

CORPORATE PARENTING BOARD

AGENDA

Meeting to be held on Monday 26 September 2022 at 5.30pm in the Conference Room, Sandhill Centre, Grindon Lane, Sunderland, SR3 4EN

Part I

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**Local Government (Access to Information)
(Variation) Order 2006**

The following is not for publication as the Committee is considered likely to exclude the public during consideration thereof as it contains information relating to any individual or information which is likely to reveal the identity of an individual (Local Government Act 1972), (Local Government (Access to Information) (Variation) Order 2006, (Schedule 12A, Part I, Paragraphs 1 and 2).

PART II

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	Minutes of the Meeting held on 23 May 2022, Part II (copy attached).	

ELAINE WAUGH
Assistant Director of Law and Governance

City Hall
SUNDERLAND

15 September 2022

CORPORATE PARENTING BOARD

**Minutes of the Meeting held on Monday 23 May 2022 at 5.30pm in the
Conference Room, Sandhill Centre, Grindon Lane, Sunderland, SR3 4EN**

Present:

Members of the Board

Councillor L Farthing (in the Chair)	Washington South Ward
Councillor C Burnicle	St Chad's Ward
Councillor M Crosby	Sandhill Ward
Councillor P Smith	Silksworth Ward
Catherine Hearne	Non-Exec Director, Together for Children

Observing

Councillor J Price	Deputy Cabinet Member for Children, Education and Skills
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All Supporting Officers

Jill Colbert	Chief Executive, TfC
Linda Mason	Headteacher, Virtual School
Tracy Jelfs	Head of Service for Cared for Children, TfC
Majella McCarthy	Director of Children's Social Care, TfC
Helen Monks	Strategic Service Manager, TfC
Gavin Taylor	IRO Team Manager
Lauren Nesbitt	IRO Team Manager
Nikki Donaldson	Participation and Engagement Officer
Chantelle	Change Council
Caitlin	Change Council
Jo Morgan	Designated Nurse Looked After Children
Angela O'Dell	CNTW
Gillian Kelly	Governance Services

Apologies for Absence

Apologies for absence were received from Councillors Laws, McKeith and Tye.

Declarations of Interest

There were no declarations of interest.

Minutes

1. RESOLVED that the minutes of the meeting held on 7 March 2022 be agreed as a correct record.

Corporate Parenting Strategy

The Chief Executive, Together for Children, delivered a presentation on the development of the Corporate Parenting Strategy and in doing so advised that there was a good outline plan emerging and young people had spent a lot of time thinking about what they wanted corporate parents to do.

It was proposed that good corporate parents would: -

- Be well trained, knowledgeable and enthusiastic about their role
- Accept responsibility for children and young people who were cared for or care experienced
- Ensure that their needs, interests, physical and emotional needs and wellbeing were met as a priority
- Seek for them the same outcomes any good parent/carer would want for their children
- Campaign to change the language when people are talking about cared for children

All employees and Members within Together for Children, Sunderland City Council and other partner agencies shared the responsibility to promote the needs of cared for children. Key responsibilities of all corporate parents were: -

- To promote the life chances of cared for children and care experienced young people
- To consider the impact of all decision making for cared for children and care experienced young people
- To ensure that services were in place to meet the needs of cared for children and care experienced young people.

It was proposed that the Board would take action to fix the things which mattered to children and would work together which children's interests at the heart of everything. The Board would also keep a close eye on whether it was making a difference to children.

The presentation set out some priorities around health and care, employment, education, leisure, housing and transport and what would be needed to succeed with these and how Members would know that they were making a difference.

The Chair commented that corporate parents had been looking at the same sorts of things for a long time and there were universal requests that society should provide for all. The Change the Language campaign was very important and all Board Members needed to be ambassadors for this; the development of a glossary for the new language would be useful.

Councillor Smith noted that progress had been being made with transport issues but this had stalled since the pandemic. Councillor Burnicle referred to some of the upcoming changes to bus services which would impact on all young people.

With regard to employment it was noted that some employers could be put off when they saw that a person was care experienced. The Chair stated that this should be tackled as a city council and there should be a strategy for care experienced young people to achieve employment in Sunderland businesses. Jill said that it might be useful to review how many care experienced young people had accessed work experience or employment.

Jill suggested that the Board could look at how reports were presented to show that a difference was being made in relation to the priorities and to place the emphasis on corporate parents.

The Chair commented that the Change Council had expressed that they were experiencing time pressures and corporate parents needed to look at how they could support this. Catherine Hearne noted that there was a role for the Board to play in supporting children and young people and the Change Council to raise their voice.

Kathryn McCabe advised that the foster carer consultative groups were back up and running and it should be considered how the Board could utilise this input, suggesting that some case studies could be brought to meetings with foster carers attending to describe what it feels like for them.

Consideration had also been given to the name of the Board with 'Here for Me Board' and 'Supportive Parenting Partnership' being two suggestions. These would be taken away for further discussion.

Having considered the presentation it was: -

2. RESOLVED that the information be noted.

Change Council Update

The Change Council report had been submitted to the Board and was presented to Members by Chantelle and Caitlin.

The Change Council had continued to meet in their designated space and both the 10-15 and 16+ group were meeting fortnightly.

Members of the Change Council had delivered their presentation around the Change the Language campaign during Social Work week and had received excellent feedback on this. It was intended to book in more dates to deliver the half hour workshop to professionals and a presentation had recently been delivered to professionals who were part of Fostering Panels and Family Time Workers. The Chair suggested that the Joint Leadership Team may benefit from receiving the presentation.

Young people had come together to wish Martin Birch well as he had left Together for Children for a new role at Sefton Council. The Change Council would continue their work with support from Majella McCarthy as the new Director of Children's Social Care.

The Change Council had taken part in activities in relation to the Holiday Activity and Food Programme and enjoyed preparing healthy meals as part of the programme. Young people had also attended a regional meeting in Durham to give an update on what the Change Council was doing and to discuss plans for a regional conference this year.

The Change Council had been successful in a key application to celebrate Foster Care Fortnight and were making an application for Children's Home Fortnight. Young people were also looking at raising money to work with Care to Dance on a programme that they run.

Members of the Change Council spoke on video for the Mind of My Own Conference which was held remotely on 18 May 2022.

The planned work for January to June 2022 was as follows: -

- Drive forward the Change the Language campaign, including working groups and workshops
- Corporate Parenting induction training and support the development of the corporate parenting strategy
- Children's Home Fortnight – Key project
- Recruitment and selection
- Engage young people in enriching activities to celebrate their hard work and increase engagement
- Consult and involve more cared for and care experienced children and young people.

With regard to the Care to Dance programme, Jill Colbert stated that around £4,500 was needed and Catherine Hearne suggested that Cultural Spring might be able to offer some support. The Chair noted that each area committee would also have funding available and would welcome funding applications. Jill commented that she would take back these suggestions and highlighted that young people had been discussing things they could do themselves to raise money.

Councillor Smith asked if there were any particular themes from the regional meeting and Nikki Donaldson highlighted that transport was continually raised and there was also discussion about a North East regional approach to council tax.

The Chair noted that care experienced young people up to the age of 25 had reduced council tax and it had been on the agenda for some time that this should be transferrable if a young person moved out of the local authority area.

Councillor Crosby queried if young people received any help for fuel costs and Jill explained that there were a range of financial support measures in place and care experienced young people remained eligible for a number of these although these

had not been removed in light of increasing fuel costs. Jill suggested that Sharon Willis could be asked to talk the Board through the allowances and support which were available for care experienced young people.

The Chair thanked Chantelle and Caitlin for presenting the report and accordingly it was: -

3. RESOLVED that the Change Council update be noted.

Health of Cared for Children

The Designated Nurse for Cared for Children submitted a report providing an update on health activity for cared for children.

The purpose of the report was to: -

- Demonstrate the duty to safeguard and promote the welfare of cared for children
- Assure the Corporate Parenting Board that support and health services to cared for children were provided without undue delay or geographical prejudice
- Demonstrate the aim of the Looked After Health team for sustained improvement in the health and wellbeing of cared for and cared experienced children
- Assure that the child's voice around health was included wherever possible
- Report on compliance with statutory targets from the Looked After Health Team for South Tyneside and Sunderland NHS Foundation Trust

The report provided an overview of the last financial year and it was noted that there had been a steady decline in the average number of cared for children during the year but the number was still above the national average.

197 Initial Health Assessments (IHAs) had been carried out for cared for young people living within a 30 mile radius of Sunderland which represented 90% compliance. 483 Review Health Assessments had taken place and 93% were within timescale. For young people placed outside of the 30 mile radius, there were five IHAs with 60% being completed in the timescale and 35 RHAs with compliance of 89%.

There were different reasons for the dip in compliance for out of area health assessments and Jo Morgan advised that the team had provided support to other areas to increase their capacity. It was intended to look at the caseload model during this year and the team was reaching out to care homes and being more visible with foster carers.

There had been an issue with getting Health Passports out to young people for their 18th birthday and the development of the regional Health Passport app was ongoing.

The dental care pathway used in East Riding had been taken to the local Dental Network but there had been no further update. Jo advised that the team had reached out to Public Health England a few times and been told that they were looking into it; it was felt that a pathway would be a positive development.

The Chair commented that she had recently attended a meeting on the forthcoming Integrated Care Partnerships and suggested that this matter could be raised with Dave Gallagher as the Accountable Officer. Jill suggested that the Chair could also ask the Director of Public Health to provide a note on access to dental treatment for cared for children.

Jo stated that the SLA for the health team was focused on health assessments and young people were being asked what they wanted from the health team. The Chair noted that the local team could also provide links on opportunities for employment within the NHS for care experienced young people. She highlighted that there was a lot of discussion about social prescribing at the current time but this had not yet been developed for children and young people. Jo advised that she had reached out to the CCG lead on this issue.

Having considered the report, it was: -

4. RESOLVED that the content of the report be noted.

CNTW Cared For Children Report

The Board received a report covering the period January – March 2022.

In January eight referrals had been seen from a total of 12, there were ten referrals in February, nine of which were seen and in March nine of 11 referrals were seen. All urgent referrals had been seen and the CYPS Intensive Community Treatment Service (ICTS) offered a 24/7 service.

Angela O'Dell highlighted the reasons for referrals being discharged without being seen and explained that, where limited information was one of the issues, the team would always try multiple times to contact the referrer for more information. The Chair noted that if the referrer was a social worker then this would be concerning and Kathryn McCabe felt it would be useful to understand more about this issue through a separate meeting with CNTW.

There had been a slight increase in waiting times across all pathways and referrals in to CYPS as a whole had significantly increased. The service had extended its clinical hours to 8.00pm in the evening and 9.00am-5.00pm each Saturday.

Linda Mason highlighted that when children and young people stopped attending school due to social, emotional and mental health difficulties, they may be referred through school but then not engage with CYPS. She queried if there was any linkage through the SEND process and any challenge to young people coming through.

Angela said that cared for young people were seen as part of that pathway and the team would try to engage with young people in whichever way they could. Consultations were offered with professionals making referrals.

5. RESOLVED that the report be noted.

Regulation 44 Visitor – Annual Overview

The Board received a report providing a summary of the findings of Regulation 44 visits undertaken between April 2021 and March 2022.

There were five registered children's homes run by Together for Children and Regulation 44 visits were now being completed in person unless there was a known case of Covid-19 in the home. The visits involved undertaking key tasks such as: -

- A visit to the home
- Speaking with the young people who lived there to gather their views regarding their standard of care
- Speaking with the young people's carer, parents, social workers and Independent Reviewing Officer to collect their views on the standard of care being provided
- Reviewing and evaluating records such as young people's files, critical incident logs, medical records and any notifications to Ofsted.

Colombo Road was a home for up to six young people and had been judged to be Outstanding by Ofsted in December 2021. There was one requirement and three recommendations arising from the inspection and these had been complied with. Feedback from young people and carers was positive.

Councillor Smith noted that one of the Ofsted requirements was about refresher training which she would have expected to take place in the home. Lauren Nesbitt advised that on this occasion it was that one member of staff had not undertaken the review restraint training.

Grasswell House provided care for up to six young people and had received an Ofsted judgement of Good in June 2021. There had been one requirement and three recommendations from Ofsted and the Regulation 44 Visitor had made 11 recommendations during the year which was an increase on the previous year.

Councillor Burnicle asked how young people would raise complaints in a children's home setting and Lauren said this would be through Mind of My Own or using forms available in the office.

Revelstoke Road was a home for up to six young people and had been found to be Good following a visit from Ofsted in January 2022. Ofsted had made two requirements and one recommendation and young people within the home felt respected and carers commented that staff were doing a brilliant job.

Councillor Crosby asked about the second requirement which was around recruitment procedures and Lauren advised that this was around ensuring that all staff were appropriately skilled for the role they were appointed to. Majella McCarthy added that there was a young person with some special needs and the statement of purpose for the home was updated to reflect this, whilst ensuring that staff had the necessary level of knowledge.

Gavin Taylor said that safer recruitment was in place at the setting, there had been a different process under the pressures of Covid but it was confirmed that the home was operating within the processes.

Nook Lodge was a new home registered in October 2020 and provided care for up to three young people. Ofsted had inspected the home in September 2021 and issued a judgement of Good with five requirements and two recommendations.

Councillor Smith queried the requirements in relation to the Independent Visitors and the effectiveness of leaders and management. Gavin advised that it had to be made clear that the Regulation 44 visitor was not doing any other corporate work and as it was a relatively new home, Ofsted had been looking for further detail about leadership and improvements were being seen through the Regulation 44 visits.

Councillor Burnicle referred to the requirement about window restrictors and queried if this had any impact on the fire risk assessment. Gavin stated that the homes would have gone through the fire risk regulations and restrictors would be tested to ensure they complied.

Monument View catered for up to six children and was currently judged to Require Improvement following an Ofsted inspection in January 2022. The home had recently been re-inspected but the outcome was not yet available, however Majella indicated that it would be published before the next meeting.

The home had had an entirely new staff team since last year and Reg 44 visitors were optimistic that management was effecting a positive change and young people spoke passionately about the home.

Councillor Smith commented that this was one of the reasons why she advocated for elected Members visiting the homes, to see in person if improvements were being made. It was noted that young people had said that they did not just want people to turn up at their home and visits should only be by invitation.

The Chair suggested that it could be made known through Sharon Willis that elected Members would like to have the opportunity to visit the homes and that if young people were interested they could get in touch through her.

6. RESOLVED that the report be noted.

Local Government (Access to Information) (Variation) Order 2006

7. RESOLVED that in accordance with the Local Government (Access to Information) (Variation) Order 2006 the public be excluded during consideration of the remaining business as it was considered to involve a likely disclosure of information relating to any individual or information which is likely to reveal the identity of an individual (Local Government Act 1972, Schedule 12A, Part I, Paragraphs 1 and 2).

(Signed) L FARTHING
Chair

**Report to Corporate Parenting Board
North East North Cumbria Integrated Care Board
26 September 2022**

The purpose of this report is to:

- Demonstrate our duty to safeguard and promote the welfare of children in care
- To assure the corporate parenting board that health services to children in care are provided without undue delay or geographical prejudice
- To demonstrate the aim of the Cared for Health team is for sustained improvement in the health and wellbeing of children in care and care experienced young people.
- To assure the child's voice around health issues are included wherever possible
- Report on compliance to statutory targets

**Development
of Health
Group**

In the early stages of developing this with partners.

- The purpose of this group is for partners to work together to ensure that the health needs of our cared for young people are met.
- To work in partnership to progress health priorities for cared for children.
- To monitor and enable access to a range of health services that promote and support the emotional, physical and mental health of cared for children.
- Ensure that systems are in place to enable access to information about the health and wellbeing that Care for children.

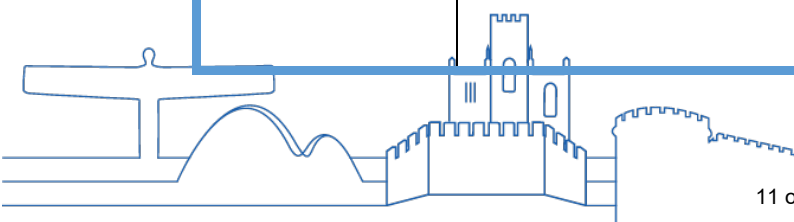
Health Passport APP

What it is?

A regional fully tailored health passport would provide an up-to-date technological regional approach to benefit YP and improve access to information and health outcomes

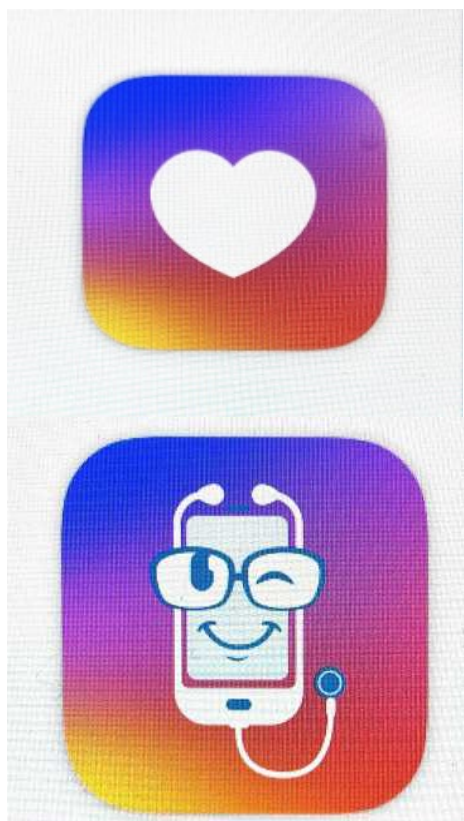
- The application can be used by young people containing key contacts, appointments, and other pertinent health information.
- The young people will be able to download and install the application from the relevant application store (Android or Apple).
- The application is developed for both Android and Apple platforms and is published for download using the appropriate application store (Apple Store, Google Store).
- The application does not contain any data on install.
- Features include the ability to capture details of future appointments and a remind the user when and where appointments are. GPS is embedded to help assist locating appointment venues.
- The application design and functionality ensure that there are no responsibilities for the ICS to act as a data controller for any aspect of this solution
- The APP uses the NHS APP, which is a third party, NHS Approved personal health record platform that stores health information in one place.
- The client group can create an account on the NHS APP. It enables the user to actively manage health, fitness, and wellbeing. For example, the user can track lifestyle goals, book GP appointments, order repeat medication and view and download the medical record using the APP.

	<ul style="list-style-type: none"> • Additionally, to this the app provides relevant health promotion: mental health. Drinking and drugs, sexual health wellbeing, safety including travel safety, CSE and festival safety. • The App can be embedded into the statutory health assessment from 14 years to aid development of independence and transition preparation.
Additional links we have asked to be embedded after consulting young people.	<ul style="list-style-type: none"> • Healthy eating–easy recipes and link to 'eat well' • Independence – budgeting • Kooth • QWELL https://www.qwell.io/ • Mental health/suicide prevention Crisis services under mental health -Samaritans etc • alcohol and drugs, smoking cessation • Sexual health • Wellbeing • Exploitation/coercion • Travel safety • Black lives matter • Bullying • Domestic violence - healthy relationships • Covid 19 • Housing – feeling safe • Benefit advice– CAB • LGBTQIA2S+- maybe some links to some national support networks. • Screening – cervical screening schedule 25+ 3 yearly testicular exam / breast exam / sunscreen awareness links • Domestic violence – healthy relationships • UASC a link to a national resource • Sleep hygiene • links for young parents -action for children

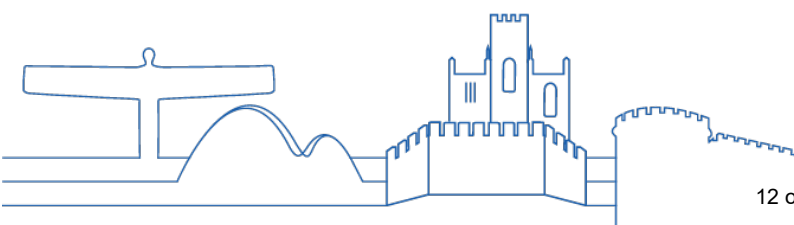


Next Steps:

Awaiting feedback for the icon



Then we will be asking for feedback from young people for the 1st 'draft' of the APP.



