

**IMPROVING LIVES SELECT COMMISSION**  
**16th April, 2019**

Present:- Councillor Cusworth (in the Chair); Councillors Beaumont, Brookes, Clark, Elliot, Ireland, Jarvis, Khan, Marriott, Price, Senior and Short.

Councillor Watson, Deputy Leader, was in attendance at the invitation of the Chair.

The webcast of the Council Meeting can be viewed at:-

<https://rotherham.public-i.tv/core/portal/home>

**64. DECLARATIONS OF INTEREST**

Councillor Clark declared a Personal Interest (Member of the Pause Rotherham Board).

**65. QUESTIONS FROM MEMBERS OF THE PUBLIC AND THE PRESS**

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

**66. COMMUNICATIONS**

**Health Select Commission**

Councillor Jarvis reported that the following items had been discussed at the recent meeting of the Health Select Commission:-

- Intermediate Care and Re-ablement Project
- My Front Door
- Implementation of the Health and Wellbeing Strategy 2018-25
- Outcomes from Joint Scrutiny Workshop – Transition from Children’s to Adults Services

All the above items were linked to the changes in provision for adults with learning difficulties and the transition in that area.

**Corporate Parenting Panel Sub-Group**

The Chair reported that the above Sub-Group had commenced a review of the Local Authority Designated Officer (LADO) process. Feedback would be provided to the next meeting of the Corporate Parenting Panel.

**67. MINUTES OF THE PREVIOUS MEETING HELD ON 5TH MARCH 2019**

Consideration was given to the minutes of the previous meeting of the Improving Lives Select Commission held on 5<sup>th</sup> March, 2019.

It was noted that it should read “Aileen Chambers” and not “Eileen Chambers” at Minute No. 59 (Progress towards Implementation of Phase Two and Phase Three of the Early Help Strategy 2016-2019).

It was noted in relation to Minute No. 58 (Barnardo's Reachout Service Update and Barnardo's Reachout Final Evaluation Report) the following text be included:

"Clarification was sought if historic victims or 'experts by experience' were involved in training or awareness raising with professionals, or to inform the needs analysis or evaluation. It was confirmed that this was not the case."

Resolved:- That the minutes of the previous meeting of the Improving Lives Select Commission held on 5<sup>th</sup> March, 2019 be approved subject to the above clerical corrections.

**68. SPECIAL EDUCATIONAL NEEDS AND DISABILITY (SEND), SUFFICIENCY AND INCREASE IN EDUCATIONAL PROVISION - PHASE 2**

Consideration was given to the report presented by Jenny Lingrell, Joint Assistant Director of Commissioning, Performance and Inclusion, which was submitted to Improving Lives Select Commission for pre-decision scrutiny prior to consideration by Cabinet at its meeting in May, 2019.

The reports set out the proposed second phase of the Council's plans to increase and develop special educational needs provision in Rotherham and outlined the available capital budget allocated by Central Government to enable these developments to be implemented.

The report, therefore, recommended that the Council consult with providers in relation to new provision to meet the needs identified within the sufficiency strategy with allocation of the capital funds to develop this provision.

Mary Jarrett, Head of Inclusion, gave the following powerpoint presentation on SEND Sufficiency:-

**High Needs Budget**

- £36.5m budget - £5.31m pressure
- Out of Authority provision (£4.4m pressure)

**Forecast – EHCP Growth**

- The number of children and young people (CYP) on EHCP was currently 2,095 (as at 11<sup>th</sup> February 2019)
- Forecasting over the next 10 year period would see a potential increase of over 700 EHCPs in the next 2 years
- Forecast projection for the next 4-5 years would see a potential rise of over 1,000 additional CYP on EHCPs
- Long term, 8-9 years ahead, the number of CYP on EHCPs could potentially double in numbers to over 4,000
- Over the 10 year forecast this was an increase of 105%

**Forecast – Population Growth Age/Key Stage Groups**

- Children and young people aged 8-11 years old (covering Key Stage 2 phase) and CYP who were of Post 16+ age were the most affected cohort now and would continue to be the most affected young people that required support
- Aged 5-7 years (Key Stage 1) cohort indicated an increase from 233 to 452 CYP with an EHCP over a 10 year period seeing an increase in need of 93%
- Aged 8-11 years (KS2) cohort indicates an increase from 523 to 984 CYP with an EHCP over a 10 year period seeing an increase in need of 88%
- Aged 17-26 years (Post 16) cohort indicate an increase from 535 to 1,679 CYP with an EHCP over a 10 year period seeing an increase in need of 213%

