



Agenda for a meeting of the Children's Services Overview and Scrutiny Committee to be held on Wednesday, 29 November 2023 at 4.30 pm in Committee Room 1 - City Hall, Bradford

Members of the Committee – Councillors

LABOUR	CONSERVATIVE	LIBERAL DEMOCRAT	BRADFORD INDEPENDENT GROUP
Fricker Mohammed Regan Thirkill Zaman	Davies Pollard	Sunderland	Sajawal

Alternates:

LABOUR	CONSERVATIVE	LIBERAL DEMOCRAT	BRADFORD INDEPENDENT GROUP
Alipoor Berry Humphreys I Hussain Walsh	Birch Felstead	Naylor	Elahi

VOTING CO-OPTED MEMBERS:

Church Representative:

Joyce Simpson

Parent Governor Representatives:

Fauzia Raza

Parent Governor Representatives:

Shifa Simab

NON-VOTING CO-OPTED MEMBERS:

Teacher Secondary School Representative:

Tom Bright

Children's Social Care:

Dr Samina Karim

Notes:

- This agenda can be made available in Braille, large print or tape format on request by contacting the Agenda contact shown below.
- The taking of photographs, filming and sound recording of the meeting is allowed except if Councillors vote to exclude the public to discuss confidential matters covered by Schedule 12A of the Local Government Act 1972. Recording activity should be respectful to the conduct of the meeting and behaviour that disrupts the meeting (such as oral commentary) will not be permitted. Anyone attending the meeting who wishes to record or film the meeting's proceedings is advised to liaise with the Agenda Contact who will provide guidance and ensure that any necessary arrangements are in place. Those present who are invited to make spoken contributions to the meeting should be aware that they may be filmed or sound recorded.
- If any further information is required about any item on this agenda, please contact the officer named at the foot of that agenda item.

From:

Asif Ibrahim

Director of Legal and Governance

Agenda Contact: Kav Amrez / Louis Kingdom

Phone: 07929 070288/07890 416570

E-Mail: kanwal.Amrez2@bradford.gov.uk/louis.kingdom@bradford.gov.uk

To:

A. PROCEDURAL ITEMS

1. ALTERNATE MEMBERS (Standing Order 34)

The Director of Legal and Governance will report the names of alternate Members who are attending the meeting in place of appointed Members.

2. DISCLOSURES OF INTEREST

(Members Code of Conduct – Part 4A of the Constitution)

To receive disclosures of interests from members and co-opted members on matters to be considered at the meeting. The disclosure must include the nature of the interest.

An interest must also be disclosed in the meeting when it becomes apparent to the member during the meeting.

Notes:

- (1) *Members must consider their interests, and act according to the following:*

Type of Interest	You must:
<i>Disclosable Pecuniary Interests</i>	<i>Disclose the interest; not participate in the discussion or vote; and leave the meeting <u>unless</u> you have a dispensation.</i>
<i>Other Registrable Interests (Directly Related)</i> OR <i>Non-Registrable Interests (Directly Related)</i>	<i>Disclose the interest; speak on the item <u>only if</u> the public are also allowed to speak but otherwise not participate in the discussion or vote; and leave the meeting <u>unless</u> you have a dispensation.</i>
<i>Other Registrable Interests (Affects)</i> OR <i>Non-Registrable Interests (Affects)</i>	<i>Disclose the interest; remain in the meeting, participate and vote <u>unless</u> the matter affects the financial interest or well-being</i>

(a) to a greater extent than it affects the financial interests of a majority of inhabitants of the affected ward, and

(b) a reasonable member of the public

knowing all the facts would believe that it would affect your view of the wider public interest; in which case speak on the item only if the public are also allowed to speak but otherwise not do not participate in the discussion or vote; and leave the meeting unless you have a dispensation.

- (2) *Disclosable pecuniary interests relate to the Member concerned or their spouse/partner.*
- (3) *Members in arrears of Council Tax by more than two months must not vote in decisions on, or which might affect, budget calculations, and must disclose at the meeting that this restriction applies to them. A failure to comply with these requirements is a criminal offence under section 106 of the Local Government Finance Act 1992.*
- (4) *Officers must disclose interests in accordance with Council Standing Order 44.*

3. MINUTES

Recommended –

That the minutes of the meetings held on 27 September 2023 and 18 October 2023 be signed as a correct record (previously circulated).

(Kav Amrez / Louis Kingdom – 07929 070228 / 07890 416570)

4. INSPECTION OF REPORTS AND BACKGROUND PAPERS

(Access to Information Procedure Rules – Part 3B of the Constitution)

Reports and background papers for agenda items may be inspected by contacting the person shown after each agenda item. Certain reports and background papers may be restricted.

Any request to remove the restriction on a report or background paper should be made to the relevant Strategic Director or Assistant Director whose name is shown on the front page of the report.

If that request is refused, there is a right of appeal to this meeting.

Please contact the officer shown below in advance of the meeting if you wish to appeal.

(Kav Amrez / Louis Kingdom – 07929 070228 / 07890 416570)

5. REFERRALS TO THE OVERVIEW AND SCRUTINY COMMITTEE

Any referrals that have been made to this Committee up to and including the date of publication of this agenda will be reported at the meeting.

B. OVERVIEW AND SCRUTINY ACTIVITIES

6. ANNUAL REPORT FOR CHILDREN LOOKED AFTER AND CARE LEAVERS APRIL 2022 - MARCH 2023 1 - 50

The report of the Director of Nursing and Quality - West Yorkshire Integrated Care Board (Bradford) (**Document “F”**) presents the Annual Report for Children Looked After and Care Leavers April 2022 – March 2023.

The annual report (Appendix 1) has been written by the Designated Doctor for Children Looked after on behalf of the West Yorkshire Integrated Care Board for the period of April 2022 - March 2023.

Recommended –

Members are asked to consider the information provided within the report. Members are welcome to ask a question or raise a comment at the meeting to gain clarity or for assurance.

(Dr Catherine Murray – 01274 237523)

7. UPDATE REPORT AND THE NATIONAL INDEPENDENT CHILD PRACTICE REVIEW REPORT PUBLISHED IN MAY 2022 51 - 62

The report of the Office of the Chief Executive (**Document “G”**) provides an update and builds upon the report presented to the Overview & Scrutiny Committee on 29th June 2022. The report identifies the progress made against the six local recommendations outlined in the National Independent Child Safeguarding Practice Review Panel's review from May 2022. The report highlights not only the advancements made in each area but also instances of improved processes and practices that have emerged during this period of reflection and improvement.

Recommended –

The Committee is requested to acknowledge and note the progress against the recommendations.

(Darren Minton – 01274 434361)

8. **UPDATE ON THE BRADFORD PLACEMENT AND SUFFICIENCY STRATEGY** 63 - 72

The Strategic Director of Children's Services will submit a report (**Document "H"**) which provides an update on the Bradford Placement and Sufficiency Strategy. This update is specifically regarding progress against the red and amber actions in plan presented in March 2023 and particularly regarding fostering and adoption (As per the recommendation and action from Children's Services Overview & Scrutiny Committee Wednesday 15th March 2023 that an update regarding the Placement and Sufficiency Strategy plan be provided and include some detail regarding the in-house Fostering Service and Adoption).

Recommended –

Members are recommended to review and consider this progress update.

(Paul Sutton – 07974 855292)

9. **YOUNG CARERS** 73 - 86

The Strategic Director of Children's Services will submit a report (**Document "I"**) which provides an annual update, specifically focusing on measures of performance, details of outcomes and improvements delivered, as requested.

Recommended –

That this Children's Overview and Scrutiny Committee receive this paper for information, note the progress and support our jointly commissioned service.

(Cath Dew – 01274 437949)

10. **SUPPORTING FAMILIES PROGRAMME 2022 - 2025** 87 - 94

The Strategic Director of Children's Services will submit a report (**Document "J"**) which provides an overview of the progress made on Supporting Families Programme since the last report that was tabled and discussed on 20th November 2022.

Recommended –

Overview and Scrutiny to receive this paper for information, note the progress and support our Supporting Families Programme.

(Cath Dew – 01274 437949)

11. CHILDREN'S SERVICES OVERVIEW AND SCRUTINY COMMITTEE 95 - 106
- WORK PROGRAMME 2023/24

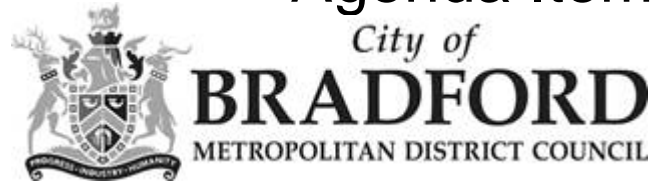
The report of the Chair of the Children's Services Overview and Scrutiny Committee (**Document "K"**) includes the Children's Services Overview and Scrutiny Committee work programme for 2023/24.

Recommended –

- (1) That members consider and comment on the areas of work included in the work programme.**
- (2) That members consider any detailed scrutiny reviews that they may wish to conduct.**

(Mustansir Butt – 01274 432574)

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Report of the Director of Nursing and Quality - West Yorkshire Integrated Care Board (Bradford)– Annual Report for Children Looked After and Care Leavers April 2022 – March 2023.

Bradford Metropolitan District Council Children's Services Overview & Scrutiny - Wednesday 29th November 2023.

F

Subject:

Annual Report for Children Looked After and Care Leavers April 2022 – March 2023.

Summary statement:

The annual report (appendix 1) has been written by the Designated Doctor for Children Looked after on behalf of the West Yorkshire Integrated Care Board for the period of April 2022 - March 2023.

This report provides the third annual report for Children and Looked After (CLA) for the period of April 2022 - March 2023. This report identifies the progress made in relation to the wider determinants of safeguarding children and the support for those Children Looked After. The report highlights the key aims of the Children Looked After and care leavers team and information on initial health assessment and reviews. The report highlights both key successes and ongoing challenges which includes the provision of care, the statutory requirements and capacity limitations in context of the year-on-year increases in the growth of children looked after across the Bradford District.

Philippa Hubbard
Director of Nursing and Quality for
Bradford Health Care Partnership

Portfolio:

[Insert where appropriate]

Report Contact: Dr Catherine Murray
Designated Doctor for Children Looked
after
Phone: 01274 237523
E-mail: Catheirne.Murray@bradford.nhs.uk

Overview & Scrutiny Area:

[Insert where appropriate]

EQUALITY & DIVERSITY:

WY Health Care Partnership ensures that no individual or group is discriminated against based on race, gender disability, religion or belief.

The report contributes to the objectives to ensure that every child receives the highest standard of protection and care regardless to their background or identity and that they all have access to physical health monitoring to enable equal opportunities to services.

1. SUMMARY

The report in Appendix 1 is the third annual report written by the Designated Doctor for Children Looked After (CLA) for the period April 2022 - March 2023. The role of the Designated Doctor and the team within the WY ICB (Bradford) team is a strategic one and is separate from any provider responsibilities for individual children and young people who are Looked After or Care leavers. The explicit independent nature of the Designated team allows for the freedom of advice, influence, and provision of guidance to be shared with service planners and commissioners.

This report highlights the key aims, matters of legislation, the scope of the Children Looked After and Care leavers team and compares the numbers of children looked after per 10,000 with Bradford's statistical neighbours. This report also provides some information about initial health assessments and review health assessments and provides some key areas of focus for 2023/24.

The report highlights some successes in the delivery of a health service to Children Looked After and Care leavers and refers to the challenges of provision of care, in meeting statutory timescales and of capacity limitations within the context of the year-on-year growth of children becoming looked after across the Bradford District.

2. BACKGROUND

Providing support for children in care is a statutory requirement with responsibilities for organisations outlined in '*Promoting the health and well-being of looked-after children*' (2015).

The Annual Report is part of the West Yorkshire Integrated Care Board (ICC) assurance arrangements in relation to Children Looked After and wider Safeguarding Children arrangements in Bradford.

There are many challenges in delivering this service both nationally and also within Bradford. These include:

- Only doctors can undertake an Initial health assessment (IHA), with the nursing team providing the follow up appointments, the review health assessments (RHAs). The medical assessments cannot be delegated to another health practitioner.
- There is a national shortage of paediatricians who also must balance the need of rising waiting lists and increasing demands within the NHS as a whole.
- The IHAs are lengthy health appointments, usually taking an hour or longer per appointment, for children who often have complex health needs.
- A significant challenge for Bradford is that the total number of children coming into care is continuing to rise.
- 'Medical complexity' and life limiting diseases for all children in Bradford is the highest in the country (along with Luton and Hyndburn), and some of these children will be becoming 'children looked after'
- The number of children who were not brought to planned appointments was much improved from last year. This was a total of 60 (11.7% of those offered, last year

116 were missed). However, this does still equate to 60 hours of clinician wasted time, plus 60 further appointments needing to be re-allocated.

- Initial health assessments require consent before a medical slot can be appointed. Delays in obtaining consent therefore causes a delay in the children having their appointment. Missed medical appointments also wastes valuable clinician time. Both are an improving picture with social workers supporting attendance and ongoing work around consent.
- The Bradford council had many temporary and changing staff, at both an operational and strategic level, whilst they committed to establish the Bradford Children and families Trust to stabilise, recover and improve Children's services. This was launched and became into effect on 1st April 2023.

Some of our local Solutions have included:

- IHAs are historically routinely undertaken by community paediatricians. In May 2021, a new clinical model was adopted sharing the responsibility of IHAs with some GPs who gained the skills and expertise to undertake some of these assessments.
- Due to the demands within the NHS, the number of paediatricians and GPs who have been available to deliver the appointments has fluctuated over the year. Unfortunately, both BTHFT and AGH are short of paediatricians who would normally undertake IHAs. BDCFT have both recruited a GP and had a vacancy become available in this reporting year. BDCFT do have a paediatrician who is highly skilled and undertakes many of the more complex initial health assessments on a regular basis.
- The weekly triage meetings are attended by system partners (Designated Doctor for Children Looked After, or Consultant Paediatrician from BDCFT, Named Nurse Children Looked After/Nursing team leaders, and administration support from Children looked after health team and managers from Children's Social Care). The purpose is to allow for timely discussion between health and social care on operational issues. It helps to mitigate the risk of the delayed time in seeing the children by prioritising the need of the children at triage, according to their clinical need and their placement. This also gives an opportunity to try and obtain missing consent.
- A one day Waiting List Initiative, was supported by 2 paediatricians and the children looked after nurses.
- Focus on complex children and pathways to support them as part of the Children and Families Health Board and strategic oversight through the SEND monitoring visits.

3. OTHER CONSIDERATIONS

3. OTHER CONSIDERATIONS

Other achievements for 2023:

- The monthly data set developed by colleagues within BDCFT Bradford is scrutinised to recognise drift and highlights have been reported to the System

Quality Committee. The data set is routinely shared with the Children's Improvement Board and informs the dashboard.

- Commitment from BDCFT to increase nursing hours and develop a business case to retain this level of staffing. The funding for this will need to be sought within the system and will be presented to the system finance committee in early 2024.
- The paperwork for review health assessments has changed and is more robust and user friendly, ensuring that it is also easier for care leavers to obtain information from their medical records in the future.
- Appointment of a dedicated children looked after nurse who undertakes RHAs for children placed out of area in Wakefield, Kirklees and Calderdale.
- The beginning of the development of robust oversight of children awaiting their initial health assessments.
- Dedicated practitioners continue to work with Bevan healthcare supporting unaccompanied asylum-seeking children
- The considerable improvement in children and young people attending their initial health assessments. This was achieved by close partnership working.
- Anecdotally, more social workers attending the initial health assessments, ensuring more effective communication between the partners regarding the children and young people.

The Annual Report was written in the context of the commitment of the system partners to improving health outcomes for Children Looked After and Care Leavers. It was recognised that no single agency could solve the issues within the system and across the partnership there has been a willingness to sustain a consistency in the quality of the service delivered and to ensure that children within the Bradford area receive what they need at the time they need it.

4. FINANCIAL & RESOURCE APPRAISAL

- If there are no financial issues arising this should be stated, but only on advice from the Assistant Director Finance and Procurement.

5. RISK MANAGEMENT AND GOVERNANCE ISSUES

The Annual report has been written by the Designated Doctor for Children Looked After and Care Leavers from WY ICB - Bradford.

The main themes and trends are for the successful and continuous sustainability of the clinical model led by BDCT and supported by paediatricians in Bradford Teaching Hospital Foundation Trust and Airedale NHS Foundation Trust. Also, the significant improvement in numbers of children and young people attending their initial health assessments. This has been achieved by partnership working.

The total number of children awaiting an IHA has risen across the year from 78 in April 2022 to 123 in March 2023. The reason for this is multifactorial: it is influenced by the complexity of the cases, the increasing number of children entering the care system, the national shortage of medical practitioners who can undertake the IHAs, and although significantly

improved the number of children who were not brought to the appointments, as these appointments have to be re-appointed.

The delay in obtaining consent for an initial health assessment to be arranged, continues to be an ongoing problem, with 45 out of the 123 (37%) children and young people awaiting an IHA in March 23 not having consent. A person cannot be booked for an IHA without consent, so even a few days delay can make a difference to the statutory target. It is expected that as a child enters the care system, they should have consent for medical treatment and examination immediately. Each child is discussed at the weekly triage meeting after they have entered care. They are risk rated according to the medical needs and placement of the child or young person, consent is checked and reminders sent by the social care team if it has not been received. From Jan 2023, BDCFT children looked after nursing team ensure that a nurse has robust oversight of the health of each child that enters the care system whether consent is available or not, For those that have consent, they are able to be booked more efficiently into an appointment slot for an initial health assessment, ensuring that as many as possible of the children who have consent are seen within the statutory timeframe. This is reflected in the figures of March 23, where 17 children were seen for their initial health assessment within the recommended 20 working days of entering care.

Strategic oversight of progress is provided by the new Children's and Young Peoples Priority programme and the Bradford District and Cravens Partnership Board via the System Quality Committee. A placed based report for Bradford is also shared with the West Yorkshire Quality Committee and partnership. The Children's Improvement Board (BMDC) will continue to receive regular updates. The Annual report will also be received by the Bradford Children's Safeguarding Partnership and System leadership Group.

6. LEGAL APPRAISAL

- If there are no legal issues arising this should be stated, but only on advice from the City Solicitor.

7. OTHER IMPLICATIONS

The success of the new clinical model has demonstrated the need to continue to drive forward the Children Looked After and Care Leavers health service provision to include work across the health system. The Designated Team for CLA (WY ICB Bradford) will maintain a strategic focus, supporting encouraging, and influencing other areas of the Children Looked After agenda that would improve the practice and service given to children to ensure that the quality of care for this vulnerable group is not compromised.

Slide 39 of the annual report sets out our key priorities for 2023-2024. The report will assist in providing benchmarks to identify areas of need and to assist in the robust management of any actions needed to improve performance and outcomes such as timely and effective initial health assessment.

7.1 SUSTAINABILITY IMPLICATIONS

N/A

7.2.1 TACKLING THE CLIMATE EMERGENCY IMPLICATIONS

N/A

7.3 COMMUNITY SAFETY IMPLICATIONS

N/A

7.4 HUMAN RIGHTS ACT

N/A

7.5 TRADE UNION

N/A

7.6 WARD IMPLICATIONS

N/A

7.7 AREA COMMITTEE LOCALITY PLAN IMPLICATIONS

N/A

7.8 IMPLICATIONS FOR CHILDREN AND YOUNG PEOPLE

N/A

7.9 ISSUES ARISING FROM PRIVACY IMPACT ASSESMENT

N/A

8. NOT FOR PUBLICATION DOCUMENTS

N/A

9. OPTIONS

N/A

10. RECOMMENDATIONS

Members are asked to consider the information provided within the report. Members are welcome to ask a question or raise a comment at the meeting to gain clarity or for assurance.

References:

Department for Education (2015). **Promoting the health and well-being of looked-after children: Statutory guidance for local authorities, clinical commissioning groups and NHS England.** [online] London: HM Government.

https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/413368/Promoting_the_health_and_well-being_of_looked-after_children.pdf

Royal College of Nursing (2020). **Looked after Children: roles and competencies of healthcare staff.** [online] London: RCN. Available from:

<https://www.rcn.org.uk/professional-development/publications/rcn-looked-after-children-roles-and-competencies-of-healthcare-staff-uk-pub-009486>

11. APPENDICES

Appendix 1: Children Looked After and Care Leavers Annual Report. April 2022-March 2023.



Annual Report
22-23 -V2_for OSC.p

Acronyms and Abbreviations Explained

ANHSFT- Airedale NHS Foundation Trust
BDCFT - Bradford District Care Foundations Trust
BTHFT - Bradford Teaching Hospital Foundation Trust
CAMHS - Child and Adolescent Mental Health Services
CLA - Children Looked After
CPP - Corporate Parenting Panel
CYP - Children and Young People
EHCP - Education, Health and Care Plan
IHA – Initial Health Assessments
RHA- Review Health Assessments
SDQ - Strength and Difficulty Questionnaires
SEND – Special Educational Needs and Disabilities
UASC - Unaccompanied Asylum Seeking Children
WYICB - West Yorkshire Integrated Care Board

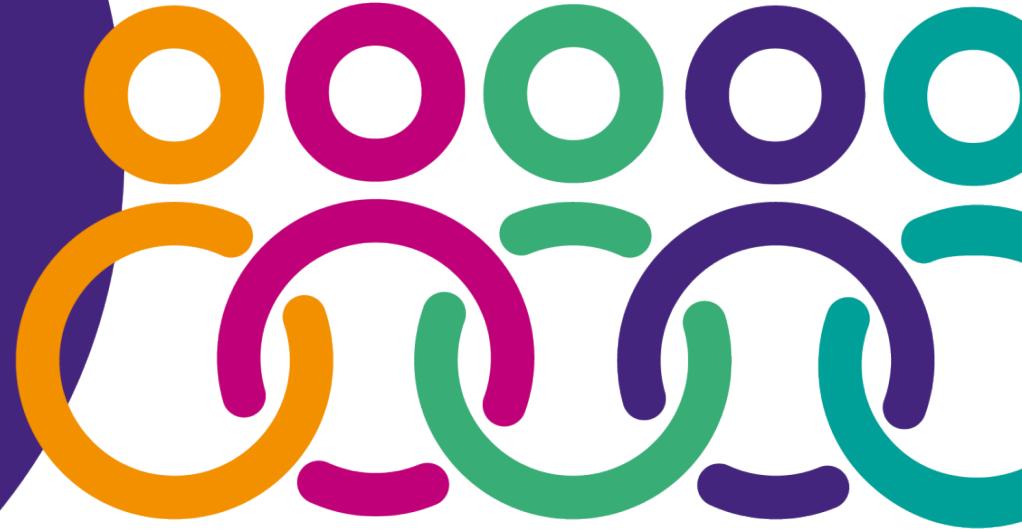
12. BACKGROUND DOCUMENTS

N/A

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Children Looked After and Care Leavers Annual Report

April 2022-March 2023



Phillipa Hubbard, Director of Nursing and Quality for Bradford Health Care Partnership

Dr Catherine Murray, Designated Doctor Children In Care

Jude MacDonald, Designated Nurse Safeguarding Children

The Context of the Report

- The 3rd annual Children Looked After (CLA) and Care Leavers Annual Report provided by West Yorkshire Integrated Care Board (WYICB) - the successor organisation to Bradford District and Craven Clinical Commissioning Group.
- Written in response to the statutory guidance *'Promoting the health and well-being of looked-after children'* (2015).
- The purpose of the Annual Report is to form part of WY ICB assurance arrangements, in relation to Children Looked After and wider Safeguarding Children arrangements.
- Covers period from 1st April 2022 to 31st March 2023
- Has been developed through regular engagement with key partners and stakeholders in the Bradford District and Craven Health and Care Partnership.



Key Aims

- To provide the WY ICB and the Bradford District and Craven Health and Care Partnership with an overview of the work undertaken by the Children Looked-After (CLA) Health Team in the last year.
- To share report with the new Bradford District and Craven Health and Care system programme for Children and Young People (CYP) and the Corporate Parenting Panel (CPP).
- To demonstrate that the Bradford District and Craven Health and Care Partnership has discharged their statutory and legislative responsibilities for Children Looked After & Care Leavers.

A Child Looked After

Children Act 1989

A Child is looked after by a local authority if he/she:

- Is provided with accommodation, for a continuous period of more than 24 hours
- Is subject to a care order or
- Is subject to a placement order.

A child ceases being “Looked After” when they are:

- Adopted
- Return home
- Reach the age of 18 years.

Care Leavers

- Care leavers are those children who have been previously Looked After and are now being supported to live independently, with an age range of 18 to 25 years.
- Social care responsibilities for Care Leavers over the age of 21 changed under the **Children and Social Work Act (2017)**:
- Care leavers can request support up to the age of 25, regardless of whether or not they are in education



Legislation

The Local Authority (LA)

The **Children and Social Work Act 2017** introduces corporate parenting principles

- set out local authorities' responsibilities for looked after children
- The LA has a duty to promote the welfare of Looked After Children
- includes promoting the child's physical, emotional and mental health.

WY ICB and NHS England

- have a duty to cooperate with requests from the LA to undertake statutory health assessments
- and provide support services to Looked After Children without any undue delay
- irrespective of whether placement of the child is emergency, short term or in another area outside of Bradford District and Craven.