Regional Task and Finish Group : Raising awareness of Care Experienced Young People and improving outcomes.

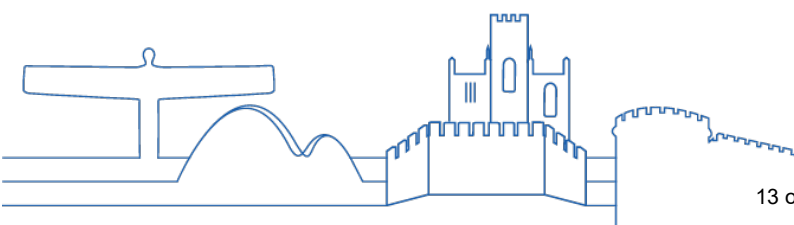
- Social Prescriber Team Manager has now met with the Personal Advisors
- Use of champions for care leavers within primary care social prescribers
- Care experienced 7-minute learning for primary care—to raise profile of their needs/vulnerabilities
- PA's coming to speak to primary care within a training session/ safeguarding leads meeting
- Peer mentorship program -recommendation within NICE Guidance.
- Health Support through transition - Scoping regards to health needs. Physical and MH need of our local population.
- Development of a digital training tool – NHSE supporting with this.

No Appendix Data as Quarter 1 data not yet due – this will be presented at the next CPB meeting.

Jo Morgan

Designated Nurse Cared for Children

NENC ICB



Cumbria, Northumberland Tyne & Wear NHS Trust
Sunderland Children Cared for Report

September 2022 (May 2022 – July 2022)



Sunderland Children Cared for Report. May 2022 – July 2022

1) Activity

	May	Jun	Jul
Referrals	10	7	13
Referrals discharged unseen	2	3	0

Referrals discharged unseen

The following provides narrative in relation to reasons why the young people were not seen by the service.

May

Young person could not attend appointments in Sunderland due to ongoing court case, attempts to gain further information from social worker were not successful and young person turned 18 during this time. Discharged and sign posted to adult services.

Young person referred with little information, advised if further information was not received within the week the referral would be declined. Further information received, no evidence suggestive of a need for involvement with a specialist mental health service.

June

Contact was attempted with the family to offer referral telephone triage appointment however no response received despite multiple attempts/methods of contact used. Young person was discussed within the team, however due to being out of area they were discharged from the service.

Young person had a history of sporadic engagement with services. They were discharged from services in October 2020, and have since turned 18 therefore were signposted to adult services upon re-referral.

Young person was referred to CYPS, however due to upcoming 18th birthday (within a 4 month time span) they were referred on to adult services.

July

All referrals seen.

2) Referral Urgency

All young people referred to CYPS are either by phone and email or in written format are reviewed on a daily basis by a Clinical Lead. The purpose of this initial review is in order to signpost any cases that have been inappropriately referred and to ensure any cases that require an emergency or urgent response are highlighted and actioned immediately. Senior members of the Cared for Children Pathway triage any appropriate referrals weekly.

CYPS Intensive Community Treatment Service (ICTS) offer a 24/7 service 365 days per year. ICTS will respond to the young person via telephone to offer a telephone triage within 1 hour.

Any young person requiring an emergency appointment will be offered an appointment within 4 hours of referral being received and for urgent referrals the young person will be offered an appointment within 24 hours

	May	Jun	Jul
Emergency	0	0	0
Urgent	2	0	0
Total	2	0	0

3) Waiting Times (All Referrals)

Current Waiting Times to Treatment are detailed below. (Treatment is defined as second attended contact)

	May (Weeks)	Jun (Weeks)	Jul (Weeks)
Wait to Treatment	9	10	9

Referrals

During COVID the service has continued to accept all referrals and complete assessments and interventions. New Ways of Working have been fully embraced by the Team to facilitate contact with young people and their families / carers such as online consultation and phone contact. Young people can be seen in their school environment if this is their preference.

Children who are Cared for Pathway

This Pathway has recently been reviewed, it specifically undertakes direct therapeutic work with children and young people, along with Foster Carers where appropriate.

Consultation is provided in conjunction with Together for Children, and CYPS continue to scaffold and support to Residential Homes.

Young People are offered priority appointments within CYPS and following assessment will access treatment usually within 10 weeks. The Pathway is a multi-disciplinary team consisting of nursing, Social Workers, Psychologists, Child Psychotherapists and are able to access Psychiatry if required.

The team have all completed specific formal training to deliver psychological therapies to meet the needs of the young people and their carers.

4) **Current Caseload**

	May	Jun	Jul
Total Children Looked After	82	86	84
Total CYPS Caseload	1543	1528	1519
Total % Children Looked After	5.3%	5.6%	5.5%

5) **Positive Case Study**

Young person was referred in June 2020 with a query around ADHD, concerns around emotional health and wellbeing, and difficulties with peer relationships. Interventions included 1:1 work and indirect work with carers and school. The ADHD assessment was deemed not necessary

1:1 work

- Supporting Young Person to open up around earlier life experiences and process their feelings around these.
- Support given to understand, manage, and express emotions that promoted resilience, confidence, and sense of self.
- Sought further understanding of their emotional world and offered support as they explored their identity and developed their relationships.
- Thinking together about day-to-day life and healthy coping mechanisms
- Working together to understand more around triggers, in particular around current school experience.
- Understanding more about how earlier experiences continue to have an impact emotionally, leaving the person feeling at risk.
- Supporting them in developing relationships and having trust in 'positive' others, particularly with carers and school staff.

Indirect Work: Support to Carers/School

- Thinking together about their presentation, changes to their presentation, and the way they navigate the world.
- Thinking about the impact of early life experiences on their current relationships.
- Thinking around 'family time' and how this might work best.
- Carers worked hard to try and understand and began to respond using the PACE approach. This allowed them to understand the importance of having to 'connect' and understand the feelings and think more about their underlying experience.
- School was given support to inform their understanding around the young person's presentation and advocacy for support around emotional and mental health, support was offered to consider ways to respond to the young person's needs.

Outcomes

- Prior to discharge, the young person shared that they felt they had more understanding around their earlier experiences. They reported feeling more in touch with their emotions, they felt they now have strategies that could help them to express their anger and other feelings in an appropriate and more positive way. They reported that they felt happier, safer, and more settled living with carers. They also shared that when things felt difficult, they now felt more able to ask for support at home and at school. They also felt able to express wishes and feelings in relation to Family Time.
- School reported positive change in school setting.
- Carers fed back that they had valued the support, and that they felt they had a deeper understanding of the young person's needs and felt more able to respond appropriately to any change in presentation challenges etc. Carers also reported the young person as presenting as happier and more stable and settled in the family environment and noted that school had also reported a positive shift, with the young person being more settled and happier at school and presenting with less distress and challenges.



Children's Independent Reviewing Service Annual Report

April 2021 to March 2022



putting
the child first

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HIGHLIGHT SUMMARY

What have we achieved?

In 2021 all our independent reviewing officers attended national training regarding up-to-date research around their roles and responsibilities for children that we cared for. The training has had a positive impact as children continue to tell us that their cared for reviews are supporting them to achieve their outcomes and goals.

We have continued to implement signs of safety and following further training in June 2021 we revisited and adapted the signs of safety conference agenda, so it is more in line with a strength-based model. The impact of this change is that parents are telling us that they feel more included in conferences and more valued in understanding how they evidence safety for their children.

We have managed service delivery challenges during the ongoing pandemic and have adapted our delivery model to include options for families, so they are able to attend meetings. Parents have told us that being present in the meetings has helped them to better understand the worries and strengths whilst being guided and supported by the Conference Chair.

Despite the challenges posed to service delivery because of Covid-19 we have continued to perform above national and local benchmarks regarding timeliness across the whole service.

The service relocated in December 2021 and were influential in designing the new office and meeting spaces, ensuring it was flexible and inclusive for children and their families. To date we have received positive feedback from families who tell us the meeting spaces are more accessible and family orientated making it easier for them to engage.

We have strengthened how we record our tracking of children's plans which means that we can clearly evidence how we are monitoring and progressing actions in a timely way for children. Ofsted in 2021 reported that that our IRO footprint was clear and evident on children's records.

We have strengthened how we use Mind of My Own within IRO practice. The impact is that there is a stronger voice evidenced on the child's records about their views being gathered, considered, and recorded in cared for meetings.

What are we worried about?

Children at the time of their second cared for review do not always have a clear plan of permanency.

There are national issues in relation to resources for homes (accommodation) and carers for our cared for children.

Nationally and locally, we are starting to see a growing impact of children living within poverty whereby they are at risk of harm is being impacted by economic factors in the family home. In turn we anticipate a rise in the use of the category 'neglect'.

What will we do next?

Although permanency timeliness can often be linked to assessments being directed as part of care proceedings, we are looking to see what we can do differently to improve the timeliness of a permanency decision being made for the child.

IROs will continue to work with colleagues in social care and commissioning to seek the best homes (accommodation) and carers possible for cared for children and will track and monitor their plans closely to ensure they best meet their needs, in keeping with their care plan.

We will work with our colleagues in social care in the implementation of Young People's Child Protection Plans, which embeds learning from recent learning reviews on how services nationally need to work more constructively with young people who are exposed to risks as a result of harm outside of the family home.

1. Purpose of the Annual Report

- 1.1. This annual report has been produced by the Children's Independent Review Team (CIRT) in line with statutory guidance and covers the period 1st April 2021 to 31st March 2022. It provides an overview of the work undertaken by the service in relation to child protection and cared for children.
- 1.2. The report highlights what is working well, what we are worried about and areas for improvement. It identifies emerging themes, examples of good practice, and identifies priorities for the next 12 months.

2. Role of the Independent Reviewing Officer (IRO)

- 2.1. Our IROs chair reviews for children who are cared for by Together for Children and Sunderland Local Authority. IROs have an important role to make sure that the decisions taken, are the ones that are best for the child or young person, that safety goals are progressing, Care Plans are followed and that everyone respects the rights of children.
- 2.2. The role of the IRO was established by the Adoption and Children Act 2002, s.118 (amended s.26 of the Children Act 1989) with the responsibility of reviewing placements and plans for children in care. The 2008 Act extended the IRO's responsibilities to have more effective independent oversight of the child's case and to ensure the child's interests are protected throughout the care planning process.
- 2.3. The primary roles and responsibilities of our IROs is to:
 - Review and scrutinise care plans to ensure they are legally compliant and in the best interests of the children.
 - Chair children cared for reviews.
 - Ensure that the voice of the child is heard and given appropriate weight within care planning.
 - Promote corporate parenting to enable positive outcomes for children in the cared for system.
 - Chair placement order and adoptive placements, ensuring they are appropriate to the child's needs.
 - Provide a quality assurance and scrutiny function, and where appropriate challenge to Children's Social Care in relation to practice.
- 2.4. Another key role for our IROs is to resolve problems arising out of the care planning process. Where problems are identified in relation to a child's case (e.g., relating to care planning, implementation of the plan or decisions relating to it) the IRO will, in the first instance, seek to resolve the issue informally with the social worker or the social worker's managers. The IRO will make a record of this on the child's file. If the matter is not resolved in a timescale that is appropriate to the child's needs, the IRO will consider taking formal action.
- 2.5. The independent reviewing officers are seen to be well placed to identify both strengths and worries with regards to practice, including general themes amongst the cared for children population and strengths and weaknesses in relation to Sunderland's corporate parenting responsibility for cared for children. Thematic concerns are identified and raised with senior operational managers with a level of timeliness appropriate to their impact on the safety and welfare of children.

3. Role of Child Protection Conference Chairs

- 3.1. Child protection conferences are meetings that take place when we are worried that a child may be at risk of significant harm. The conferences are managed by an independent conference chair. Where concerns relate to an unborn child, consideration is given as to whether to hold a child protection conference prior to the child's birth.
- 3.2. An initial child protection conference brings together people who are important to the child. This includes family members (and the child where appropriate), supporters, advocates and practitioners most involved with the child and family who are best placed to make decisions about whether the child is at risk of significant harm. If they think this is the case, they will work with parents and the child (if present) to create a child protection plan that focuses on what people are worried about.
- 3.3. Our Signs of Safety approach makes the conference easy for everyone to understand. It helps everyone to identify what we are worried about, what is going well and what needs to happen to make the child safe – this means that people are asked to use language that everyone understands.
- 3.4. Once everyone understands what the worries are (danger statements), and what they are working towards (safety goals), the conference decides whether a child protection plan is needed, and the Chair uses a scaling question to help participants think through this decision. If it is decided that a child protection plan is needed, the final part of the conference will look at what needs to happen to enable the child to be safe from harm. This means identifying actions needed and the people responsible for carrying out those actions, including the parents/carers and when they will complete these actions. This is called the outline child protection plan.
- 3.5. Three months after the initial child protection conference, a review child protection conference is held. After that, a review child protection conference happens every six months. The review will consider whether the child protection plan should continue or should be changed. Reviews continue until it is decided that a plan is no longer needed to safeguard the child.
- 3.6. When chairing either initial or review child protection conferences, the role of our conference chairs is to ensure information is appropriately shared and concerns and actions are identified collectively to ensure children are kept safe. The chair will meet the child and parents in advance to ensure they understand the purpose and process. The chair will also ensure that parents are clear about any recommendations and plans made involving them or their family.
- 3.7. Our child protection conference chairs are all practitioners but do not have operational or line management responsibility for the child or young person. Wherever possible, the same conference chair will host all subsequent child protection reviews in respect of a specific child.
- 3.8. Another key role for our conference chairs is providing independent oversight of child protection work and planning and contributing to the raising of practice standards. Conference chairs must ensure that problems identified in relation to a child's case or practice, in the first instance, are raised informally with the social worker or the social worker's manager. The Chair will make a record of this initial informal resolution process and if the matter is not resolved in timescale, the chair will consider taking formal action.

4. Impact of IRO/Conference Chair Work

- 4.1. Below are some anonymised stories of work that our service has achieved for children. In terms of confidentiality names and dates have been changed but the stories are real examples from the past year.



MARK'S STORY

Mark is a 12-year-old boy who became cared for child due to him not being kept safe. Mark was adopted but sadly for Mark his adoptive parents broke up and he could no longer stay in their care so became cared for again. During this time, it became clear that Mark's journey as a child had been difficult and he blamed himself for not being loved by a family. The IRO and the social worker identified the need for Mark to understand his journey and timescales were put in place to support Mark's understanding. Mark told his IRO that he felt scared of his emotions and didn't understand why he was not loved by a family.

The IRO built a relationship with Mark, and it became clear that he had a lot of negative feelings about himself, such as feelings of guilt and telling people that it was all his fault that he did not have a family of his own. The IRO used the cared for reviews and pre-cared for visits as mechanisms to celebrate Mark's achievements and made a clear recommendation for life story work to be completed so he could understand his journey.

The approach of the IRO on both building a relationship with Mark and his social worker has been key to Mark no longer expressing feelings of guilt. The tracking of his life story work by the IRO over a 6-month period has given him the tools he has needed to talk about his childhood and loss. This tool has helped Mark's current carer work through some of the challenges at home to a point that they feel able to keep Mark for the rest of his childhood. Mark now talks about being loved and feeling safe with his carer.

REBECCA'S STORY

Rebecca is a child who has been known to children's services due to child protection concerns. The worries were that Mam and Dad were arguing and Dad would hit Mam, which made Rebecca scared and frightened. Rebecca also told us that Mam and Dad both drank alcohol and sometimes they would not wake up. Her older adult brother was also a worry as he would argue and hit her. On one occasion he pushed her downstairs whilst their Mam and Dad were drunk and Rebecca was hurt and needed hospital treatment. During these times Mam and Dad always told us that they loved their children and really wanted to keep them safe from harm.



In the most recent referral, we were being told that the above problems were happening again and Rebecca was scared. We used Signs of Safety and the new conference agenda at the most recent initial child protection conference meeting. This model allowed Rebecca, parents and other attendees to focus upon what was working well and what Rebecca needed to feel safe. In doing this the Conference Chair skilfully moved the discussions from risk to strengthening safety and empowered the parents with the support of their family to look at what they would do to mean that Rebecca no longer needed to worry and felt safe. The change in approach allowed parents to understand things from Rebecca's view and feel safe to consider if being together as a couple was right for Rebecca.

By the conference focussing upon safety and valuing the parent's role in achieving this for Rebecca, it supported Mam and Dad making the decision that they should no longer be in a relationship but still bring their daughter up together. The impact of this reduced the risk of physical harm to Rebecca and led to her child protection plan ending but with her having a safety network of adults who help her to stay safe.

TOM'S STORY

Tom is a young man who lived at home with his parents and siblings where there was significant long-term domestic abuse. Despite our best efforts and Tom's own wishes to remain in the care of his Mam and Dad the decision was made at the age of 13 that Tom needed to be cared for by Together for Children. At the time of him becoming cared for, Tom was a non-school attender and had many emotional unmet needs. He lacked impulse control, and this led to him communicating via aggressive outbursts which often led to carers being hurt.



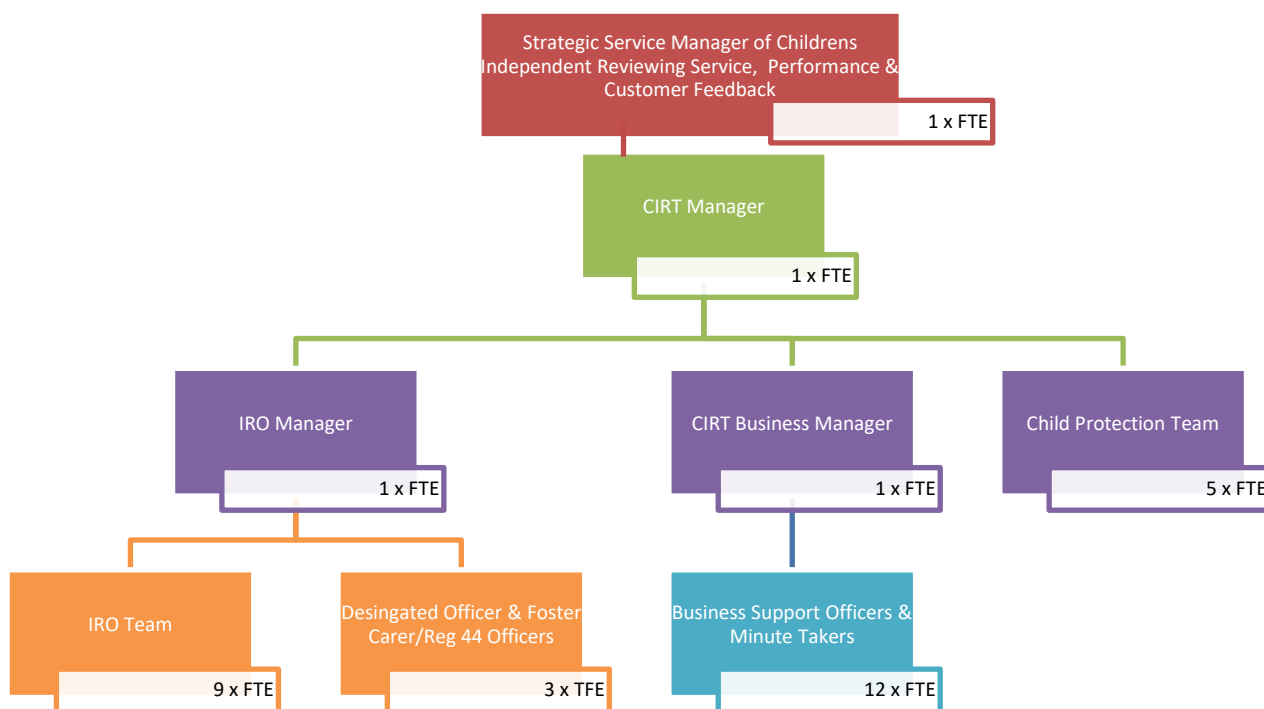
The IRO established a positive relationship with Tom and visited him prior to all his cared for reviews. The IRO praised his achievements during his reviews and worked with the care team so that Tom went from being an angry, unhappy young person to growing into a confident, determined person.