**Forecast - Primary Need Growth**

- Visual Impairment
- Speech, Language, Communication Difficulty
- Specific Learning Difficulty
- Social, Emotional and Mental Health
- Severe learning Difficulty
- Profound and Multi learning Difficulty
- Physical Disability
- Other Difficulty/Disability
- Multi-Sensory Impairment
- Moderate Learning Difficulty
- Medical
- Hearing Impairment
- Autism Spectrum Disorder

**Primary needs**

- Autism Spectrum Disorder – 651 CYP – 32% of 2019 cohort
- Moderate Learning Difficulty – 447 CYP – 22% of 2019 cohort
- Social, Emotional and Mental Health – 373 CYP – 18% of 2019 cohort
- Analysis on forecasting projections of Primary Needs shows that within the next 10 years the number of CYP with a Primary need of ASD, MLD, SEMH increase as follows:-
  - MLD cohort indicates an increase from 447 to 999 CYP with an EHCP over a 10 year period seeing an increase in primary need of 123%
  - ASD cohort indicates an increase from 651 to 1,399 CYP with an EHCP over a 10 year period seeing an increase in primary need of 114%
  - SEMH cohort indicates an increase from 373 to 789 CYP with an EHCP over a 10 year period seeing an increase in primary need of 111%
  - These needs are our largest Primary needs now and projected for the future

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- Further analysis indicates that for children with MLD the potential increase in need will be most significant at age 8-11 years KS2 and Post 16
- For children with ASD the potential increase in need would be most significant at KS1, KS2 and Post 16
- For children with SEMH the potential increase in need will be most significant at KS2 and Post 16

### Forecast for School/College Provision

- ‘Rotherham Special Schools’ and ‘Post 16+ places in Higher/Further Education’ were the most affected provisions with the highest number of children attending these school types
- Growth in demand for School/FE places for children with EHCPs was projected as follows:-
  - Post 16 provision – currently 392 to 1,262 CYP with an EHCP over a 10 year period an increase in demand by 879 (221%)
  - Special School provision – currently 678 to 1,069 CYP with an EHCP over a 10 year period an increase in demand by 391 (57%)
  - Rotherham School/Academy – currently 583 to 992 CYP with an EHCP over a 10 year period an increase in demand by 409 (70%)

### Forecast for School/College provision Out of Authority Area

- Out of Authority – Post 16+ and Special School types were the Authority’s largest provision that CYP with an EHCP attended outside of Rotherham
- The forecasted projection continued for the future

### Phase 2

Projects	Project, estimated cost and funding stream
Wales High School (2019/20 financial year)	10 secondary ASC places £166k – DfE Grant (Year 2) £34k – Approved Capital Programme – Invest to Save
Aspire (site TBC) (2019/20 financial year)	15 High Level SEMH therapeutic places (primary and secondary) £75k – approved Capital Programme – Invest to Save
Milton School (2020/21 financial year)	10 Complex Needs Primary/Secondary places £166k DfE Grant (Year 3) £34k – approved Capital Programme – Invest to Save
Waverley Junior Academy (2021/21 financial year)	10 primary ASC places £tbc – funded from Section 106 of the Town and Country Planning Act developer contributions

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### Phase 3

SEND/SEMH Phase 2 report to be submitted to Cabinet May 2019 seeking approval to consult	£0.9m Basic Need Funding (allocated early to local authority from DfE for 2019/20 and 2020/21 allocations) £116k from DfE initial announcement of additional £50m SEND funding £223k from DfE additional announcement of additional £100m SEND funding £100k Remainder from previous unspent money for partnerships
	Total = £1.348m

### A 5 Year Plan

- Sufficiency for children with complex needs within Special Schools – Phase 1 of project (2018/29)
- Children who were within the mainstream ability range but who had an EHCP and need higher levels of support were integrated within mainstream learning settings able to differentiate for specific subjects and there was a developed offer of a range of Inclusion units – Phase 2/3 of project (2018/20)
- Specific outreach teams with specialisms in Autism and SEMH at both primary and secondary level were developed to support schools and develop the graduated response – Phase 4 of project (2019/21)
- A range of high quality post-16 options with increased capacity for supported internships and work placements – Phase 5 of project (2019/21)