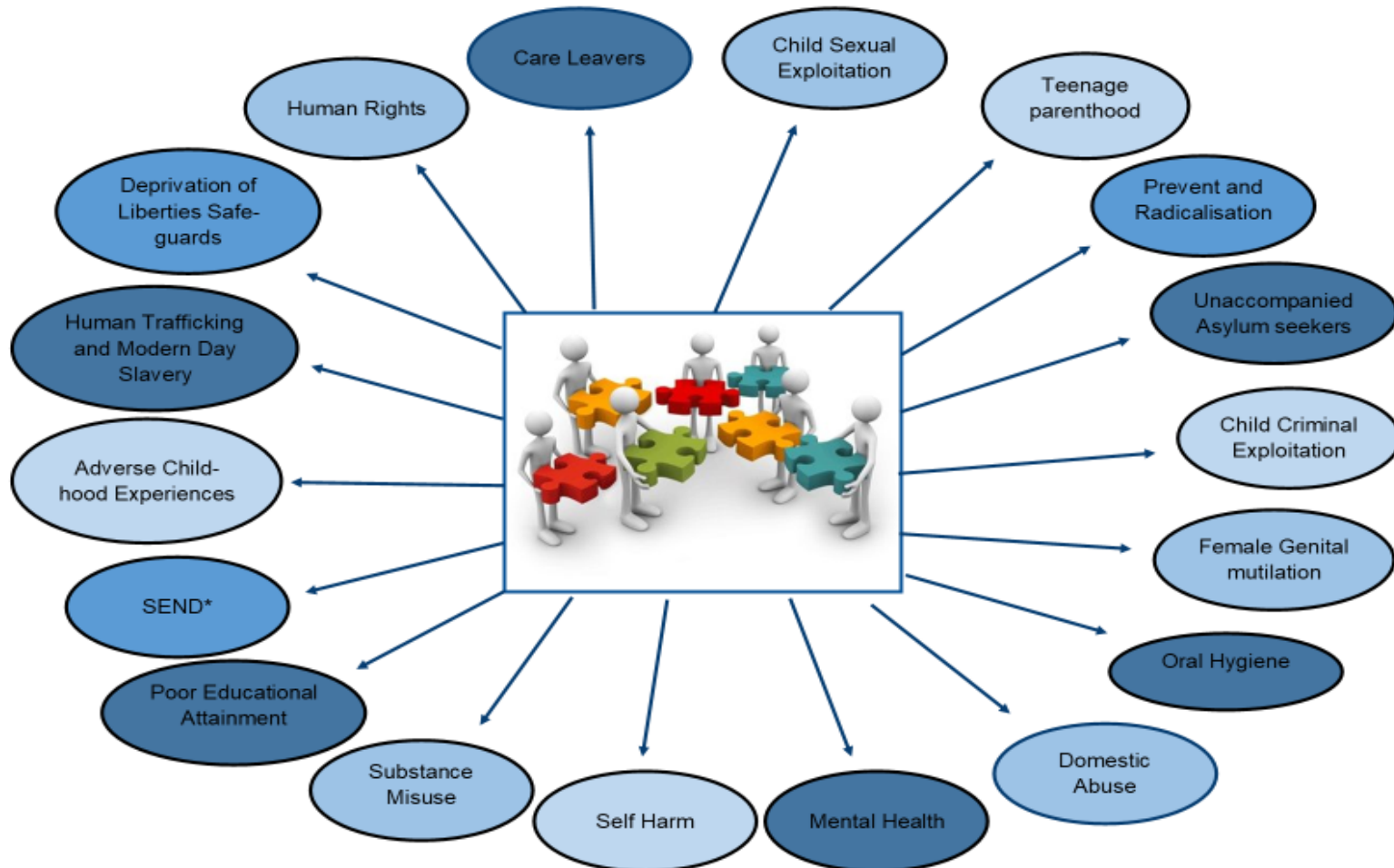
Why Their Health is So Important



They often experience:

- unmet health needs such as missed immunisations, neglected dental care and missed health appointments.
- a higher incidence of learning and developmental problems
 - 3-4 times more likely to have Special Educational Needs by 16 years of age than all children
- emotional, behavioural and mental health problems
 - higher rates of mental health disorders – 45% rising to 72% for those in residential care, compared with 10% of the general population aged 5-15 years.
- Most have experienced a high numbers of Adverse Childhood Experiences (ACEs) and the subsequent health impact is significant.

Scope of CLA – Multiple Agendas



*SEND – Special Educational Needs and Disabilities

*CLA- Children Looked After

WY ICB Responsibilities

There is a clear line of accountability for safeguarding, reflected in the Bradford District and Craven Health and Care Partnership governance arrangements. (i.e. a named Place based Director lead to take overall leadership responsibility, who employs or secures the expertise of Designated Professionals (Des) to provide health leadership and expertise across local area).

Place Based Director of Quality and Nursing
WY ICB Director of Nursing

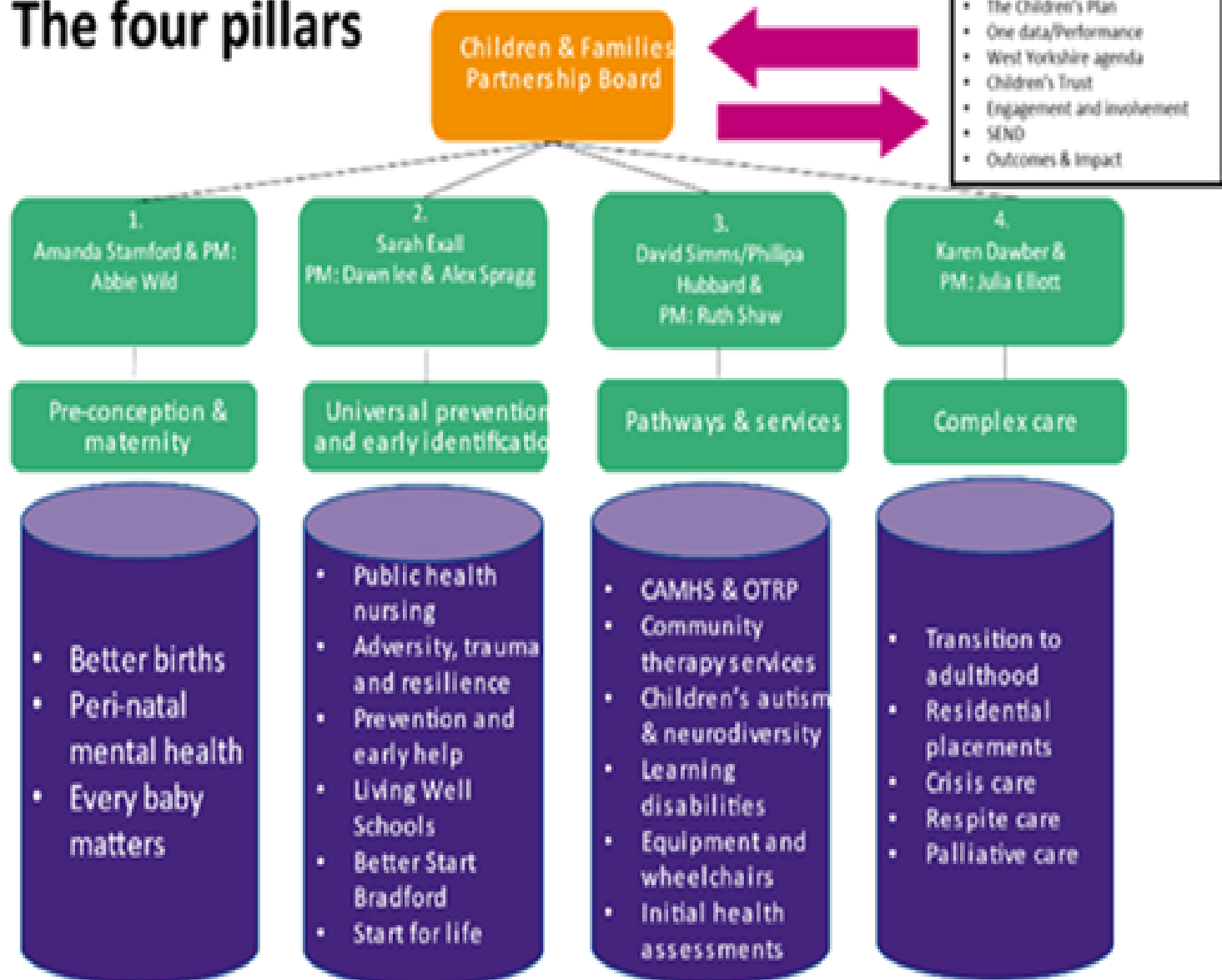
Children's Team

- Des Nurse Safeguarding and Children Looked After
- Deputy Des Nurses: Safeguarding Children
- Specialist Health Practitioner: Safeguarding Children and Domestic Abuse
- Named GP Safeguarding Children
- Des Doctor Safeguarding
- Des Doctor Children Looked After

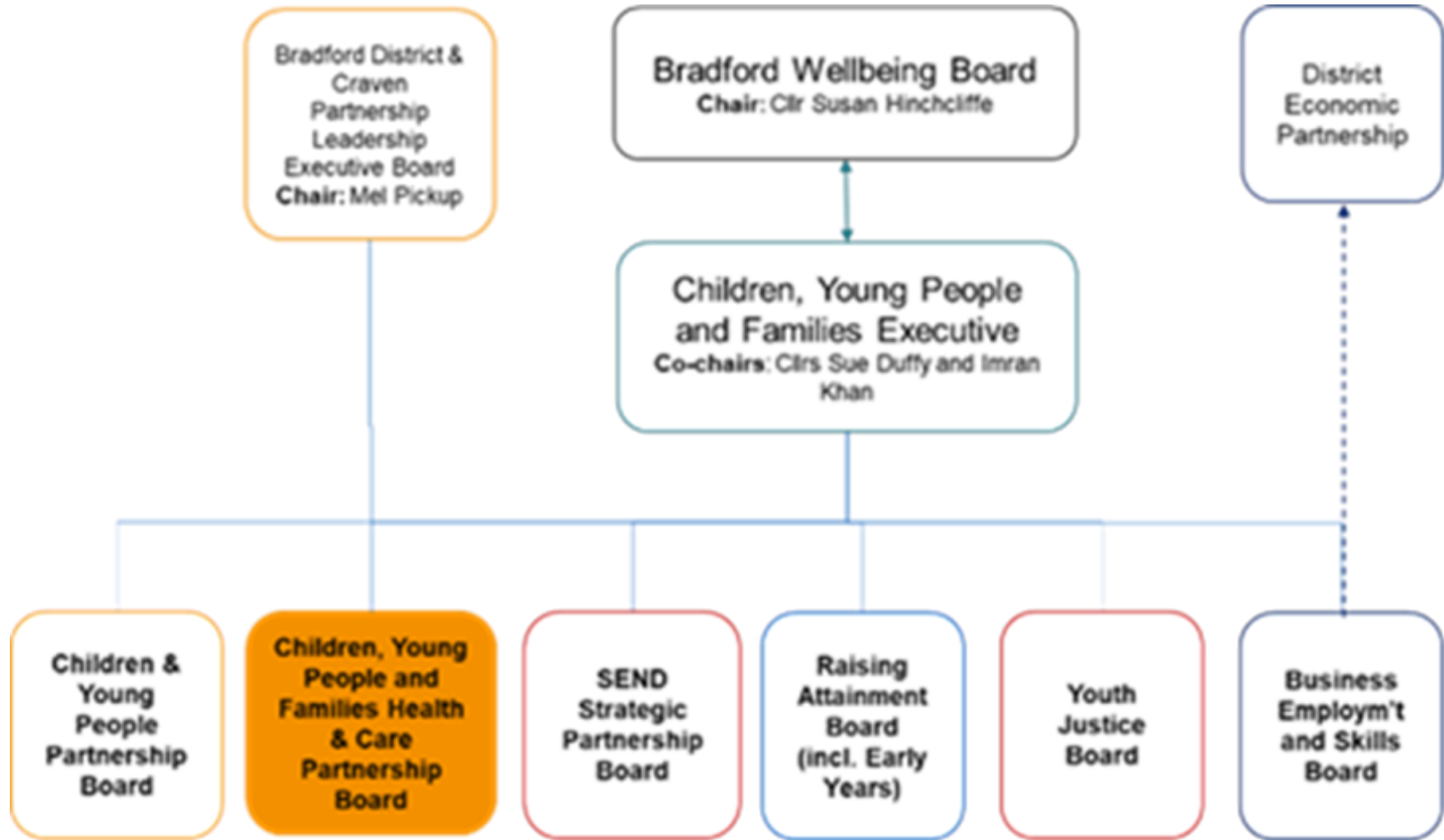
Adult's Team

- Des Nurse Safeguarding Adults
- Deputy Des Nurse: Safeguarding Adults
- Mental Capacity Act/Liberty Protection Safeguards Lead
- Specialist Health Practitioner: Safeguarding Adults
- Named GP Safeguarding Adults

The four pillars

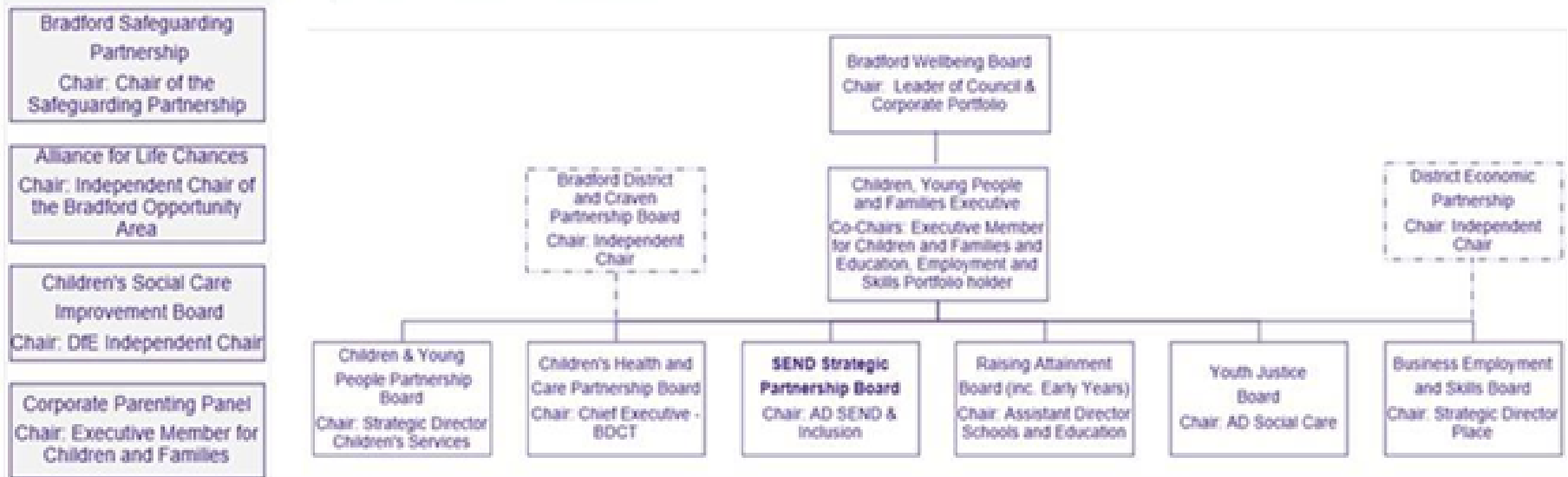


SRO/PM key point of contact and coordination for their respective pillar.



Local Authority Responsibilities and Governance Interface with Health Team

Figure 1: Children, Young People and Families Governance



Children, Young People and Families Partnership

Data, Intelligence and Research Evidence (including Act Early, CAER, Born in Bradford)

Voice and influence of Children, Young People and their Families

Statistical Neighbours: CLA*

Published figures for the period 2021-22 and as at 31/03/22
 Numbers are children looked after per 10,000

	2018	2019	2020	2021	2022
Kirklees	67.00	62.00	66.00	66.00	62.00
Peterborough	74.00	73.00	71.00	67.00	66.00
Bolton	91.00	95.00	92.00	90.00	77.00
Dudley	96.00	95.00	90.00	89.00	85.00
Oldham	93.00	86.00	88.00	89.00	87.00
Blackburn with Darwen	97.00	104.00	106.00	97.00	97.00
Walsall	95.00	90.00	97.00	97.00	97.00
Rochdale	95.00	108.00	100.00	104.00	101.00
Telford and Wrekin	92.00	96.00	98.00	102.00	102.00
Bradford	70.00	82.00	87.00	94.00	103.00
Derby	82.00	94.00	98.00	108.00	107.00

*CLA- Children Looked After

The Local Figures: Children Looked After (CLA)

Published figures for the period 2021-22 and as at 31/03/22

Numbers are children looked after per 10,000

	2018	2019	2020	2021	2022
Bradford	70.00	82.00	87.00	94.00	103.00
Yorkshire and The Humber	71.00	74.00	77.00	78.00	81.00
Statistical Neighbours	88.20	90.30	90.60	90.90	88.10
England	64.00	65.00	67.00	67.00	70.00

- No. of CLA in Bradford (March 2023) was 1588
- Many have additional needs, have experienced abuse and neglect and therefore enter care with multiple and complex health and care needs.

The Local Context, Bradford

- 7th largest local authority in England in terms of population size, after Birmingham, Leeds, Sheffield, Cornwall, Manchester and Buckinghamshire.
- In June 2020, the Office for National Statistics published latest population estimates for 2019.
- Bradford had a total estimated population of 539,776, an increase of 2,576 people since 2018. The population is expected to grow to around 550,100 by mid-2028.
- A young population, with the fourth highest proportion of under 16 - year - olds in England (over 160,000 children)

The Local Context, Bradford

- Approx. 56.7 % of school children are from ethnic minority groups (national 31%).
- 3 main ethnic groups in the local authority are
 - White English & British 40.6%
 - Other Pakistani 19.6% and
 - Mirpuri Pakistani 11.4%
- Health and well-being of children generally worse compared with the England average
 - obesity, teenage pregnancy and accidental injury.
 - 11.4% of children have a rare disorder compared with national average of 4.3%
- Infant mortality rates significantly higher
- Craven in N. Yorkshire LA– slightly different demographics, with more ageing population, still many children in poverty

Who Provides the Medical Care for CLA?

Children Looked After (CLA) Team

IHAs allocated at triage* according to the need of the child to most appropriate medical professional. Either:

- Paediatrician in ANHSFT*
- Paediatrician in BTHFT*
- Paediatrician at BDCFT*
- Specialist GPs for CLA—3 GPs , plus 1 starting March 2023
- Adult health forms all completed by BDCFT from Dec '21

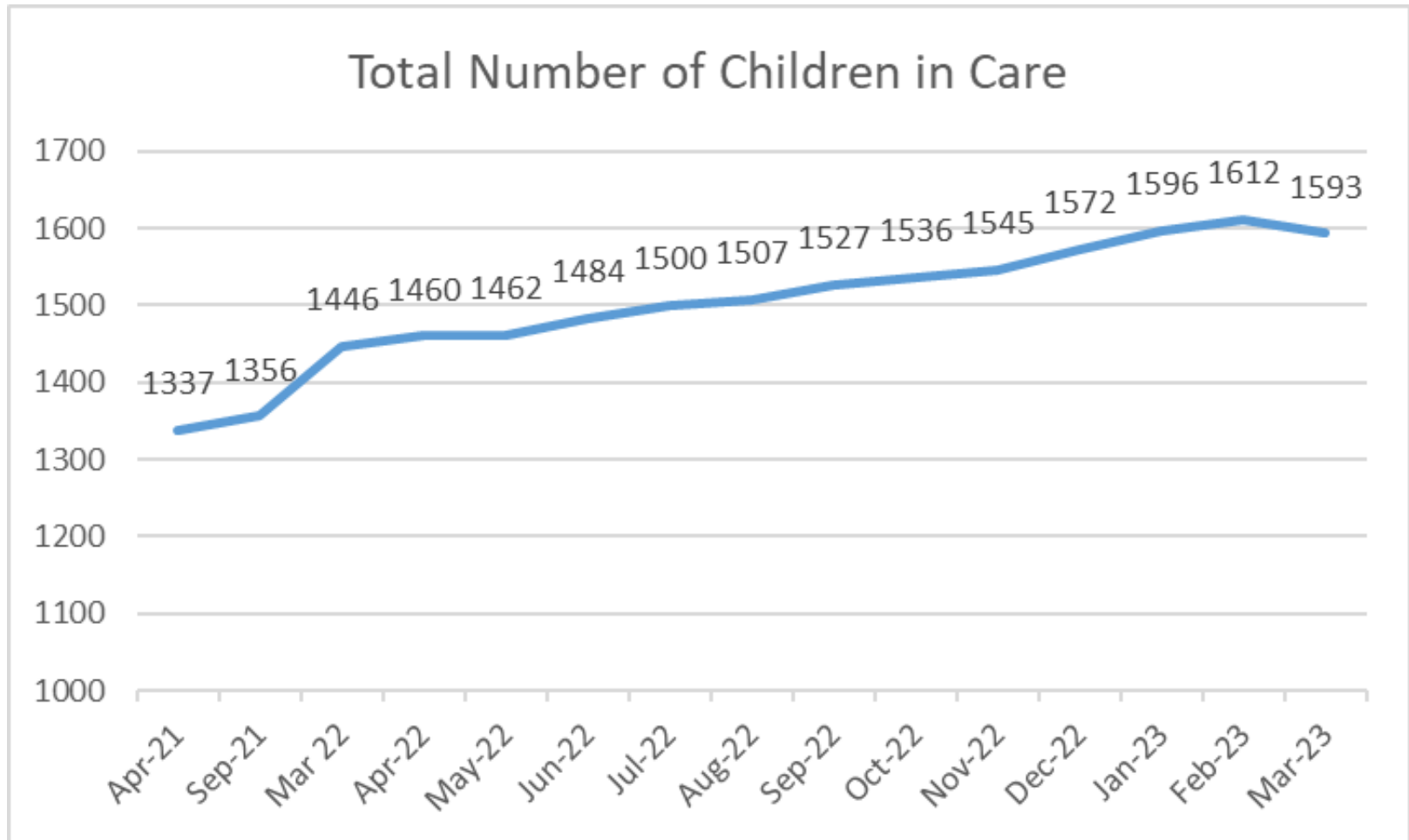
RHAs team of specialist CLA nurses comprising:

- 1 WTE Named Nurse (band 8A)
- 1 WTE Team Leader (Band 7)
- 1 WTE Clinical Lead (Band 7)
- 10 WTE Band 6 nurses—case holders 1.5 WTE vacancy
- 1 WTE Band 5 nurse—support clinics
- 2 WTE Band 4 Nursery Nurses
- 3.7 WTE Band 3 Admin
- 0.49 WTE Band 1 Admin

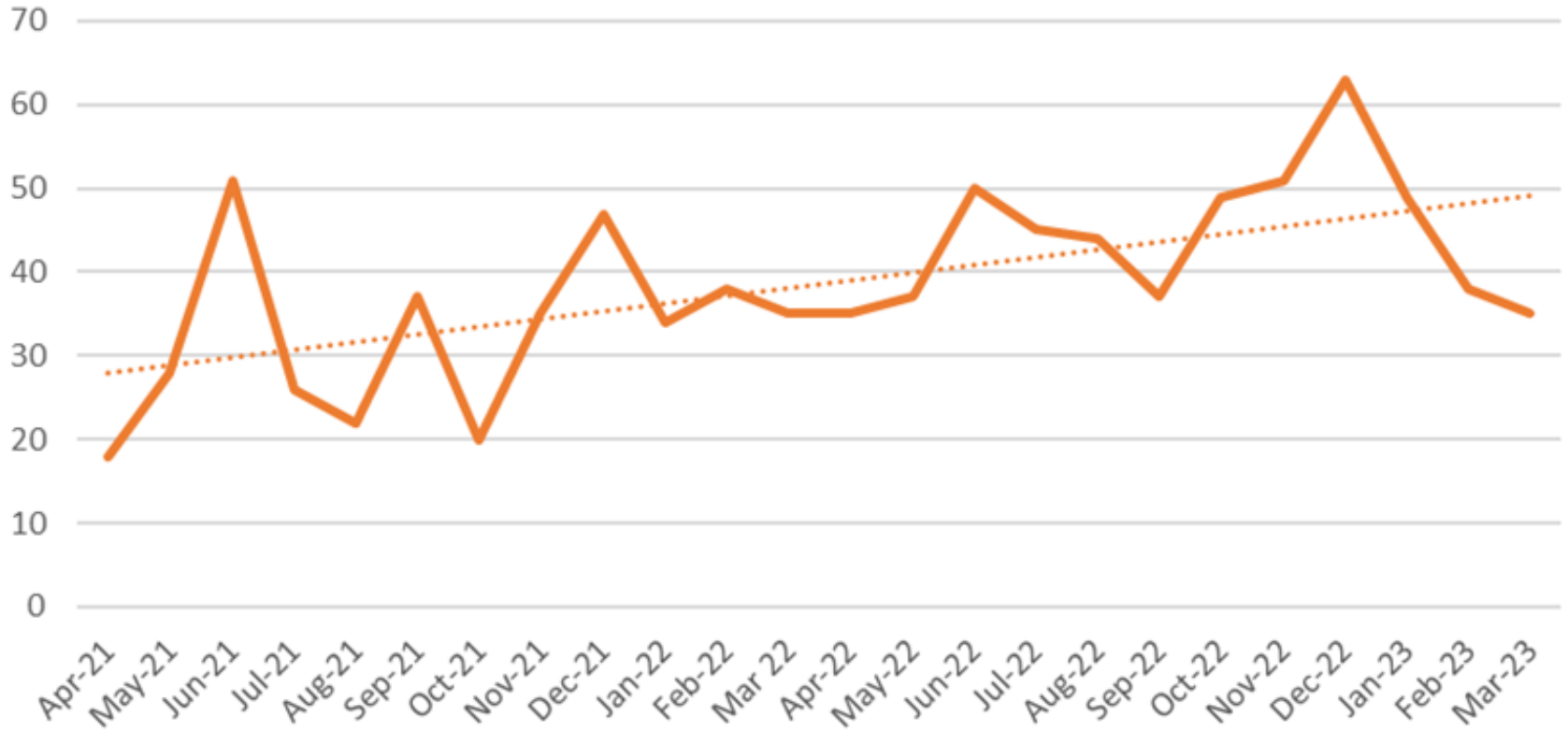
* Using a systems approach to help address the needs of looked after children and young people in Bradford. Ensuring more timely access to services for a child. Also provides a clearer understanding of any risks/gaps and overall system capacity



Numbers of Children In Care, Bradford April 2022 - March 2023



Admission into Care



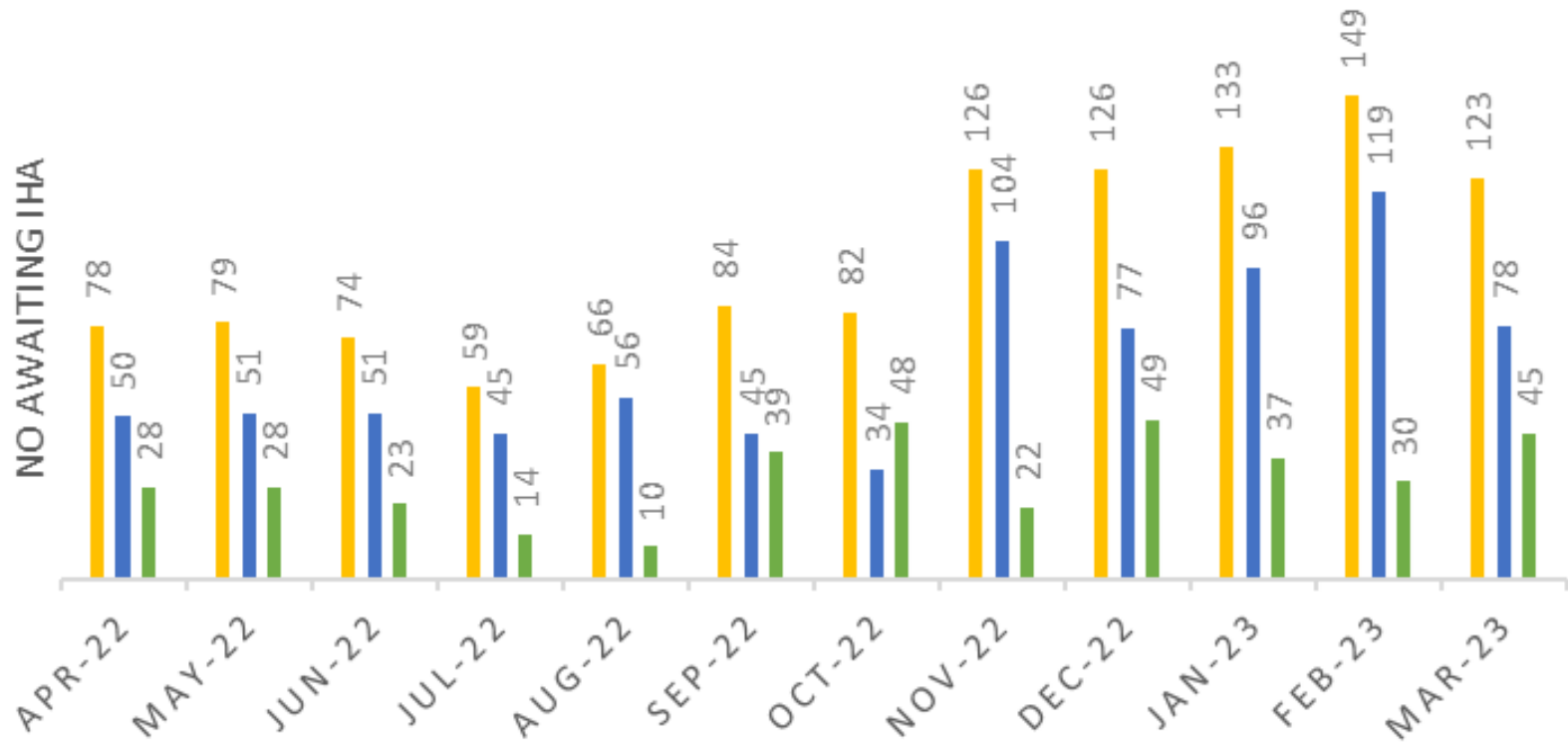


Purpose of IHA and Who Can do Them?