Tom moved into a children's home and went from strength to strength. He formed relationships with staff who helped him build his relationships with his Mam and Dad. Tom started to attend school regularly and is going to take GCSE exams this summer.

During his Cared for Reviews, Tom voiced that he wanted to return home. Through his cared for reviews, the IRO listened to Tom's voice and engaged with the social worker who arranged for repeat risk assessments to be undertaken. Tom was able to return to the care of his Mam with the plan to revoke the care order. Mam's situation had changed; she was no longer in a relationship with an adult who could hurt Tom and through the assessment was able to tell us what she would do to keep Tom safe and how she would make sure that any new relationship would ensure that Tom was given time to develop a relationship prior to any changes to his living arrangements.

5. Professional Profile of the Children Independent Reviewing Team

- 5.1. Our service sits within the Corporate and Commercial Directorate in Together for Children and is managed independently of children's social care line management. We have the required management capacity to lead and develop our service and provide appropriate levels of support to our workers including supervision and monitoring.



- 5.2. We have 14 full-time equivalents (FTE) Independent Reviewing Officers/ Child Protection Chairs who are all registered Social Workers with at least five years post qualifying experience.
- 5.3. Our Business Support Team provides minute taking services and administrative support to the whole Children's Independent Reviewing Service and manages reception duties.
- 5.4. The profile of our team is diverse, offering a wide range of knowledge and practice experience. In terms of diversity, the profile of our service is representative of a range of ages, gender, ethnicity, and cultural backgrounds. We have benefitted from a stable group of Independent Reviewing Officers and Conference Chairs and have kept changes of Independent Reviewing Officers for children to a minimum with four staff leaving the service this year due to retirement, and promotions.
- 5.5. The structure chart shows that we also have the Designated Officer, Regulation 44 Officers and Foster Carer Review Officers in our service. A separate annual report is produced covering the Designated Officer role.

Caseloads

- 5.6. The overall average caseload for CIRT is 61 which is a decrease from the previous year. The average caseload for child protection cases is 65 and the average caseload for cared for is 59. The current IRO handbook advises that IRO's should have a caseload of between 50 and 70. It is anticipated that following Josh McAllister's national review of Children's Services in England,

that further direction/steer will be given to the ongoing role of the IRO/Conference Chair via an updated version of the IRO Handbook.

Supervision

- 5.7. All workers within our service receive regular individual and group supervision and have access to informal supervision as and when needed. Peer supervision is a reflective discussion using Signs of Safety regarding individual cases. There continues to be a real commitment by the management of the service to ensure that the level of supervision and support is of the highest standards.

6. Learning and Development

- 6.1. As part of our commitment to ongoing learning and development, all our workers continue to have access to learning events such as legal briefings, staff briefings, Safeguarding Partnership training, and IRO specific training delivered by Edgehill University and funded by the Northeast Regional IRO Network. We have also held fortnightly team meetings at which research, practice guidance and learning reviews are discussed and disseminated to staff. Staff have also been encouraged to engage in monthly sessions regarding Signs of Safety / Signs of Success and learning from CIRT audits has been used to steer changes in practice for children.

- 6.2. We identify training requirements through supervision, team meetings, appraisals, training analysis, observations and the Ofsted inspection. The following training has been undertaken within this reporting year:

- | | |
|---|---|
| • Trauma informed practice | • Advanced IRO Training (Edgehill University) |
| • Signs of Safety (Harm Matrix) | • Arcbox |
| • Signs Of Safety child protection conferences (2 days) | • Mind of My Own |
| • Non-Verbal Communication | • Somerset Ruling and the impact on progression of adoption plans |
| • Signs of Safety Snapshot - Journal and Fire Drills | • Star and Arthur - what we know to date and what we need to consider |
| • Signs of Safety Snapshot - Safe Houses | • Contextual safeguarding |
| • Signs of Safety - Timelines and Trajectories | • Voice of the Child Team training |
| • Safe and Together Global Practice | • Signs of Safety - First Visits |
| • Coaching | • Regional IRO conference |
| • Unaccompanied Asylum Seekers | • Trauma informed practice workshops |
| | • Supervision skills |

In addition to the above training courses the IROs/Conference Chairs have continued to access Community Care Informed database and Signs of Safety learning space which provide updates to articles and research in areas of social work practice.

7. Regional, National and Local Links

- 7.1. Our management team meets quarterly with IRO managers from the Northeast. This regional group considers changes to policy and practice, gathers relevant statistical information at a regional level and works toward consistent practice in the region. This has led to the development of a regional training plan for IRO's. Over the last year we have also created a shared drive in Teams to enable all members to upload best practice documents to share with each other. This has been particularly important in the development of Young People's Plans. The impact of this work is raising the profile of the IRO's with our multi-agency partners. For example, the Judiciary Service has now issued updated guidance regarding expectations in final evidence bundles for children which now asks for an IRO court statement outlining their views on the final care plan.

- 7.2. The regional group have met to discuss and consider the implications regarding the changes in legislation around the use of unregulated homes, learning from child deaths, whilst reviewing ongoing strategies for strengthening the influence that children have upon shaping the service.
- 7.3. The regional group has continued to influence and develop practice and policy by having representation at National Independent Reviewing Officer Management (NIROM), whose focus has remained upon engagement of children. This reporting year Sunderland has now taken on the role as deputising when the two identified IRO Managers are not able to attend, further raising our profile at a national level.
- 7.4. We have also sought to maintain direct working relationships and links with TfC children's social care services. The management team meets regularly with Service Managers in Social Care. The IROs and Conference Chairs meet with social care Team Managers where they agree an agenda in advance to discuss strengths or worries that they may have relating to practice.
- 7.5. We continue to liaise with our local partners and are represented at the following groups:
- Sunderland Safeguarding Children's Partnership (SSCP)
 - Regional NE 12 IRO Managers Group
 - NHS Complex Case Panel
 - Liquid Logic Operational Group
 - Change Council
 - TfC Children Resource Placement Panel
 - TfC Legal Services, Social Care and CIRT
 - Corporate Parenting Board
 - Care and Legal Gateway Panel
 - Harrogate District NHS Foundation Trust & Children's Independent Reviewing Service Management Forum
 - Northumbria Police & Children's Independent Reviewing Team Management Forum
 - CAFCASS & TfC Management Forum
 - Quarterly meetings with Councillor Farthing, portfolio holder for children within the City of Sunderland
 - Headteachers Forum
- 7.6. Attendance at the above groups provides the opportunity for improved working arrangements, which in turn leads to better outcomes for the children and families that we work with. One example has been the introduction of a pre-meeting discussion between the allocated social worker, team manager and conference chair prior to ICPC. The impact of this has been social workers and conference chairs feeling better prepared in supporting the family. The groups provide an opportunity to influence practice and procedural developments, which ultimately supports Together for Children to deliver positive outcomes for the children of Sunderland.
- 7.7. We also support partners via training and development sessions. For example, we delivered training for Northumbria Police, GP services and Wear Recovery. The purpose has been to raise awareness of changes in practice and to help their individual organisations further embed Signs of Safety/Success.

8. Voice and Influence of Children

- 8.1. The voices of children play a key role in influencing our work and provide a vital grounding and reality check as to how things are working in practice. 'Putting the child first' is central to everything we do and therefore we want to offer meaningful opportunities for children to contribute their views and opinions, so they can participate in decisions and activities that shape and influence practice, policies and services that can impact on their lives.
- 8.2. Over the last 12 months, children have continued to tell us what is important to them and below are some examples of their views and opinions:

You said.....		We did.....
"You would like a choice of how your meetings should be held, you said sometimes having it virtual is easier than having too many people in a room but also said that having the meeting face to face makes you feel more comfortable because you have known the IRO for a long time"	→	We created a menu where you can choose whether you would like to have your meeting face to face, virtually or even a mixed meeting which is called hybrid. We also included other choices such as who you would like at your meeting and how you would like to share your views
"You would like your social worker to chair your cared for review "	→	We spoke with your social worker and arranged a way for your social worker to chair the meeting in place of the IRO.
"You wanted the language to be changed in your meetings and the minutes to the meetings to reflect the change in language"	→	The IROs are changing the jargon and are using the language you have asked such as care leaver to care experienced, placement to home ect.
"You want to be spoken to clearly, in a quiet place and to help you communicate you would like your IRO and social worker to use pictures and symbols and to give you simple choices"	→	When visiting your IRO uses Mind of My Own which has lots of pictures and simple options for you to use to help you communicate what you want us to know and help you with so that this can be talked about in your cared for review

- 8.3. Listening to children is a core value of CIRT which we want to continue to hear and demonstrate how it is leading to changes in how we undertake our job on their behalf. In the coming year, whilst acknowledging the achievements we have made in listening, we are eager to further strengthen the child and their family in our work by undertaking the following:

- Create opportunities outside of statutory meetings for children to be able to communicate safely with conference chairs/IRO's

- Embed Young Person's Plans and the ethos of their engagement / chairing of their meetings, so that children have the true sense that the actions we take are done with them rather than done to them to manage risk.
- Build upon our strengths in valuing the child's family network to help them manage the risks to children and therefore reducing the need for them to be either cared for or subject to a child protection plan. As we know children have better outcomes when they can be kept safe within their family network.

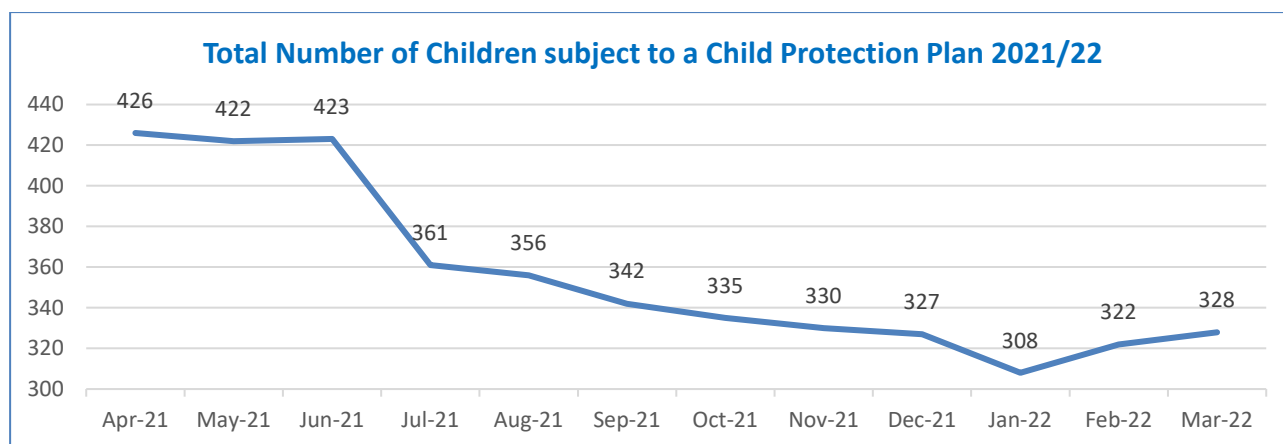
9. Highlighted Achievements in 2021/22

21/22 Priorities	Progress & Outcomes
Move towards having two teams; 'Cared for' and 'Child Protection' to further strengthen skills and practice for children.	In April 2021 we move to a preference model which enabled staff to practice either predominantly cared for children or the child protection arena. This model has seen some positive changes in relation to practice with consistency in quality being improved. We continue to manage workloads in keeping with children's needs within the city.
In line with the government 'roadmap out of lockdown', engage in more face-to-face meetings with children and their families to ensure the child is at the centre of practice and to support each other in our shared understanding of the needs of individual children.	Throughout this reporting year it has continued to be a challenge in respect of face-to-face meetings being able to be held due to the impact of Covid-19. However, despite these challenges we have actively promoted face-to-face meetings during periods where government guidance has allowed us to. From March 2022, our risk assessments were refreshed to enable all families to have face to face meetings. We continue to embed the ethos that every encounter is an opportunity to learn more about the child's situation and to promote their wellbeing.
Embed our newly developed engagement tools to encourage children to contribute their views, wishes and feelings in their reviews.	Every staff member has their own set of engagement tools. We have increased our training regarding Mind of My Own and staff have risen to the challenge of embedding the Voice of the Child in practice. The impact of this was acknowledged in our Ofsted inspection in 2021 and has been noted during internal audits. This means that our practice and planning is influenced, where appropriate to do so, by the child's voice. Ofsted 2021 said that <i>"Hearing the voice of the child is an exceptional strength in Sunderland."</i>
Establish meaningful options for children to help chair their cared for reviews.	CIRT now has a "Child's Menu" which is shared with them during every pre-cared for visit to outline the different options we can use to help them take part in their review. The impact of this is we are starting to have examples of children chairing their own reviews. This continues to be an area that we want to build upon as the progress to some extent has been impacted by Covid-19.
Evolve our practice to support and empower survivors of domestic abuse through the delivery of child protection conferences and reviews.	As a service we have moved away from victim blaming and seek to work with survivors and their children in a way that challenges the abuser's behaviour. Staff have had access to the Safer Together training and value the support the non-abusive parent needs. This change in practice will continue to be an area we revisit regularly to embed the cultural shift needed in Sunderland.
Strengthen how plans are recorded so that they are SMART to help parents,	Training was delivered in July 2021 regarding Signs of Safety which covered plans. The impact of this training and the training undertaken by social workers is leading to improved SMART plans.

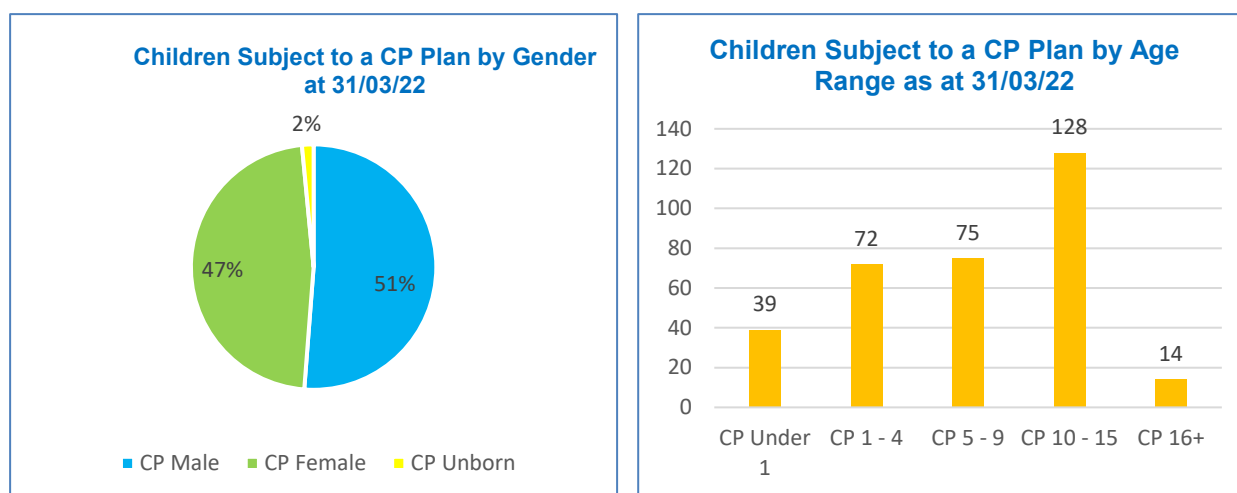
21/22 Priorities	Progress & Outcomes
carers and professionals understand clearly what is required to ensure the safety and wellbeing of the child.	<p>The evidence that supports this, is that the length of time children are subject to plans continues to reduce, indicating that mechanisms are in place to effectively limit drift and delay for children.</p> <p>Ofsted said in 2021 <i>“Child protection plans are of a high quality, providing clarity about what needs to happen linked to the child’s timeframe for change”</i></p>
Continue to embed signs of safety/ success into our day-to-day practice.	<p>Since our last annual report, we have reviewed our practice in child protection and implemented a new standard agenda which was designed in consultation with our Signs of Safety consultant. Regarding cared for reviews, we have worked at a national level in influencing the development of new paperwork which will hopefully be implemented in the early part of the next reporting year.</p>
Continue to work with Social Care and partners to explore different ways of working with teenagers.	<p>As outlined above, during this reporting year we have worked with partners via SSCP and now are at the position of implementing Young People’s Plans from 01/04/2022.</p>
Use performance data more intelligently to produce greater insight and evidence regarding the impact that our work is having on children.	<p>We are in the process of developing our Power BI scorecards, which gives us live access to information regarding children and IRO’s. This has enabled us to understand better how our work is leading to improved oversight and outcomes for children, for example it enables us to identify gaps and ask questions around the impact that these gaps have upon children.</p>
Further improve the quality of our recording so that we fully demonstrate the impact of our work from the child’s perspective.	<p>We have introduced our recording template into Liquid Logic and fully embedded the ethos of Signs of Safety. The impact of this has been acknowledged during our Ofsted inspection</p> <p>Ofsted said in 2021 <i>“Cared for children’s reviews are regular and comprehensive and there is good evidence of tracking and monitoring of children’s progress by the Independent Reviewing Officers.”</i></p>
Continue to work with agencies and social care to improve the timeliness of child protection conference reports.	<p>We have strengthened the processes with regards to ensuring that agencies are provided with their performance data. We have undertaken training with individual agencies where difficulties have been evidenced regarding their timeliness. This has led to some real improvements; however consistency remains a challenge.</p>
Use our position as conference chairs/IROs within the wider Together for Children agenda to help to improve practice and outcomes for children.	<p>We have embedded a model of joint thematic audits so that we learn together and develop together. This means that we have a whole service-learning ethos which enables us to celebrate positive practice and better outcomes for children.</p> <p>Ofsted said in 2021 <i>“Managerial oversight has demonstrably improved with clear manager oversight at all levels, including by child protection chairs, throughout a child’s written records”</i></p>
Seek to strengthen how we can impact upon more timely decisions regarding permanence at the second review.	<p>As identified, this continues to be an area for further joint understanding between the different departments within TfC. To aid this a thematic audit is due to commence in April 2022 looking at both children who have had a permanency plan and those who have not by the second review. Therefore, this remains an ongoing priority for the service.</p>

10. Profile of Children in Sunderland

Child Protection

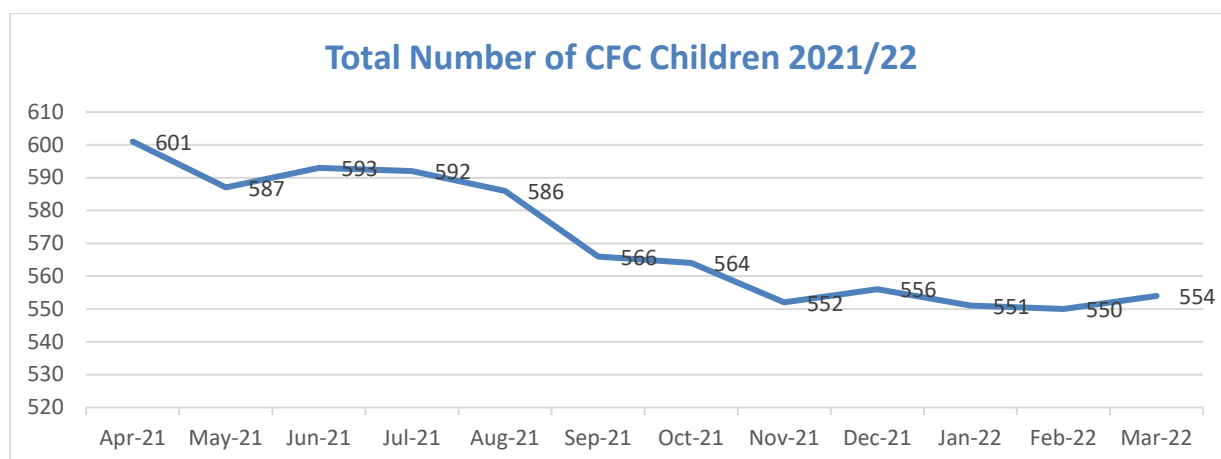


10.1. The number of children subject to a Child Protection Plan in Sunderland has reduced across the year by 23% between April 2021 and March 2022. The impact of workforce stability, implementation of a consistent model of practice has all led to a reduction in children needing protection plans. Since the lowest level in January 2022, we have started to see a more upward trend with neglect becoming more prominent. *The year-end position in relation to the rate of children on a child protection per 10k plan places Sunderland (60.52) below the median (63.35) when compared with Local Authorities in our region.*

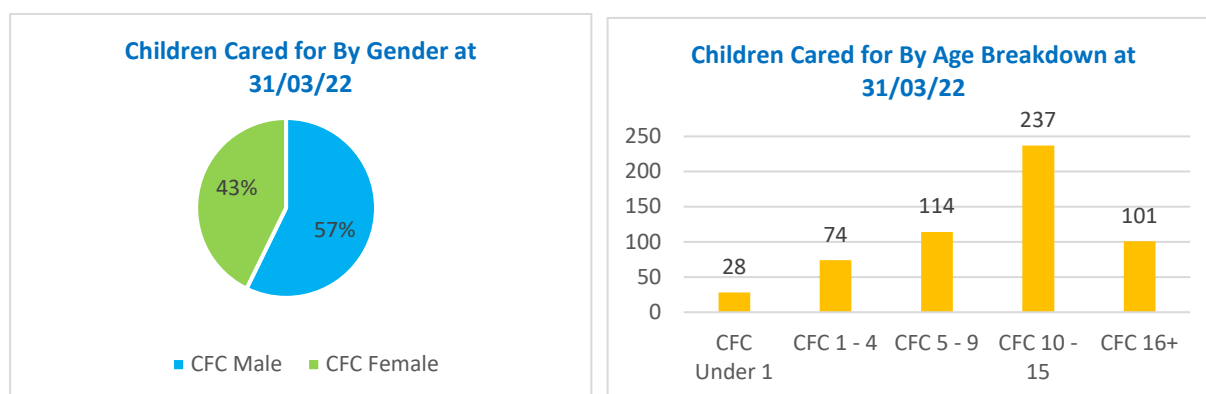


10.2. There continues to be an even balance of male and female children who are subject to a Child Protection Plan. Most children on a plan are aged between the years of 10 and 15. In response to this we have worked with partners to consider how we support these children better when the risk is outside of parental control. We envisage that this work will see a reduction in the coming year as compared to 20/21 data there are signs of this work impacting upon children in this age range needing plans. The reason for us envisaging ongoing reduction is due to increased targeted work based upon relationships and management of risk within the child's network.