### Increase use of Inclusion Units: 50 Places

- 2 x 10 pupil Primary School Inclusion Units one of which to be Autism specialism and one to be SEMH
- 2 x 15 pupil Secondary School Inclusion Units one of which to be SEMH and one of which to be combined MLD
- Develop new ASD secondary provision at Wales at existing Swinton provision

### Criteria for Business Case

#### Evidence of

- Reduction in Permanent Exclusions across Trust/Academy
- Inclusive Practice
- MAT/Academy investment in Project
- Clear business plan and project lead
- Deliverable outcomes from September 2019
- Borough-wide approach (consideration of feeder schools and geography)
- Developing good practice and expertise in SEN
- Multi-agency working and development of partnership approaches
- Proven track record of delivering at least good or outstanding education
- Financial stability

Timescales

- Expressions of Interest and Business Cases to Mary Jarrett by 31<sup>st</sup> May 2019
- Shorting Panel and follow-up completed by 30<sup>th</sup> June 2019
- Cabinet report requesting permission to consult in relation to successful projects timetables for May 2019
- New provision to Cabinet for approvals August 2019
- Units have staggered start from September 2020

Discussion ensued with the following issues raised/clarified:-

- Phase 2 was a one year plan to lead to a further year's delivery
- SEND Sufficiency was not just about school places but all the services that wrapped around children with disabilities were in place
- Rotherham had seen the highest and steepest growth of children with an EHCP in the country. The Authority had an escalating level of need and was adapting to the new code of practice. Under this code EHCPs applied up to the age of 25 compared with the previous Statement of Special Educational Needs which applied while a child was of statutory school age
- There was huge growth in children with Autistic Spectrum Disorder, multiple learning difficulties and SEMH difficulties nationally however, there was a higher prevalence of Autism in Rotherham together with higher levels of deprivation. The work that had taken place on developing the All Age Autism Strategy would hopefully provide some understanding as to the reasons why Rotherham had such a high prevalence of Autism
- Additional Special School places were required for those children who had the ability to learn at mainstream level but needed additional support
- Within the 5 Year Plan Outreach Teams would be developed who would have specialisms to work with children who had complex needs and vulnerable
- A potential behaviour pathway would align services to intervene much earlier with families. There were concerns that needs were not met early enough with the present system and escalated to the point where parents were keen for their children to have a diagnosis; their perception was that if they had a diagnosis it would unlock additional resources. It was recognised for some children and families a diagnosis was helpful as it could help young people understand why they felt different from others

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- An analysis/benchmarking exercise had not been done recently. If one was to be undertaken, it would need to be done across the whole system e.g. health
- The report had been presented to the Rotherham Education Strategic Partnership. Rotherham schools wanted assistance to support this cohort of children and young people, particularly those that did not fit/meet the threshold for specialist provision
- The Schools Forum had also considered the report and had been equally supportive
- The focus of the presentation on the SEND Sufficiency was the allocation of Capital funding to create additional resources to meet the needs of children with special educational needs and disabilities but at the same time the Service would like to consult with schools on their ideas for wider provision i.e. those children that did not have an EHCP or even have SEN support identified but where there might be a risk that they may not be fully engaged with the mainstream curriculum and possibly at risk of exclusion
- It had been taken into consideration that not all disabilities experienced in childhood carry on into adulthood but there were also children living longer with complex needs. Part of the issue was around transition from childhood to adulthood
- Rotherham was a net importer of children into its Special Schools by a marginal number. Rotherham had LAC from other authorities placed within the Borough or its periphery as well as Rotherham children accessing education placements in other local authorities particularly around SEMH
- The Government required local authorities to place children and young people in a category relating to their primary needs to count them however, it was recognised that often the child or young person may have multiple needs which may not be reflected in the data
- The financial and procurement implications had been completed by the Head of Finance in Children and Young People's Services, therefore, confidence that the figures were robust
- It was difficult to know how realistic the case for prudential borrowing might be until the specific business case had been developed. It would be an Invest to Save model
- If Capital funding was released as described it would create a delay as to when the places were available for the children and young people; it may be in the Authority's interests to speed up that process by having a short term Invest to Save plan if it meant that the children

could remain within the Borough. There was a risk that if children went out of the Borough and were settled in their placement, it may not be appropriate to end the placement