- The Initial Health Assessment must be done by a registered medical practitioner ¹
- Statutory guidance states that IHAs should be done within 20 working days of entering care.
- The statutory health assessment should address the following for a child:
 - The state of their health, including physical, emotional and mental health
 - Their health history including, as far as practicable, his/her family's health history
 - The effect of their health history on their development
 - Existing arrangements for their health and dental care; including
 - routine checks of their general state of health, including dental health treatment and monitoring for identified health (including physical, emotional and mental health) or dental care needs
 - preventive measures such as vaccination and immunisation
 - screening for defects of vision or hearing
 - advice and guidance on promoting health and effective personal care
 - any planned changes to the arrangements
 - the role of the appropriate person, such as a foster carer, residential social worker, school nurse or teacher, and of any other person who cares for the child in promoting his or her health.

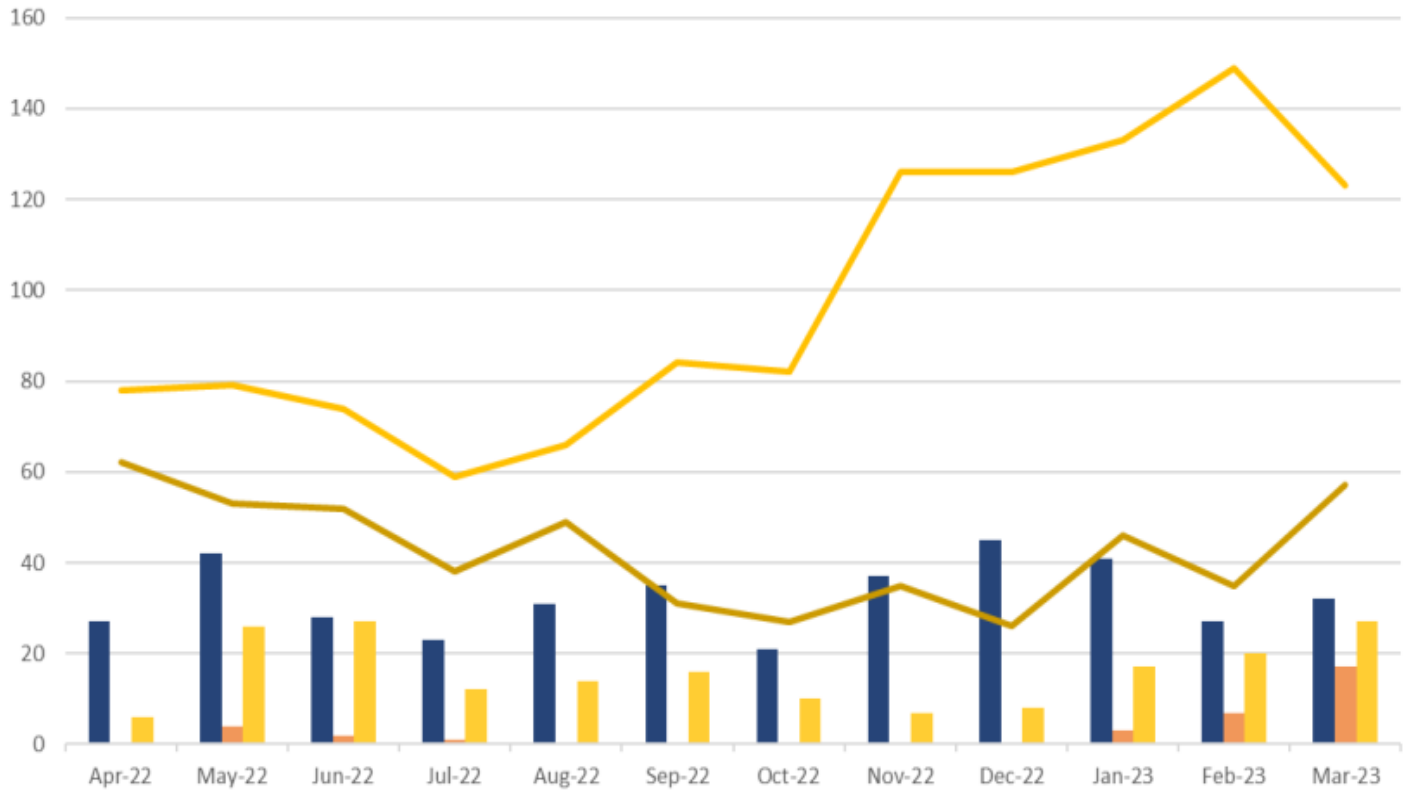
NUMBERS AWAITING IHAS

■ Total no. IHAs awaited
 ■ No. with consent
 ■ No. without consent



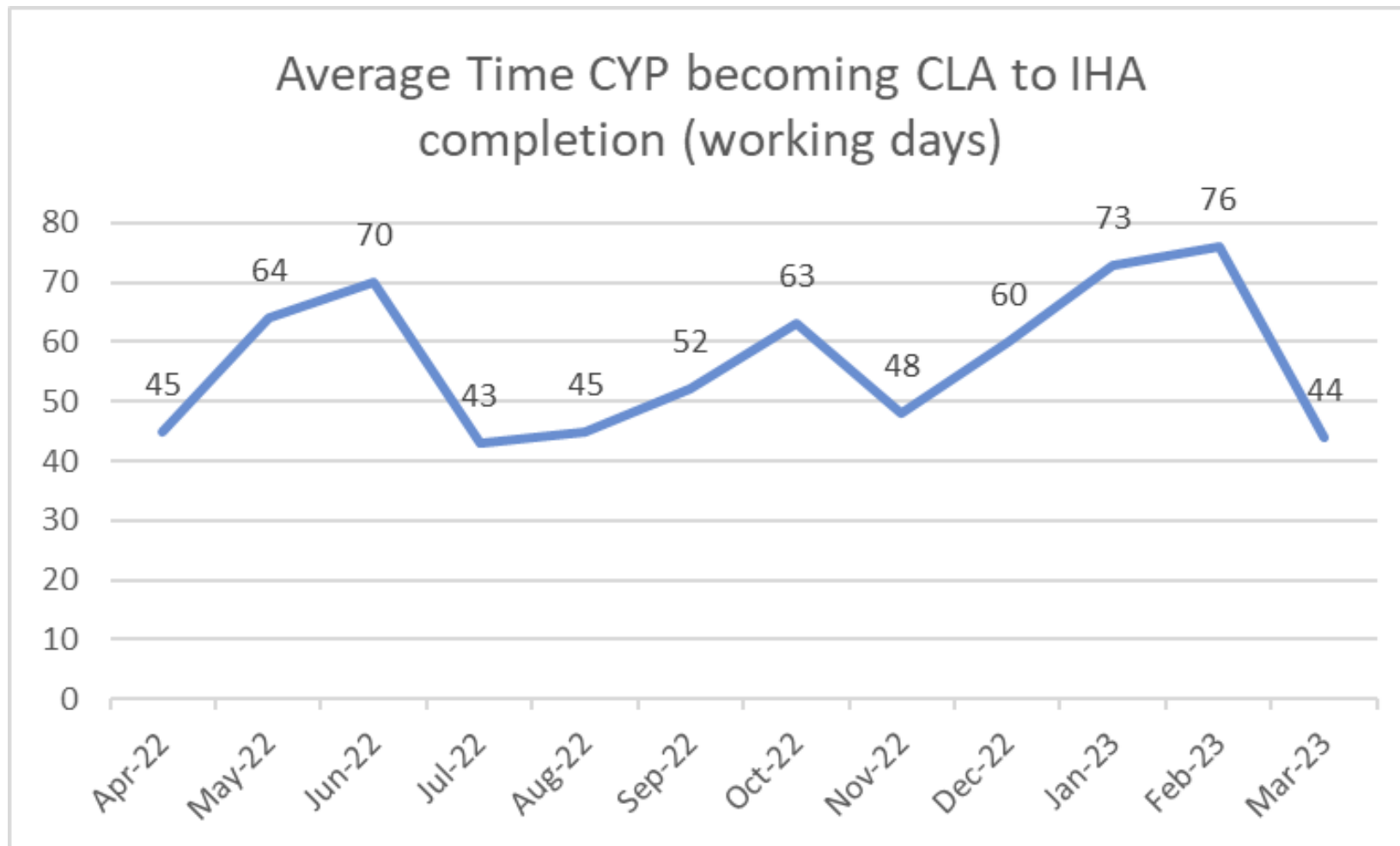
*IHA – Initial Health Assessment

IHAs Completed



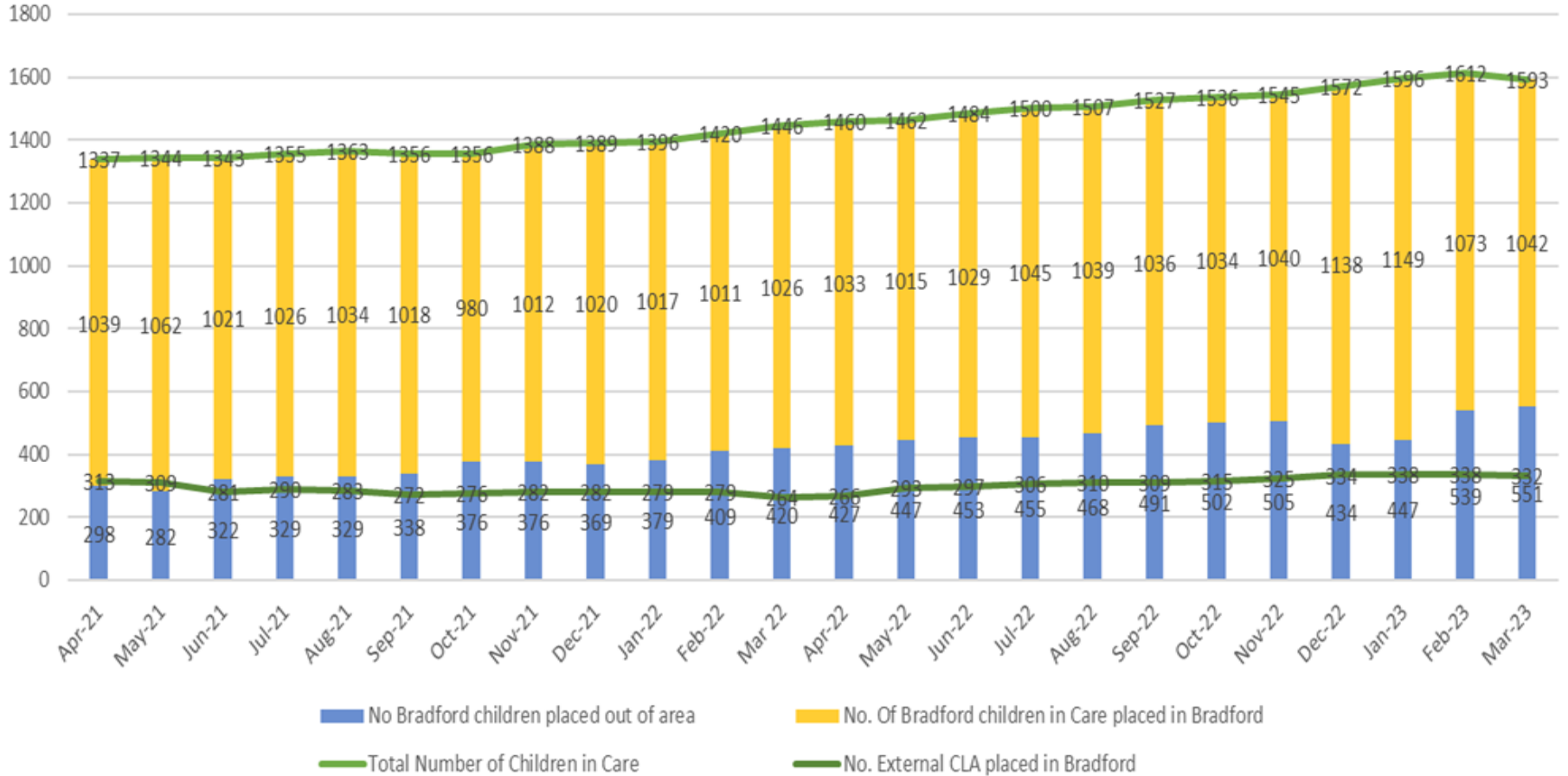
	Apr-22	May-22	Jun-22	Jul-22	Aug-22	Sep-22	Oct-22	Nov-22	Dec-22	Jan-23	Feb-23	Mar-23
No IHAs due within 20 working days	27	42	28	23	31	35	21	37	45	41	27	32
No IHAs done within 20 working days	0	4	2	1	0	0	0	0	0	3	7	17
No IHA forms completed	6	26	27	12	14	16	10	7	8	17	20	27
No awaiting IHA	78	79	74	59	66	84	82	126	126	133	149	123
No of IHA appointments offered	62	53	52	38	49	31	27	35	26	46	35	57

■ No IHAs due within 20 working days
 ■ No IHAs done within 20 working days
 ■ No IHA forms completed
— No awaiting IHA
 — No of IHA appointments offered

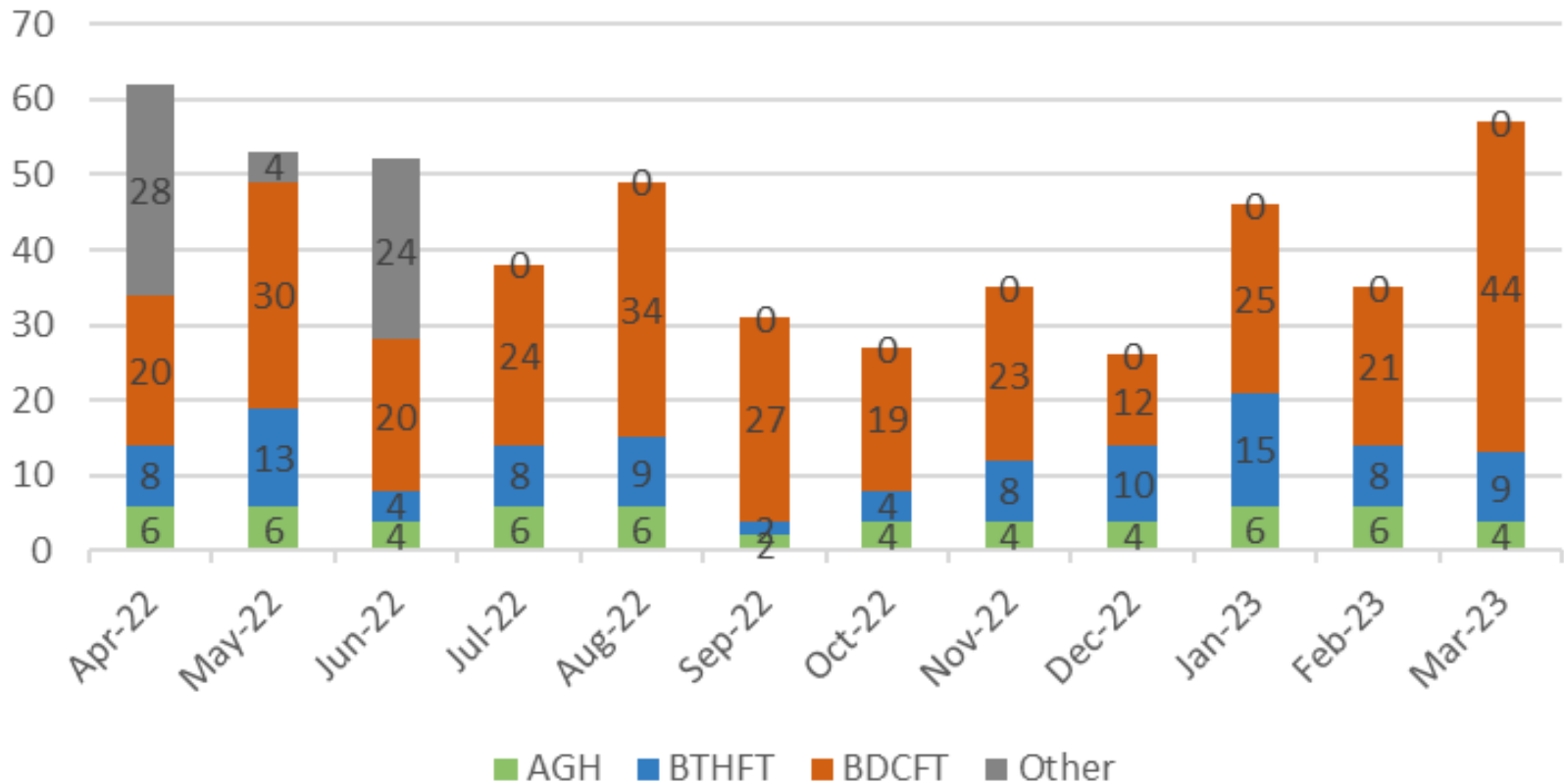


*CYP – Children and Young People, CLA – Children Looked After, IHA – Initial Health Assessment

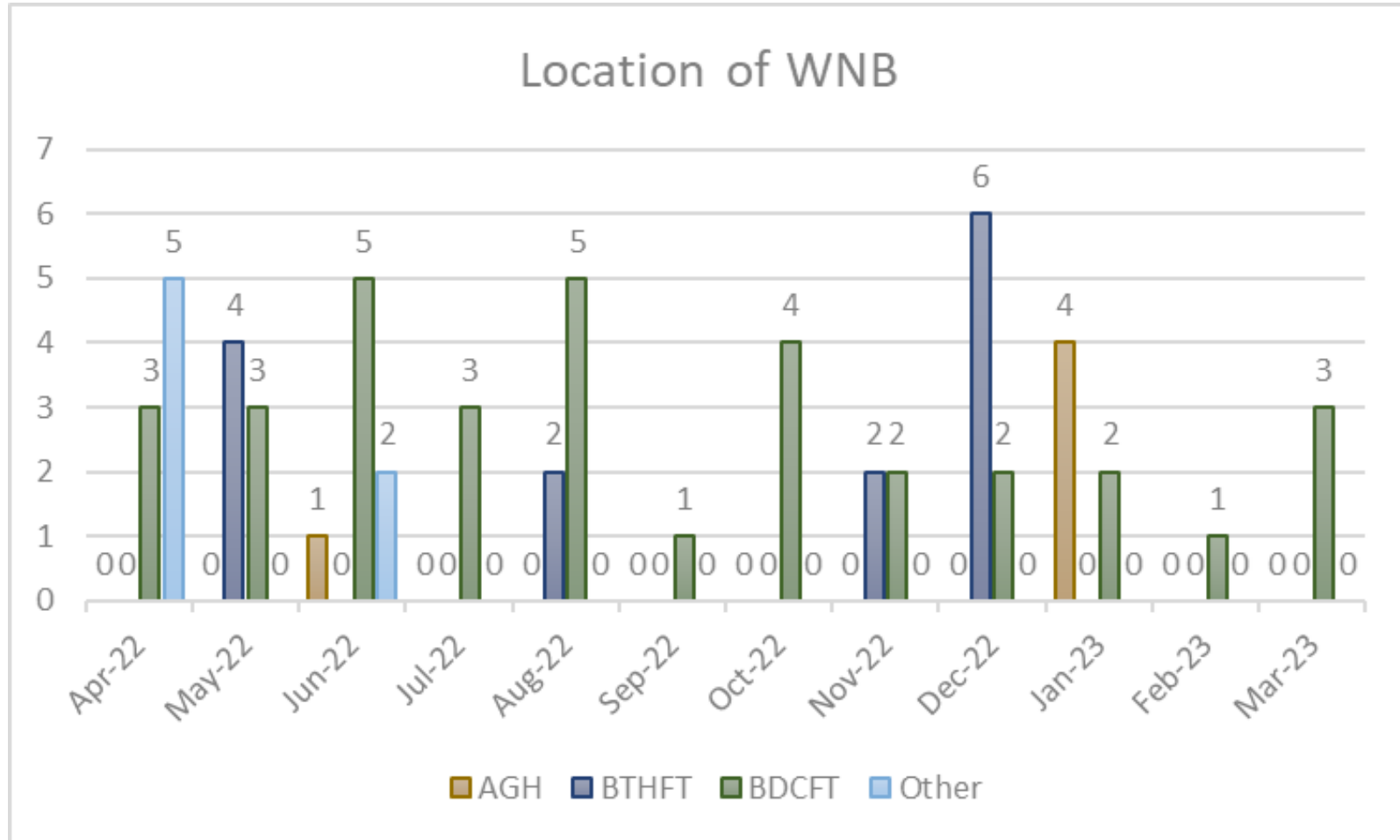
Placements



Location of IHAs

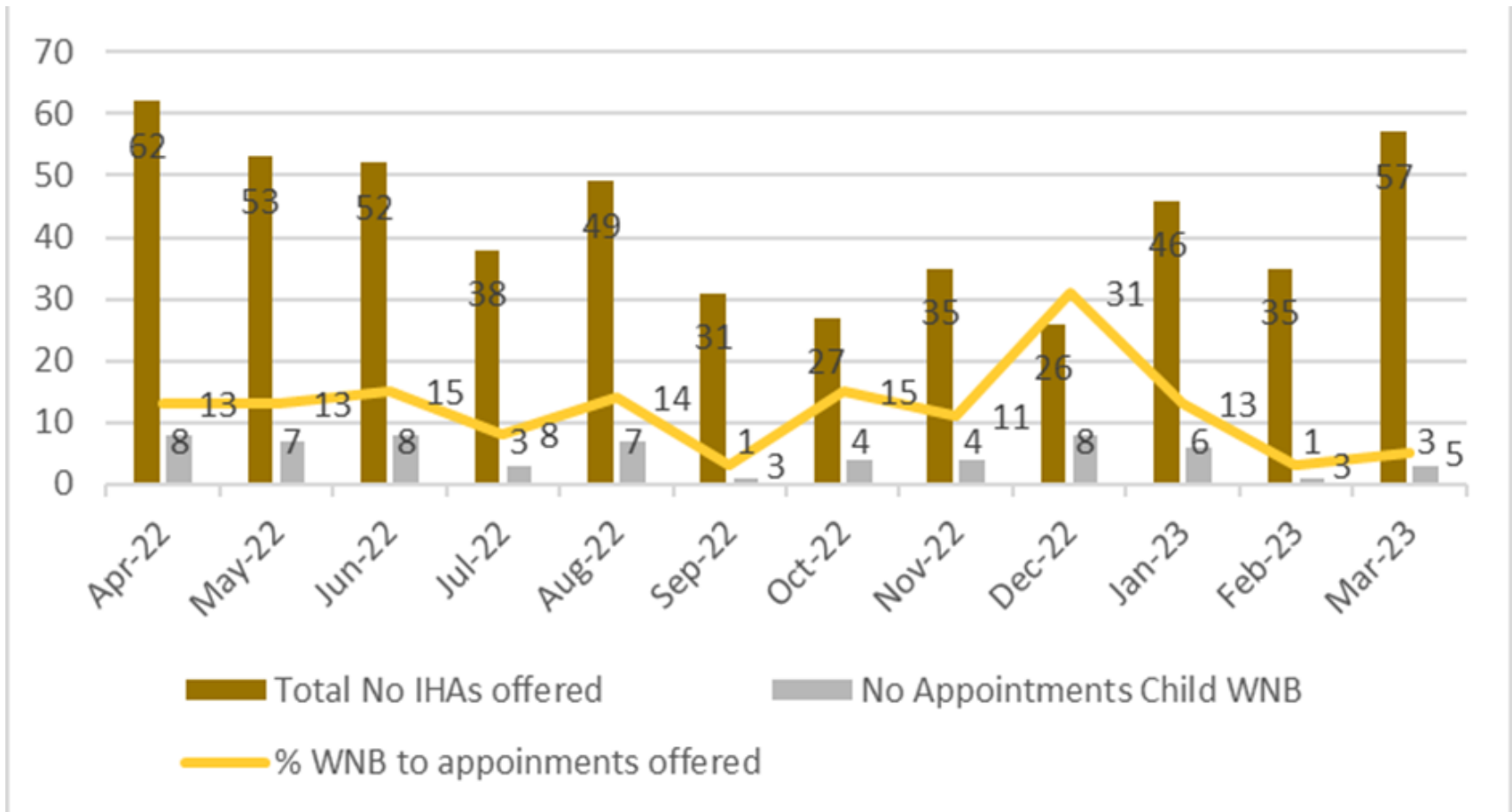


AGH – Airedale General Hospital, BTHFT – Bradford Teaching Hospitals Foundation Trust, BDCFT – Bradford District Care Foundation Trust.



*WNB – Was Not Brought, AGH – Airedale General Hospital, BTHFT – Bradford Teaching Hospitals Foundation Trust, BDCFT – Bradford District Care Foundation Trust.