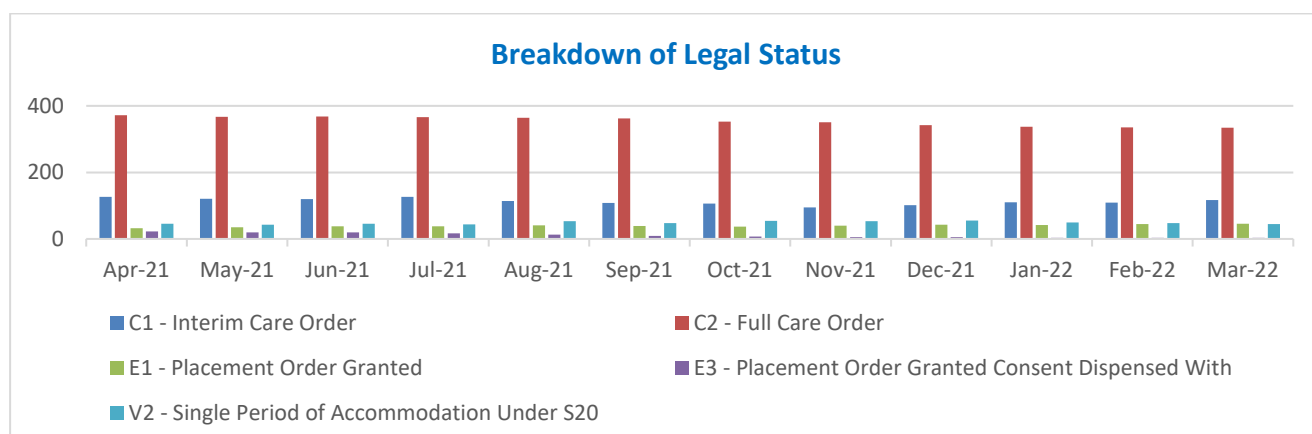
Cared for Children



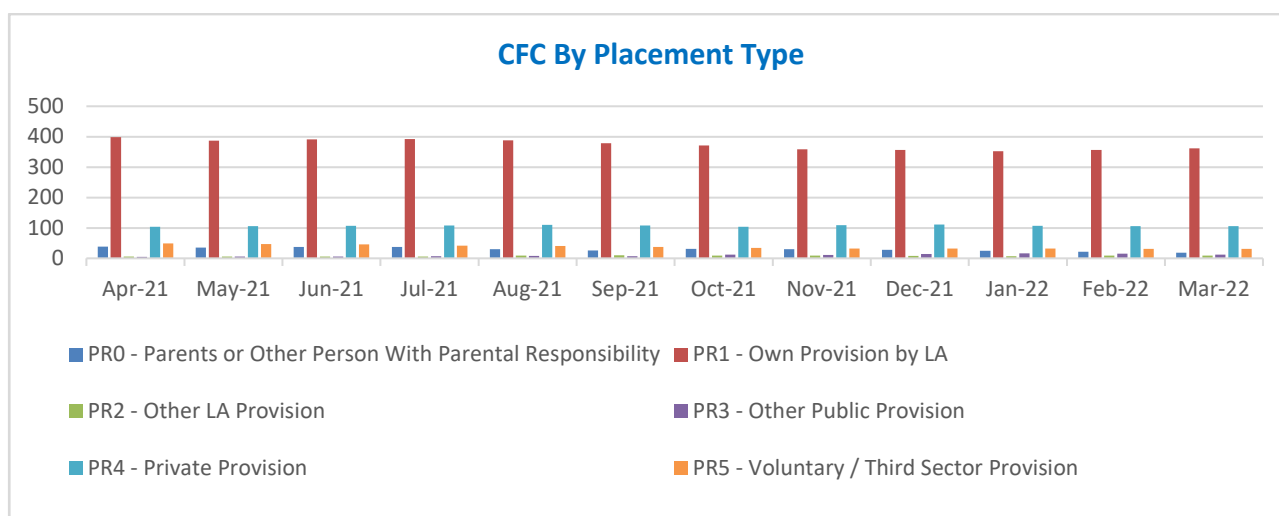
- 10.3. The number of children cared for by Together for Children has reduced across the year with an overall reduction of 9% from 601 in April 2021 to 554 in March 2022. Further evidencing that working with a strength-based model is leading to children not needing to become cared for. Also improved timeliness of care proceedings means that children are exiting cared for arrangements sooner. *The year-end position in relation to the rate of cared for children per 10k plan places Sunderland (100.6) below the median (113.75) when compared with Local Authorities in our region.*



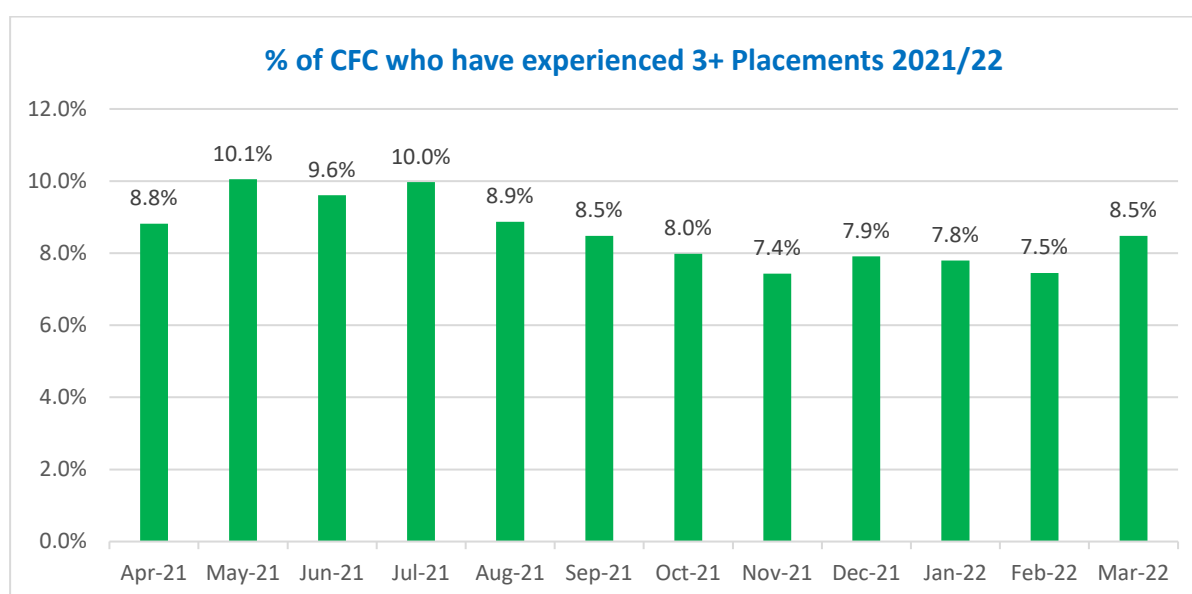
- 10.4. Slightly more cared for children are male over female. Most children who are cared for by Together for Children are aged between the years of 10 and 15 which is the same age group as child protection and highlights why TfC together with partners are now working differently and are hopeful that Wear Together will help reduce the number of cared for children in this age range. Wear Together is targeted at providing intensive support for families to help prevent children becoming cared for.



- 10.5. On the 31/03/22 there were 45 children accommodated via S20, which is a reduction from the previous year at 63.



- 10.6. The placement type continues to evidence the ongoing commitment of Together for Children to provide in house care for children so that they can remain living in communities that they best identify with. This means that we can have greater influence in ensuring their needs are met as it removes the potential complicating factor of distance to travel for school, family time and meaningful appointments.



- 10.7. For the position as at the end of March 2021/22 was 8.5% which is 1% less than the previous year meaning that a greater percentage of our cared for children are experiencing more stability in their homes.

11. Performance Summary - Child Protection 2021/2022

- 11.1. We have held a total of 807 conferences this year; 277 have been Initial Child Protection Conferences (ICPCs), 9 transfer in conferences and 521 have been Review Child Protection Conferences (RCPCs). Overall, this is a reduction in child protection meetings of 10% when compared with the previous year.

- 11.2. Throughout the year our Conference Chairs have had to continue to accommodate changes in practice because of COVID-19. Participation in conferences has largely operated via a hybrid approach informed by family choice and the assessment of risk. All child protection conferences have been organised to enable families and professionals to consider the needs of children.
- 11.3. In 2021/22, a total of 589 child protection plans were ended:
- 201 ended under six months
 - 386 ended between six months and two years
 - 2 ended after two years
- 11.4. The reasons for children's plans ending are due to a mixture of improved safety for the child as the result of tried and tested safety plans and safety networks or due to changes in the child's living arrangements i.e., child becomes cared for or is placed with family members. In relation to the two children's plans who ended after 2 years, their plans were impacted by us waiting for a findings of fact outcomes regarding of allegations of abuse. Scrutiny is in place for any plans that progress over 16 months via supervision and care and legal gateway.

Timeliness of Initial Child Protection Conferences (ICPC's)

- 11.5. An ICPC should be held within 15 days from the date of a strategy, where a child protection investigation has been carried out. The table below shows the current performance together with the latest comparator data.

% Of ICPC Held in Timescale	Sunderland 20/21	Sunderland 21/22	Statistical Neighbours	England
	88%	84%	87%	83%

- 11.6. Within the last year, 84% of ICPC's were held within timescale. This represents an 4% decrease in performance when compared to the previous year. We are performing slightly lower than England and our statistical neighbours as of 2021.

- 11.7. The reasons for those ICPC's held out of timescale are detailed in the table below:

ICPC - Reasons for out of Timescale	20/21	21/22	Variance
Late Notifications	14	13	-1
Admin Errors	4	2	-2
Missing Information /Reports	10	4	-6
Non-Attendance by Significant Person	8	19	+11
Non-Attendance by Other Professional	1	4	+3
Extension Agreed by Professionals	1	2	+1
Total Number of Children	68	83	

- 11.8. In 2021/22 there were 13 late notifications received which resulted in conferences being held out of timescale. 5 of the 13 late notifications were stood down as insufficient notice (five days) was given for external agencies to prepare and submit reports for the meetings. This specifically impacted Northumbria Police who require sufficient time to undertake police checks for inclusion in their reports.
- 11.9. There were 4 occasions this year where key information was not available for conference, and in the best interests of the child the meetings were stood down. A further 19 meetings were impacted by non-attendance by a significant person, this being the child's parent or carer. As we have progressed through periods of the country going in and out of lockdown this has led to family members catching covid making them unavailable for engagement in the conference.

- 11.10. Overall, initial conferences for 83 children were held out of timescale, which is an increase from 68 in the previous year.
- 11.11. We continue to actively monitor conference meeting activity and provide weekly updates to Service Managers within Social Care. We have also continued to provisionally plan ICPC's at the start of the Section 47 investigation giving Social Care and other organisations the full 15 days to plan for the ICPC.

Timeliness of Review Child Protection Conferences (RCPC's)

- 11.12. A child protection plan should be reviewed at an RCPC within three months of the Initial Child Protection Conference and then at intervals of no more than six months. The table below shows the percentage on RCPC's held in timescale in Sunderland.

% Of RCPC Held in Timescale	Sunderland 20/21	Sunderland 21/22	Statistical Neighbours	England
	98%	98%	94%	93%

- 11.13. Within the last year, 98% of all RCPC's were held within timescale which is the same as last year. We are performing 5% above England and 4% higher than our Statistical Neighbours as of 2021.

- 11.14. The reasons for those RCPC's held out of timescale are detailed in the table below:

RCPC - Reasons for out of Timescale	20/21	21/22	Variance
Admin Error	3	1	-2
Missing Information /Reports	3	4	+1
Non-Attendance by Significant Person	5	2	-3
Non-Attendance by Other Professional	1	1	-
Extension Agreed by Professionals	1	3	+2
Total Number of Children	25	17	-8

- 11.15. In 2021/22, 1 RCPC was out of timescale due to lack of quoracy. The number of reviews delayed due to family availability has also decreased in this reporting year.
- 11.16. Overall, review conferences for 17 children are recorded as being held out of timescale which is a reduction of 8 children compared with data last year.
- 11.17. For those children, where conferences were out of timescale, plans were agreed to ensure their safety. We are taking a proactive approach in limiting the number of reviews that fall out of timescale by ensuring data is provided weekly to Children's Social Care Management, and that individual direct contact is made with Team Managers, where required.

Timeliness of Reports for ICPC and RCPC

- 11.18. Provision of reports within timescale from professionals for both ICPC's and RCPC's is an area where improvement is required.

21-22 Report Timeliness	ICPC 20/21	ICPC 21/22	Variance	RCPC 20/21	RCPC 21/22	Variance
Children's Services	57%	41%	-16%	34%	33%	-1%
Police	58%	94%	+36%	24%	84%	+60%
GP	67%	59%	-8%	48%	57%	+9%
0-19 Service	67%	65%	-2%	43%	39%	-4%
Education	75%	67%	-8%	26%	40%	+16%

- 11.19. Social Worker reports available by the required timescales have decreased since the previous reporting year, from 57% to 41% and RCPC's from 34% to 33%. Whilst improvements have been achieved at some points throughout the year, overall, performance remains well below the TFC target of 80%.
- 11.20. The timeliness of reports submitted by other agencies ranges between 59% and 94% for ICPC's and between 39% to 84% for RCPC's. There is a dependency on the social worker returning invitations to allow sufficient time for confirming dates and for agencies to complete reports. This is a particular issue for the Police, as without its updated list of adults around the child they are not able to undertake the checks required on their database.
- 11.21. We will continue to provide regular figures to Social Care and agencies together with any supplementary information that will help to improve timeliness.

Progression of Child Protection Plans

- 11.22. Where a child is subject to a child protection plan for longer than 12 months, we must consider the reasons why. Conference Chairs consider what alternative intervention is required to reduce the risk of significant harm to the child. The longer a child is subject to a plan can be an indicator that the plan may not be achieving the required outcome for the child.
- 11.23. Our Conference Chairs track the progression of the plans and use their position to resolve issues where there are concerns regarding drift and delay. Compared with last year, the impact has led to an ongoing decrease in the number of plans open longer than 12 months from 40 children to 37 children as of the end of the reporting year. This further supports the position that good communication between the conference chair and social worker between conferences via tracking is having an ongoing positive impact in plans moving forward for children.
- 11.24. In addition to the above processes children with Child Protection Plans over and above 12 months are also reviewed within the Care and Legal Gateway Panel where CIRT are represented so that decisions can be made regarding the potential need to escalate matters by issuing the Public Law Outline.

Child Protection Categories

- 11.25. The following table shows a breakdown of the categories for children subject to a Child Protection Plan.

Child Protection Categories	2020/21		2021/22		Number Variance
	No of Children	% Of Children	No of Children	% Of Children	
Neglect	152	35.98%	142	43.29%	-10
Emotional Abuse	245	59.61%	172	52.44%	-73
Physical Abuse	3	0.73%	8	2.44%	+5

Sexual Abuse	11	2.68%	6	1.83%	-5
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- 11.26. There are 142 child protection plans within the category of neglect; within these cases there is often evidence of a combination of risks which relate to; substance misuse, mental health and domestic abuse. Towards the end of the reporting period, we have seen an increase in children whose plans have started due to neglect. It is anticipated that the cost of living crisis within England is likely to see the ongoing increase in this category. Up to date research and writers have highlighted the link between poverty and a reduced resilience of families to overcome financial stress. Whilst poverty itself is not pre requisite to neglect it is factor that does have an impact upon families ability to cope. (Joseph Rowntree Foundation 2017 and Josh Macalister Interim Review of Children Services report 2021)
- 11.27. The number of children subject to a plan under the category of Emotional Abuse has decreased by 73. This suggests that as we have come out of the tightest Covid-19 restrictions that the increased mobility of families has enabled them to remove themselves from abusive situations.
- 11.28. The category of Physical Abuse has seen an increase in the number of children from 3 in 2021 to 8 in 2022. The category of Sexual Abuse has decreased in the last year from 11 in 2021 to 6 in 2022. Work continues to ensure that categories are used appropriately and reflect the area of risk of significant harm for the child.

Tracking Discussion Child Protection Reviews

- 11.29. A tracking discussion describes a contact between a Conference Chair and the allocated Social Worker for a case. We plan that they should be held as soon as one is needed to track a child's plan is moving forward, but no later than the mid-way point after each review.
- 11.30. We held 1060 child protection tracking discussions within the reporting year which is a slight decrease from 1199 last year. The decrease correlates with the overall reduction in requests for ICPC's and the fact that plans for children have been progressing timelier reducing the need for tracking being undertaken.

12. Participation and Views within Child Protection

- 12.1. Where children attend a conference, the Conference Chair will invite them into a pre-meeting half an hour prior to the start of the meeting to support their engagement. Where a child is not attending a conference, the Conference Chair will encourage the professionals working with the child to collect their views using the child protection conference pack or the Mind of My Own application which is a digital participation tool. During this reporting year we have continued to offer pre-meetings however due to the pandemic these have been achieved via several methods including telephone contact, conference calling, Microsoft Teams and face-to-face meetings where it has been risk assessed as safe to do so.
- 12.2. In 2021/22 we introduced a new Microsoft Form questionnaire which has assisted us in being able to gather feedback from parents during the Covid restrictions. Most comments received have been positive with parents and professionals confirming a positive experience in conference with comments such as:



- 12.3. Participation has remained a core value for our service with parents and professionals. We have been flexible in our delivery using all the learning that was undertaken at the start of the pandemic to operate an inclusive model of practice. During this year parents and professionals have continued to express their appreciation for our professionalism and skills in enabling child protection conferences to remain child focused and relevant.