- It was the intention to share the information presented to the Select Commission with Schools and Academies and seek their views on the proposals outlined
- As a matter of urgency there was a need to increase the specialist provision hence the drive to develop the inclusion places. The initial Capital investment was still to be realised. Also, whilst that was taking place, the development of services to intervene much earlier was required to avoid the escalation in the projected data
- Rotherham had a relatively high number of special schools that were extremely good. In the first instance expansion of the existing provision would be considered rather than building new schools
- It was noted that an out of date Equality Impact Assessment template had been used and some of the protected characteristics were listed incorrectly.
- Further clarification was sought about the options put forward in the proposals as it was felt that Option 1 to retain SEND sufficiency at current levels was not realistic or sustainable. It was outlined that the only other option available was to build more special schools and special school places. The Local Authority had taken the view that the solution was to create resilience and good practice within mainstream academies rather than building further special schools. Special schools were very important for children with complex needs but the majority of disabled children that attended special school provision would go on to live in mainstream society. Provision needed improving for this group
- Option 1, as described in the report, was not a realistic option. A 3 year plan had to be submitted to the DfE on how the Authority was going to recover its position on the High Needs Budget. It was obliged to show the activity and the actions that were being taken to reduce that budgetary pressure and overspend; to do nothing would not allow the Authority to submit that plan in any realistic way because without additional in-Borough provision, whether mainstream or special, it would not be in position to meet the needs of the children and continue to rely on out of authority provision which cost much more money

Resolved:- (1) the report and recommendations to Cabinet as set out in the report and supports the recommendations to Cabinet as set out in the report submitted.



(2) That consideration is given as to why Option 1 to retain SEND sufficiency at current levels has been included as a viable option.

(3) That discussions take place with regard to possible work with partners to look at the high prevalence within Rotherham of Autism.

**69. ROTHERHAM PAUSE PRACTICE - UPDATE**

Jenny Lingrell, Joint Assistant Director of Commissioning, Performance and Inclusion, and Lindsey Knight, Pause Practice Lead, presented an update on Rotherham Pause Practice which had become operational in July 2018. This report followed on from a previous scoping report submitted to Improving Lives Select Commission in October 2017, which prompted the decision to proceed with the project.

The Pause model kept the women at the centre and enabled them to address a number of complex and intersecting needs. As of March 2019, the team were working with a cohort of 24 women and of these 16 were fully engaged with the Pause Practice had which meant that the women agreed to use an effective form of long-term reversible contraception, which gave the gave them the chance to pause and take control over their lives with the aim of preventing repeated pregnancy. The 24 women in the cohort had had 78 children removed between them, an average of 3.3 children removed per woman.

Pause Rotherham had been extremely effective at identifying and engaging women on the programme achieving 87% appointment attendance last quarter. The women identified what areas they would like to focus on with the highest priority being relationship with children. It had been successful in supporting women to engage in the court process and complete Life Story work

During the last quarter Pause Rotherham had:-

- supported 8 women with their housing needs including supporting 3 to access new properties and working in partnership with Housing colleagues to avoid an eviction
- supported 3 women to access a GP surgery, one to go to hospital for an operation, 4 to access Mental Health Services and 3 to access support from the Sexual Health Clinic

The Pause Rotherham Board had been established and included a broad multi-agency representation including a Councillor. It had also undertaken joint work with the National Team including the Practice Lead being elected to sit on the Pause National Practice Board to help shape and drive forward practice nationally.

However, whilst the evidence suggested that Pause Rotherham was implementing the model successfully and partners were supportive, it was necessary to start work to explore if Rotherham wanted to sustain the

practice and how it would be funded. The final figures in April 2018 showed 270 women who were eligible for Pause equating to 720 children who had been removed.

A Pause Success Event was to be held in July 2019 to celebrate the first year of the practice. It was hoped by that time further plans would be in place to address the sustainability of the project including the Practice Lead submitting a sustainability report and meeting with all agencies involved to look at the overall cost benefit analysis. Work was taking place with the South Yorkshire Police looking at cost savings related to crime and domestic abuse within the cohort.