Appointments Offered and Not Attended

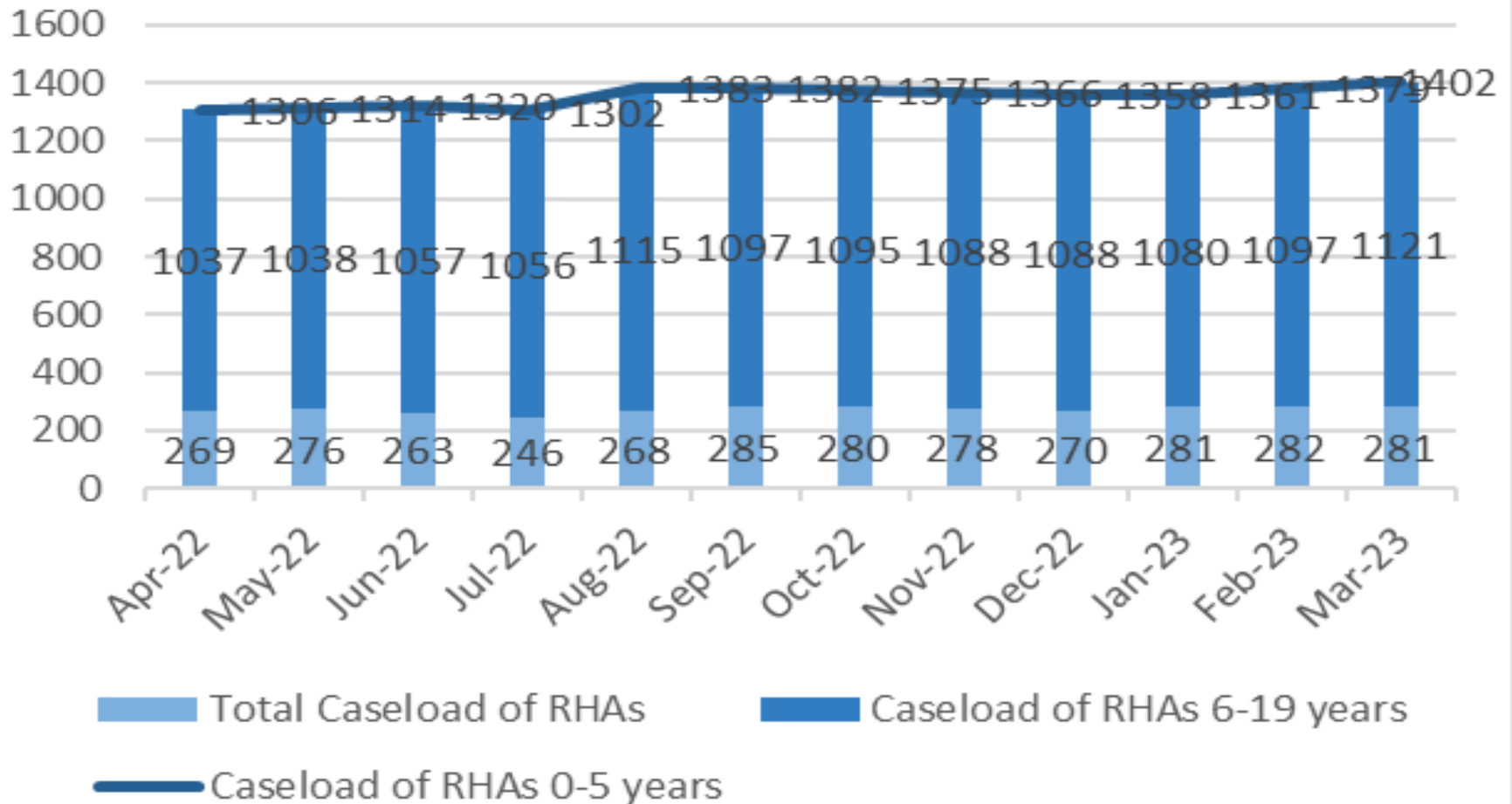


*IHA – Initial Health Assessment, WNB – Was Not Brought

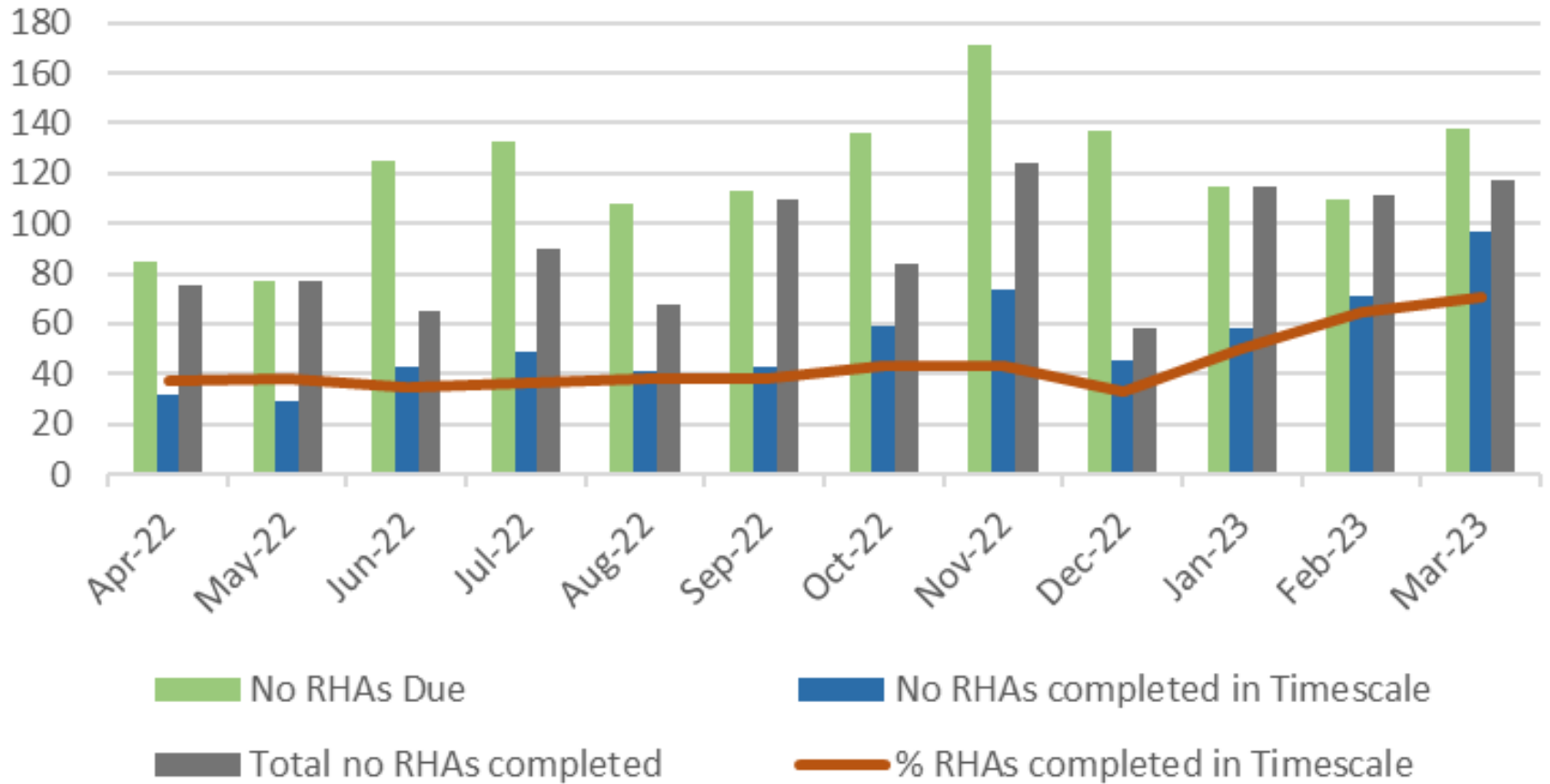
Review Health Assessments (RHA)

- The local authority that looks after the child must make arrangements for a registered medical practitioner or a registered nurse or registered midwife to review a looked-after child's health needs and provide a written report for each review
- The review of the child's health plan must happen at least once every six months before a child's fifth birthday and at least once every 12 months after the child's fifth birthday.
- The child's social worker and Independent Reviewing Officer (IRO) have a role to play in monitoring the implementation of the health plan, as part of the child's wider care plan.
- The local authority that looks after a child must take all reasonable steps to ensure that the child receives the health care services he or she requires as set out in their health plan. Those services include mental health services, medical and dental care treatment and immunisations, as well as advice and guidance on personal health care and health promotion issues

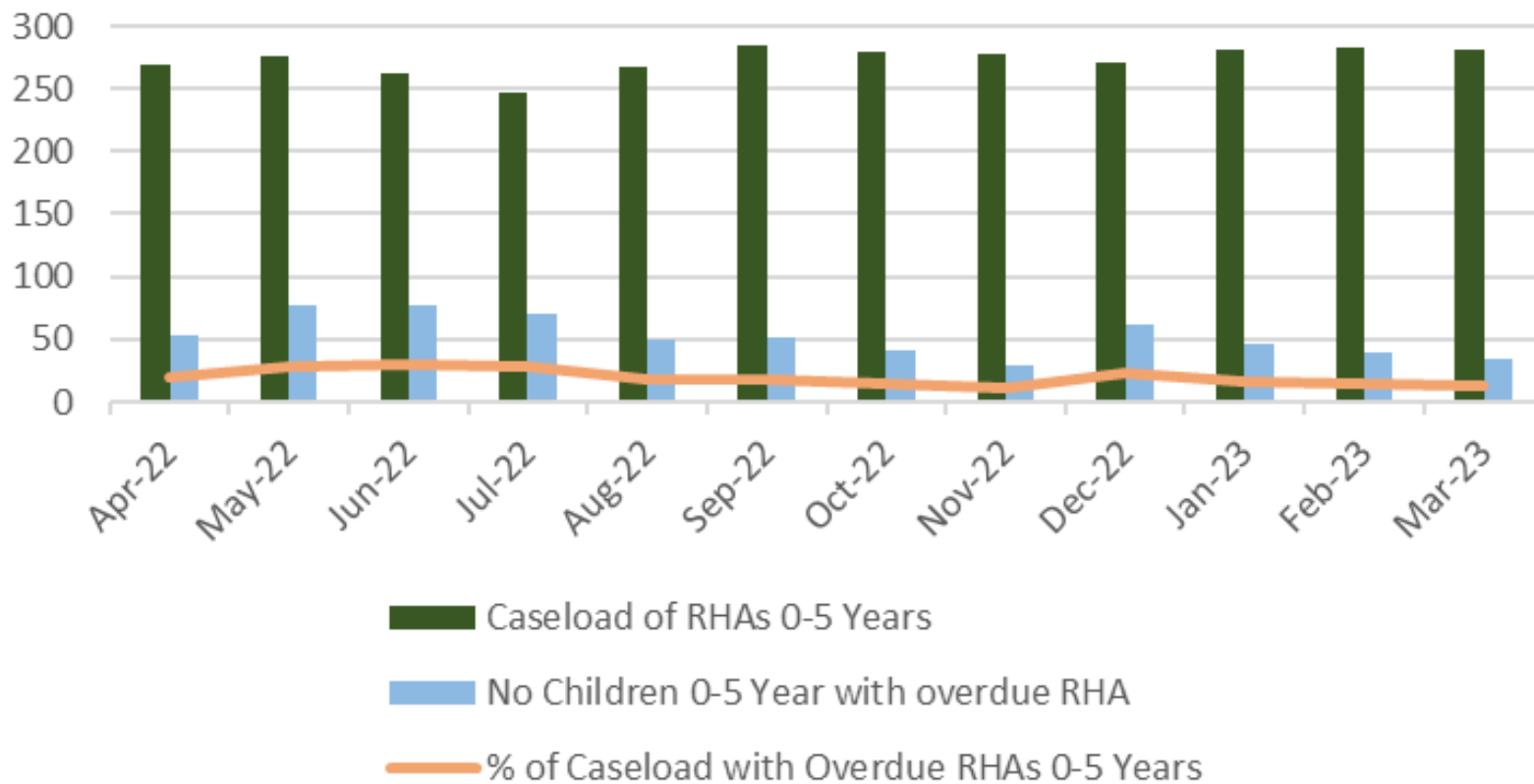
Review Health Assessments

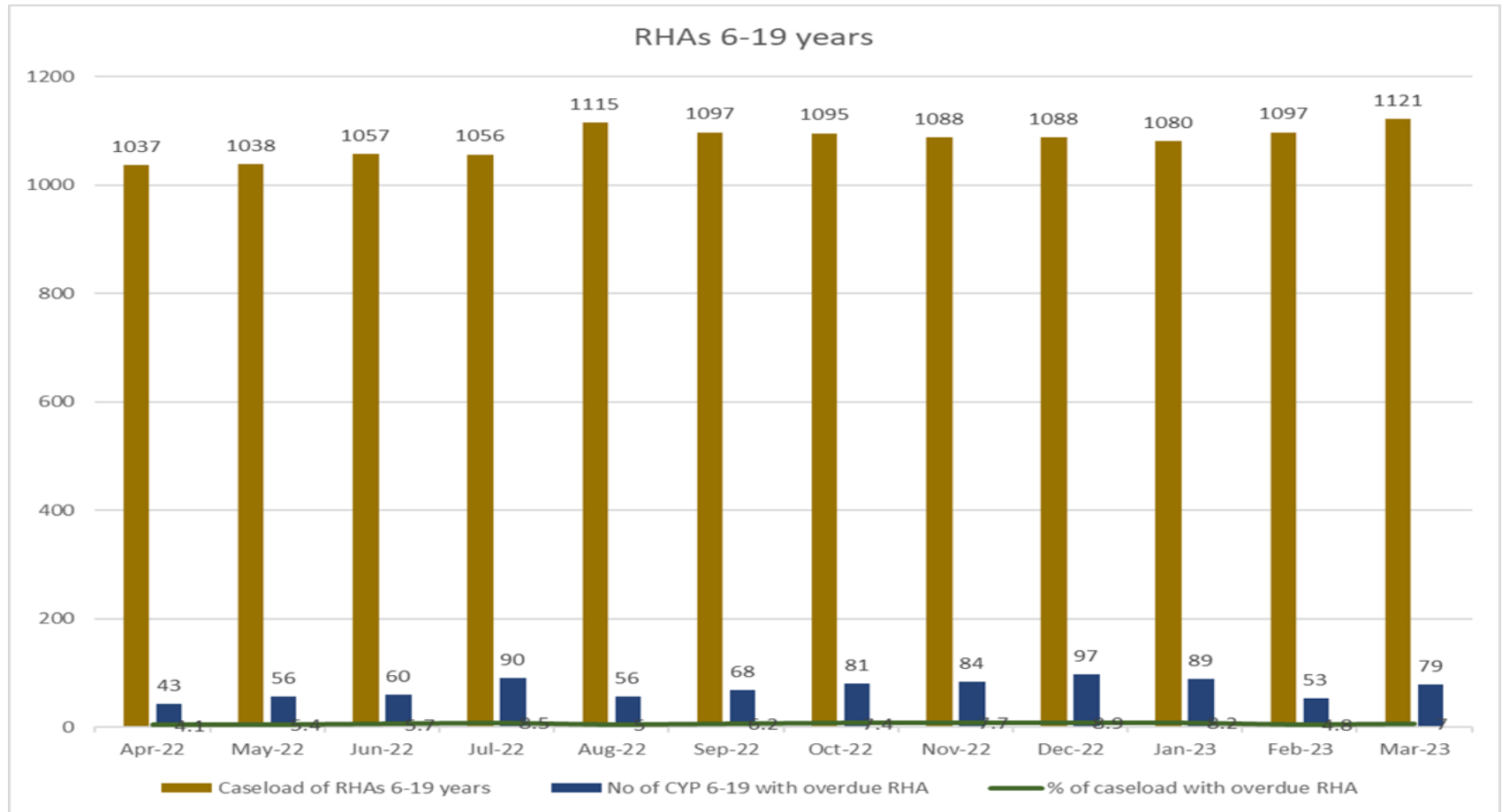


Review Health Assessments

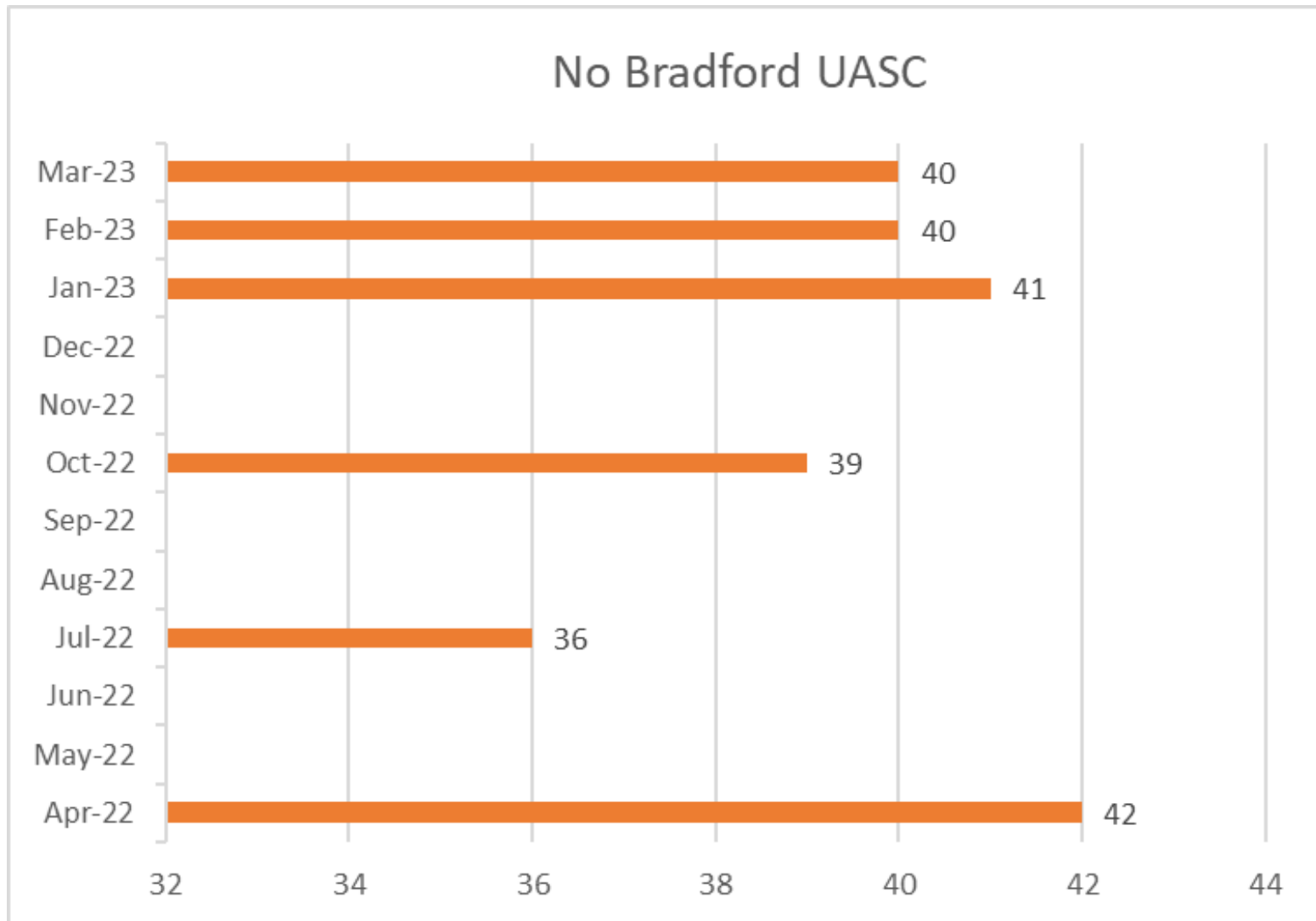


RHAs 0-5 Years





No Bradford UASC



*UASC – Unaccompanied Asylum Seeking Children

Other Data

- Bradford children generally have good childhood vaccination coverage, especially for Children Looked After
- The dental assessment undertaken help to inform the overall health assessment.
- Informed consent for dental treatment is needed from an adult with parental responsibility for the child (unless the child can consent for themselves)

	2019-2020	2020-2021	2021-2022	2022-2023
Number of children whose immunisations were up to date	97.0%.	95.0%	96.8%	97.3%
Number of children who had their annual health assessment	94.0%	94.0%	95.3%	94.9%
Number of children who had their teeth checked by a dentist	93.0%	45.0%	83.2%	85.10

Strength and Difficulty Questionnaires (SDQ)

- Important to have some means of measuring on a regular basis the emotional and behavioural difficulties experienced by looked-after children at a national level.
- SDQ is a clinically validated brief behavioural screening questionnaire for use with 4 -17 year olds or 2- 4 year olds.
- Internationally validated and simple to administer.
- 3 versions: for parents or carers, teachers and children aged 4 -17
- Used to screen for any problems related to a child's emotional well-being.
- Provides information to help social workers form a view about the emotional well-being of individual looked-after children. Recommended that it is completed around the time of child's IHA or RHA

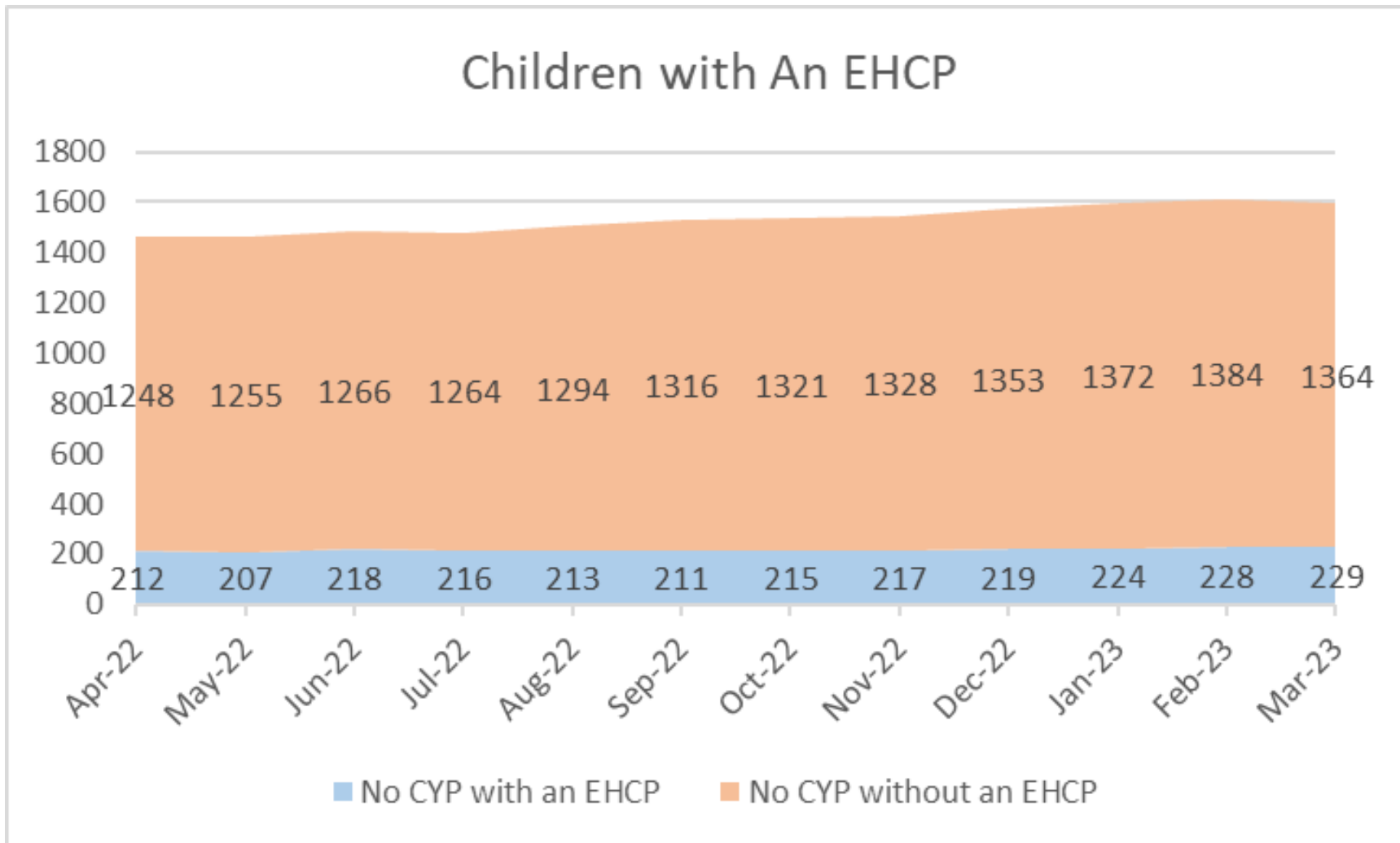
Strength and Difficulty Questionnaire



Education, Health and Care Plan (EHCP)

- Around 70% of looked after children have some form of *SEN, and it is likely that a significant proportion of them will have an EHCP ²
- Local authorities will have particular responsibilities for these children and will act as a 'Corporate Parent'
- It is imperative that their needs are quickly and efficiently assessed and provided for so that the effect of any instability on their education is reduced to a minimum

*SEN – Special Educational Need



* EHCP– Education, Health and Care Plan

Reflection on Key areas of focus for 2022/23 for Partners to Address

Annual report to be considered by

- Corporate Parenting Panel - complete
- SEND partnership – complete (I think, Phil, can you check?)

IHAs

- Optimise recruitment to medical staffing vacancies as much as feasible through partnership working – some progress made, but remains a considerable problem.
- Improve attendance at appointments – significant improvements, but needs to be ongoing
- Improve time taken to obtain consent. Should be day 0 – ongoing, but now more closely monitoring health of those waiting consent.
- Improve data collection so we can be more responsive, currently takes 1 or 2 months to see the monthly data – needs to be done.

Work with partner agencies

- To better understand where there are delays and problems – improvements made and ongoing
- Work closely with Local Authority to improve contractual agreements and policy & procedures and to strengthen the governance and strategic support – needs strengthening
- To respond to any relevant areas of concern highlighted in the SEND Inspection Written Statement of Action – complete and ongoing.

Key areas of focus for 2022/23 for Partners to Address

Annual report to be considered by

- Corporate Parenting Panel – before OSC next year?
- SEND partnership

IHAs

- Develop pathways and work with partners to ensure more timely consent, with an overall aim of meeting statutory timescale.
- Improve data collection

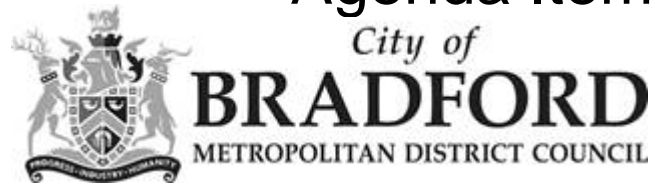
Work with Partner Agencies

- Work closely with Local Authority to improve contractual agreements and policy & procedures and to strengthen the governance and strategic support
- Launch and embed care leaver's passports
- Work with CAMHS to ensure children who are looked after referred to services are prioritised.

References

1 Promoting the health and well-being of looked-after children Statutory guidance for local authorities, clinical commissioning groups and NHS England. March 2015. DOE and DOH

2 Special educational needs and disability code of practice: 0 to 25 years Statutory guidance for organisations which work with and support children and young people who have special educational needs or disabilities. January 2015. DOE and DOH



Report of the Office of the Chief Executive to the meeting of Overview and Scrutiny Committee to be held on 29th November 2023

G

Subject: Update report and the National Independent Child Practice Review Report Published in May 2022

Summary statement:

This report provides an update and builds upon the report presented to the Overview & Scrutiny Report on 29th June 2022. This report identifies the progress made against the six local recommendations outlined in the National Independent Child Safeguarding Practice Review Panel's review from May 2022. The report highlights not only the advancements made in each area but also instances of improved processes and practices that have emerged during this period of reflection and improvement.

EQUALITY & DIVERSITY:

The Bradford District Safeguarding Children Partnership (BDSCP) promotes equality. It ensures that no individual or group is discriminated against based on race, gender, disability, religion or belief, sexual orientation, age, or other protected characteristic. The actions and recommendations outlined in this report have undergone a thorough equality assessment. This assessment ensures that the policies, practices, strategies, services, or functions presented herein are inclusive and do not inadvertently disadvantage any particular group.

The BDSCP recognises the importance of the Council's equality objectives. The work presented in this report contributes to these objectives by fostering a safeguarding environment where every child receives the highest standard of protection and care regardless of their background or identity. Specific measures have been implemented to ensure that the safeguarding practices are culturally sensitive and responsive to the

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Overview & Scrutiny Area:

Children Services

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diverse needs of our community.