13. Performance Summary - Cared for Children

- 13.1. As of the 31/03/22 Sunderland had 554 cared for children, which is a 10.5% decrease of the cared for population from the previous year end data. The table below provides a summary of cared for activity.

Indicator	20/21	21/22	Variance
% Of Cared for reviews held in timescales	99%	98%	-1%
% Of Cared for reviews where a child participated within the review	94%	94%	-
% Of Cared for children with an up to date care plan	98%	97%	-1%
% Of Cared for children with an up to date PEP	99%	100%	+1%
% of CYP with an up to date health assessment	87%	86%	-1%
% Of Cared for children accommodated under section 20	10%	8%	-2%
% Of cared for children with a primary plan of permanence by the second review	34%	36%	+2%

Timeliness of Child Cared for Reviews

- 13.2. An initial Cared for Review is required within 20 working days of a child becoming cared for, a second review within three months and subsequent reviews six monthly. Reviews can be held early where there is evidence of a significant event in the child's life or where consideration is required for changes to the care plan. We have held 1,643 cared for reviews this year which is a decrease of 92 compared to the previous year, again evidencing that our interventions on seeking

to support children remaining safely at home is starting to have a direct impact upon both the cared for population and the time that children remain in care.

- 13.3. The percentage of reviews held in timescale has slightly decreased from 99% in 2021 to 98% this year. We have listed the reasons for a child's review being held out of timescale in the table below.

Review OOT Reasons	20/21	21/22	Variance
Late Notification	1	5	+4%
Administration Error	7	16	+9%
Non-Attendance by Significant Person	6	13	+7%
Extension Agreed by Professionals	4	4	-
External Professional/Agency Unavailable	2	0	-2%
Total Number of Children	20	38	

- 13.4. As highlighted above the first three categories have seen an increase, with one of the big factors being that as we have come out of tight Covid restrictions that parents and professionals have had greater exposure to Covid-19 meaning that they have not always been in a position to update systems or engage.

Pre-Cared for Review Visits

- 13.5. An IRO arranges a Pre-Cared for Review Visit (PCV) with a child prior to their Cared for Review. This gives the IRO and child the opportunity to directly discuss the care plan and the structure of the child's forthcoming review to ensure it is firmly focussed on the child and their plan.
- 13.6. We have held a total of 1286 held in 2021/22 which is 6% decrease from previous year of 1366., h Children continue to tell us that our pre visits are important to them and that they want to see their IRO prior to their cared for review so that they can talk to them in private. We have continued in this reporting year to undertake pre-cared for visits via a combination of methods including Microsoft Teams, telephone calls and face to face visits. If a child does not wish to have a PCV the reason is noted on liquid logic and within the cared for review documentation.

Tracking Discussions

- 13.7. A tracking discussion is a contact between an IRO and the allocated Social Worker for a case. Tracking discussions are planned after each review and take place as and when required, depending upon the progress of the child's plan. We have held 1453 tracking discussions in 2021/22 which is a decrease but reflects the decrease in the cared for population. Tracking discussions continue to provide the IRO and the child's allocated Social Worker with the opportunity to reflect upon how the child's care plan is progressing and provides the IRO with an opportunity to share their experiences and practice knowledge should a Social Worker be faced with an area of a child's care plan that is not moving forward.

Education

- 13.8. The number of cared for children with Personal Educational Plans (PEP) has increased from 99% in 20/21 to 100% in 21/22, meaning that every child now has an up-to-date plan of support. PEP is the education plan that outlines individual targets and the support that will be put in place to help a child achieve those targets. The aim of the PEP is to support the child to overcome the disadvantages that research tells us they face, as a result of being a cared for child.

Secure Accommodation Panel Reviews (SAR)

- 13.9. With regards to children who have been placed in Secure Accommodation under Section 25 of the Children Act 1989, (Welfare Secure) a Secure Accommodation Review (SAR) panel must be arranged within 20 working days of the order being made and subsequently three monthly. We continue to have a reciprocal regional arrangement in place with South Tyneside and Gateshead

Local Authorities to accommodate the SAR panels as there is a requirement for three IROs to be in attendance, one of which must be independent.

- 13.10. In the reporting year we have had 3 children placed in secure accommodation which is an increase from 2 in the previous year. Whilst numbers remain relatively low there have been other children who have been identified as requiring secure accommodation, however due to national shortages beds have not been available. When a resource is not available the child's IRO works with Social Care in providing support and assistance to help best meet their needs.

14. Participation and Views – Cared for Children

- 14.1. This year, 94% of children participated in their reviews for 2021/22, which is the same as last year. We have continued as a management team to undertake dip samples of IRO recording and strengthened our use of Mind of My Own in our pre-cared for visits.
- 14.2. In the last reporting year CIRT completed 25 Mind of My Own statements with children. This year we have completed a total of 171. We have achieved this by investment in training and the purchasing of cellular tablets making it more accessible for IRO's to complete directly with children. In acknowledgement of this increased uptake, we have purchased further cellular tablets which will hopefully continue to drive up the number of Mind of My Own statements completed.
- 14.3. To ensure that the child's voice is heard, CIRT continues to work closely with the Children in Care Council (Change Council) by attending their meetings when requested. We have also supported Early Help activities and assisted in engagement with children's groups in Sunderland STARS, a cosmic epiphany, and Youth Parliament to collect a wider perspective of the child's voice.
- 14.4. In 2021/22 we have continued to provide children with introduction letters and IRO profiles when they become cared for. All profiles in this reporting year have been updated and are currently in the process of being uploaded on to the CIRT designated web page to strengthen accessibility for children.
- 14.5. Below are some of the positive things that children have said worked well during the last year.
- *My meeting helped me understand things about the plan and what my future holds and I felt my views were heard*
 - *My IRO supported me in sharing my views at my review*
 - *I'm clear about my future and my plan*
 - *Having a meeting virtually is easier because there is no travelling and more relaxed*

- *Where I live is good and I feel hopeful, calm and excited.*
- *My IRO is fabulous and Lovely.*
- *My IRO helps me by listing and helps others understand what saying in my meeting*
- *I live in a proper mansion with gold door handles, I'm really jolly and enthusiastic about my life and I have an awesome family and get like a million pounds for my birthday*
- *Things I didn't understand I now do they got explained to me*

15. Dispute Resolution Procedure (DRP)

- 15.1. The DRP process has four stages in total; the process ordinarily begins with a DRP ALERT which involves the IRO/Conference Chair (within 24 hours of identifying an issue) contacting the Social Worker or Team Manager by telephone to raise the concern with the aim of seeking to resolve the issue or concern immediately. Where this cannot be achieved, 10 days is given to seek to find an agreed resolution for the child. This is stage 1.
- 15.2. Following the 10-day timescale, should the issue remain unresolved or if the IRO/Conference Chair feels it necessary, they can escalate the matter up through the levels of Case Management. Once the DRP has been initiated the issue(s) should be addressed within an overall 20 working day timescale.
- 15.3. In 2021-22 we raised a total of 69 DRP's which are summarised below.

DRP's – Child Protection

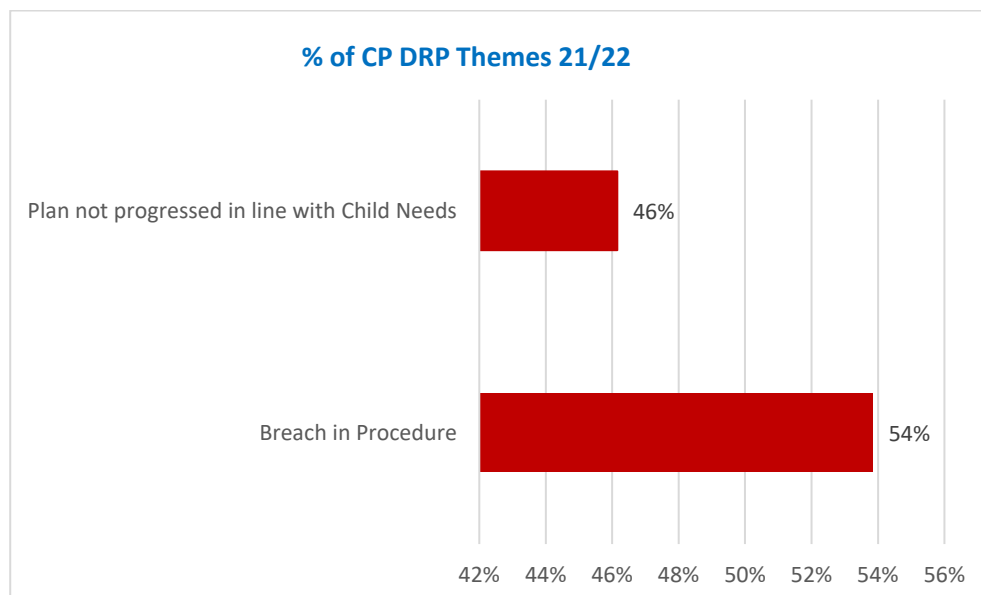
- 15.4. The table below shows the number of DRP's raised in relation to child protection.

Child Protection DRPs	20/21	21/22	Variance
No of DRPs Raised	36	35	-1

- 15.5. The following table highlights the different stages in which DRP's have been resolved for children subject of child protection plans in this reporting year.

Child Protection DRPs	Alert	Stage 1	Stage 2	Stage 3	Stage 4	Total
Stage DRP Closed	35	0	0	0	0	35

- 15.6. All DRPs raised in respect of child protection have been resolved at the early alert stage and have not needed to be progressed through to stage 1 or higher.
- 15.7. The child protection DRP themes and issues can be seen within the chart below.



15.8. The highest themes remain in line with those from the previous reporting years; issue not addressed, lack of progress, late or no Social Worker report and Social Worker report not shared with parents. In line with our updating of our DRP process and categorisation in 2021 we streamlined the themes hence the reason for the reduction in the number of different categories. CIRT continues to work closely with our colleagues in social care to overcome the above challenges so that it is in the best interest of the child.

15.9. Below is an example of DRP raised for children subject to a child protection plan.

DRP Challenge	Outcome for the Child
The Chair raised a DRP due to the child protection conference having to be stood down as procedural fairness had not been followed. Mam and the children had not received a copy of the report to help them understand the worries social care have about the family. This led to a delay in decision making as the conference then had to be rearranged. The DRP also highlighted that this would be the third child protection plan for the children and no senior management oversight had been sought to ensure that the intervention being recommended was the most effective to get better outcomes for the children and family.	The child protection conference was rearranged immediately for 5 days after the original planned date. The social worker shared the report with mam the same day and this ensured that mam and the children had a copy of their report to help them understand the worries social care have in preparation for the discussions. This meant that the children also are aware of what safety is in place for them. In addition, the multi agencies present were part of the interim safety planning as well as mam until the rearranged conference could take place. The social worker also agreed to map out the worries and strengths and present this to care and legal gateway to discuss the third child protection plan, the aim for this is to ensure that the most efficient interventions are being provided to families to have the most effective outcome.

DRP's – Children Looked After

15.10. The table below shows the number of DRP's raised in relation to cared for children.

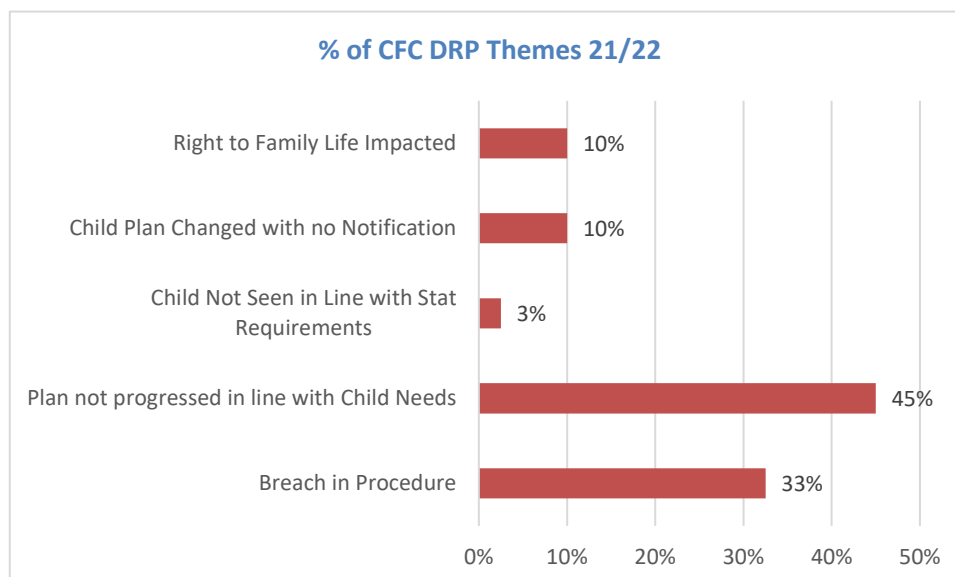
Children Cared for DRPs	20/21	21/22	Variance
No of DRPs Raised	76	34	-42

15.11. The following table highlights the different stages in which DRPs have been resolved for cared for children in this reporting year.

Children Cared for DRPs	Alert	Stage 1	Stage 2	Stage 3	Stage 4	Total
Stage DRP Closed	19	11	3	0	0	33

15.12. The majority of DRPs have been resolved at alert or stage 1, with three progressing to stage 2.

15.13. The children cared for DRP themes and issues can be seen within the chart below:



15.14. As with CP we have streamlined the categorisation in this reporting year, it is fair to say that whilst there has been an overall reduction, the main issue continues to be delays in progressing? care plans. In this year covid recovery has had an ongoing impact upon the availability of appropriate experts leading to some delay. The second highest category relate to breaches in procedure, such as late reports or missing information.

15.15. Below are examples of DRP raised for children who are cared for:

DRP Challenge	Outcome for the Child
The IRO raised a DRP due to a delay in a child's plan being progressed in line with their needs. In the young person's previous Cared for Review it was identified that the young person required significant dental work which included cosmetic dental treatment. Social Care agreed at the time of the review to fund the additional costs. However, there was a delay in this progressing at the most recent cared for review and it transpired that the finance for the treatment had not yet been before the finance panel to be agreed.	The social worker completed the forms for finance panel, and this has now been agreed so that treatment for the young person can begin. For the young person this means that she can smile without being self-conscious.
The IRO raised a DRP due to a child not being seen in line with the statutory requirements and the plan not being progressed in line with the child's needs. During a pre cared for visit carried out by the IRO to seek the child's views in preparation for her cared for review, the IRO noted worries around Dad and his	The Team Manager acknowledged the importance of the visiting whilst sharing a reason for the visiting frequency not being adhered to. Although this can't change anything for the child immediately regarding the missed visits, this highlighted an area of improvement for the Team Manager who agreed to address this individually and agreed to increase visits to support the family during

DRP Challenge	Outcome for the Child
partner having difficulties with managing some behaviours with them being new to parenting. When reviewing the case, it was identified that weekly visits from the day the child moved in with her dad and partner, the visits had not taken place and the IRO felt that these would have helped identify earlier support necessary to maintaining the stability of the family. In addition, the IRO noted no words and pictures had been completed to help the child understand her journey and what we had done to help her get to where she is now and what we have agreed to do to keep her safe and happy.	this important time. It was also agreed words and pictures would be completed with the family to give the child a story of her experiences to help her understand why she had to live outside her Mam and Dads care for a short while, and an understanding of what everyone did to get her back with her Dad and his partner, and a story of what everyone will be doing to keep her safe now and in the future.

- 15.16. Over the last year we have continued to use a full range of skills to best link our challenge with achieving good outcomes for children. IRO's work closely with children's social workers and have further strengthened their tracking of plans for children which has subsequently led to early identification of difficulties leading to solutions being identified for children. We continue to be represented on the weekly Care and Legal Gateway Panel where discussions are held around the actions required for children whose plans are not progressing in a timely manner.

Reporting Positive Practice

- 15.17. This year, the IROs and Conference Chairs have continued to highlight to Social Workers and their Team Managers a instances of good practice, which has led to timely and positive outcomes for children. Some examples are listed below:

- "I want to take the opportunity to tell you that "children's home worker" is the very best communicator I have come across since returning as an IRO. They are exception in letting other professionals know what is happening to XX which is invaluable to an IRO."
- I was very impressed reading the social workers report prior to the conference due to the quality of their work, but even more so with the clear evidence of work they had carried out in getting the "child's voice". The social worker had used words and pictures which enabled me as the conference chair to read in readiness for the conference. In addition, the social worker fully supported the child's dad in being able to engage in the conference and showed her use of signs of safety in building upon strengths of the family.
- Following the most recent Review Conference for XX. The social worker attended and demonstrated excellent understanding and empathy with X and Mam, surrounding the worries we have of them being exposed to abusive and harmful behaviours from dad. The social worker was able to be realistic and empathetic with Mam around what needed to happen in terms of safety planning and where in terms of her feeling strong enough to involve Police and family members when danger arose and advocated for mam appropriately, balancing this with the need to prioritise XX safety and get a good safety plan together. The social worker was focused on supporting Mam, keeping X safe and trying to devise a plan that would support family time. She was sensitive around exploring worries we have around Mam's vulnerabilities and coping mechanisms around alcohol and exploring this with mam and her partner and how this can impact on XX. The social workers approach was steeped in the Safe and Together approach and feedback from mam was positive in how she experienced the meeting and the support she has received from her.

16. Quality Assurance Work

16.1. Over the course of the last reporting year, CIRT has continued to undertake a range of quality assurance work which has included the following:

- Participation of the young person and their family in cared for reviews.
- Observed practice on child protection conference chairs.
- Were cultural and identity needs of the child have been considered and addressed within the most recent cared for review.
- Signs of safety and its use at ICPC.
- Repeat child protection plans within a 2-year period.
- Observed practice on cared for reviews.
- Cared for children and young people with repeat home moves.
- The use of mind of my own within children's independent review service.
- Quarterly peer observations.

The impact of this work has continued to highlight areas of good practice and the impact of the work that we do upon children's plans, for example observation of practice completed in both cared for reviews and child protection conferences has demonstrated consistency in practice , and that progress continues to be made re the implementation of signs of safety.

We know from our audit work and our Ofsted inspection in 2021 that we have a strong footprint on the child's file, and that we evidence the impact of our work for children. CIRT continues to build upon how we use our role to strengthen learning, we use audits as a key tool to learn from and to implement changes in practice therefore in 2022/23 we have a clear programme of auditing work which will need to be undertaken to help us strengthen further areas of practice. The themes that have been identified to date are repeat CP plans within a 24-month period, plans of permanency at their second cared for review and improved child engagement.

17. Our Customer Feedback

17.1. Our customer service feedback is captured in several ways, such as feedback collected through the Microsoft questionnaire from parents, training feedback sheets, meetings with children, Mind of My Own application (an online feedback tool for children), the TfC compliments process and via email from professionals.



17.2. The service has received 27 compliments in the last year. We have also continued to receive additional positive informal feedback, examples of which have been around our flexible approach to work, supportive manner in assisting service development and our child focussed approach.

17.3. Below are some recent examples of feedback received:

- 0-19 Service – "I just wanted to share some feedback following a meeting chaired yesterday for XX. The meeting was extremely difficult due to lots of issues with the current home that XX is residing in and the care staff there. The chair was very supportive and managed the meeting really well and was invaluable to her when trying to keep things focused on the YP and the plan moving forward."
- Police – "I just wanted to say, having not done a Child Protection Review Conference in a while, how great it was to have such a streamlined meeting. I was fully braced to go through the detail of each report but was delighted when the chair asked everyone if they had any other worries/strengths etc that they wanted to share that were not already captured in the reports. We were done and dusted in little over 90 minutes which was great considering it was for 3 children, but even better for the parents as it did not prolong them having to listen to everyone's worries being repeated and repeated."