Over the course of the next 6 months the women would continue to work on their goals and benefit from the 1:1 sessions with their practitioner. The women would move into the transition work in October 2019 where they would be supported with their plans moving forward once having completed the 18 month programme.

Discussion ensued with the following issues raised/clarified:-

- The national Pause Team was helping Rotherham to build a profile of the money the project was saving other service areas. The challenge encountered in Rotherham was not unique. It was quite easy to attribute costs to Children's Service where there was the cost avoidance of removing children that might be born in the future but also the cost avoidance for other services i.e. missed appointments, responding to anti-social behaviour and crime, eviction. The work of Pause supported all those areas of work. The aim was to build the evidence base and the awareness thereof to potentially create a sustainable funding model that was not reliant on the funding stream from one Directorate
- Although predominantly a service for women, it recognised that there were a number of women who, although may not be in healthy relationships, wanted to remain in them. Part of the work included their male partners to support them to understand healthy relationships
- The National Pause Team was currently looking at what a Pause offer could look like to men as it was recognised that they too had experienced loss when children were removed
- Pause nationally was continuing to undertake work on its longitudinal studies and the success rate of the interventions. Pause practices were now being expanded throughout the country, moving into Scotland and Northern Ireland. Research had been undertaken by Lancaster University previously which had looked at the impact of the recurrent care proceedings on women.

It was asked if more current research was underway on the success of the Pause intervention to inform the evaluation prior to a decision being taken to allocated more funding. This would be raised with the Chief Executive of Pause National who sat on Rotherham's Strategic Board

- There were a small number of women who were currently working with Pause who had much more chaotic lifestyles with substance misuse, unstable housing needs, difficulties with partners, mental health issues etc.. Part of the model was intensive and consistent outreach work adapting to different needs.
  
- Following on from the scoping exercise where 270 women had been identified, prioritised using a model based on the research conducted at Lancaster University. The research highlighted particular categories that identified women who were at higher risk of having babies e.g. age of the woman when she had her first child, succession/age of the children, whether the children had been adopted, whether the women was a victim of CSE, whether she was a care leaver as well as her age in terms of child bearing years. All 270 had been considered using that criteria to identify those thought to be the highest risk women of recurrent pregnancies. The project was working with 13 out of the top 20 who were classed as the highest risk. There were still a number of women that were eligible for Pause. The Team Co-ordinator was taking referrals on a regular basis from Social Workers or other agencies who were identifying more women. The Pause model specified it worked with only 24 women to ensure that the intervention was deliverable
  
- The remaining 246 women not supported by Pause would be supported by existing services such as Drug and Alcohol Services, Mental Health, Rotherham Hospital and the Community and Voluntary Sector
  
- The project worked closely with the Sexual Health Service in an attempt to strengthen pathways for the women to access those appointments, who may otherwise struggle to manage these commitments
  
- Pause worked very closely with Housing colleagues who were very supportive of the work of the project and were a member of the Strategic Board. Consideration would be given to the possible progression of women within the project to Housing First when work had stopped with the current cohort. There was a Housing representative on the Strategic Board
  
- Now the first cohort of Pause women were established to prove the efficacy of the project, it was now the focus of the Strategy Group to build a sustainable model and meet with colleagues across the

partnership and see where the project had helped reduce demand on other parts of the Service and not just CYPS

- The Pause National Team database was used to record all the activity that took place which enabled a quarterly report to be submitted. This also enabled benchmarking against other areas
- Approximately 15 women had not wanted to take up the Pause offer. Their refusal had been respected as it was a voluntary service

The Select Commission wished the message to be conveyed to “Bluebell” that she was an inspiration after Members had heard her case study.

Resolved:- (1) That the progress of the Rotherham Pause Practice and the impact on the women on the caseload be noted.

(2) That a further update be submitted on partner contributions.

(3) That further details be submitted regarding the longitudinal impact of the Pause project.

(4) That exploration take place of whether the women who had completed the Pause project could progress to the support of Housing First.