1. SUMMARY

- 1.1 Following the tragic deaths of Arthur Labinjo-Hughes in Solihull in June 2020, Star Hobson in Keighley, Bradford in September 2020, and the subsequent two murder trials and convictions in December 2021 of their parents and partners, a national review of learning from the two cases was initiated.
- 1.2 The review was undertaken by the national independent Child Safeguarding Practice Review Panel. This panel commissions reviews of serious child safeguarding cases, focusing on improving learning, professional practice and outcomes for children, based on the possibility of identifying improvements from cases that it views as complex or of national importance.
- 1.3 The review's primary focus was to try and understand how and why public services and systems designed to protect children were not able to do so. The review looked in detail at service responses to the two children's experiences, to make sense of what can be learned and must do differently in the future locally and nationally. The review, published on the 26th of May 2022 has six local and eight national recommendations. This Overview and Scrutiny report focuses primarily on the national and local recommendations for Bradford only.

2. BACKGROUND

- 2.1 This report provides an update and builds upon the report presented to the Overview & Scrutiny Report on 29th June 2022. This report identifies the progress made against the six local recommendations outlined in the National Independent Child Safeguarding Practice Review Panel's review from May 2022. The report highlights not only the advancements made in each area but also instances of improved processes and practices that have emerged during this period of reflection and improvement.

2.1 RECOMMENDATION 1: REVIEW STRATEGIC AND OPERATIONAL RESPONSIBILITIES

- 2.2 In response to the national review's call to enhance strategic and operational responsibilities, the Bradford District Safeguarding Children Partnership (BDSCP) has taken several proactive measures. The Children's Partnership has convened development sessions, creating a new shared vision and objectives for 2023/25. While partners have been diligently reviewing their safeguarding structures, separate initiatives have been undertaken to understand the intricacies of resource allocation.
- 2.3 Recognising the importance of continuous learning, the National Review has been made accessible on the Safer Bradford website. Its insights have been disseminated through various channels, including webinars, events, and publications. To ensure data-driven decision-making, the BDSCP sub group Performance Monitoring Audit and Evaluation (PMAE) is realigning the partnership dashboard with safeguarding priorities. New recruitment initiatives have been successful to bolster data management capabilities.

- 2.4 Each statutory safeguarding partner determines their contribution based on organisational capacities and budgetary constraints. The Strategic Leadership Group (SLG) plays an instrumental role in overseeing and finalising these financial arrangements. The BDSCP annually reviews these contributions to ensure they remain equitable, proportionate, and aligned with evolving needs.
- 2.5 These contributions are documented and shared in the Partnership's annual report to maintain transparency and demonstrate commitment to prudent financial management. This approach ensures that funding is equitable and consistently aligned with the strategic objectives set by the safeguarding partners.
- 2.6 RECOMMENDATION 2: COMPREHENSIVE EARLY HELP OFFER DEVELOPMENT**
- 2.7 In light of the national review, BDSCP has been proactive in refining its early help offer, ensuring it's comprehensive and accessible at various stages of child and family assessment by the Bradford Childrens and Families Trust.
- 2.8 The Partnership has meticulously reviewed its Pre-Birth Procedures, emphasising the assessment of parental and family risk factors and has been assured of further dissemination by partners. The Independent Chair's involvement with the improvement board has ensured alignment and prevented duplication of efforts.
- 2.9 The approved Early Help Strategy, published in February 2023, will be a cornerstone of the Start for Life programme. This strategy is complemented by developing family hubs, children and young people's plan, and embedding Police Early Action teams in localities.
- 2.10 Bradford District Care NHS Foundation Trust (BDCFT) has made improvements in antenatal health visiting, especially for first-time parents. They've introduced a new process to review antenatal records, ensuring vulnerable individuals receive timely face-to-face contact. Furthermore, a new 0-19 triage system has been implemented to provide no missed antenatal contacts.
- 2.11 For pregnant teenagers, pathways have been reviewed to ensure efficient and effective support, with safeguarding activity reports now including data on under-18s bookings for maternity care.
- 2.12 The role of care-leaving services has been expanded to support care leavers who transition into parenthood. This involves monthly meetings between adult and children services, a joint housing protocol for care leavers, and updated pre-birth guidance.
- 2.13 The Partnership emphasises a holistic approach, focusing on child outcomes and involving extended families and neighbourhoods in supporting vulnerable young parents. The development of Family Hubs, restorative practices, and increased multi-agency workforce development opportunities is fortifying this approach.
- 2.14 RECOMMENDATION 3: CLEAR EXPECTATIONS ON RISK ASSESSMENT AND DECISION MAKING**

- 2.15 In response to the call for more explicit expectations regarding risk assessment and decision-making, the BDSCP has undertaken several initiatives. The Integrated Front Door (IFD) has been implemented, ensuring timely service provision.
- 2.16 Strategy meetings, integral to the IFD, have undergone a continual review and refinement. The partnership has identified and is addressing key areas for improvement, particularly concerning the attendance and punctuality of these discussions. Moreover, progress is being made in reviewing and enhancing current processes, particularly on strategy discussions and Section 47 investigations. While the partnership has made progress in ensuring these procedures are consistent and embedded in practice, there is a collective acknowledgement that sustained efforts and diligence are essential to maintain and further elevate the standards of these critical safeguarding processes.
- 2.17 The Children's Social Care (CSC) has revamped its chronology template, aligning it with the National Law Group and providing bi-monthly training on chronology completion.
- 2.18 The David Thorpe Model approach to the IFD has been introduced. This model, combined with the updated policy for safeguarding children's supervision in 2022, aims to ensure effective, timely, and professionally challenging supervision of cases. Current efforts are focused on broadening the understanding of supervision across multiple agencies, including Police, Health services, and Children's services. However, a recent review indicated that only 50% of cases have recorded supervisory oversight, highlighting an area for continued improvement.
- 2.19 Furthermore, the BDSCP has emphasised the importance of professional curiosity, disguised compliance, and information sharing. Seven Minute Briefing guides have been published on these topics, and a complete training programme has been delivered to social workers.
- 2.20 In June 2023, the BDSCP, in collaboration with the Bradford Adult Safeguarding Board, hosted a pivotal joint conference centred on professional curiosity for frontline practitioners. This conference garnered the participation of over 100 delegates and featured nationally recognised speakers, underscoring the community's commitment to this crucial aspect of safeguarding. A highlight of the event was the afternoon session, which presented a case study derived from this review, offering insights and learning points from the findings. This case study served as a practical example to reinforce the theoretical knowledge imparted, ensuring that the principles of professional curiosity are understood and effectively applied in practice.
- 2.21 The co-location of the Emergency Duty Team (EDT) with the police has enhanced information sharing, and the review of the West Yorkshire Consortium Tri Ex procedures ensures alignment with best practices.
- 2.22 RECOMMENDATION 4: REVIEW AND COMMISSION OF DOMESTIC ABUSE SERVICES**
- 2.23 The BDSCP has taken significant steps to review and commission domestic abuse

services. An independent review led by Huddersfield University is currently assessing the effectiveness and availability of domestic abuse services across the Bradford District. This review aims to comprehensively understand service availability, capacity, and gaps, with a final report expected **by the end of November 2023**.

- 2.24 Training modules have been thoroughly reviewed, incorporating findings on domestic abuse, its impact on children, and the development of safety plans. A recent safeguarding conference in June 2023 emphasised these elements, and a dedicated website has been launched to provide resources and support on domestic abuse and sexual violence.
- 2.25 Additionally, the practice of routine enquiry about domestic abuse has become a standard part of the professional practices within midwifery and health visitor services. Bradford Teaching Hospitals NHS Foundation Trust (BTHFT), Bradford District Care NHS Foundation Trust (BDCFT), and Airedale NHS Foundation Trust (ANFT) have all incorporated domestic abuse awareness and routine enquiry into their safeguarding training protocols. Recent audits have shown a significant implementation of routine domestic abuse enquiries in clinical interactions at BTHFT, with BDCFT and ANFT also placing a strong emphasis on this practice within their training programmes. While these figures are encouraging, the Trusts acknowledge the necessity for ongoing efforts to ensure that this practice is consistently applied across all cases. The commitment to continuous improvement in this area reflects the dedication to safeguarding the well-being of individuals and families within the community.
- 2.26 The BDSCP's efforts in response to Recommendation 4 demonstrate a comprehensive and multi-faceted approach to addressing domestic abuse. Through independent reviews, training enhancements, and embedding routine enquiries in healthcare services, the partnership is continuing to make progress in ensuring a robust understanding and response to domestic abuse in the Bradford District.

2.27 RECOMMENDATION 5: UNDERSTANDING ROLES REGARDING ALLEGATIONS OF BRUISING

- 2.28 In addressing Recommendation 5, the BDSCP has made progress in ensuring practitioners understand their roles when considering allegations of bruising.
- 2.29 The co-location of the Emergency Duty Team (EDT) and West Yorkshire Police at Trafalgar House as facilitated improved strategy discussions. This move has enhanced the quality of these discussions and facilitated the review and improvement of Section 47 Investigations. As previously documented in this report, additional training is being provided to managers and social workers on Section 47 and strategy discussions.
- 2.30 Professionals requesting a Child Protection Medical Assessment (CPMA) now follow updated documentation to ensure all crucial information about the child and family is shared during the assessment. The Principle Social Worker is responsible for familiarizing new social workers with this updated guidance. CPMA training has been incorporated into the Section 47 training and induction processes. The Bradford District Safeguarding Children Partnership plans to engage with the

Children's Trust to seek assurance about the implementation and efficacy of these CPMA practices, underscoring the commitment to continuous improvement in child protection.

- 2.31 Child Protection Medical Assessments (CPMAs) in the Bradford District are consistently conducted in accordance with the guidance provided by the Royal College of Paediatrics and Child Health (RCPCH). Both Bradford Teaching Hospitals NHS Foundation Trust (BTHFT) and Airedale NHS Foundation Trust (ANFT) demonstrated commendable performance in a recent national audit undertaken by the RCPCH, reflecting their commitment to these standards. Continuing their dedication to quality and compliance, both trusts maintain rigorous review processes for Child Protection reports to ensure ongoing adherence to the RCPCH guidelines.
- 2.32 Training workshops and briefing sessions have been conducted, focusing on case recording, assessment, plans, and lessons learned from this review.
- 2.33 A comprehensive training programme has been developed and implemented, addressing issues raised in this review, including medicals, information sharing, and bruising. The bruising has become a regular topic within existing training for social workers, ensuring they are well-equipped to handle such cases. Furthermore, Police colleagues have increased the number of Digital Media Investigators to bolster the Child Protection processes.
- 2.34 In conclusion, the BDSCP's actions in response to Recommendation 5 demonstrate a detailed approach to enhancing practitioners' understanding of their roles when dealing with allegations of bruising. Through improved strategy discussions, updated CPMA guidance, adherence to RCPCH standards, streamlined information provision, and comprehensive training. The commitment to multi agency training ensures that frontline practitioners are well-prepared and informed, fostering a more robust child protection system in the Bradford District

2.35 **RECOMMENDATION 6: REVIEW INFORMATION-SHARING PROTOCOLS**

This recommendation underscores the criticality of establishing and maintaining robust information-sharing protocols to safeguard children effectively. Recognising this, the BDSCP has taken decisive measures, including strategically co-locating EDT with the police at Trafalgar House. This initiative has substantially bolstered real-time information exchange, ensuring that vital data is accessible when it's most crucial. Concurrently, the district's statutory partners are reviewing and refining their existing information-sharing protocols. This comprehensive review is about alignment with current best practices and anticipation and preparation for future guidance.

- 2.35 In line with this forward-thinking approach, the BDSCP is actively reviewing and considering the insights from the recent parliamentary report, "Improving Multi-Agency Information Sharing." This report, which emphasises the enhancement of existing information-sharing protocols, serves as a beacon for the BDSCP's ongoing efforts.
- 2.36 Additionally, the BDSCP is keenly awaiting the revised "Working Together

Guidance 2023." Even though it's currently in the consultation phase, this guidance is anticipated to fortify information-sharing practices further. Once finalised, the BDSCP is poised to adopt and integrate the recommendations from this guidance into its operational framework. The partnership's proactive stance on this matter underscores its commitment to ensuring that every piece of shared information contributes effectively to safeguarding children in Bradford.

2.37 BDSCP'S COMMITMENT TO ROBUST INFORMATION SHARING

The Bradford District Safeguarding Children Partnership acknowledges that information sharing consistently emerges as a pivotal theme in numerous reviews, both at the national and local levels. Recognising its paramount importance, the BDSCP is committed to exploring innovative avenues to bolster the confidence of staff in this domain.

2.38 The partnership believes that when practitioners have the right tools and knowledge, they can share information more effectively, knowing they stand on solid legal and ethical ground. While improvements have been made, the BDSCP is cognisant of the journey ahead. The intent is to cultivate an environment where information sharing becomes second nature, underpinned by trust, clarity, and the collective goal of safeguarding the vulnerable.

2.39 The partnership's will continue with ongoing efforts to refining this crucial aspect of child protection, ensuring that every piece of information is harnessed to its fullest potential for the welfare of the children in Bradford.

2.40 The Oversight & Delivery Group, under the guidance of its Chair, has taken strategic steps to amplify accountability and transparency in the challenge process. A series of assurance meetings with key agencies integral to the action plan's execution has been undertaken.

2.41 These meetings serve as a platform for a comprehensive assessment of progress against the plan's recommendations and actions. They also foster constructive dialogue and challenge, ensuring that the partnership's approach to challenge remains dynamic and continues to focus on service improvement.

2.42 The Practitioner Forums, designed by the Business Unit Manager and facilitated by the Independent Chair and Scrutineer, have emerged as a vital mechanism for two-way communication between the safeguarding partnerships and frontline practitioners. These forums foster the sharing of skills and expertise and facilitate discussions on impactful information concerning vulnerable children, adults, and families.

2.43 The Independent Chair recognises the immense value of these forums and envisions them as an ongoing engagement tool within the quality assurance framework.

2.44 EXPLORING PROGRESSIVE PRACTICE: THE BRISTOL INSIGHT MODEL

2.45 In the pursuit of continuous improvement, the BDSCP has been actively exploring progressive practices in child safeguarding. A promising avenue that has emerged

is adopting a model aligned with the "Bristol Insight" and the "Think Family Database." This innovative approach, which emphasises a holistic view of child welfare, was spotlighted as a best practice in the recent Social Care Review led by Josh MacAlister.

2.46 By integrating the principles and methodologies of this model, the BDSCP aims to enhance its data-driven decision-making processes, ensuring that every intervention is both timely and effective. The "Data as One" project board has been entrusted with ensuring this initiative's successful implementation and monitoring. This board will oversee the integration of the model, ensuring that its principles are embedded in the partnership's daily operations, ultimately driving positive outcomes for the children of Bradford.

2.47 A CONTINUOUS COMMITMENT TO EXCELLENCE IN SAFEGUARDING

2.48 The Bradford District Safeguarding Children Partnership (BDSCP) has dedicated significant time and resources to meticulously compile and execute the actions within the main action plan. This commitment reflects our focus to the safety and well-being of the children in our district. All but one of the actions have been completed, with the final action set for completion in November.

2.49 It's imperative to understand that safeguarding is a dynamic and evolving process. While we acknowledge the completion of specific actions, many of these represent ongoing commitments that will require continuous monitoring, review, and adaptation. For instance, monitoring and reviewing strategy meetings is not a one-time task but an enduring responsibility, ensuring our practices remain robust and responsive to the needs of our community.

2.50 The BDSCP is not just ticking boxes but is deeply invested in improving our safeguarding practices. BDSCP remains steadfast in its dedication to continuous improvement and elevating service delivery standards.

2.51 The learning from the review was published in the Bradford District Safeguarding Children Partnership's Annual Report for 2022/23. This information was posted on the Safer Bradford website on October 31st and presented to the Council Executive Committee on November 7th, fulfilling the obligatory duty to disseminate such findings.

2.52 The profound impact of the loss of a child resonates deeply within our community and especially among those of us in safeguarding roles. Such events serve as poignant reminders of the gravity of our responsibilities. As a partnership, we are resolutely committed to ensuring that every child in our care receives the protection, support, and opportunities they rightfully deserve.

3. OTHER CONSIDERATIONS

There are no other considerations.

4. FINANCIAL & RESOURCE APPRAISAL

4.1.1 There are no financial issues arising from this report. .

5. RISK MANAGEMENT AND GOVERNANCE ISSUES

5.1 The protection of Children is the highest priority for the Council and its partners when considering the implications of abuse, as is the provision of services to support those who are victims of this abuse. Failure to protect and provide appropriate services significantly increases the risk to children in the district. It would lead to significantly reduced public confidence in Bradford Council, West Yorkshire Police, the Health economy and other partners, as has been demonstrated nationally.

6. LEGAL APPRAISAL

6.1 There are no direct legal implications arising from this report, in that it does not impose any additional legal duties or obligations on the Council. Rather, it provides an update on recommendations for improvement of services, many of which have either already been adopted by agencies, or which will be incorporated into the future working practices of those agencies in the exercise of their statutory duties.

7. OTHER IMPLICATIONS

7.1 SUSTAINABILITY IMPLICATIONS

Nil

7.2 TACKLING THE CLIMATE EMERGENCY IMPLICATIONS

Nil

7.3 COMMUNITY SAFETY IMPLICATIONS

7.31 The Bradford Community Safety Partnership (CSP) and BDSCP are essential collaborators in protecting the community's most vulnerable individuals. The implications for the BDSCPs 2022/23 annual report show enhanced cooperation and communication between these partnerships, sharing knowledge, resources, and best practices to mitigate identified risks effectively. BDSCP, & CSP intend to explore overlapping areas of responsibility. Continued opportunities may exist to refine roles or develop joint strategies for more impactful community safeguarding.

7.32 Across West Yorkshire we are adopting a public health approach to reducing violence and seek to identify the common risk factors driving violence and the protective factors preventing violence. This encourages identification of these factors and implementing interventions across all levels: individual, relationship, community and societal, at the same time.

7.33 The public health approach to violence reduction has dedicated research and evidence at its core and addresses the inequalities that can lead to involvement in serious violence.

7.4 HUMAN RIGHTS ACT

7.5 The use of violence and intimidation is a violation of the rights of the child/adult under the Human Rights Act. The multi-agency partnership arrangements are intended to prevent the rights of the child/adult being violated in this way.

7.5 TRADE UNION

Nil

7.6 WARD IMPLICATIONS

Nil

7.7 AREA COMMITTEE LOCALITY PLAN IMPLICATIONS

Nil

7.8 IMPLICATIONS FOR CHILDREN AND YOUNG PEOPLE

7.81 The perspectives and well-being of young people are at the forefront of every measure implemented. The updates to strategy discussions, information sharing protocols, and the concerted efforts in training and process refinement directly contribute to a more robust safeguarding framework. This not only aligns with the Council's legal and moral duties as a Corporate Parent but also actively promotes better outcomes for Looked After Children. By enhancing the precision and responsiveness of our safeguarding practices, we are creating an environment where the voices of young people are heard, and their safety and development are prioritised, ensuring that the impact on Bradford's youth is positive and enduring.

7.9 ISSUES ARISING FROM PRIVACY IMPACT ASSESMENT

7.91 The nature of child protection work requires partners to manage confidential matters and data under GDPR regulations in accordance with individual agency guidelines. There is no sensitive data included in this report that requires a Privacy Impact Assessment None.

8. NOT FOR PUBLICATION DOCUMENTS

Nil

9. OPTIONS

Nil

10. RECOMMENDATIONS

10.1 The Committee is requested to acknowledge and note the progress against the recommendations.

11. APPENDICES

12. BACKGROUND DOCUMENTS

Nil



Report of the Strategic Director of Children’s Services to the meeting of Children’s Services Overview and Scrutiny Committee to be held on Wednesday 29 November 2023

H

Subject: Update on the Bradford Placement and Sufficiency Strategy

Summary statement:

The Children Act 1989, the Sufficiency Statutory Guidance (2010) and the Care Planning, Placement and Case Review Regulations (2010) places a duty of ‘Sufficiency’ upon Local Authorities (or their Trusts). Under this duty Local Authorities (or their Trusts) must, so far as is reasonably practicable, ensure that there is a range of locally available placements, either by direct provision or commissioned services, sufficient to meet the needs of all children in care (CIC).

In March 2022 the existing 2020-2023 Placement and Sufficiency Strategy and action plan was shared with this Committee. In March 2023 a further update regarding the progress of this strategy and action plan was given and the Committee also advised that in June 2022 Cabinet had approved an updated, 2022-2025 Placement and Sufficiency Strategy,

EQUALITY & DIVERSITY:

As a Corporate Parent Bradford Council, and its agent, Bradford Children and Families Trust (BCFT), must provide a service that meets the broad range of needs within its Children in Care (CIC) population and the wider demographic of young people in the city in general. The placement options available need to be sufficiently diverse, targeted, and have the necessary expertise, to meet the (differing) needs of individuals and ensure all children, especially those with complex care requirements, can have their needs met.

Marium Haque
Strategic Director Children’s Services

Portfolio:

Children & Families

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Overview & Scrutiny Area:

Children’s Services

1. SUMMARY

- 1.1** The Placement and Sufficiency Strategy 2022-25 (and its 2020-2023 predecessor) sets out how Bradford City Council, and its agent, Children and Families Trust, BCFT, will work to ensure that Bradford's Children in Care (CIC), are living in suitable, stable, homes that enable them to thrive and achieve their potential. This update is specifically regarding progress against the red and amber actions in plan presented in March 2023 and particularly regarding fostering and adoption (As per the recommendation and action from Children's Services Overview & Scrutiny Committee Wednesday 15th March 2023 that an update regarding the Placement and Sufficiency Strategy plan be provided and include some detail regarding the in-house Fostering Service and Adoption). Members are asked to consider this update.

2. BACKGROUND

- 2.1** The Children Act 1989, the Sufficiency Statutory Guidance (2010) and the Care Planning, Placement and Case Review Regulations (2010) places a duty of 'Sufficiency' upon Local Authorities (or their Trusts). Under this duty Local Authorities (or their Trusts) must, so far as is reasonably practicable, ensure that there is a range of locally available placements, either by direct provision or commissioned services, sufficient to meet the needs of all children in care.
- 2.2** This is a significant responsibility for Local Authorities, particularly so for Bradford where the number of Children in Care has increased in recent years. In March 2017 there were 926 children and young people looked after, by October 2023 there were 1,591, a rise of 72%% in 6.5 years. The demographic of Children in Care is also changing, for example more children of British Asian heritage becoming looked after.
- 2.3** The preceding (2020-2023) Sufficiency Strategy has been shared with this committee previously. The new Placement and Sufficiency Strategy 2022-25, which was approved in Cabinet in June 2022, was also shared in March 2023. When it was shared, an update was requested regarding the strategy action plan and also regarding fostering and adoption.

3. OTHER CONSIDERATIONS

BRADFORD PLACEMENT AND SUFFICIENCY STRATEGY 2022-2025 - OVERVIEW

- 3.1** The Strategy is a comprehensive document setting out the data regarding CIC and setting out the Council's (and now BCFT's) response to the issues and commitment to ensuring good homes for all Bradford CIC at a time of increasing numbers of children and young people (C&YP) being looked after.
- 3.2** The data in the strategy indicated a continuing upward trend in the number of Bradford CIC Further it showed, that whilst a rise in numbers is consistent with the wider national picture, the increase is bigger and faster in Bradford when compared

to National, Regional and Statistical Neighbour trends. This highlighted a need for Bradford to reduce the numbers of children entering care and improve the quality and quantity of placements available (to ensure permanence and stability) for those who do become looked after.

- 3.3** Regarding adoption the strategy noted that Bradford is part of the One Adoption West Yorkshire (OAWY) consortium and that this is generally working well with an increased pool of adopters. The data in the strategy indicated that the number being placed for adoption has fluctuated in recent years but appeared to be increasing again.

NB: The 2022-2025 Strategy is currently in the process of being refreshed and a new Action Plan developed to accompany the refreshed strategy.

- 3.4** The strategy indicated that whilst an increase in care numbers is to be expected in an LA under Ofsted intervention, the accelerating trajectory should be of concern, especially the volume of emergency admissions. The strategy notes that an improved, Prevention and Early Help offer, especially one regarding preventing family breakdown (“edge of Care work”), needed to be developed and implemented, and current resources in this area reviewed (now done).

- 3.5** Supporting, enabling, and empowering families to care for their own children, where possible, should always be the aim of any Children’s Services. However, when children do become looked after the aim is always to find them a suitable alternative family environment (either Adoption, SGO, Friends and Family foster carers, in house retained foster carers or commissioned IFA carers). For some children, especially older adolescents, especially those with additional needs this is not always possible and residential care is found (in house if possible or external, commissioned provision, if it is not. This is at the heart of the sufficiency strategy and the action plan being developed.

4. FINANCIAL & RESOURCE APPRAISAL

PROGRESS SINCE MARCH

- 4.1** There is a lot of work in this area and progress continues to be made against the Strategy and Action Plan and improvements are being made regarding supporting CIC but further work is needed e.g. in reducing the numbers becoming looked after (especially adolescents), increasing the number and range of placements (residential and foster care) and recruiting more in house foster carers.

OCTOBER 2023 Headline Data – CIC Demographic and Placement Types

1591 Children in Care

The ethnic demographic of the main cohort of children is:

- White British background – 799 (50%)
- Asian British Pakistani background – 145 (9%)
- Asian British White background – 128 (8%)

NB: In the March 2023 paper to the CSOSC (based on March 2021 data) the committee were advised that Bradford CLA population was 58% white, (a consistent figure until recently) but that there was a growth in the number of British Asian heritage CLA. As can be seen the percentage of white British CLA has reduced by 8% in the last 2.5 years.

790 (49.6%) of the current cohort are aged over 11.

872, 54.8% are male, 712, 44.8%, are female and 7, 0.4%, are Trans/non-binary

Type of Placement	Percentage of Total Children in Care Cohort
Foster Care - Long and Short Term	40%
Family and Friends Long and Short Term	26%
Place with Parents	8%
Residential - in house	1%
Residential - purchased	13%
Semi Independent	8%
Mother and Baby Unit	Less than 1 %
Secure Unit/Young Offenders Institution/Prison	Less than 1 %
NHS/Other Hospital	Less than 1 %
Placed for adoption	2%
Total	

NB: Current capacity in Bradford in House Children’s Homes is 23 mainstream places plus 11 short breaks and 5 permanent places for disabled children. Two homes are currently closed for refurbishment and when these re open in the early new year will provide 10 more mainstream places. Two places will also go when Valley View and the Willows close before Christmas (a new home is being purchased to replace the Willows).

We have 513 fostering households registered in total of which 270 are Friends and Family Foster Carers (FFFCs) and there are 243 mainstream Foster Carers. 258 children are placed with Friends and Family Carers and 323 cared for by mainstream Foster Carers.

Regarding supported lodgings we have 9 places and regarding supported accommodation, we have 9.

NB: Whilst not counted as CIC there are also 404 SGO carers being supported with payments.