- Parent – “Following a RCPC today a father told me, the building is much more comfortable than Lambton House and having a car park makes it much easier to access.”
- Voluntary sector – “I would like to feed back that the meeting this morning and the document produced has been extremely helpful in capturing concerns and identifying actions that would help us to support XX and her family in ensuring she is safe, and we have a good plan moving forward. I really appreciated his support in doing this and the guidance given in the process 2021”
- Barrister – “Just spoke with Counsel who said the IRO and social worker did a fabulous job in giving evidence which supported the making of the Order.”

- 17.4. Within 2021/22 we received 2 new complaints relating to the IRO service. With regards to one of these complaints no elements were upheld and the Stage 2 investigation concluded there was no learning for CIRT. As a result of the second complaint learning has been taken forward to ensure that birth parents continue to have access to relevant information following the making of a final order.
- 17.5. The Sunderland Safeguarding Children’s Partnership (SSCP) has received informal feedback but none of these concerns have escalated to a complaint.
- 17.6. With regards to our service, we will continue to liaise with the SSCP to reflect any learning with regards to feedback.
- 17.7. Below are some examples of how we have responded to feedback received from families, our IRO’s and Conference Chair’s and our partnering agencies.

You said.....		We did.....
<p>Police said: “They wanted more training around Signs of Safety and the new Child Protection agenda”</p>		<p>We delivered a further two CP Signs of Safety conference sessions which has meant that Police have got an increased number of staff who can produce reports and attend CP conferences. The impact can be seen in the improved performance regarding timeliness of reports.</p>
<p>CAFCASS said: “They wanted to be able to have discussions with children’s IRO’s during care ..”</p>		<p>We provided CAFCASS with all our staff’s contact details and the impact of this is there is increased communication between the two services in line with good practice.</p>

You said.....		We did.....
Health GP said: "They wanted support with GP training, re CP conference"	➔	IRO team members that can help provide training. But also agreed a joint audit to be carried out after 3 months to monitor progress.
Several parents said: "They felt that Lambton House wasn't an appropriate venue for children's meetings"	➔	We have relocated and invested in a purpose-built conference suite which parents tell us is accessible, friendly and welcoming.
Early Help said: "CIRT is not using the Mind of My Own application with cared for children"	➔	We reallocated the tablets purchased as part of Covid contingency planning and put on additional training for IRO's. The impact of this has been a significant increase in the number of Mind of My Own statements being completed with children by CIRT
Our Learning Review said: "We need to consider how we work better with teenagers when the risk is also outside of the family home."	➔	We have worked with partner agencies and the SSCP and implemented a new child protection / young people pathway into Liquid Logic which now means conferences for young people who meet the criteria will be conducted differently to increase the young person's engagement

18. Our Priorities for 2022 - 2023

- To continue to place children at the centre of our practice.
- To have more children having a clear plan of permanency approved by the time of their second cared for review.
- Continue to work with all parties in helping to ensure that children live in homes that keep them safe and make them feel valued so that they have stability.
- Getting the balance right with regards to the modelling between child protection and cared for work, so that growing confidence in the area of preference does not leave staff feeling de-skilled in the other area of their work.
- Continuing to develop working relationships with the audit team supporting shared learning and identifying areas for strengthening practice for children.
- Continue to look for creative ways of engaging children and young people in their meetings and strengthening the influence that the voice of the child has upon plans and outcomes for their future.

- Continue to work with the Signs of Safety team in evolving practice in child protection and cared for meetings.
- Respond and adopt practice in line with any government recommendation from the national learning review into Star and Arthur's deaths. Learning review due for publication in May 2022.
- Consider and respond to Josh McAllister's report into Children Social Care due for publication in May 2022.
- Build upon the work already undertaken in helping children where the risk is outside of the family home by building upon our young people's plans and practice.

19. Conclusion

- 19.1. This reporting period, in some respects, has been equally as challenging as the last annual report in 2020/2021 due to the ongoing impact linked to COVID19, however despite these challenges CIRT has remained committed to its core value of the voice of the child and engagement. Practice in Signs of Safety has continued to evolve with evidence of it having a positive impact upon the number of children needing child protection plans.
- 19.2. Our hard work regarding plans and them being SMARTER was highlighted during our OFSTED inspection and as a service we continue to build and value the importance of relationships with children, parents, carers and professionals. We have been able to embed short break cared for reviews and where needed raised concerns regarding any delay in being able to provide service. IRO's themselves have continued to grow in confidence in their role and with the increased training offer use their position within the organisation to support and influence plans for children.
- 19.3. The outcome of our 2021 OFSTED report has provided us with confidence in our practice and working model with partners. In 2022/23 we are looking forward to implementing young people's plans and providing teenagers with a more empowering experience of engaging in the young person's child protection conference. We foresee increasing pressures in the coming year for our families due to increasing economic pressures and we will aim to work with organisations in identifying pathways of support whilst keeping children safe.
- 19.4. We want to continue to build upon our skills and use of Signs of Safety, looking more to how we use the model for children in care to build on success and stability; help deliver meaningful outcomes for them such as where possible helping family members to still be involved even when their children cannot live with them.
- 19.5. To continue to use our influence within the North East Regional IRO Group to build a regional standard of practice and expectations for children, continuing to share learning around what we do well and what we can learn from each other.



together for children

SUNDERLAND



Report Authors:

CIRT Service Management & Business Manager

Report presented to:

TfC Senior Leadership Team & Corporate Parenting Board

All data provided in this report for 2021/22 is provisional pending the submission to and publication of data by the Department for Education

TOGETHER FOR CHILDREN CORPORATE PARENTING BOARD	
DATE:	26th September 2022
REPORT AUTHOR:	Anita Swales ACTING HEAD TEACHER Virtual School
SUBJECT:	Head Teacher's Report
PURPOSE:	FOR INFORMATION

1. SUMMARY

The purpose of this agenda item is to provide the Corporate Parenting Board with updated information about the education of cared for children since the last report on 25th May 2022.

2. RECOMMENDATION(S)

The Board is requested to receive the report for information

3. COHORT

Currently as of 15th September 2022 we have 515 Cared for Children aged 0 –18. 98 cared for children became cared for in 2022 and 101 ceased being cared for. This data gives an overview of the normal turbulence on the Virtual School roll. For example, 98 new EPEPs within 20 school days are required, new schools/designated teachers and school staff (potentially).to build relationships with.

Historical cohorts (when report written)

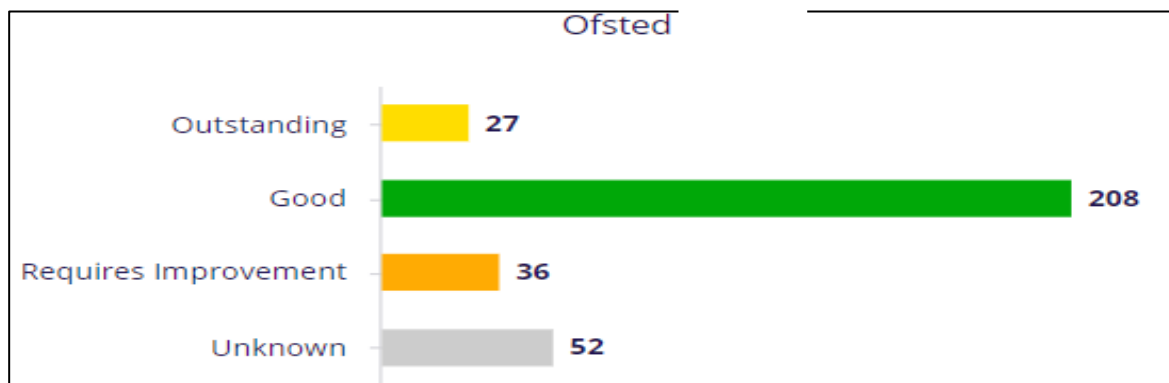
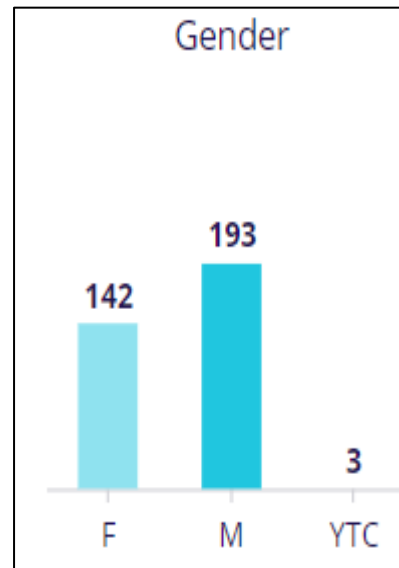
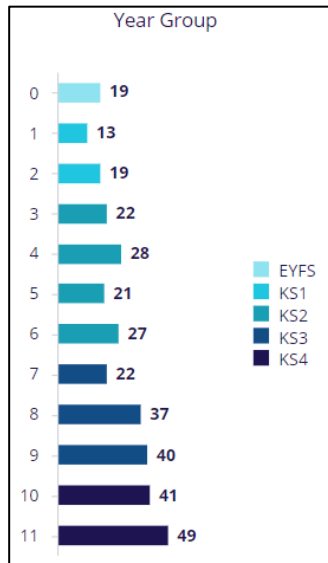
Current 15 th September 2022	515
July 2022	550
February 2022	561
November 2021	564
September 2021	586

3.1 COHORT

Of the 515:

- 71 are Pre School (0 – 4+yrs) of which 23 attend nursery or early years provision (2/3 and 3/4yr), the remainder are aged 0-2 years
- 338 are school age Reception to year 11
- 106 are Post 16

RECEPTION TO YEAR 11

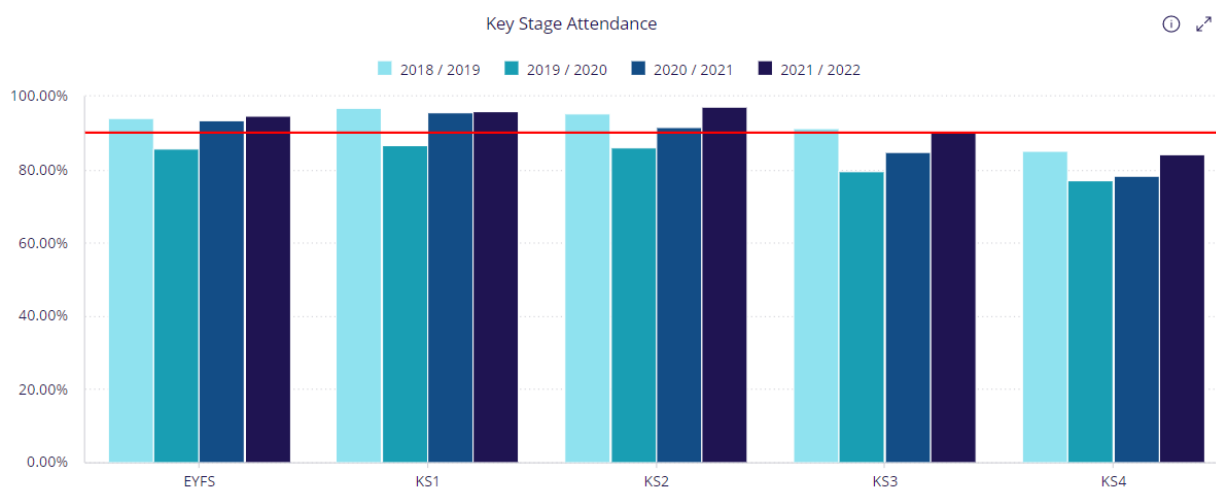


4 Progress and Achievement

There is no progress and achievement data to report as validated data from Summer 2022 is not yet available.

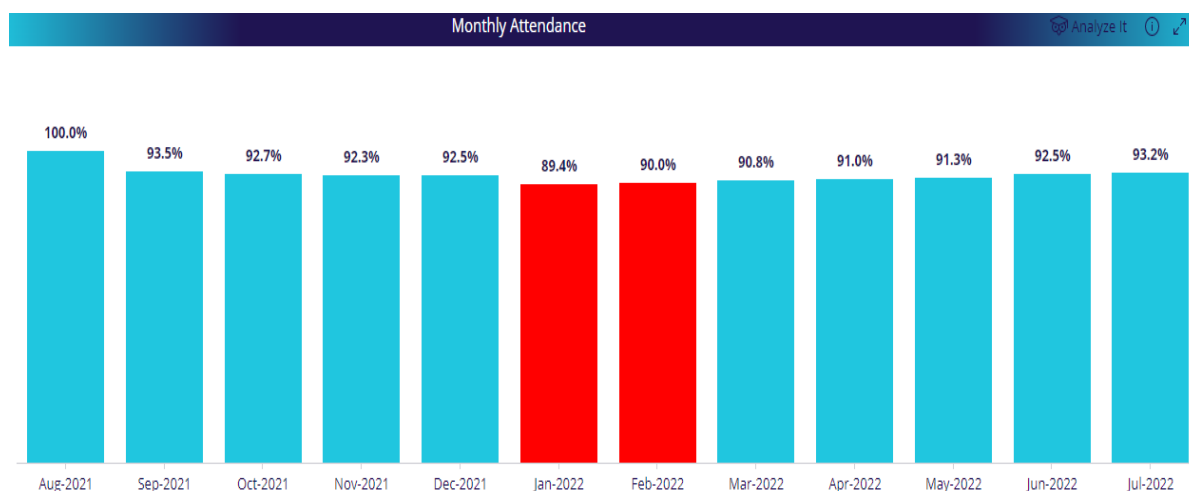
5 Attendance and Absence monitoring

Term on Term analysis comparisons



Three year trend across all keystages has shown an improvement in attendance year on year since the dip in 2019/20 due to school closures during COVID-19. Attendance in all keystages has now returned back to pre-pandemic levels, although a dip was seen in the spring term across all keystages (See graph below) due to high COVID infection rates in Jan and Feb. Attendance in KS4 although improving remains stubbornly low and has been identified as a key area of action for the Virtual School and its partners.

Monthly Attendance

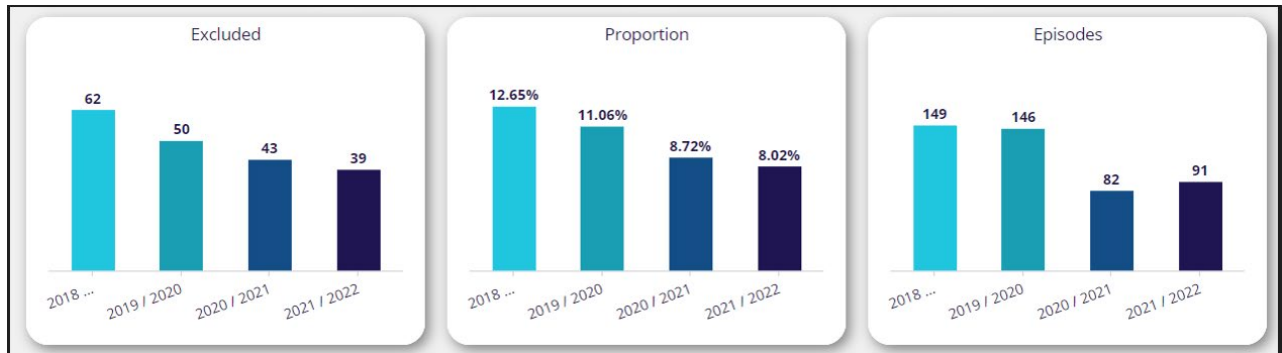


The Virtual School monitors attendance daily through Welfare Call and contacts carers to ensure attendance at school is a key priority should concerns arise. Analysis of the detail behind the data occurs termly and virtual school staff work closely with schools, carers and social workers to ensure attendance is improved through the ePEP. DfE guidance 2022 states that attendance which drops below 50% without valid reasons should now be seen as a safeguarding concern for any child/young person.

6 Suspensions and Permanent Exclusions

Suspensions are showing a declining trend.

The graphs below **demonstrates the improving four-year trend of reduction in fixed term suspensions**. The proportion of young people who have experienced one or more periods of fixed term suspension has fallen from 12.6% in 2018/19 to 8.02% in 2021/22 and remains below that of cared for children nationally.



Of the 39 children who have received suspensions:

- 18 (46%) received more than 1 exclusion
- 20 (51%) are in Key Stage 4
- 11 (28%) have an EHCP of which 7 attend specialist provision
- 12 (38%) receive SEND support
- 13 (33%) currently live and attend schools outside of Sunderland LA

Caseworkers monitor exclusion data to ensure fixed term suspensions occur as infrequently as possible. The Virtual School caseworkers liaise closely with schools, carers and social workers when suspensions occur to understand the antecedents and to ensure appropriate support and plans are put in place to prevent further suspensions. This includes the use of the SEND ranges to ensure needs are identified and resources are put in place, but also referrals to other agencies are aligned such as CYPS, CAMHS for example. Alongside our partners we explore strategies which can be employed as an alternative to suspension wherever possible.

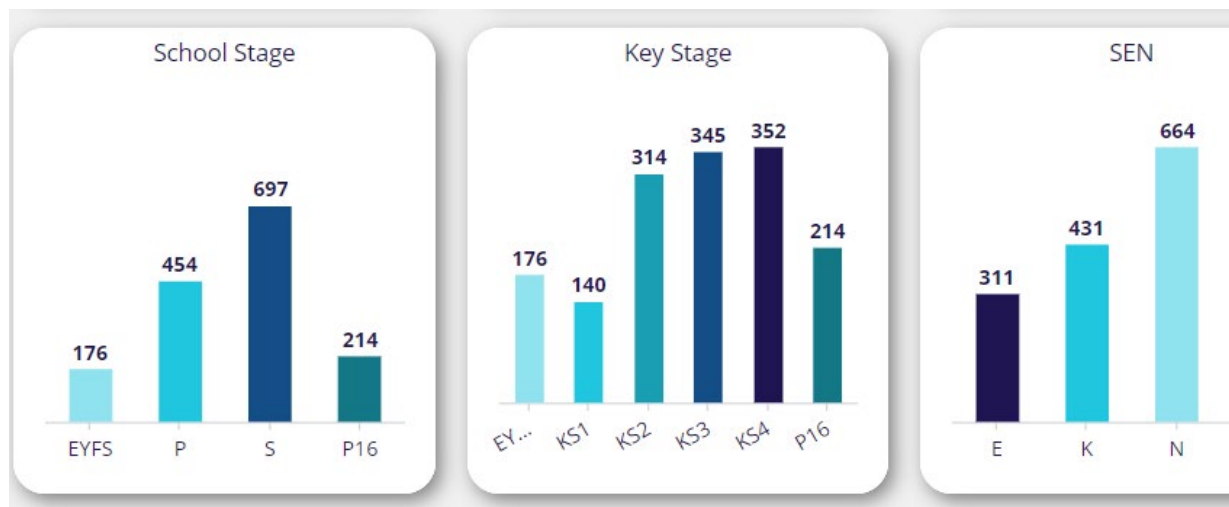
Permanent Exclusion - The Virtual School will intervene at the earliest opportunity when informed of a possible permanent exclusion. Working with school leaders, carers and our partners we avoid this course of action at all costs, ensuring the school can reconsider or that the young person is placed in an alternative and appropriate education setting as quickly as possible to meet their ongoing needs. As a result of this partnership, **we have had no Permanent Exclusion of a Cared for Child/Young Person in Sunderland in five-years.**

7 EPEPS

7.1 COMPLIANCE

PEP meetings take place termly for statutory age and early years children and 6 monthly for Post 16 young people. EPEP compliance with statutory timeframes is **now over 97% (an improvement from 86% in 2020)**. All PEPs are quality assured by the VS caseworkers to ensure they are fit for purpose.

Over the last academic year 1,541 PEP meetings took place for 629 young people in 229 education provisions within 38 different local authorities.



Quality assurance continues to be a key area of focus this year. Each section of the EPEP will be assessed and this is fed back to schools using a RAG rating. If there are concerns about the quality of the EPEP, a meeting is held with the school or the Social Worker to consider how it can be improved. 91% of EPEPS were quality assured as Good in the last academic year and 9% as Amber. The average number of days from PEP meetings being held to completion of the PEP Plan is now 11.8 days, this is a significant improvement, and the target is completion within 10 days or less for this year.