**70. UPDATE ON THE OUTCOME OF THE HMI OFSTED FOCUSED VISIT: 21ST-22ND MARCH 2019**

Ailsa Barr, Acting Assistant Director Safeguarding, gave the following powerpoint presentation on the recent Ofsted Focussed Visit (21<sup>st</sup>-22<sup>nd</sup> March, 2019), and the outcome thereof:-

What’s Working Well

Improved practice in respect of children coming into care:-

- Most recent S20 Audit (February 2019) evidenced appropriate use or a clear rationale for Section 20 placements and thus minimal drift
- Of the 33 children subject of Section 20, 6 were Unaccompanied Asylum Seeker Children, 10 by virtue of receiving short breaks, 6 were 17+, 8 in PLO/legal process and 3 with a plan for reunification
- All admissions presented to Public Law Outline Panel including emergency admissions so that:
  - Opportunities for reunification fully explored
  - All family options exhausted and viability assessments appropriate front loaded
  - Adoption planning including (early permanence) considered at earliest opportunity

### Improving Placement Stability

- Long term placement stability tracker
  - Process managed within Performance Clinics
  - 21 long term matches achieved in 2018/19
  - 13 more with Panel date already booked (7 x IFAs)
- Better use of Special Guardianship Orders/Child Arrangements Orders
  - Early use of Interim Supervision order/CAO at initial hearings
  - 28 Looked After Children stepped down to SGO/CAO in 2018/19
  - 83 children made subject of SGO/CAO not previously Looked After over same period
  - 273 SGO/CAO placements financially supported by CYPS
  - Post-SGO Support Worker to encourage greater sign up by carers
  - Letterbox co-ordinator

### A 'Good' Adoption Service

- 32 adoptions successfully completed – 22 of these children in the 'Hard to Place' categories
- Time limited searches by exception only and in accordance with identified needs of the child
- RMBC acknowledged as regional Early Permanence leads – 6 EP placements in 2018/19 with 7 more in process
- Only 1 disrupted adoption
- 35 more children already in adoptive placements, 25 of whom were in 'Hard to Place' categories
- Post-adoption support
  - Rotherham Therapeutic Team
  - Adoption Support Fund – 136 applications
- A collective commitment to ensure the Regional Adoption Agency does not impact on performance and adoption outcomes for our children

### Innovative Practice

- Intensive Intervention Programme using predictive analytics to identify and support the most vulnerable towards increased placement stability
- Right Child Right Care – providing targeted and performance managed interventions to support more Looked After Children to permanent arrangements
- Edge of Care Service – significant investment in a range of Edge of Care Services (PAUSE, MST, FGC, Edge of Care Team) to support children to remain living with birth/extended families and to support Looked After Children to return home
- Life-Long Links (2<sup>nd</sup> wave) to re-establish long term social and family connections using Family Group Conferencing model and social mapping processes to improve placement stability
- The House Project – contributing to the 'coming Home' objectives in supporting 16 and 17 year olds to move for Out of Authority placements and towards semi-independent living

Areas for Further Development

- Although the quality of Life-Story had significantly improved, it could be produced too late and was not yet widely available beyond children in the adoption pathway
- Insufficiency of in-house foster carers could impact on matching practices and placement stability
- Foster carer retention had been an issue
- A small number of pre-birth assessments had been concluded too close to the end of the pregnancy to allow for a full 12 week consideration within the PLO process
- Quality of some Care Plans and Support Plans could dissuade the Court from endorsing early permanence

What We Are Doing About It

- Continued Right Child Right Care implementation until we are confident it had become embedded practice
- Improved foster care recruitment  
Revised Marketing and Placement Sufficiency Strategy  
Foster Carer Diversity Scheme  
Mockingbird  
Challenge 63  
Fostering Network retention project
- Task and Finish Group had produced a Pre-birth Planning Process and Tracker with milestones measured in Performance Clinics
- Production of life-story work to become a performance measure
- Improve the quality of Care Plans via the continued drive for 'Outstanding' Social Work practice

Feedback – What's Going Well

- Significant improvement in Permanence Planning for Looked After Children
- A real focus on securing the long-term future for Looked After Children with some very creative interventions that were well-adapted to the needs of individual children
- Progress was very evident and effective strategic management had built on existing strengths and improved management oversight
- Right Child Right Care was progressing to becoming standard practice
- The Service was reflective and adaptive having embraced the learning identified in previous Peer Reviews
- There was strong evidence of front-loading assessments and twin track planning

Feedback – Areas for Improvement

- Social Workers were able to well articulate the plans for their children but they were less well reflected in case files in a consistent way
- The unique identity of our children was not always captured in assessments especially in regard to ethnic identity and some of our

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risk assessments were not sufficiently robust to inform placement decisions and permanence plans

- Sufficiency was an issue in terms of both demand and the complexity of our young people leading to a small but significant number of unregulated placements

The Strategic Director and Leadership Team were proud of the Service for the progress it had made and the drive for improvement.