4.2 Work is ongoing regarding:

- Reducing the numbers coming into care (“Turning the Curve”);

- Improving and increasing the use of Friends and Family Foster Carers and increasing the use of Special Guardianship Orders (SGOs);
- Work re adoption is improving e.g. the Should be Place for Adoption (SHOBPA) meeting and process is working well and One Adoption West Yorkshire (OAWY) is now picking up all non-agency adoption and inter-country adoption applications.
- The adequacy and cost of placements (Placement Review Panel);
- Working with partners (especially the ICB) regarding sharing costs and better supporting children in care;
- Increasing the number of Foster Carers (Service Development Plan);
- In house residential provision which is being modernised and better utilised;
- Improving the range and number, and coordination of, short breaks, especially a more holistic, partnership approach (between Council, Trust and ICB) and the respite and short breaks offer at the two specialist residential homes is being reviewed as part of this and consideration as to whether the places offered can be increased;
- The commissioning of placements, there have been significant improvements. Bradford Council's Commissioning Service has been increased and is developing a good and strong relationship with the Trust. Additionally, the Trust has augmented its placement team and a review have been undertaken regarding procurement and we continue to work well with the White Rose Framework Agreement;
- Post 16 Supported Accommodation provision. The new regulation process has started to be implemented and as a result an application for all in house Supported Accommodation to be registered was made in October.

4.3 Additionally, a detailed review of the “market” (in house provision and purchased provision) is being undertaken and a report is expected in December 23 (this report will support the refresh of the 2022-2025 Placement and Sufficiency Strategy).

4.4 However, challenges remain and despite the work and improvements in this area the numbers entering, and in, care, especially adolescents, remain higher than we would want and the number of these children with complex needs (and thus difficult to place) is also high. This is not an issue unique to Bradford, it is being replicated in many Local Authorities (LAs) and increased demand and reduced supply has led to a rise in costs. This situation creates pressure on staff on and resources.

4.5 Work is ongoing regarding further refreshing the strategy with current date and developing a new, more detailed action plan to give a more accurate current position and response. The Trust is working with stakeholders to refresh the Strategy and plan and ensure a systemic response to meeting the needs of this vulnerable group of children.

NB: The above is based on data in a strategy that was agreed in the summer of 2022, 15 months ago, data is currently being refreshed to advise on a new plan to support the strategy. However, a similar picture still exists regarding pressure on services. However, green shoots are appearing, and the situation is improving slightly in certain data e.g. in the strategy data show over 10% of C&YP being placed at home, this is now down to just under 8%.

4.6 The strategy notes that Bradford already does relatively well in supporting family and friends to care for CIC e.g. as family and friends foster carers but in specific relation to none related Foster Care we are also making improvements. The recruitment and retention of (in-house) foster carers is one of the most important roles for the Trust. By recruiting and retaining a range of skilled, knowledgeable, and experienced, foster carers we are able to provide safe, warm and loving homes to the most vulnerable children and young people within our community, ensuring they are more likely to thrive. Further, providing this care through in house carers rather than other arrangements, (IFA or Children's Home) is a more efficient and economic (and, due to the local connection, probably more effective) and therefore benefits the Trust in various ways.

4.7 BCFT Fostering Service is working hard to recruit new, and retain existing, foster carers. In the six months of the trust we have introduced the following:

- Faith in Fostering Campaign launched
- Ramadan – Radio campaign released to promote fostering in the Muslim community.
- Foster Care Fortnight - working with Northern Rail to take over Forster Square station as 'Foster Square'. This attracted extensive media coverage both locally and nationally.
- Play in the park - sessions in summer to promote fostering.
- Shared Care Campaign – targeting health venues to provide information sessions this will include video production with carers for promotion.
- LGBT Week in March – recruitment and retention event in the community which will include local business Cake 'Ole in Bradford City centre.
- We are working on improving relationships with the Asian Express and T&A newspaper to support with advertising.
- Staff Fostering Policy written and agreed off.

4.8 Regarding retention we listen to our carers and acknowledge the importance of retaining our current foster carers and financially supporting them is not the only consideration. In consultation with our carers we have recruited an Enrichment Officer who will be leading on the retention plan and retention activity which has also been used to enrich our marketing and recruitment to new carers. Additionally, we have:

- Improved links with Bradford Independent Foster Carers Association. They have been working more closely with the service to engage foster carers with the service. They have created an additional support group in Keighley to complement the existing group in Shipley.
- Restructured the service in order to allocate carers on a locality model to support building relationships and linking carers in with support groups and locality-based support services.
- Engaged Norton Webb to deliver Level 3 Diploma Children & Young people's workforce training, currently 20 carers are completing this.
- Developed a foster carer ambassador scheme – we have a number of carers interested in this and they will be supporting the service developments in different areas for example buddy scheme for foster carers and training.
- Worked with Principles Trust to provide holidays for foster carers and their

children.

- Worked with Buckton House activity centre and provided some activity days and short stays for foster carers and their children.
- The recommend a friend scheme has been re launched and payments increased.
- The service continues to develop the Mockingbird model and is currently recruiting a second constellation. This will provide additional support to carers.
- Recruited a training officer to improve our training offer to carers.
- Made a successful application to the Government Household Support Fund to support foster carers pay their water and energy bills this year were awarded £330K (This is a one-off payment).

4.9 However, there are challenges to recruiting and retaining foster carers, it is becoming harder to recruit, not just locally but nationally, fostering services are under huge pressure nationally. One report by Ofsted revealed that the number of available foster placements nationally has decreased by 23% over the last 4 years. At the same time, the number of people enquiring about fostering has decreased.

4.10 There are many reasons for this, such as people living in smaller homes and the fact that many more people are working from home since the pandemic and have turned spare bedrooms in to home offices and thus not having the space to foster. Additionally the increased cost of living has impacted, another report produced by Foster Talk (a leading fostering support charity), found that 43% of all foster carers who responded thought they might have to give up fostering in the next two years due to the additional cost of fostering.

4.11 A report from the Nationwide Association of Fostering Providers (NAFP), the trade association of Independent fostering agencies, highlighted the reduction of available foster placements and the difficulty in recruitment of new foster carers in the North West. This has resulted in a large increase in the use of Independent Residential Child Care provision (with impacts on that market, e.g. increased cost).

4.12 Additionally, the provision of foster care has become a crowded and competitive marketplace. There are 30 independent fostering agencies operating in and around the Bradford district. These IFAs are recruiting carers locally and using them as a resource to sell to other authorities.

4.13 In recruiting and retaining fosters we are operating in a very challenging market, whilst we are working hard to recruit and retain carers, we have seen 12 mainstream carers de-registered in the year to date and additionally our recruitment efforts have yielded 5 new carers, with an extra 10 to be completed by December. If we do achieve the recruitment of 15 new carers by December and have no more de-registrations, then we will have seen an increase of 3 carers in total in the year to December (increasing placements by approximately 5).

4.14 Regarding Adoption we currently have 32 children (2% of total CIC cohort) placed for adoption. There are weekly SHoBPA (Should be Placed for Adoption) meetings to oversee the work regarding adoption and the relationship with OAWY is good and continues to strengthen. We meet quarterly with them regarding performance and challenge and received data and have good communication regarding service

delivery.

- 4.15** In the 1st quarter of 2023/24 the number of children placed reduced by 31% to 9 and the number adopted reduced by 20% to 12 when compared to the same quarter last year indicating a reduction in year on year performance regarding placements. However, in the same period the number of Agency Decision Making (ADMs – Decision to place a child with prospective Adoptive Parents) has risen 60% to 24 and the number of Placement Orders (POs – placing a child with a view to adoption) by 21% to 17. Additionally, the Percentage of children placed with OAWY approved adopters is now 89%, a rise of 27%. This indicates that we will likely see an increase in the number of adoptions over the coming year.
- 4.16** At quarter end there were 56 children with a placement order but not matched, of these 9 had a potential match, and 5 had a panel booked. The demographic of this group is 32 male, 24 female and 37 were under the age of 2, 14 under 5 and aged over 5. 23 were part of a sibling group and 33 were single children. In relation to the top 5 ethnicities represented in the group, 23 children were White British, 10 were White Other/White Irish, 6 were Gypsy/Roma, 5 Mixed heritage, White & Black Caribbean and 4 Mixed heritage White and Asian (59% of the group are White).
- 4.17** There has been an improvement in timeliness for the children adopted in the quarter. While these figures remain above the national indicators, the time taken between children entering care and moving in with their adoptive family is below the England average. Eight of the 12 children adopted were children considered more difficult to find adoptive families for due to their age, ethnicity or needing to be placed for adoption with a brother or sister.
- 4.18** Regarding the number of children and families receiving adoption support this has risen 12% to 175 and at 409 (231 in, 178 out), the number of letters processed by the letterbox team has risen by 38%.

NEXT STEPS

- 4.19** The Council, Trust and Partnership Sufficiency board is working on refreshing the strategy with new data and updating the action plan and this will be produced by March 2024. Additionally:
- The residential service is improving (5 out of 11 are now rated as good by Ofsted) and has become more stable. The use of agency managers has significantly reduced and now all but 1 of the homes is being managed by BCFT employees. The estate is being upgraded (two homes closed for refurbishment and one closing and being replaced by a new home, in the process of being purchased). Staff, are being trained in Therapeutic Crisis Intervention (TCI). All open homes are now full. The intention is for all existing homes to be open, operational, and occupied by February 24 and the new home by the autumn of 2024.
 - The Foster Carer Service has been augmented with some new resource and are implementing their improvement plan. They have improved the marketing strategy and are focussing on recruiting more in house foster carers.

Engagement by the Foster Care Service with Foster Carers, especially Friends and Family carers, is good and improving and more work is now ongoing to improve engagement and relationships between Children's Social Workers and foster Carers. Further, additional work is ongoing to increase the use of SGOs.

NB: As we are now a Trust, the Foster Care Service is legally and Independent Fostering Agency and as such will now get inspected by Ofsted in its own right, separate to the rest of the Trust. Work is ongoing regarding the preparation for this.

5. RISK MANAGEMENT AND GOVERNANCE ISSUES

6. LEGAL APPRAISAL

There are no legal issues arising from this report.

7. OTHER IMPLICATIONS

7.1 SUSTAINABILITY IMPLICATIONS

None.

7.2 TACKLING THE CLIMATE EMERGENCY IMPLICATIONS

None.

7.3 COMMUNITY SAFETY IMPLICATIONS

None.

7.4 HUMAN RIGHTS ACT

N/A

7.5 TRADE UNION

There are no Trade Union issues from this report.

7.6 WARD IMPLICATIONS

There are no Ward implications from this report.

7.7 IMPLICATIONS FOR CHILDREN AND YOUNG PEOPLE

Corporate Parenting is an important statutory duty of the Council as is the provision of sufficient placements to meet need. This Placement & Sufficiency Strategy helps meet those statutory duties and thus will be overseen by the Corporate Parenting Panel.

7.8 ISSUES ARISING FROM PRIVACY IMPACT ASSESMENT

None.

8. NOT FOR PUBLICATION DOCUMENTS

None.

9. OPTIONS

Not applicable.

10. RECOMMENDATIONS

10.1 Members are recommended to review and consider this progress update.

11. APPENDICES

None.

12. BACKGROUND DOCUMENTS

None.



Report of the Strategic Director of Children's Services to the meeting of Children's Services Overview and Scrutiny Committee to be held on Wednesday 29 November 2023

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Subject: Young Carers

Summary statement:

This report provides an annual update, specifically focusing on measures of performance, details of outcomes and improvements delivered, as requested.

The Young Carers Service is a commissioned service which meets the Council's statutory duty to provide an assessment for Young Carers, as well as providing other resources following assessment. The Carers Resource currently holds the contract for the Young Carers Service and in January 2023 successfully re-tendered alongside Adult Carers service and NHS West Yorkshire (ICB) Integrated Care Board, Bradford.

The new contract and monitoring started April 2023 and will run for 5 years with an option to extend 1plus1.

Recent figures in the 2021 census show 1.7% (785) of children aged 5-15 years old and 4.1% (1,221) of young people aged 16-19 years old are unpaid carers in Bradford District.

EQUALITY & DIVERSITY:

Equality Impact assessments were completed June 2022 as part of the re-tendering process and can be supplied if necessary.

Marium Haque
Strategic Director Children's Services

Portfolio:

Children and Families

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Overview & Scrutiny Area:

Children's Services

1. SUMMARY

- 1.1** The Young Carers Service is a jointly commissioned service with the NHS West Yorkshire (ICS) Bradford which meets the Council's statutory duty to provide an assessment for Young Carers, as well as providing other resources following assessment.
- 1.2** This report has been taken from the monitoring reporting that the Carers Resources service is asked to complete quarterly – therefore this report is retrospective from April 2022 to March 2023, with comparison details from 2021/2022. Key highlights from 2023 to 2024 in relation to KPI's are also included.
- 1.3** It is well documented that Young Carers often don't want to ask for help, or for people to know about them and Young Carers can often be hidden from society. The main aim of the service is to help other professionals identify Young Carers and offer Young Carers support should they require this. If a Young Carer only wishes to have minimal support through friendship groups and activities this is provided but the service will give more intense support when necessary.
- 1.4** The service's performance remains stable with a good understanding from Partners about the remit of the service. The service numbers have grown and there is an increasing need for Young Carers to have individual support and an increasing number of Young Carers with SEND needs.
- 1.5** The increasing numbers of SEND children, are those Young Carers who look after siblings with sometimes the same condition but of lesser complexity. These Young Carers require individual risk assessments and extra support for their own needs. We will be reviewing and exploring how these young people can be given a Short Break, within disability services rather than through the Young Carers service.

2. BACKGROUND

- 2.1** The Children and Families Act 2014 states that "young carer" means:

'A person under 18 years of age who carries out caring tasks and assumes a level of responsibility for another person which would normally be carried out by an adult.'

This is taken to include children and young people under 18 who provide regular and on-going care to a family member, usually because that family member has significant unmet care needs arising from disabilities, mental health needs or substance misuse. That care can involve:

- Emotional support;
- Taking responsibility – giving medication, looking after siblings, paying bills;
- Physical Care - personal care, helping someone to dress or move around, cooking, cleaning.

2.2 Key Highlights for Quarter 1 only 2023/24

2.2.1 KPI 1 – Numbers of Young Carers assessed and provided a service across the district.

Actual to Q1 - 108

Annual target 240

This figure is new Young Carers, the Provider noted that, following a continued effort to publicise the service through local and social media, and through the team's ongoing awareness raising work to promote early identification and appropriate referral of young carers, there has been an increase in referrals. The Provider has also worked with schools to alert them about the need for schools to identify young carers in the school census.

2.2.2 KPI 2 - Number of young carers supported within Family Hub areas.

Actual to Q1- 827

Annual target 750

This is a cumulative figure, the Provider has continued to operate a tiered model of support so that while they are able to see every young carer 1:1 for an initial impact assessment, they are also able to offer some 1:1 work to young carers who need it. Most of the engagement with young carers is through youth clubs and trips/activities, meaning they can continue to support a high number of young carers.

2.2.3 KPI 3 –% of referrals to be allocated within 5 working days of receipt.

Actual - 71%

Target 80%

Following the high volume of new referrals, performance was below target this quarter. This has been impacted by a member of staff on long term sick. Discussion with the provider indicates they are confident that they have appropriate measures and systems in place, and performance will improve. *The provider has employed additional staff to support with referrals and activities.*

2.2.4 KPI 4 - Number of places offered on day trips/activities/residentials.

Actual to Q1 - 182

Annual target 400

Activities at the youth clubs and trips etc delivered in school holidays are designed to increase well-being, mental and physical health and therefore resilience as well as peer support and social opportunities. An 'at home' activity was offered during half term - Bottles containing the ingredients to make cookies. This was extremely well received, with families indicating they loved the idea. This resulted in engagement from some families who the Provider rarely hears from. 100 kits were distributed, and it was still oversubscribed. Feedback was that, despite being an activity to do at home, young carers still found it a kind of respite as it was something different and they enjoyed doing it with their families. The Provider was sent lots of photos of the finished product. Figures for the Summer will not be available until Quarter 3.

2.2.5 KPI 5 – Number of Young Carers attending youth clubs

Actual to Q1 - 166

Annual target 250

Young Carer Youth clubs are delivered in each of the four family hub areas during school term time. These run alternate weeks as Budz (for ages 5-11) and uTime (for ages 11-18).

Following fundraising efforts, the Provider has been able to recruit a specialist Young Carer Activities worker who attends all the youth clubs, ensuring consistency and avoiding duplication of effort with planning etc. Clubs are growing in size with good friendships forming which is positive.

2.2.6 KPI 6 – Number of Primary Schools in the district to develop and maintain Young Carers Champions

Actual - 95%

Target 95%

The Provider has written to all schools offering training or an assembly etc given the new requirement for them to report numbers of young carers on the census. While the response rate was low, 5 schools had booked at the time of the Q1 monitoring meeting, with other schools indicating they plan to take up this offer in the autumn. Other work with primary schools includes: Assemblies; Top Tips for teachers; and lesson plans ready to go which have been developed with the help of the Provider steering group, Young Directions.

2.2.7 KPI 7 – Number of Secondary Schools in the district to develop and maintain Young Carers Champions

Actual - 95%

Target 95%

Over the course of the previous contract and this quarter the Provider received referrals for young carers from nearly all secondary schools. Because initial assessments are undertaken in school whenever possible this means the Provider has regular contact with them for booking rooms etc and staff go into the schools in the family hub areas they cover, becoming familiar faces.

The Provider also contacts the schools regularly throughout the year, providing posters etc especially around Carers Week, usually in June and Young Carer Awareness Day.

2.2.8 KPI 8 – % Service Users report overall satisfaction with the service.

Actual – not report on Q1

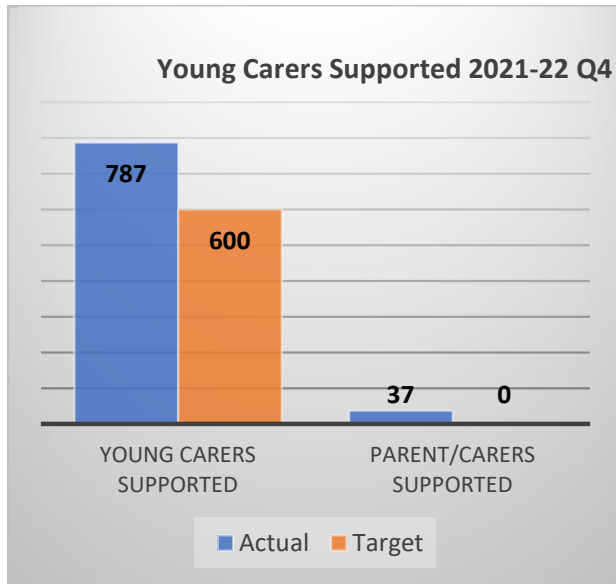
Target 90%

Discussion at the monitoring meeting highlighted difficulties with regards to reporting actual figures for feedback due to the range of activities, support and interventions offered – with feedback being recorded at different times for each of the interventions. The Provider has developed a web-based form that can pick up most activity feedback. The monitoring meeting on the 16th of November will discuss reporting on this feedback with consideration about the peer support

sessions and how, and if these can be sensitively and accurately recorded in a timely way.

2.3 Performance Highlight Report – Young Carers 2021 – 2023 Provider Performance Data Comparison Summary for 2021/22 and 2022/23

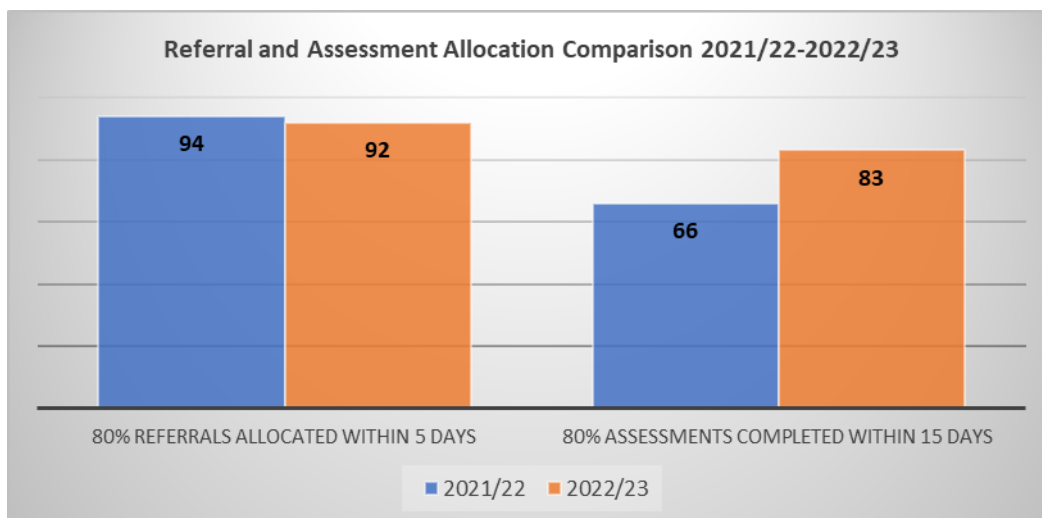
2.3.1 Number of Young Carers Supported



Number of young carers being supported through this contract continue to increase, and to exceed target. The numbers reported above were taken as at Q4 in both years – as to report on an annual figure would include double counting individual young carers.

Number of new young carers referred and supported during the first quarter of 2023 was 108.

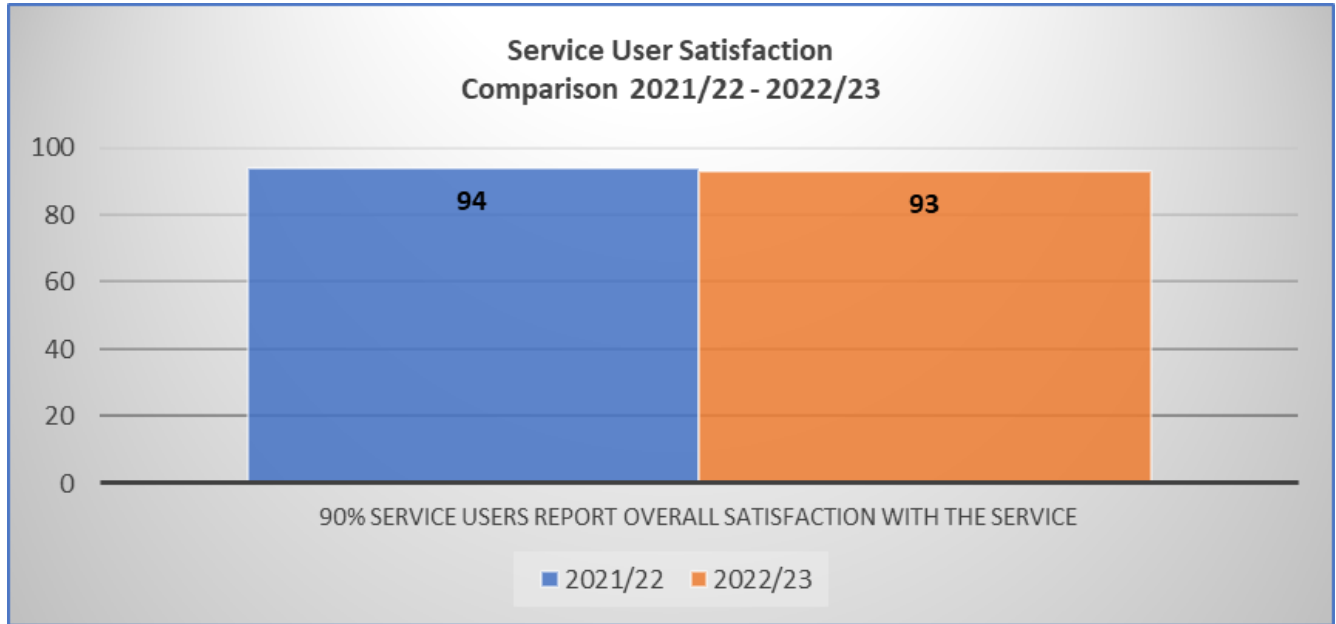
2.3.2 Referral and Assessment Allocation



Timeliness of referral and assessment allocation improved between 2021 and 2023, with overall performance in 2023 exceeding the target.

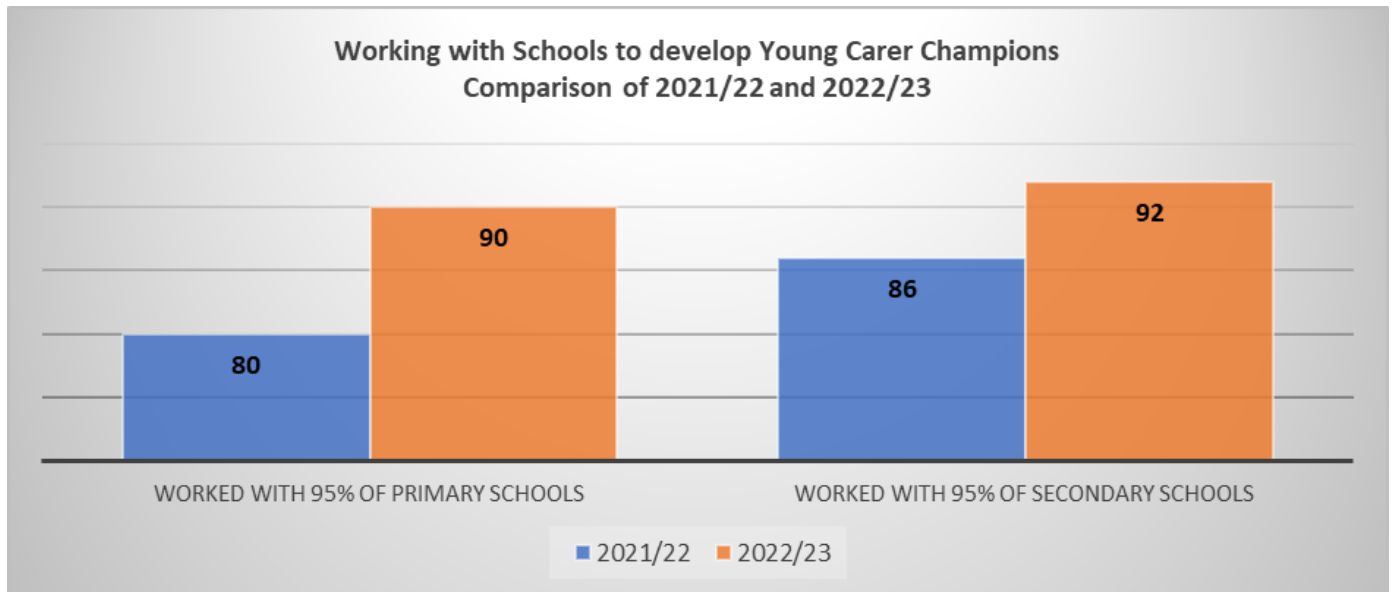
In the first quarter of 2023/24, performance fell just below the target of 80%, as highlighted above in KPI performance. This was because of staff absence and significant increase in referrals.