8. VIRTUAL SCHOOL STRUCTURE

8.1 HEAD TEACHER RETIREMENT AND REPLACEMENT PLANS

Linda Mason retired on 31 August 2022. In discussions between TFC and the Virtual School Governing Board it was decided not to recruit to the post of Head Teacher and to have an Acting Head Teacher, the main reason was to provide some stability for the team following the recent structural changes.

To ensure continued capacity we also advertised a secondment or fixed term post to replace the Senior Lead post.

8.2 THANK YOU FROM LINDA MASON

'I would like to thank the Corporate Parenting Board for their support and challenge since I joined TFC in November 2018. I would like to think I have left the Virtual School in a good position ... to continue being the best advocate for cared for children's education. The Team are very passionate about making a difference. I have every confidence that Anita will continue this excellent work. I look forward to hearing positive things in the future'.

8.3 NEW VIRTUAL STAFFING STRUCTURE

The new structure has been in place since May 1st 2022, although staff (highlighted) have only recently been appointed. The new structure affords for greater capacity and reduced caseloads with the average caseload dropping from 80 in 2021/22 to 60 for the coming academic year.

Staff	Roles
Anita Swales	Acting Headteacher from 1 st September
Claire Goodwill	New member of staff 1 st September
Emma Pattison	Senior Casework Lead SEND Complex Needs
Timothy Worley	Senior Casework Lead Secondary
Vivien Fell	Senior Casework Lead Primary
Kelly Woods	Senior Casework Lead Post 16 (job share)
Helen Taylor	Senior Casework Lead Post 16 (job share)
Emma Mickle	Caseworker Early Years Primary SEND (Fixed term) 16 th May
Jill Heslop	Caseworker Secondary SEND
Kerry Reay	Caseworker Yr11/Post 16 SEND (Fixed Term) from 12 th May
Jean Graham	Caseworker Primary SEND from 11 th July
Maria Hetherington	Caseworker Complex SEND from 1st September 2022
Leanne Greenlaw	Business Support
Adam Reynolds	Business Support Data (Education Data and Information Team)

8.4 GOVERNING BOARD

The Virtual School continues to have a strong support from the Governing Board with representation from all sectors of education provision. Two of our Board members resigned at the end of the academic year:

- Rachel Hargreaves Special School Head who is leaving the area for a new headship in North Yorkshire
- Sue Hamilton Secondary Head as she has a new role at Thornhill Academy

Both colleagues have made a significant contribution to the Governing Board, and we wish them well with their new roles. We are actively seeking replacements.

9. EMPLOYMENT EDUCATION AND TRAINING

Cared for children in education training and employment (EET) shows an improving trend.

		EET	Seeking EET	
2017	ENGLAND	50	40	
	SUNDERLAND	55	40	
2018	ENGLAND	51	39	
	SUNDERLAND	54	46	
2019	ENGLAND	52	39	
	SUNDERLAND	44	50	Lait 2019
Sep-20	year 12	83.70%	16.20%	Local data
	year 13	53%	47%	
	TOTAL	69%	31%	SIGNIFICANT IMPROVEMENT against 2019 of 50%
Jun-21	year 12	72.50%	27.50%	
	Year 13	52%	48%	
	TOTAL	65%	35%	SIGNIFICANT IMPROVEMENT against 2019 of 50%
Autumn 2021	year 12	81.40%	18.60%	
	Year 13	70%	30%	
	TOTAL	75%	24%	SIGNIFICANT IMPROVEMENT against 2019 of 50%
Spring 2022	year 12	74.00%	26.00%	
	Year 13	69%	28%	
	TOTAL	72%	28%	SIGNIFICANT IMPROVEMENT against 2019 of 50%

2019, showed a decline in the number of young people who were in Education, Employment or training. Given this priority additional investment has been put in place since and as a result improvement can be seen in the number of CYP identified as EET.

Most recently the Virtual School has secured a Pilot grant from the DfE to provide additional support through transition mentoring, 1:1 tuition for English and maths and attendance incentives to support Y11 students as they transition to Post 16 provisions to improve retention and attendance.

The Virtual School maintains regular contact with the young person, carer and social worker to have a clear picture of the young person's current situation and educational/support needs. Virtual School Caseworkers in year 11, Post 16 Casework Leads and Next Steps Social Workers focus on next steps, aspirations, and ambitions for post 16 to ensure they have had the opportunity to explore fully what is available during year 11. includes support to attend:

10. BACKGROUND PAPERS

None

10 CONTACT

Name: Anita Swales
 Position: Acting Head Teacher Virtual School
 Email: anita.swales@togetherforchildren.org.uk
 Tel: 07880 080285

Fostering Service Monitoring Report Form (England) for NMS 25 and Regulation 35 reports

1. Introduction

Name of fostering service	Together for Children Fostering Sunderland
Period covered by the report	1 st April 2021 – 31 st March 2022
Name of person completing the form	Daniel Kenny
Position in the fostering service	Registered Manager
Date form was completed	6 th May 2022

Date of last Ofsted inspection	September 2018
Overall judgement	Good
Statutory requirements for improvement (with dates)	

A fostering service provider must maintain a case record for each foster parent approved by them which must include copies of the documents specified in paragraph (2) and the information specified in paragraph (3).

The documents referred to in paragraph (1) are—

- (b) any recommendations made by the fostering panel,
- (d) the foster care agreement,
- (Regulation 30 (1)(2)(b)(d))

To be actioned by 30/11/18

Action undertaken to meet those requirements

This requirement was fulfilled within the necessary timescale. A new Foster Carer agreement was sent to all carers upon the launch of the new training, support and finance scheme in April 2019. In addition, revised Foster Care agreements are shared with carers following a change in their approval or following initial approval as foster carers with TfC.

Recommendations for improvement (with dates)

- Ensure that reviews of foster carers' approval are sufficiently thorough to allow the fostering service to properly satisfy itself about their carers' ongoing suitability to foster. ('Fostering Services: National Minimum Standards', 13.8) This is with particular regard to ensuring that all foster carers have their background checks refreshed every three years in line with the organisation's policy.

TfC Fostering have updated the use of our recording systems to inform Fostering Social Worker's via automated email, six months prior to expiry, that a DBS check is due for renewal. This process should ensure that all checks are returned to TfC in line with the organisation's policy.

- Ensure that the fostering service only suggests foster carers to local authorities as a potential match for a child if the foster carer can reasonably be expected to meet the child's assessed needs and the impact of the

placement on existing household members has been considered. Where gaps are identified, the fostering service should work with the responsible authority to ensure the placement plan sets out any additional training, resource or support required. ('Fostering Services: National Minimum Standards', 15.1)

Matching continues to be a pressure within the service, however our working group is established to update and develop matching paperwork and a greater emphasis across the team is in place to record the detail of matching conversations alongside the use of Fostering Champions who are linked to each team across Together for Children. In consultation with TfC's *Change Council*, a group of Cared For children and young people, our referral forms have been revised to ensure more effective exchange of information is undertaken between the placing Social Worker and Fostering Social Worker. In addition, the Foster Carer profile template has been revised which can be shared with placing Social Workers at the point when a match is being considered.

- Ensure that foster carers maintain an ongoing training and development portfolio which demonstrates how they are meeting the skills required of them by the fostering service. ('Fostering Services: National Minimum Standards', 20.4)

The social care system has now been developed to allow us to access a report for each individual carer. The established foster carer online portal also collates information for individual carers, including their learning logs and certificates of attendance (only released once learning log completed). Within the reporting period, TfC Fostering have invested significantly in our online training offer within this review period and any training completed is recorded within our electronic training record and considered as part of the carers Professional Development Plan.

- Ensure that each approved foster carer is supervised by a named, appropriately qualified social worker who has meetings with the foster carer, including at least one unannounced visit a year. Meetings have a clear purpose and provide the opportunity to supervise the foster carer's work, ensure the foster carer is meeting the child's needs, taking into account the child's wishes and feelings, and offer support and a framework to assess the carer's performance and develop their competencies and skills. The frequency of meetings for short break foster carers should be proportionate to the amount of care provided. Foster carers' files include records of supervisory meetings. ('Fostering Services: National Minimum Standards', 21.8)

We can now access a report from the social care system in relation to completion of monthly supervision of carers and unannounced visits. In respect of the monitoring of the quality of carer supervisions, this is conducted via dip sampling and developing an audit tool to explore the quality of the work produced. Furthermore, within this reporting period, TfC Fostering has implemented an audit process to further embed the oversight of the quality of work produced by the service and to explore any themes that may benefit the organisation.

- Ensure that the fostering service has and implements a written policy that clarifies the purpose, format and content of information to be kept on the fostering service's files, on the child's files and on case files relating to foster carers. ('Fostering Services: National Minimum Standards', 26.1)

A policy has been developed and shared with staff and carers. Regular attendance at Care Team Meetings and Cared for Reviews ensure that children's information is kept up to date along with the implementation of recording files for both carers and children's record.

- Ensure that staff, volunteers, panel members and fostering households understand the nature of records maintained and follow the service's policy for the keeping and retention of files, managing confidential information and access to files (including files removed from the premises). There is a system in place to monitor the quality and adequacy of record keeping and take action when needed. ('Fostering Services: National Minimum Standards', 26.2)

A training course has been developed for carers and staff encouraged to attend. Training specific to panel members is built into the introduction to panel training and is planned to be part of a panel training day later this year. The implementation of full case file audits and within case supervision assist with the adherence to his.

Action undertaken to meet those recommendations

See above

2. Summary data

Foster carers				
Expressions of interest	April – June 2021 - 8 July – Sep 2021 - 5 Oct – Dec 2021 - 8 Jan – March 2022 - 14			
Assessments completed	There has been a total of 48 assessments completed within the reporting period.			
Assessments ongoing	18			
Approvals	Temporary Foster Carers (Reg 24) – 91 Connected Carers – 19 Mainstream Carers – 9 Long Team Permanence at Panel – 25			
Reviews completed	There have been 185 foster carer reviews completed within the reporting period.			
Foster carer training		2021	2022	
	ADHD Fostering	3	1	
	Adoption Fostering	1	0	
	Adverse Childhood Experiences Fostering	2	2	
	Advocacy Training Fostering	0	1	
	An Introduction to Child Sexual Exploitation and Child Abuse Fostering	1	1	
	Anti-Bullying Advanced Level Fostering	1	0	
	Anti Bullying Charter Mark	0	1	
	Anti-Bullying Fostering	28	6	
	Attachment	5	5	
	Attachment And Bonding Advanced Level Fostering	13	6	
	Autism Awareness	1	0	
	Autism Spectrum Disorder Fostering	1	0	
	Babies Withdrawing From Addictions Fostering	2	0	
	Basic First Aid	2	0	
	Caring For Sexually Abused Children Advanced Level Fostering	28	5	
	Caring for Sexually Abused Children Fostering	39	6	
	Child Development	7	3	
	Child Development Advanced Level Fostering	25	5	
	Child Development Fostering	28	7	
	Child Exploitation Fostering	3	2	
	Child Sexual Exploitation Advanced Level Fostering	11	5	
	Child Sexual Exploitation And Child Exploitation Fostering	17	7	
	Cognitive Behaviour Therapy Fostering	1	0	
	Communicating With Children Advanced Level Fostering	1	0	
	Communicating with Children Fostering	1	0	
	Complex Trauma Advanced Level Fostering	1	1	
	Connected Carer Initial Workshop	0	3	
	Contact and Birth Families Fostering	42	11	
	COSHH Fostering	17	7	

	Criminal Exploitation And County Lines Fostering	1	0
	CSE	9	5
	Cyberbullying Advanced Level Fostering	9	2
	Cyber Security Fostering	13	5
	Delegated Authority	6	0
	Depression And Suicide Fostering	2	0
	Domestic Abuse: Children And Young People Fostering	3	0
	Drugs and Alcohol Awareness Fostering	0	1
	Eating Disorders Fostering	2	3
	Emergency Duty Crisis & Child Expl	3	0
	Emergency Duty Team	5	0
	Equality And Diversity Advanced Level Fostering	9	3
	Equality and Diversity Distance Learning	0	1
	Equality and Diversity E-Learning	4	2
	Equality And Diversity Fostering	25	6
	Equality And Diversity Specialist Fostering	1	0
	E Safety	1	0
	Every Disabled Child Matters Fostering	1	0
	FASD	4	0
	Female Genital Mutilation Awareness Fostering	2	2
	Female Genital Mutilation Level 1 Fostering	11	2
	Fire Safety Fostering	19	9
	First Aid Essentials Fostering	20	8
	First Aid Refresher Fostering	6	1
	Foetal Alcohol Syndrome Fostering	2	0
	Food Safety And Hygiene Advanced Fostering	15	1
	Food Safety And Hygiene Fostering	7	0
	Food Safety And Hygiene Foundation Fostering	12	4
	Gangs And County Lines Fostering	1	2
	GDPR For Foster Carers Fostering	4	1
	General Data Protection Regulation Fostering	11	1
	General Data Protection Regulation Office Based Employee	2	0
	Health And Nutrition Fostering	11	8
	Health And Safety Fostering	25	4
	Impact of Abuse	28	15
	Impact of Sexual Abuse	1	1
	Infection Control Fostering	16	5
	Internet Safety Advanced Level Fostering	39	6
	Isolation Fostering	1	1
	LGBT Fostering	2	0
	Life Story Work	9	3
	Life Story Work Fostering	34	14
	Managing Allegations	4	5
	Managing Allegations Fostering	44	15
	Managing Challenging Behaviour Fostering	1	0
	Manual Handling Fostering	13	3

	Medication Advanced Fostering	24	0
	Medication Foundation Fostering	16	4
	Mental Health Fostering	1	0
	Mental Health Suite Module 1-The Prevalence Of Mental Health Problems In Children And Young People Fostering	3	0
	Mental Health Suite Module 2-Common Mental Health Problems In Children And Young People Fostering	5	0
	Mental Health Suite Module 3-Less Common Mental Health Problems In Children And Young People Fostering	4	0
	Mental Health Suite Module 6 - Risk And Protective Factors In The Development Of Mental Health Problems In Children And Young Pe	1	0
	Mental Health Suite Module 7-The Effect Of Social Media On The Mental Health Of Children And Young People Fostering	0	1
	Missing From Care Advanced Level Fostering	1	0
	Moving Forward With Delegated Authority Fostering	36	9
	Online safety	1	0
	Online Safety Fostering	3	0
	Other	50	27
	Paediatric First Aid	11	4
	Paediatric First Aid Fostering	34	17
	Permanence Training	9	9
	Play Therapy Fostering	5	1
	Prevent	26	0
	Radicalisation And Extremism Fostering	10	2
	Record Keeping	3	0
	Reporting And Recording Advanced Level Fostering	25	4
	Reporting And Recording Fostering	29	11
	Risk Assessment Fostering	1	0
	Risk Management And Safer Caring Fostering	42	9
	Safeguarding Adults Level 1 Fostering	8	2
	Safeguarding Adults Level 2 Fostering	7	2
	Safeguarding Children Advanced Level Fostering	14	2
	Safeguarding Children Foundation Fostering	13	0
	Safeguarding Children With Learning Disabilities Fostering	12	1
	Safer Caring	2	0
	Safer Handling of Medication	1	0
	Secure Attachment and Bonding Fostering	41	9
	Secure Base Model	2	3
	Self-Harm Advanced Level Fostering	1	0
	Self-Harming Behaviours Fostering	14	6
	Sexualised Behaviour Advanced Level Fostering	1	0
	Skills to Foster	12	0
	Solihull Approach	37	20
	Stress Management Fostering	1	0
	Support Group	159	45
	Supporting Boys and Young Men Affected by Child Sexual Exploitation and Abuse Fostering	2	0
	The Impact Of Trauma On Sensory Processing Fostering	2	1
	Therapeutic Care Fostering	2	2

	Theraplay	14	14
	Training and Development Standards	18	63
	Trauma Fostering	0	1
	Using Basic Theraplay Techniques Fostering	29	8
Foster carer support groups	Monthly support groups, including guest speakers have taken place each month in the reporting period. Due to the removal of restrictions, support groups have returned to in person since January 2022, something which foster carers have informed us was their preference.		
Terminations of approval	We have had 15 foster carers resign over the reporting period, 0 of these resignations were because of the agency raising standards of care concerns, and all were for a range of personal reasons. We have had 18 foster carers temporarily approved under Regulation 24 whose approval has ceased within the 16-week period.		
Number of foster carers	182 fostering households		
Comment, analysis, and any action taken			
<p>TfC have continued to invest significantly into our online training programme and the uptake on the variety of courses has been high. We have consulted our carers regarding their preference in respect of accessing training and the majority of carers have preferred a hybrid approach to online and in person training. The service has been able to respond to this feedback and whilst continuing to offer a significant number of training courses online, in person training has continued including the facilitation of paediatric first aid and Solihull Therapeutic Parenting, TfC Fostering’s behaviour management programme.</p> <p>Within the reporting period, we strengthened our relationships with Fostering Network and have been able to successfully launch two Mockingbird Family Model constellations.</p> <p>In addition to this, we have appointed a permanent full-time consultant child psychologist, Dr Harrison, to the service which has been very well received by both carers and Social Workers alike. Dr Harrison is currently supporting the service with the roll out of enhanced training to foster carers in order to support their training and development alongside the offer of regular consultation sessions with foster carers and advice to Social Workers in respect of a range of issues.</p>			

Children and young people	
Referrals	193
New placements	95
Placements ended	41
Unplanned endings	8
Number of children	164
Comment, analysis, and any action taken	
<p>Demand upon the service remains high with the requests for older children and sibling groups remaining challenging to find homes for. Performance colleagues are able to provide us with detailed breakdowns of unplanned endings and disruptions will allow us to monitor these closely and learn from each event. The number of children and young people received for referral within this reporting period are from Together for Children Sunderland as the placing authority.</p> <p>However, a disruption policy has been reviewed, implemented and disruption meetings are now held, being chaired by an Assistant Team Manager within the service. Currently this covers permanent homes for children who have lived there in excess of 3 year and children who have had multiple unplanned endings.</p>	

3. Detailed data

Compliance with care plan
<p>Within the reporting period, the Foster Carer Supervision template has been further updated throughout the reporting period to allow for greater reflection between FSW (Fostering Social Worker) and the foster care to reflect a Signs of Safety/Success/Wellbeing approach. This should ensure, that the carer is clear about the care plan for each child, and that the child is aware, subject to their age and understanding within this model of working which is the model of practice within the TfC wider organisation. It also considers if the carer is supporting each child to contribute their views, and know their plan as well as identifying if the carer contributes to the care planning process via attendance at meeting's etc.</p> <p>The Fostering Service has continued to work closely with the IRO service to ensure compliance with care plans, the IRO manager and Fostering Registered Manager are in regular contact and any issues/concerns are raised and addressed. The Fostering Service currently manually collates data on unplanned endings; however, this information is also monitored via Foster Carer Reviews with a report by the FSW having managerial oversight within the FSW's report.</p> <p>During the reporting period 10 young people have moved on to access 'staying put' arrangements and 32 children have moved on to live with prospective adopters.</p>

Accidents, injuries and illnesses

Evidence of notification under schedule 7 regarding death of a child, serious illness or accident, or outbreak of infectious disease

Within the annual reporting period, there have been 91 schedule 7 notifications regarding serious illness or accident or outbreak of infectious disease. 86 of these relate to either a foster carer or cared for child being positive for Covid-19, 3 incidents of self-harm and 2 of broken bones.

Comment and any action undertaken to improve care provided

The vast majority of these notifications within the reporting period are due to the outbreak of Covid 19 within a fostering household. Carers have responded excellently to the challenges the pandemic has placed upon them and the children they care for.

Medication, medical treatment and first aid administered

Comment and any action undertaken to improve care provided

The Foster Carer Supervision template includes prompts for discussion around medication, medical treatment and first aid. Together for Children established a relationship with The Big Initiative training provider and carers, Fostering Social Workers and Panel Members can now access a range of training programmes via this tool.

