiny of the Annual Report Domestic Abuse: New Ofsted framework and 'health-check' of current services
November 2, 2016	CSE (post-abuse support) Focus on recovery. How do we know if services are making a positive difference to CSE survivors? National Transfer Scheme for Unaccompanied Asylum Seeking Children report from Cabinet October 10 and update
December 14, 2016	Domestic Abuse – follow up from presentation on Sept 21 Safeguarding Adults Annual Report 2015/16 Scrutiny of the Annual Report CYPS Performance Monitoring –
February 1, 2017	Early Help Impact of early help offer – 12 months on Corporate safeguarding policy - update
March 22, 2017	SEND Following the Children and Families Act 2014, how has provision changed for children with special educational needs and disabilities?