2.3.3 Service User Satisfaction



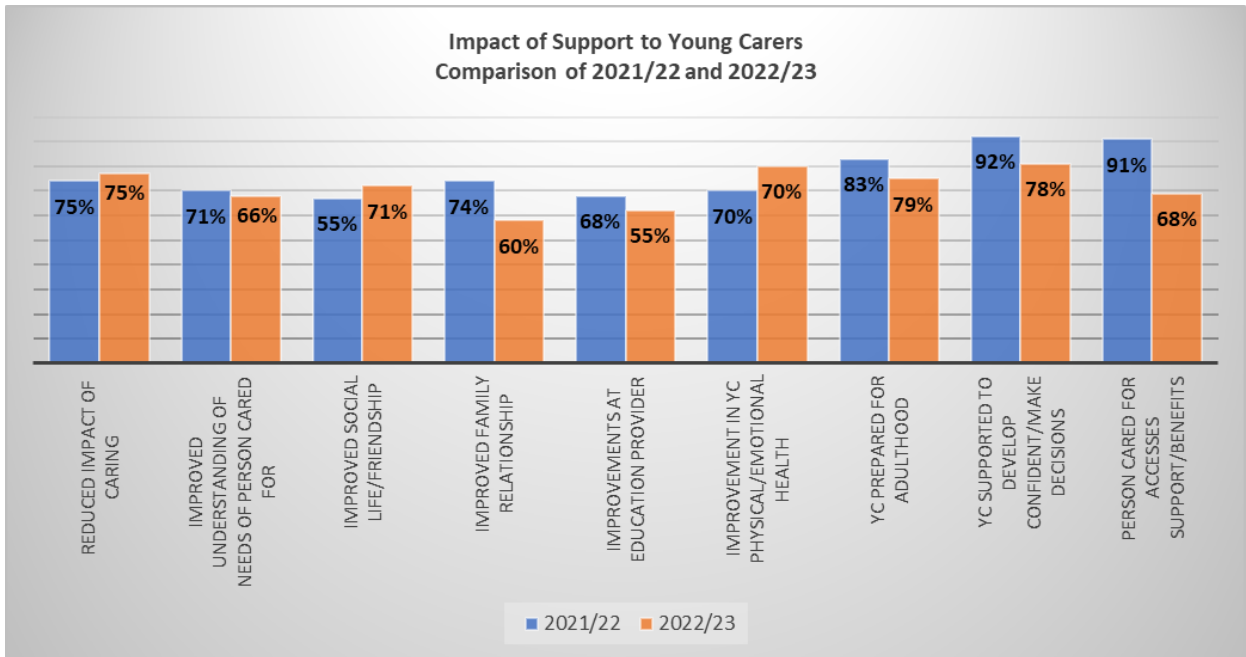
Service user feedback was overwhelmingly positive across 2021-2023.

2.3.4 Engagement with Primary and Secondary Schools



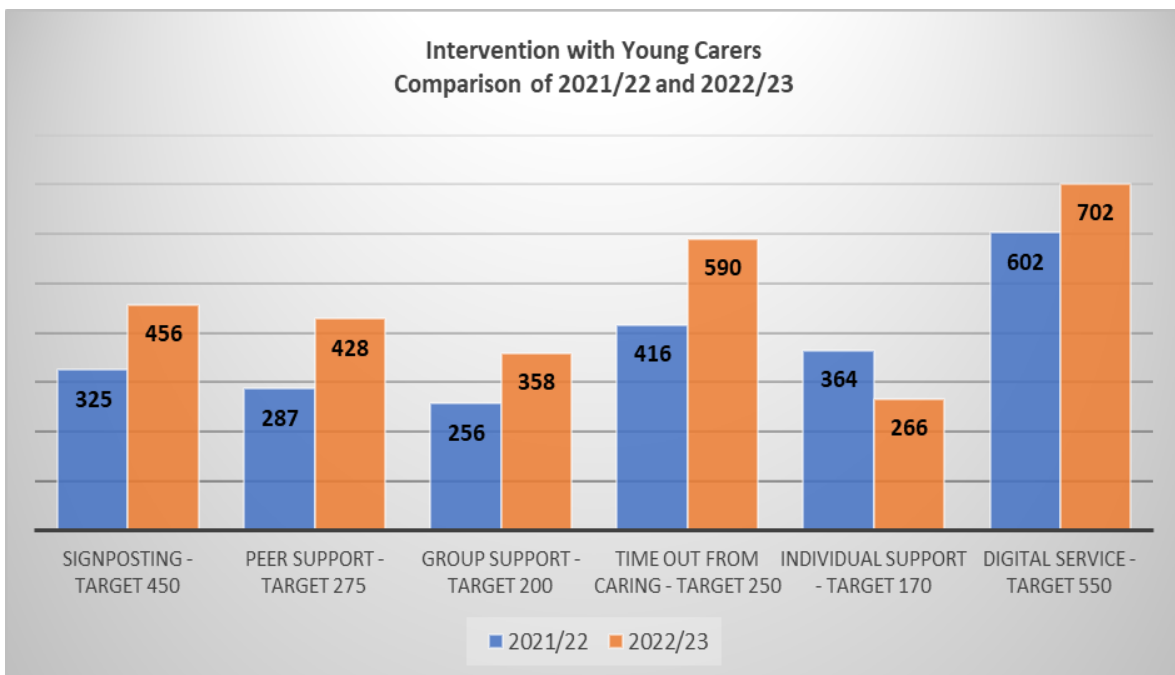
The number of schools worked with increased during 2021-2023, with the Provider working hard to engage with schools.

2.3.5 Reported Impact of Support to Young Carers



The percentages highlighted above are based on those young carers for whom an outcome was identified as being a particular issue. There were unusually higher percentages than in 2021/22 for confidence of Young Carers and the support given to the person being cared for. These increases were a direct response to the impact of covid on young people’s confidence and also the person being cared for in relation to worries about if their child went to school etc would they be more at risk of bringing covid home. The provider had to work really hard with some parents to get them to allow young people to go back to school.

2.3.6 Interventions with Young Carers



Signposting is being reported for those who were signposted personally by a staff member. Is it difficult to estimate how many people are using the signposting info on the website, but the number of hits on 'Useful Links' in 2021/22 overall was 459.

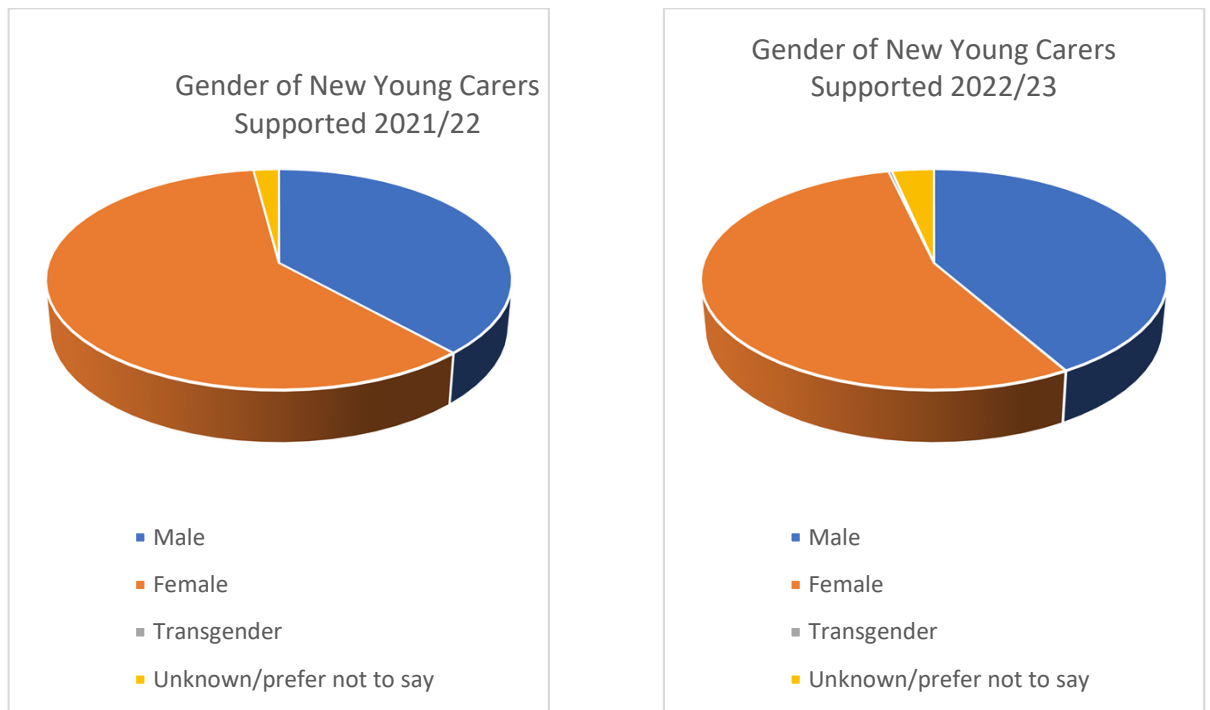
There were also 835 visitors to the young carer website in Q4 (over 2300 page views) so the measure to estimate number of young carers receiving a digital service (half those specifically visiting the Bradford young carer page) may be an underestimate.

Young Carer Service User Analysis – Annual Comparison 2021/22 and 2022/23
Total number of young carers supported:

2021/22 – 342 new users, with an average across the year of 604 young carers continuing to be supported on a regular basis each month.

2022/23 – 357 new users, with an average across the year of 805 young carers continuing to be supported on a regular basis each month.

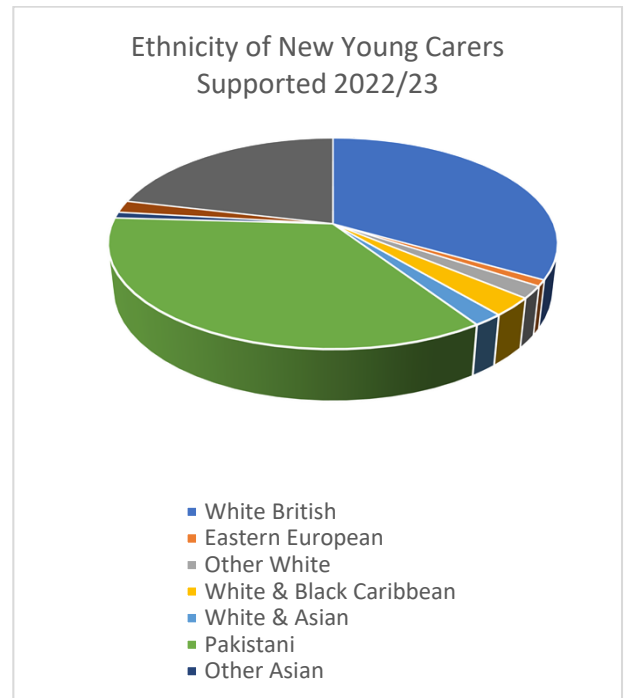
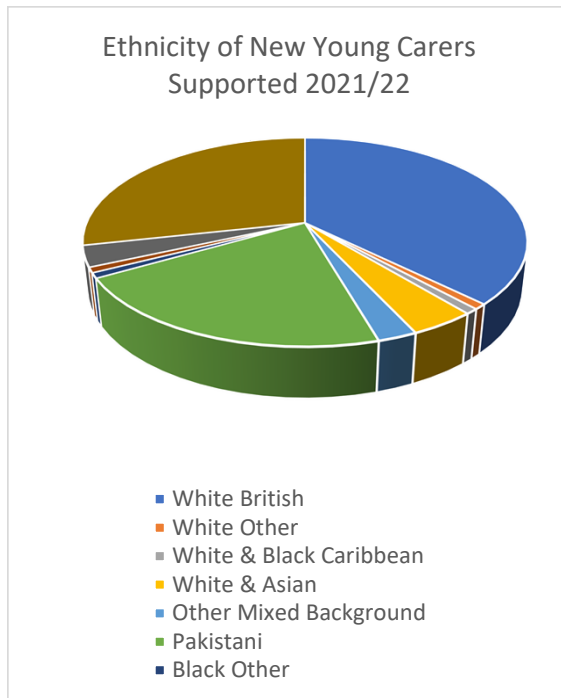
2.3.7 Gender of Young Carers entering the Service



There was little change in terms of reported gender of those young carers supported with approx. 60% female, 38% male and 2% unknown/ prefer not to say..

2.3.8 Ethnicity of Young Carers Supported

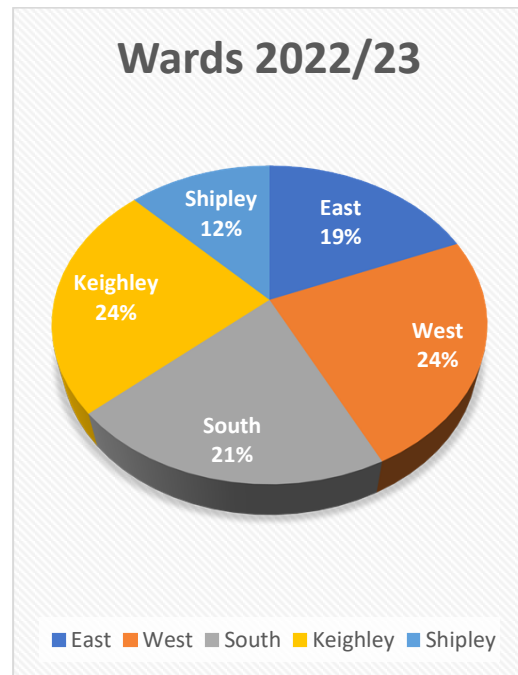
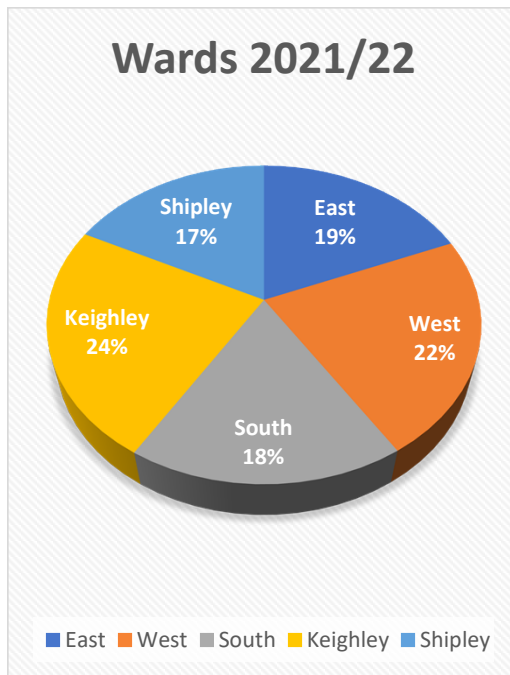
Ethnicity of Young Carers Supported



2022/23 saw an increase in the number of new referrals for Pakistani Young Carers.

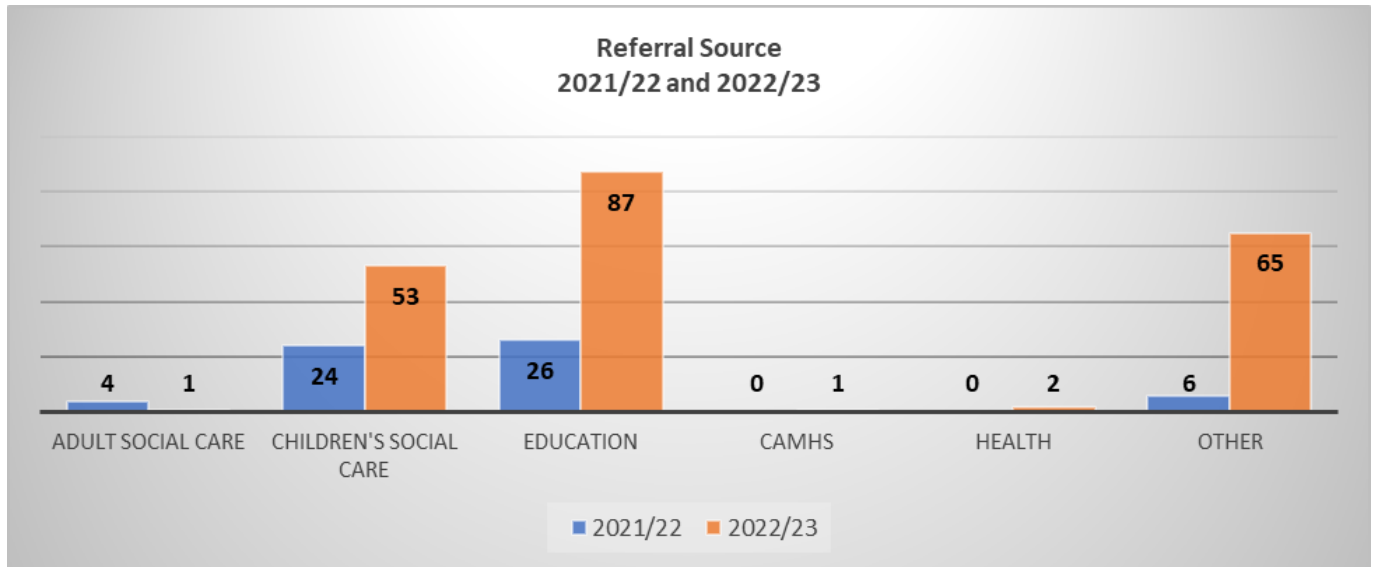
2.3.9. Ward data shown by Family Hub areas.

Ward Data



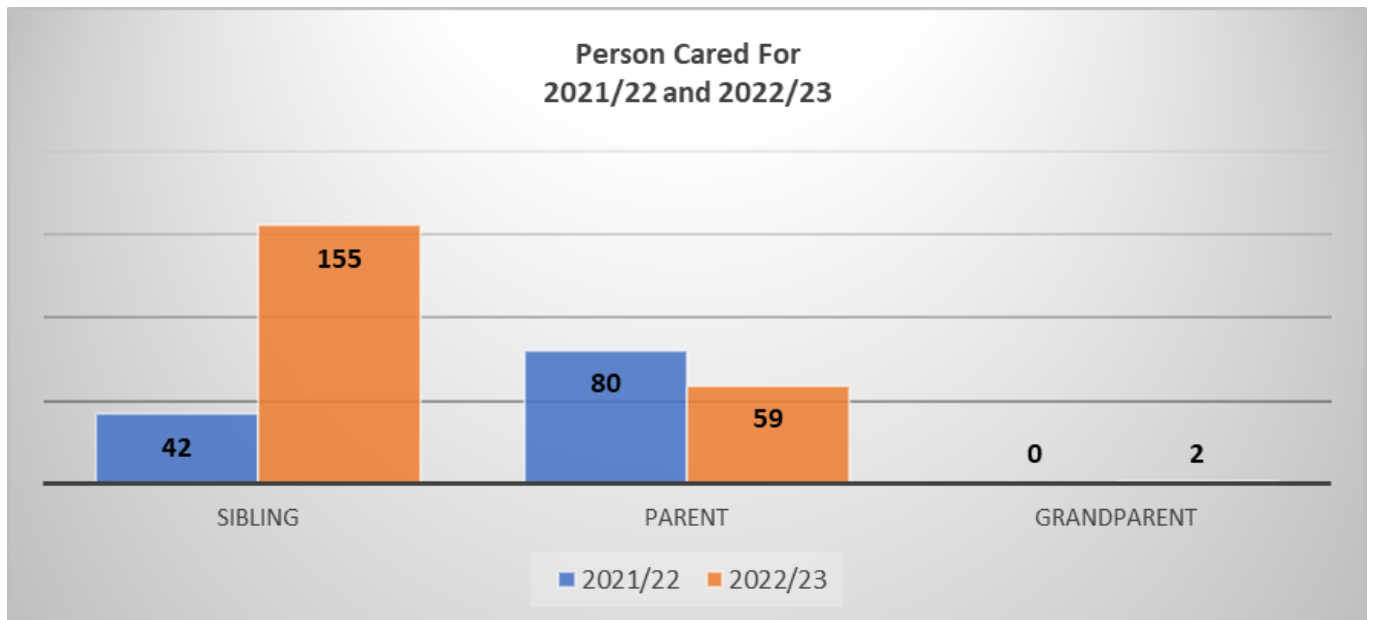
There were only slight variances in the split of young carers supported via Ward.

2.3.10 Referral Source



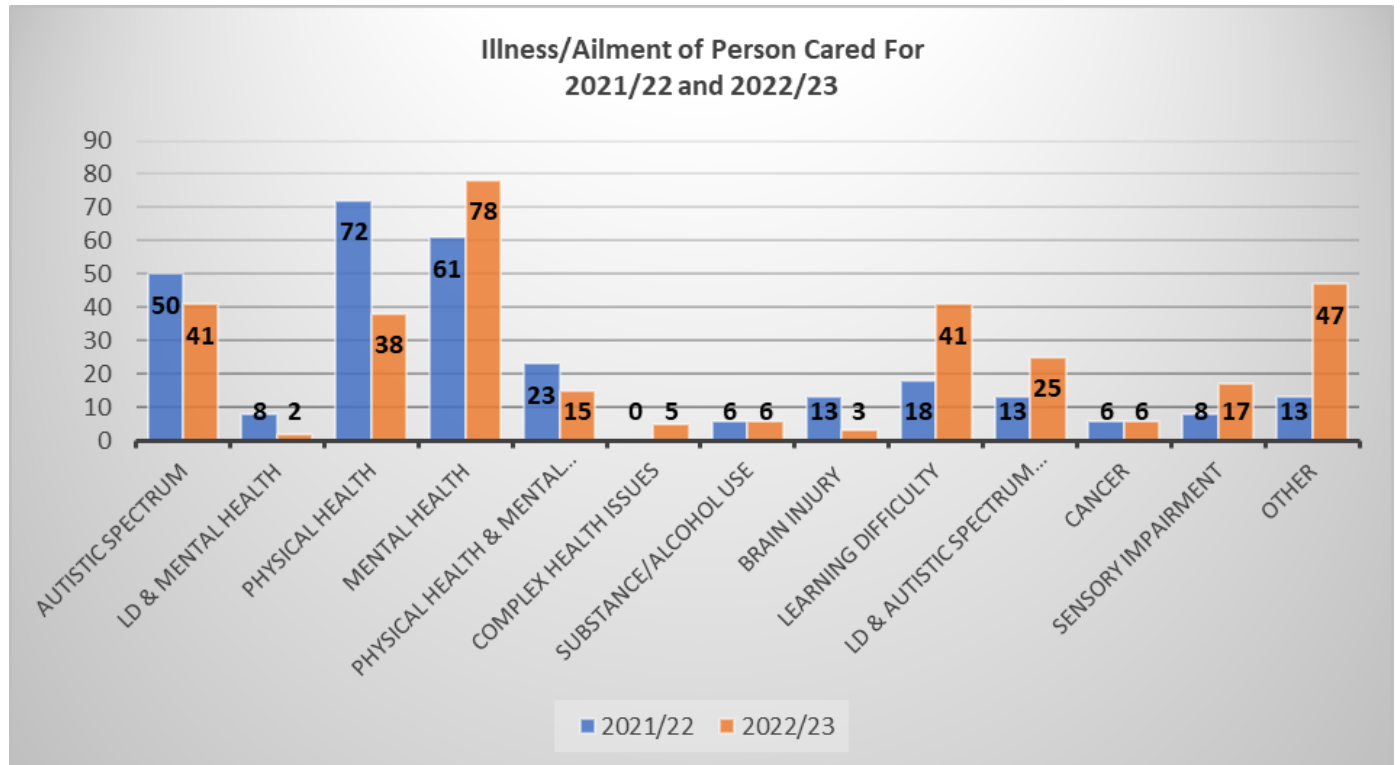
Referrals from Education and Children’s Social care saw a significant increase in 2022/23. Due to the high number of ‘other’ referrals sources in 2022/23, the options have been amended, in discussion with the Provider, for 2023/24 monitoring to ensure a clear picture of referral source.

2.3.11 Family Member Being Cared For



2022/23 saw a significant increase in the number of siblings being cared for by Young Carers.

2.3.12 Illness/Ailment of Person Cared For



2023 saw an increase in mental health being the main reason for a family member being cared for by a Young Carer – this took over from physical health which had previously been the most significant reason. Learning difficulty and the person being on the autistic spectrum also saw an increase. The high number of ‘other’ reasons is being explored and monitoring forms amended for 2023/24 to capture this detail.

3. OTHER CONSIDERATIONS

3.1 The Provider has noted the following key issues:

As the service has grown, they are less able to offer Young Carers multiple trips/activities per holiday period which they might have been able to access in the past, causing some disappointment.

3.2 There is an increasing number of Young Carers with their own additional needs so the Provider has to complete individual risk assessments and plan some of their activities to ensure they are suitable. They have highlighted that this can be difficult to balance with allowing the other Young Carers on the trips to have respite especially when there are Young Carers who have the same conditions as other Young Carers care for. The increasing number of Young Carers with their own SEND was discussed at the Q1 monitoring meeting and it was suggested that consideration may need to be given to exploring specific provision for Young Carers with SEND.

3.3 Keighley/Shipleigh club is in Keighley and Young Carers from Shipleigh do not often attend. Consideration is being given to a Shipleigh club and the provider is talking to the Youth Service about working together to try to make this possible.

- 3.4** Since Covid it has been more difficult to attract volunteers to support the clubs (extra staffing and therefore adult attention is especially appreciated by the Young Carers at Budz groups). The Young Carer Champions who were in place pre Covid have largely moved on and we have not been informed if they were replaced. More often it seems the term Young Carer Champion has fallen out of use although they may have a named contact within the school (often as part of the role of SENCO) In response to these issues, the Provider is planning to attend the SENCO networks to raise awareness of ways to support young carers in all schools, as well as exploring other possible networks - academy groups, pastoral staff networks etc.
- 3.5** Despite the difficulties in being able to fully capture all the feedback received, the Provider reported on several feedback activities:
- Feedback forms have been amended so that it is available on a tablet that workers take on trips so that young carers can complete it there and then rather than forget. Young Carers also preferred the tablet to paper and the results feed directly into the Provider database avoiding the need for admin time.
 - A very high proportion of feedback that the Provider have had about specific interventions has been good.
 - Some young carers (and/or parents) express dissatisfaction. when asked in feedback in relation to the fact that they would like to attend more sessions, this is not negative feedback it is just they would like more sessions to be available for them.
- 3.6** The current Carers Strategy ends in 2024. The People's Commissioning Service is generating awareness of the work that is beginning to re-draft the Carers Strategy, 2025-30. Work planned will encompass a review of achievements to date, coproduction with unpaid carers and consideration of good practice regionally and nationally. Additionality will be provided by a separate piece of research that will be undertaken by the Health Research Partnership in conjunction with York University. The strategy will be an All-Age Strategy and is being led by Julie Robinson-Joyce.

4. FINANCIAL & RESOURCE APPRAISAL

4.1 The funding resource implications for partners are as follows;

- City of Bradford Metropolitan District Council - £151,236 to City of Bradford Metropolitan District Council (Trust Contract Payment) - £151,236
- Combined Clinical Commissioning Groups - £53,323

The annual contract value will be £204,559.

4.2 There are no options for consideration presented as this is a statutory duty for the Council. No uplift has been given.

4.3 New reporting expectations for the Provider Commissioning forum (PCF) in relation to Young Carers under S75 schedule (the legislation we use to have cross payment with health) will mean an annual report will be presented on services to Young Carers.

5. RISK MANAGEMENT AND GOVERNANCE ISSUES

The work undertaken by the providers and partners in relation to Young Carers, contributes to the Council priorities by ensuring: Young Carers are safe; that they are supported to achieve the best outcomes they can in relation to their education; and their emotional well-being is monitored with support offered as and when needed.