The letter received from Ofsted on the outcome of their visit set out very clearly the positive strides the Service had made and set out some of the issues/recommendations identified correlated with those already identified by the Service itself and would form an improvement plan.

Discussion ensued with the following issues raised/clarified:-

- It was noted that children who were Looked After had to be placed in an Ofsted registered provision i.e. a foster care placement which had been approved under national standards; placed with their parents if an appropriate assessment had been undertaken or placed in a registered children's home. If a child was placed anywhere else it was an "unregulated placement". An explanation was given outlining under what circumstances "unregulated placements" occurred and the steps taken to address this
- The Authority could care for a child in that arrangement for up to 20 days.
- Ofsted had looked at a small number of case files related to "unregulated placements" and had felt that the plan for the child was appropriate but was concerned that the written risk assessment contained within the case file was not clear enough about the risks being considered and why, therefore, the actions outlined had been taken. The Service needed to ensure that consistent managerial oversight was in place, to make sure that risk assessments were up to date, and Social Workers used these to record the rationale for their actions/ decisions clearly consistently in the case records
- Any proformas used needed to be useful for practitioners and work would take place with workers to develop them. The operational model work around Signs of Safety was enabling Social Workers to succinctly record what they were worried about, what they were going to do and why

Resolved:- (1) That the progress made be noted.

(2) That the Select Commission continue to have oversight of performance of Children and Young People's Services.

**71. OUTCOMES FROM JOINT SCRUTINY WORKSHOP SESSION - TRANSITION FROM CHILDREN'S TO ADULT SERVICES**

Caroline Webb, Senior Adviser (Scrutiny and Member Development), presented the outcomes of a workshop held by members of the Health Select Commission and the Improving Lives Select Commission on 19<sup>th</sup> March, 2019.

The purpose of the workshop was to seek assurance that young people and their families/carers would have a positive transition from Children's to Adult Services, through clear pathways and a strength based approach that sought to maximise independence and inclusion.

Evidence comprised of briefing papers, case studies, a presentation and the refreshed draft Education, Health and Care Plan.

Membership of the sub-group included Councillors Evans (Chair), Cusworth, Elliot, Jarvis, Keenan and Short.

The findings were set out in the report and fell within the following headings:-

- Understanding the cohort – numbers and main presenting needs of the children and young people
- Strategic alignment
- Voice and influence
- Shared approach to assessment and strength-based practice
- Demonstrating outcomes – short and long term

It was noted that the follow-up actions for scrutiny outlined in Section 10 of the report would be considered in the work programme for the new municipal year.

Resolved:- That the report be noted and the following recommendations be forwarded for consideration:-

(1) That the PfA (Preparing for Adulthood) Board develop a range of outcome measures during 2019-20 to supplement output measures such as the number of EHCPs completed in time in order to:

- Understand the impact of the new pathway
- Capture achievement of individual aspirations in EHCPs and in the longer term

(2) That the PfA Board develop measures of satisfaction during 2019-20 for young people and families/carers with regard to the transition/PfA process and new pathways.

(3) That quality assurance processes are in place to monitor the consistency and quality of EHCPs when the new template is introduced.



(4) That Adult Social Care continue to develop its Information, Advice and Guidance offer in 2019-20 for all customer cohorts including young people transitioning from Children and Young People's Services and for people aged 25 who may face a second phase of transition.

(5) That training and workforce development continues to embed taking a strengths-based approach fully with staff across Children and Young People's Services and Adult Care, Housing and Public Health, and with health partners.

(6) That representatives from the PfA Board, including Rotherham Parent Carers Forum, provide Scrutiny with a further progress update during 2019-20.

**72. DATE AND TIME OF FUTURE MEETINGS**

Resolved:- That meetings take place during the 2019/20 Municipal year as follows:-

Tuesday 11<sup>th</sup> June, 2019  
9<sup>th</sup> July  
17<sup>th</sup> September  
29<sup>th</sup> October  
3<sup>rd</sup> December  
7<sup>th</sup> January, 2020  
10<sup>th</sup> March

all commencing at 5.30 p.m.