6. LEGAL APPRAISAL

None.

7. OTHER IMPLICATIONS

7.1 SUSTAINABILITY IMPLICATIONS

None.

7.2 TACKLING THE CLIMATE EMERGENCY IMPLICATIONS

N/A.

7.3 COMMUNITY SAFETY IMPLICATIONS

None.

7.4 HUMAN RIGHTS ACT

None.

7.5 TRADE UNION

N/A.

7.6 WARD IMPLICATIONS

This Service is District Wide. West and Keighley have the highest number of Young Carers identified at 24 % but not with any major variance from the other Wards, South 21% East 19% and Shipley being a smaller Ward at 12%.

7.7 AREA COMMITTEE LOCALITY PLAN IMPLICATIONS

The Managers of the Family Hubs work closely with the Young Carers Service and the Area Committee teams to ensure vulnerable groups are supported and heard at a local level.

7.8 IMPLICATIONS FOR CHILDREN AND YOUNG PEOPLE

Carers Resource deliver a good service to the Young Carers within the Bradford District.

7.9 ISSUES ARISING FROM PRIVACY IMPACT ASSESMENT

Not required.

8. NOT FOR PUBLICATION DOCUMENTS

This information is Third Party Data.

9. OPTIONS

None.

10. RECOMMENDATIONS

That this Children's Overview and Scrutiny Committee receive this paper for information, note the progress and support our jointly commissioned service.

11. APPENDICES

None.

12. BACKGROUND DOCUMENTS

This report provides an update on the needs of Young Carers following the implementation of the Children and Families Act 2014, Care Act 2014. It updates the previous annual reports presented on the 26th July 2016 and 27th September 2017 and 13th February 2019, 9th October 2019, 2nd September 2020, 6th January 2021 deferred until 3rd March 2021 and 23rd March 2022.



Report of the Strategic Director of Children’s Services to the meeting of Children’s Services Overview and Scrutiny Committee to be held on Wednesday 29 November 2023

J

Subject:

Supporting Families Programme 2022 - 2025

Summary statement:

This report has been requested by a member.

Supporting Families is the new name for the Governments ‘Troubled Families programme’. In Bradford this programme was originally named Families First – this report is an overview of the progress made on Supporting Families Programme since the last report that was tabled and discussed on 20th November 2022.

EQUALITY & DIVERSITY:

Equality Impact assessments were completed 2022 as part of the re-tendering process and can be supplied if necessary.

Marium Haque
Strategic Director Children’s Services

Portfolio:

Children & Families

Report Contact: Cath Dew Service
Manager/ Lisa Bray Practice Lead
Phone: (01274) 437949/ 07582101656
E-mail: cath.dew@bradfordcft.org.uk

Overview & Scrutiny Area:

Children’s Services

1. SUMMARY

Bradford's Supporting Families Programme was launched in March 2021, this programme built on the previously Government named 'Troubled Families' programme that began 12 years ago. In Bradford this programme was previously called 'Families First'.

The paper presented to Overview and Scrutiny on 20th November 2022 outlined the details of the new criteria for the 10 outcomes and progress against the Early Help System Guide, which is submitted annually in July to demonstrate progress against set outcomes to the National Team.

The Department for Levelling Up, Housing and Communities (DLUHC) and the Department for Education (DfE) have determined that to have better oversight of the programme the DfE will now become the lead agency for the Supporting Families Programme.

The regional lead for Yorkshire and Humber is now Jason Henderson and he will be supported by Leanne Scales.

This paper presents the continued positive progress and challenges of the Supporting Families Programme.

2. BACKGROUND

2.1 Supporting Families is committed to strong multi-agency local partnerships in every area and expects Local Authorities to have mature local data systems and links to national data systems, so that workers can prove what a difference they are making to families and their children as part of Whole Family Working.

2.2 The Supporting Families programme has investment money attached to it and then income is generated by evidencing work done with families and children. Bradford has invested all its income generated funding back into services.

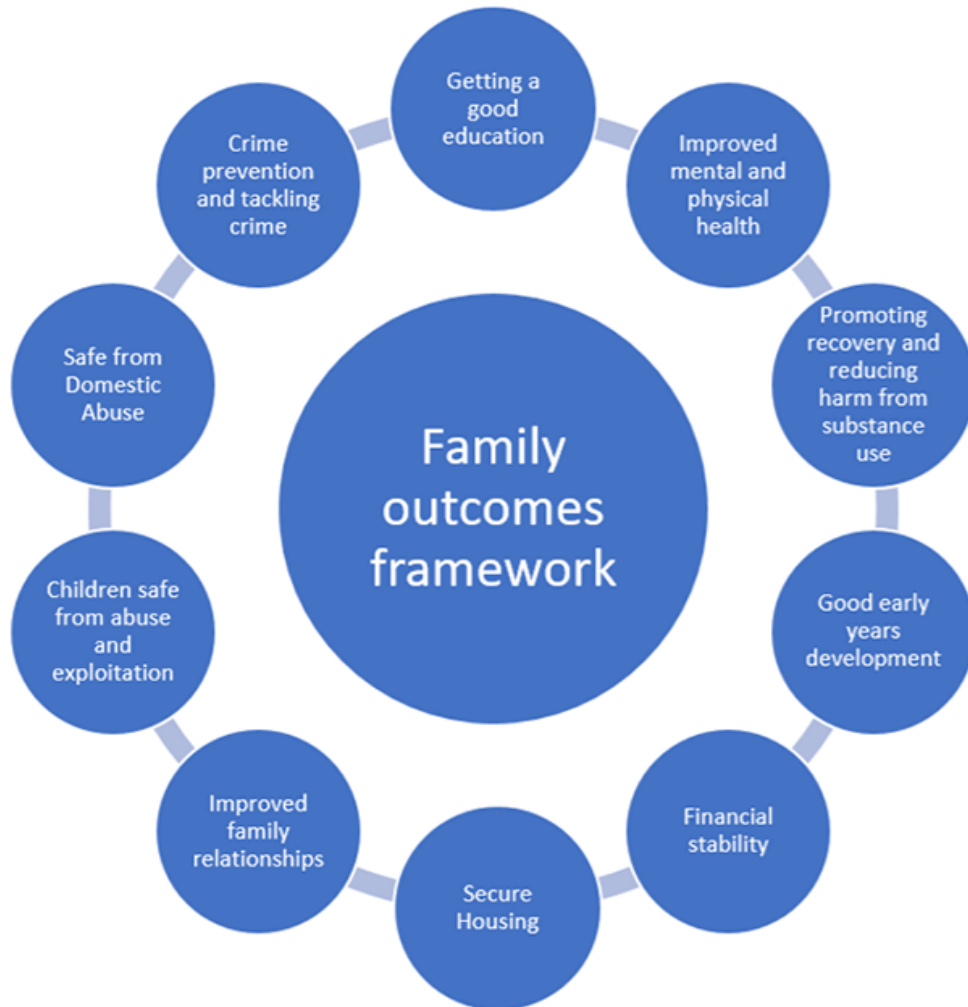
2.3 The Supporting Families programme supports:

- Workers who are called keyworkers and work with complex situations that are not safeguarding to the extent of requiring a social worker but require a Team Around the Family approach.
- We have funded attendance workers in schools, to aid the huge number of children who are finding it hard to return to the classroom.
- Youth workers who are supporting more than a young person but are looking at how the family can be supported to be more resilient and help themselves as young people grow and become independent.
- Family aid workers that go into families' homes and do 'hands on' work.
- Substance Misuse navigators who are working with a handful of very complicated families in need of child protection but also hope and change to do things differently to keep their children at home.
- Family navigators who are guiding and taking families into services with some exceptional results.

- Early Help Coordinators who are supporting and guiding all agencies to become lead practitioners and trusted adults for families when they need someone, they trust to do a little bit more for them. **(see Table 3)**

2.4 Supporting Families' focus continues to be on building the resilience of vulnerable families, and the 10 criteria outcomes noted last November became part of our reporting mechanisms in July this year.

Table 1 Ten Outcomes



2.5 The Supporting Families Team work closely with our National Team and regional leads to inform practice, share skills and experience.

2.6 Bradford's refreshed Early Help System Guide has been completed and was submitted to the National Team in July 2023. The refreshed version improves on the content and clarity of the self-assessments and works to encourage local transformation in line with descriptors. The progress against these descriptors will continue to be reported annually to the DfE. The outcomes are embedded into the work streams within Start for Life and Family Hubs Programmes.

2.7 Clear links between Supporting Families and the Start for life and Family Hub Programmes have been drawn with expectations that:

- Family Hubs are a way of delivering the Supporting Families vision of an effective early help system.
- Family Hubs provide a single access point to a range of services for families – a ‘front door’ to universal and early help services - and involve co-location of services and professionals.
- Where needed, family hubs will ensure seamless access to a Whole-Family Lead Practitioner.

3. OTHER CONSIDERATIONS

Progress

3.1 Data Maturity

As part of writing our Early Help System Guide, we are asked to self-assess our data maturity. To improve this outcome, we have invested in a new system for the next phase of the Supporting Families Programme, which is still being implemented. We have also been given time with Somerset Local Authority who are a leading authority on data and information to support the way we evidence our claim data to maximise our income and work more productively with our partner data.

3.2 Support for Families

The outcome data that determines progress is the claim data and targets (Table 2) and the number of assessments and plans (Table 3) we are able to complete clearly show a change and a difference is being made to Whole Families by a range of partners.

Table 2 - Claim Data – successful claims in years 2020 - 2023

Financial Year	Number of families who have achieved 'Significant & Sustained progress':	Number of families that have achieved the 'Continuous Employment' result:	Total PBR Claimed	Maximum PBR Available	Amount PBR Claimed
2020-21	1013	4	1017	1017	£813,600
2021-22	1056	4	1060	1060	£848,000
2022-23 –	1089	1	1090	1090	£872,000

Table 3 - Lead Practitioner assessments – annual increase

Month	Total 12 months to	Oct-22	Nov-22	Dec-22	Jan-23	Feb-23	Mar-23	Apr-23	May-23	Jun-23	Jul-23	Aug-23	Sep-23	Total 12 months to

		30th Sept 22													30th Sept 23
Tier 2	Total	795	139	61	72	66	107	106	45	87	97	90	23	31	924
	College	3	0	2	0	0	4	0	0	0	0	1	0	0	7
	Health (other e.g. Midwifery , Community Nursery Nurses)	6	1	0	0	2	0	0	0	0	2	0	0	0	5
	Health Visitors (0-19s Service) (Commissioned)	71	4	1	0	2	1	2	0	0	1	0	1	2	14
	LA Education Services	1	0	0	0	0	0	0	0	0	0	0	0	0	0
	Nurseries/Pre-school	75	11	7	7	7	3	6	2	4	11	12	2	0	72
	Primary Schools	524	105	39	43	40	77	78	32	54	63	56	9	18	614
	Secondary Schools	94	18	12	19	14	20	20	11	28	18	21	3	7	191
	Special Schools	18	0	0	3	1	2	0	0	1	2	0	0	0	9
	VCS Commissioned	0	0	0	0	0	0	0	0	0	0	0	6	3	9
	West Yorkshire Police	0	0	0	0	0	0	0	0	0	0	0	2	1	3
Tier 3 - Commissioned	Total	467	44	16	21	33	30	36	21	56	46	45	21	55	424
	VCS Commissioned	360	39	13	13	29	29	31	18	52	37	35	16	46	358
	West Yorkshire Police	107	5	3	8	4	1	5	3	4	9	10	5	9	66
Tier 3 - LA	Total	600	37	70	56	53	43	59	47	54	62	48	62	39	630
	LA	600	37	70	56	53	43	59	47	54	62	48	62	39	630
Total		1862	220	147	149	152	180	201	113	197	205	183	106	125	1978

3.3 Challenges

- 3.3.1 Bradford acknowledges that achieving the accelerated targets will be a challenge. Extra support, monitoring and resources have been sourced to ensure we deliver to time and plan.
- 3.3.2 The Service purchased a new module to support this reporting but due to pressures in IT and in the Service the installation has been delayed. We expect the module to be up and running by the end of the year.

4. FINANCIAL & RESOURCE APPRAISAL

- 4.1 Due to the increase in PBR target this year from 1090 to 1763 and alongside the change to the 10 inclusion criteria in April 2023, there is a risk that Bradford will not achieve the maximum available PBR income this financial year. We have a target tracker to keep pace with this and this is regularly monitored. Additional resources will be allocated if required.

5. RISK MANAGEMENT AND GOVERNANCE ISSUES

Any monies not achieved in 2023/24 may impact on projects and staff teams currently funded through PBR.

6. LEGAL APPRAISAL

None.

7. OTHER IMPLICATIONS

7.1 SUSTAINABILITY IMPLICATIONS

N/A.

7.2 TACKLING THE CLIMATE EMERGENCY IMPLICATIONS

N/A.

7.3 COMMUNITY SAFETY IMPLICATIONS

None.

7.4 HUMAN RIGHTS ACT

N/A.

7.5 TRADE UNION

None.

7.6 WARD IMPLICATIONS

Supporting Families is District Wide and an integral part of our Family Hubs. The work done in the family hubs and the partnerships that are being formed with our neighbourhood colleagues, policing teams, youth services, schools, health partners and VCS partners is starting to make a real difference and we are now being able to capture more and more to evidence what we are doing.

7.7 AREA COMMITTEE LOCALITY PLAN IMPLICATIONS

The Family Hubs are part of the locality plans.

7.8 IMPLICATIONS FOR CHILDREN AND YOUNG PEOPLE

The Whole Family ethos of Supporting Families is at the core of the work we do. Children and Young people have their own voice as part of that family.

7.9 ISSUES ARISING FROM PRIVACY IMPACT ASSESMENT

N/A.

8. NOT FOR PUBLICATION DOCUMENTS

None.

9. OPTIONS

None.

10. RECOMMENDATIONS

Overview and Scrutiny to receive this paper for information, note the progress and support our Supporting Families Programme.

11. APPENDICES

None.

12. BACKGROUND DOCUMENTS

Overview and Scrutiny Report - 20th November 2022.

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Report of the Chair of the Children’s Services Overview and Scrutiny Committee to be held on Wednesday 29 November 2023

K

Subject:

Children’s Services Overview and Scrutiny Committee – Work Programme 2023/24

Summary statement:

This report includes the Children’s Services Overview and Scrutiny Committee work programme for 2023/24.

EQUALITY & DIVERSITY

Community Cohesion and Equalities related issues are part of the work remit for this Committee.

Cllr Debbie Davies
Chair – Children’s Services Overview and Scrutiny Committee

Portfolio:
Children and Families

Report Contact: Mustansir Butt
Overview and Scrutiny Lead
Phone: (01274) 432574
E-mail: mustansir.butt@bradford.gov.uk

Overview & Scrutiny Area:
Children’s Services

1. SUMMARY

- 1.1 This report includes the Children's Services Overview and Scrutiny Committee work programme for 2023/24, which is attached as appendix 1 to this report.
- 1.2 Also attached as appendix 2 to this report is a list of unscheduled topics for 2023/24.

2. BACKGROUND

- 2.1 The Council constitution requires all Overview and Scrutiny Committees to produce a work programme.

3. OTHER CONSIDERATIONS

- 3.1 The Children's Services Overview and Scrutiny Committee has the responsibility for "the strategies, plans, policies, functions and services directly relevant to the corporate priority about services to children and young people." (Council Constitution, Part 2, 6.3.1).
- 3.2 Best practice published by the Centre for Public Scrutiny suggests that "work programming should be a continuous process". It is important to review work programmes, so that important or urgent issues that arise during the year are able to be scrutinised. Furthermore, at a time of limited resources, it should also be possible to remove areas of work which have become less relevant or timely. For this reason, it is proposed that the Committee's work programme be regularly reviewed by members of the committee throughout the municipal year.
- 3.3 The work programme as agreed by the Committee will form the basis for the Committee's work during the year, but will be amended as issues arise during the year.
- 3.4 This Committee is currently finalising the Elective Home Education Scrutiny Review.
- 3.5 At its meeting on Tuesday 15 March 2022, the Executive, during their discussions relating to supporting children and their families to thrive post pandemic, recommended that the Children's Services Overview & Scrutiny Committee undertake a scrutiny review into Child Poverty across the District. The Committee is currently undertaking this Scrutiny Review.
- 3.6 The Children's Services Overview & Scrutiny Committee, at its meeting on Wednesday 1 February 2023, agreed to undertake a Scrutiny Review into persistent absence across schools in the Bradford District.

4. FINANCIAL & RESOURCE APPRAISAL

- 4.1 None.

5. RISK MANAGEMENT AND GOVERNANCE ISSUES

5.1 None.

6. LEGAL APPRAISAL

6.1 None.

7. OTHER IMPLICATIONS

7.1 SUSTAINABILITY IMPLICATIONS

None.

7.2 TACKLING THE CLIMATE EMERGENCY IMPLICATIONS

None.

7.3 COMMUNITY SAFETY IMPLICATIONS

None.

7.4 HUMAN RIGHTS ACT

None.

7.5 TRADE UNION

None.

7.6 WARD IMPLICATIONS

Work of this Overview and Scrutiny Committee has ward implications, but this depends on that nature of the topic.

7.7 IMPLICATIONS FOR CORPORATE PARENTING

This will be a key area of work for the Committee.

7.8 ISSUES ARISING FROM PRIVACY IMPACT ASSESMENT

None.

8. NOT FOR PUBLICATION DOCUMENTS

None.

9. OPTIONS

- 9.1 The Committee may choose to add to or amend the topics included in the 2023-24 work programme for the committee.
- 9.2 Members may wish to consider any detailed scrutiny reviews that it may wish to conduct.

10. RECOMMENDATIONS

- 10.1 That members consider and comment on the areas of work included in the work programme.
- 10.2 That members consider any detailed scrutiny reviews that they may wish to conduct.

11. APPENDICES

Appendix One – 2023-24 Work Programme for the Children’s Services Overview and Scrutiny Committee.

Appendix Two – Unscheduled Topics.

12. BACKGROUND DOCUMENTS

Council Constitution.
2022-23 Children’s Services Overview and Scrutiny Committee Work Programme.

Democratic Services - Overview and Scrutiny

Childrens Services O&S Committee

Scrutiny Lead: Mustansir Butt tel - 43 2574

Work Programme

Agenda Items	Description	Report Author	Comments
Wednesday, 12th July 2023 at City Hall, Bradford. Chair's briefing 22/06/23. Report deadline 29/06/23.			
1) Appointment of Co-opted members.	Voting Co-opted Members - Joyce Simpson, (Church Representative), Paret Governor Representative Fauzai Raza & Shifa Simab. Non Voting C-opted Members - Teacher Secondary School Representative Tom Bright, Children's Social Care - Dr Samina Karim.	Mustansir Butt.	
2) Draft Childrens 2023-24 Children's Services Overview & Scrutiny Work Programme.	The proposed areas of work to be considered in this muncipal year.	Mustansir Butt.	
Wednesday, 27th September 2023 at City Hall, Bradford. Chair's briefing 06/09/23. Report deadline 14/09/23.			
1) Monitoring the Children's Services Improvement Plan.	Report to also include performance data.	Marium Haque/Picklu Roychoudhary/Charlotte Ramsden.	Children's Services Overview & Scrutiny Committee recommendation from Wednesday 1 March 2023.
2) Work Programme.	There is s a need to regularly review the work programme, in order to priortise and manage the work.	Mustansir Butt.	
Wednesday, 4th October 2023 at Remote Virtual Meeting.			
1) Child Poverty Scrutiny Review.	Remote informal information gathering session with the volumtary sector and and Bradford Council Officers.	Mustansir Butt.	Council resolution.
Wednesday, 18th October 2023 at City Hall, Bradford. Chair's briefing 27/09/23. Report deadline 05/10/23.			
1) Bradford District Children and Young People Plan.	The Plan be presented to the Committee prior to it being finalised. To also include details of priorities and outcomes.	Niall Devlin/Jenny Cryer/Kate Welsh/Helen Johnston.	Children's Services Overview & Scrutiny Committee recommendation from Wednesday 15 March 2023.

Childrens Services O&S Committee

Scrutiny Lead: Mustansir Butt tel - 43 2574

Work Programme

Agenda Items	Description	Report Author	Comments
Wednesday, 18th October 2023 at City Hall, Bradford.			
Chair's briefing 27/09/23. Report deadline 05/10/23.			
2) Work Programme.	There is s a need to regularly review the work programme, in order to priotise and manage the work.	Mustansir Butt.	
Monday, 20th November 2023 at Unknown.			
1) Child Poverty Scrutiny Review.	Informal information gathering session with young people.	Mustansir Butt.	
Wednesday, 22nd November 2023 at Unknown.			
1) Child Poverty Scrutiny Review	Informal information gathering session with young children and their familes.	Mustansir Butt.	
Wednesday, 29th November 2023 at City Hall, Bradford.			
Chair's briefing 08/11/23. Report deadline 16/11/23.			
1) National Review Action Plan.	Progress against the review recommendations, together with examples of some positive outcomes.	Darren Minton/Marium Haque/Michelle Turner/Ruth Terry/Richard Padwell/Charlotte Ramsden	Children's Services Overview & Scrutiny Committee recommendation from Wednesday 30 June 2022. Been deferred on two occassions at the request of Officers.
2) Health Services to looked after Children and care leavers. December 2022.	The Annual Report to also include: Details of the progress against the Action Plan; the Children's Health Assessments being undertaken; Percentage of Children's Health Assessments being done within St	Phillipa Hubbard/Cath Murray/James Drury/Juliet Outcomes of	Children's Services Overview & Scrutiny Committee recommendaion from Kitchen/Karen Dawber. Wednesday 14
3) Sufficiency Strategy, to also include in-house Fostering Service and Adoptions.	Progress against the strategy and the recommendations contained within it.	Marium Haque/Charlottle Ramsden/Picklu Roychoudhary.	Children's Services Overview & Scrutiny Committee recommendation from Wednesday 15 March 2023.
4) Supporting Families Programme.		Charlotte Ramsden/Cath Dew/Andrew Edwards.	Member Request.

Childrens Services O&S Committee

Scrutiny Lead: Mustansir Butt tel - 43 2574

Work Programme

Agenda Items	Description	Report Author	Comments
Wednesday, 29th November 2023 at City Hall, Bradford.			
Chair's briefing 08/11/23. Report deadline 16/11/23.			
5) Young Carers.	To also include measures of performance and details of outcomes and improvements delivered.	Charlotte Ramsden/Cath Dew.	Children's Services Overview & Scrutiny Committee recommendation from Wednesday 23 March 2022.
6) Work Programme.	There is s a need to regularly review the work programme, in order to priotise and manage the work.	Mustansir Butt.	
Wednesday, 20th December 2023 at City Hall, Bradford.			
Chair's briefing 30/11/23. Report deadline 07/12/23.			
1) Raising Attainment Strategy.	Demonstate key outcomes.	Marium Haque/Sue Lowndes.	Children's Services Overview & Scrutiny Committee recommendation from Wednesday 1 February 2023.
2) School Holiday and Activity Programme.			Children's Services Overview & Scrutiny Committee recommendation from Wednesday 27 September 2023.
3) Home School Transport.			Children's Services Overview & Scrutiny Committee recommendation from Wednesday 27 September 2023.
4) Work Porgramme,	There is s a need to regularly review the work programme, in order to priotise and manage the work.	Mustansir Butt	
Wednesday, 24th January 2024 at City Hall, Bradford.			
Chair's briefing 04/01/24. Report deadline 11/01/24.			
1) SEND Services.	This Committee requests that a further progress report be presented in 12 months, which also includes the deatiled Action Plan, RAG rating and the full Written Statement of Action.	Marium Haque/Niall Devlin.	Children's Services Overview & Scrutiny Committee recommendations from Wednesday 18 January 2023.
2) Findings from the review into children's health assessment caseloads.		Michelle Holgate/Dawn Lee.	Deferred from Children's Services Overview and Scrutiny Committee meeting on Wednesday 15 February 2023.

Childrens Services O&S Committee

Scrutiny Lead: Mustansir Butt tel - 43 2574

Work Programme

Agenda Items	Description	Report Author	Comments
Wednesday, 24th January 2024 at City Hall, Bradford.			
Chair's briefing 04/01/24. Report deadline 11/01/24.			
3) Work Programme.	There is s a need to regularly review the work programme, in order to priotise and manage the work.	Mustansir Butt.	
Wednesday, 7th February 2024 at City Hall, Bradford.			
Chair's briefing 17/01/24. Report deadline 25/01/24.			
1) Exploitation Annual Report.	To include detailed information of porgress being made.	Darren Minton/Marium Haque/Charlotte Ramsden.	Children's Services Overview & Scrutiny Committee recommendation from Wednesday 15 February 2023.
2) Monitoring the Children's Services Improvement Plan.		Marium Haque/Charlotte Ramsden.	
3) Audit findings relating to the quality of Social Work Practice.		Charlotte Ramsden/Amandip Johal.	Children's Services Overview & Scrutiny Committee recommendation from Wednesday 18 January 2023.
4) Bradford District Children and Young People Plan.	Progress to include relevant data in respect of the various elements listed under the following four key themes: Education; and Mental Health; Safe Homes Places & Communities; Skills Development.	Marium Haque/Charlottle Ramsden/Niall Devlin/Jenny Cryer/Jenny Physical Cryer/Helen Johnston.	Children's Services Overview & Scrutiny Committee recommendation from Wednesday 15 March 2023.
5) Work Programme.	There is s a need to regularly review the work programme, in order to priotise and manage the work.	Mustansir Butt.	
Wednesday, 13th March 2024 at City Hall, Bradford.			
Chair's briefing 21/02/24. Report deadline 29/02/24.			
1) Mental Health issues relating to Children's Social Care.	Report to focus on the Written Statement of Action and the Action Plan to support the delivery of this and outcomes delivered. Findings and recommendations from the Deep Dive Review, to also be included.	Ali Jan Haider/David Sims/Christina Hollaway/Kristain Farnell.	Children's Services Overview & Scrutiny Committee from Wednesday 15 February 2023.

Childrens Services O&S Committee

Scrutiny Lead: Mustansir Butt tel - 43 2574

Work Programme

Agenda Items

Wednesday, 13th March 2024 at City Hall, Bradford.

Chair's briefing 21/02/24. Report deadline 29/02/24.

2) Educational Standards - Early Years to Key Stage 4.

3) Work Programme,

Description

To scope the report with the Chair, Deputy Chair and Overview & Scrutiny Lead.

There is s a need to regularly review the work programme, in order to prirotise and manage the work.

Report Author

Marium Haque/Sue Lowndes.

Comments

Children's Services Overview & Scrutiny Committee recommendation from Wednesday 15 February 2024.

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Democratic Services - Overview and Scrutiny

Scrutiny Committees Forward Plan

Unscheduled Items

Childrens Services O&S Committee

Agenda item	Item description	Author	Comments
1	Child Poverty Scrutiny Review.	Mustansir Butt.	Council resolution from Tuesday 15 March 2022.
2	Scrutiny Review into persistent absence across schools in the Bradford District.	Mustansir Butt.	Children's Services Overview & Scrutiny Committee recommendation from Wednesday 1 February 2023.
3	Draft Scrutiny Review Report - Elective Home Education.	Mustansir Butt.	Key findings and recommendations from the scrutiny review.

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