Mandatory Paediatric First Aid training is held and repeated every three years for all carers and can be extended to adult household members should the need arise. Within *The Big Initiative*, our online training platform, a significant increase in the online training offer to support carers understanding of these issues, including the safe handling and storage of medication has been provided. Carers have welcomed this addition to our training offer and the return of in person training to cover paediatric first aid.

Measures of control, restraint or discipline

Comment and any action undertaken to improve care provided

Face to face supervision of foster carers has continued uninterrupted throughout the reporting period, mindful of the management of risks to Fostering Social Workers and carers. Risk assessments have been in place to ensure that this risk is managed and balanced against the need to offer support and supervision to all carers and ensure the most vulnerable children and young people are seen regularly.

In addition to the training programmes available via The Big Initiative, we have continued in the roll out of the Solihull Parenting Programme having now trained over 150 carers within this approach.

In May 2021 and again in February 2022, TfC launched a Mockingbird Family Model constellation. The model of delivering foster care includes 15 fostering families and over 35 children and young people with an aim of providing a high level of peer support to the carers and normalising the care experience for those children and young people. We are currently waiting on our first annual data analysis report from Fostering Network which will provide the summary of the costs saved, avoided and overall impact of the model.

Complaints in relation to children/about foster carers, and their outcomes

Summary	<p>There have been no schedule 7 notifications regarding a serious complaint about a foster carer.</p> <p>During the reporting period there have been 41 compliments submitted to Together for Children's Compliments and Complaints Department.</p>
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Evidence of notification under schedule 7 regarding any serious complaint about a foster carer, or information being provided to the Disclosure and Barring Service

Within the current reporting period we have submitted no notifications to the DBS service.

Allegations or suspicions of abuse or neglect, and investigation outcomes

Evidence	<p>There have been 21 foster carers referred to the Designated Officer within the reporting period. Of those 21, 10 cases met the threshold for Designated Officer involvement and 11 were recorded advice given only and did not meet threshold.</p> <p>Of the 10 cases that were accepted, 3 were closed and all of these were recorded as unsubstantiated. The remaining 7 are open cases with no conclusion to date. There are 3 cases from November 2021 still open (1 police investigation and 2 Standards of Care) and 4 cases that are currently being investigated.</p>
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Evidence of notification under schedule 7 regarding instigation and outcome of any child protection inquiry, or suspicion/involvement of child in "prostitution"

There have been 5 schedule 7 notifications submitted due to 'instigation and outcome of any child protection enquiry.'

Comment and any action undertaken to improve care provided

As a service we continue to develop relationships with the Designated Officer and are introducing regular monitoring and information sharing meetings. This has allowed us to monitor trends and develop an appropriate action plan as required.

Children missing without permission

Evidence of notification under schedule 7 regarding a child missing from placement

There have been no notifications in this regard.

Comment and any action undertaken to improve care provided

Our ability to report using our social care system allows us to receive information in relation to children that go missing, this includes data around the child and the carer with whom they are living. This data is included within the agenda within the monthly management meetings. This data will allow us to identify any themes or trends that may emerge.

Additional training from colleagues who work within the Emergency Duty Team is also provided to carers to assist in their understanding of these issues.

Allegations that a child has committed a serious offence

Evidence of notification under schedule 7 regarding allegations that a child has committed a serious offence

There have been no incidences within the reporting year whereby a child has committed a serious offence and as such no notifications of this regard have been made to Ofsted.

Serious incident necessitating police being called to the foster carer's home

Evidence of notification under schedule 7 regarding a serious incident necessitating police being called to the foster carer's home

There have been 10 notifications made to this regard.

4. Staffing

Summary of staffing position
<p>Registered Manager – Full time Assistant Team Managers – 2 FT Fostering Social Workers – 12 Assistant Fostering Officer – 1FT</p> <p>During the reporting period there have been some staffing changes, however the staff team is currently stable and with full compliment. Any vacancies are immediately advertised and recruited using safer recruitment guidance.</p>
Recruitment of new staff
<p>Recruitment of new staff is undertaken with the support and guidance of the Human Resources Department within Together for Children. HR ensures that appropriate checks are in place and saved on file prior to appointment.</p>
Staff supervision
<p>All staff have a named supervisor and receive monthly personal and case supervision. The TM undertakes ad hoc dip sampling of the supervision records for all staff. The monthly management meeting has a standing agenda item of 'staffing' and key points relating to individual staff members are explored within this.</p>
Staff training
<p>The current team plan was developed in September 2021. The plan incorporates a section on staff training and allows team members to influence training that is identified. Within the reporting year staff have also had access to training on Foster Care Supervision, the social care system, signs of safety, Train the trainers in relation to Solihull Parenting Programme (not whole staff team), Mental Health First Aid and Robust Analysis and an Evidence Based Approach Assessment. We have also supported Social Workers within the team to complete their Practice Educator Award's to support their development.</p>
Staff appraisals
<p>Staff appraisals are completed annually, and the development of a personal development plan is used throughout the following year.</p>
Staff meetings
<p>Team meetings are held monthly, they are chaired by the TM or an ATM in his absence and minutes are taken on a rota basis by members of the team. Within the reporting period, team meetings have been held in person to support colleagues as is their preference.</p>
Comment and any action undertaken to improve care provided
<p>Staff enjoy having areas of responsibility which they can 'own' and develop. They also appreciate their regular supervision and accessibility of both assistant team managers and the team manager. We work with a whole team approach which is supportive to all. The further established Connected Carer team within the reporting period has continued to expand the benefits of this specialised service and these are continuing to feed into the wider service.</p>

5. Fostering panel

Summary of panel

The Fostering Panel has continued to function at full capacity during the reporting year and has returned to in person since January 2022. The Panel Chair, Panel Advisor and Panel Members have remained committed to their roles during this time and therefore as a panel the meetings have been quorate with a least 5 members in attendance at each panel, despite the changes to the regulations for quoracy.

Additional panels have been facilitated to meet the increased demand for cases to be heard, alongside the panel's planned introduction of Permanence Panels to consider the permanence planning for children 13 years and under. The Registered Manager is Panel Advisor for the Permanence Panels.

Fostering Panel are currently exploring how the use of alternative platforms such as Microsoft Forms can be utilised to increase the frequency of panel feedback received to further develop the panel experience for Social Workers and applicants.

Panel meetings

There has been 26 Fostering Panels held during the reporting period.

Cases considered and recommendations

- Connected Carers – 36 Cases considered, recommendation to approve 30 cases and not approve 4, 7 deferred.
- Mainstream Foster Carers – 18, recommendation to approve all 18 carers
- Regulation 25's – 32, recommendation to approve 31, 1 deferred
- First Reviews – 17, recommendation on-going approval for all 17 cases
- Resignations – 26 including 16 connected carers
- Deregistration's – 2 due to the care afforded

Panel feedback

Evaluation forms completed by the applicants, the assessing Social Workers and where appropriate the child's allocated Social Worker in respect of their attendance at the Fostering Panel continues to be requested and the responses are collated and to date this has been largely positive. Applicants refer to being made to feel at ease by a professional but friendly panel, where time is taken to listen to their views.

Training and appraisals

Panel Members appraisals have taken place virtually and all Panel Members will have engaged in their appraisals by the end of May 2022. Panel business meetings have been held in 2020 and 2021 to inform the panel development, as has Panel Members training which took place in March 2021. With the increased demand for panels additional members are now sought with interviews taking place at the end of May.

Comment and any action undertaken to improve care provided

In respect of actions taken to improve care, any concerns in respect of safeguarding have been reported to senior managers and ADM. Panel have monitored that the Safer Care Policy for children living with Regulation 24 carers has been child specific and not generic, within the documents provided to panel. This has been a focus in terms of safeguarding and when considering the Voice of the Child. Finally, for further development to feedback to panel the outcome of any case reviews as identified by panel members.

6. Consultation with children and young people

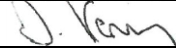
Evidence	<p>An online survey using 'survey monkey' is completed annually with both carers and children living with our foster carers. The feedback is used to inform decisions relating to service development.</p> <p>Our annual carer and children's survey was commissioned in March 2022 to assist us in learning more about how we engage with children and the activities they enjoy, particularly relevant when restrictions were in place. Support events have been held during school holiday periods, and a large in person event was held in February 2022 to launch our second Mockingbird constellation.</p> <p>We have been able to reintroduce our children and young people's group, VOKOL (Voice of Kids Our Lives) children and young people group within this reporting period. The group, who meet monthly, is a combination of cared for children and carers birth children. The group offers them a shared activity space to come together for fun activities and to highlight ways in which the service can be influenced, particularly in relation to recruitment activities and the group has taken a particular lead in this area. The group have recently designed recruitment adverts for carers along with lending their voices to a new marketing campaign to highlight children's experiences of being cared for.</p>
Comment and any action undertaken to improve care provided	
See below, along with consultation with foster carers	

7. Consultation with foster carers

Evidence	<p>An online survey using 'survey monkey' is completed annually with both carers and cared for children who live with our foster carers. The feedback is used to inform decisions relating to service development. We have been unable to hold bi-monthly coffee mornings for carers which is an opportunity for them to chat informally both with staff and each other due to the Covid restrictions within the reporting period. Monthly support groups have continued to be held, these are more 'formal' and usually include guest speakers on a range of topics.</p> <p>We have an established consultative group which meets regularly, the Registered Manager chairs this group and over the reporting year I have seen the group change and attendance begin to increase. Carers advise they feel supported and listened to, they are empowered to raise issues as they know their concerns will be listened to and acted upon.</p> <p>Unfortunately, we had to restrict our annual Carer Celebration Event in May 2021 however we did recognise the amazing contribution two sets of carers have made, both with forty years' service respectively. We have plans to recognise the length of service of all carers within Foster Care Fortnight in May 2022.</p>
Comment and any action undertaken to improve care provided	
<p>Participation and engagement within the reporting period has posed additional challenges due to the restrictions placed upon on us however despite this, the service has continued to hold regular support groups, children's events and launched two Mockingbird constellation. Within our team plan we recognised that we wanted to really engage with children and carers at an informal and supportive level before enhancing this further with more formal routes of engagement.</p> <p>Carers report that they are listened to, they have direct contact details for the Registered Manager and are also able to meet with him/raise issues both at informal and formal meetings. Our training, support and fee scheme is a transparent way of financially supporting foster carers and has ensured that an unprecedented level of commitment to developing their own learning and in turn improving the level of care afforded.</p>	

8. Financial information

Comment																				
<p>1.1 The table below provides summary financial information relating to the Fostering Service for 2021/22.</p> <table border="1"> <thead> <tr> <th>Category</th> <th>£</th> </tr> </thead> <tbody> <tr> <td>Employees (inc Agency)</td> <td>807,005</td> </tr> <tr> <td>Premises (Room Hire)</td> <td>2,446</td> </tr> <tr> <td>Car Mileage (Employee)</td> <td>28,719</td> </tr> <tr> <td>DBS / Medical Reports</td> <td>50,799</td> </tr> <tr> <td>Equipment (Foster Carers)</td> <td>3,760</td> </tr> <tr> <td>Publicity</td> <td>48,207</td> </tr> <tr> <td>Other Running Expenses</td> <td>31,826</td> </tr> <tr> <td>Foster Care Payments</td> <td>6,101,029</td> </tr> <tr> <td></td> <td>7, 073,790</td> </tr> </tbody> </table>	Category	£	Employees (inc Agency)	807,005	Premises (Room Hire)	2,446	Car Mileage (Employee)	28,719	DBS / Medical Reports	50,799	Equipment (Foster Carers)	3,760	Publicity	48,207	Other Running Expenses	31,826	Foster Care Payments	6,101,029		7, 073,790
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<p>1.2 Key priorities for the agency remain the retention of its excellent carers and the recruitment of more foster carers. A major focus is on recruiting carers who will care for older children and teenagers, or children with complex needs, or large sibling groups and target younger carers who will provide longer term stability for younger children entering care.</p>																				

Signed	
Name	Daniel Kenny
Position	Registered Manager
Date	6 th May 2022



Together for Children Adoption Sunderland NMS 25 Report 2021/22

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2	Legislation, Regulations and Guidance
3	Key Requirements of Local Authority Adoption Services
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15	Challenges and priorities for the year ahead
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1 INTRODUCTION

Together for Children Adoption Sunderland has been in operation since 31st March 2017 and provides Adoption services on behalf of Sunderland City Council.

The main priorities of Together for Children Adoption Sunderland are:

- To achieve forever homes for cared for children for whom adoption is the Care Plan, with appropriate approved adopters, matched according to the children's specific needs and circumstances and within appropriate timescales.
- To prepare, assess and support prospective adopters who are likely to be able to meet the needs of the children waiting for families across the RAA, Northeast and nationally.
- To provide Pre and Post Order support to adoptive families.
- Birth Record Counselling for adopted adults
- Birth Family Support for families whose children are adopted

The needs of the children requiring forever homes are the agency's paramount consideration.

Adopt Coast to Coast launched on the 1st April 2021. Cumbria County Council, Durham County Council and Together for Children/Sunderland are the spokes that continue to deliver their local authorities statutory adoption functions. They do so under the coordination and support of a Head of Service who has overall responsibility for quality management and practice oversight. The recruitment and associated activity which includes the website and Facebook is managed in the Hub by a dedicated Communications and Marketing Manager.

The shared vision -

Coast to Coast will deliver high quality, adoption services across the three local authority areas, raising performance to the levels of the highest performing Adoption Agencies and improving outcomes for children across the region.

2 LEGISLATION, REGULATIONS AND GUIDANCE

There is a range of Legislation, Regulations and Guidance, which influence the working of Adoption Agencies. These include:

- The Children Acts of 1989 and 2004
- The Care Standards Act 2000
- The Adoption and Children Act 2002 (revised 2011)
- The Adoption Agency Regulations 2005 (amended 2011)
- The Children and Adoption Act 2006
- The Care Planning, Placement and Case Review Regulations 2010
- Adopters Charter 2011
- Adoption Statutory Guidance 2011 and 2013
- The Adoption Agencies (Panel and Consequential Amendments) Regulations 2012
- Action Plan for Adoption Tackling Delay 2012
- The Children and Families Act 2014
- The Adoption Minimum Standards 2014

3 KEY REQUIREMENTS OF LOCAL AUTHORITY ADOPTION SERVICES

The key requirements of all Local Authority Adoption Services have not changed significantly since the formation of Together for Children Adoption Sunderland. These are that:

- The focus is firmly on the needs of the child, whose needs will be paramount in all decisions relating to adoption
- Highly skilled professionals lead a quality service delivered to National Minimum Standards
- A permanency plan is identified for all cared for children within four months of them becoming cared for. (This may be a return home, or any of a range of different permanent home options, one of which is adoption)
- Focused effort goes into finding permanent families for all cared for children waiting to be adopted

- A range of potential adopters are welcomed and assessed efficiently in an open and fair way
- Children and their adoptive families have easy access to adoption support services

4 ADOPTION SUPPORT SERVICES

Support to the prospective adopters assessed by Together for Children Adoption Sunderland is provided by Social Workers within the Service from the point of them being matched with their child and up to three years post Order.

After 3 years, the support needs of the adoptive family transfer to the Local Authority where they reside. Though many adopters live in Sunderland's local authority boundaries the conclusion of the Regional Adoption Agency programme may see an increase in such services being delivered to Sunderland's previously cared for children by the other Adopt Coast to Coast spokes. Likewise, year on year children who move from outside the region with adoptive families living in Sunderland and approved by other adoption agencies become our responsibility under the 3-year rule.

Birth families are provided with support services from ARC Adoption North East (ARC), this ensures independent support is available and is offered via a service level agreement between Together for Children Adoption Sunderland and ARC.

Access to their records for adopted adults and counselling support is provided by Social Workers within the service. In the year 2021/22 this service has been provided for 7 clients. Intermediary services have been provided to 3 people for the same period. This is an increase of 4 and reduction of 2 respectively on the previous reporting period.

Despite the national restrictions Social Workers within the team have provided Theraplay for 3 children. This is a significant achievement which demonstrates the commitment of the staff group to offering services to children and families most in need. The therapeutic training across the staff group also includes DDP (Dyadic Developmental Psychotherapy), therapeutic life story work and the Solihull Parenting programme. In this period 2 staff completed the Solihull Parenting programme to support the service's ambition to build a local therapeutic offer for families, both pre and post adoption and in doing so reduce the reliance on commissioned services through the Adoption Support Fund.

We operate our Post-box Service and currently there are 502 active post-box files. This is a small decrease (18) on the previous reporting period. The overseeing of post-box correspondence and responding to enquiries is a whole team task undertaken on duty. However, a single team member has overall responsibility for

overseeing, reviewing, and developing the post-box Service within her responsibilities.

Post Adoption Assessments	No completed	Within 6 weeks	Over 6 weeks	% completed in timescales*
17-18	66	42	24	64%
18-19	45	29	16	64%
19-20	41	35	6	85%
20-21	17	7	10	41%
21-22	69	60	9	87%
*NB this 6-week timescale is set by TfC, as a measure of best practice				

The requests for post adoption support have increased significantly on the previous year's figures and could be attributed to the easing of COVID restrictions as well as children being back at school, parents being back at work and the families not having the focused time together that was experienced in the lock down periods and where we experienced a fall in requests for post adoption support.

Reviews of post adoption assessments are being included on our data system now so future reports will be able to evidence this statutory aspect of adoption practice.

5 The National Minimum Standards – Adoption

The Adoption National Minimum Standards came into force in April 2003 and were updated in April 2011. Local Authority adoption agencies are expected to fully comply with the Minimum Standards which cover all areas of an agency's responsibilities and function.

Together for Children Adoption Sunderland's procedures are fully compliant with both the Adoption and Children Act 2002 (revised February 2011) and the Adoption National Minimum Standards.

Following the launch of the Regional Adoption Agency a revised Statement of Purpose was completed and was provided to Ofsted and is available on our website and Adopt Coast to Coast's.

6 Organisation

The ongoing work of the Service is monitored by Together for Children's Board.

The Service has all the necessary key documents in place including:

- Statement of Purpose

- Adopt Coast to Coast's Recruitment Strategy for Prospective Adopters
- The Service has comprehensive written procedures.

7 STAFFING

Current staffing levels

The current team consists of:

- Responsible Individual - Director of Children's Social Care – Full time
- ADM – Head of Service – Full time
- Registered Manager and Panel Advisor – Full Time
- Service Manager and Adoption Support Services Advisor (ASSA) – Service Manager – Full time
- Assistant Team Manager (1 posts) (F/T)
- Adoption Social Workers (3 posts) (F/T)
- Adoption Social Workers (3 posts) (.8 post)
- Adoption Social Workers (2 post) (.6 post)
- Administrator (Letterbox) (1 post) (1 x .5 posts)
- Senior Panel Administrator (1 posts) (.5 post)
- Team Administrator (1 post) (.5 post)

Team administrators and Panel administrators are centrally managed as part of the Together for Children Sunderland business support.

Business support is provided to Together for Children Adoption Sunderland from the business support team within Together for Children.

8 STATEMENT OF PURPOSE AND RECRUITMENT STRATEGY

Together for Children Adoption Sunderland has a Statement of Purpose and is referenced in the Adopt Coast to Coast Statement of Purpose. The hub lead in the recruitment of prospective adopters and the dedicated Communications and Marketing Manager works closely with the communications leads in each spoke.

The recruitment strategy is regularly reviewed to ensure it is meeting the recruitment needs of the spokes. Together for Children Adoption Sunderland are responsible for following all enquiries received by them and a comprehensive written plan is in place and is compliant with all current legislation, regulations, standards, and best practice guidance.

The Statement of Purpose has been updated.

9 ADOPTION TIMELINESS DATA ANALYSIS

Together for Children Adoption Sunderland monitor the child's journey from the child becoming Cared For to being adopted in line with the DfE threshold.

- The number of days from a child becoming Looked After to the Decision to Place for Adoption has increased by 25 days to 241 from the figure reported in the previous report.
- In respect of the number of days from the date of Decision to Place to Placement Order date, this has reduced by 35 days to 66. This is very positive performance.
- The number of days from Placement Order date to Date of Matching increased from 147 to 202 days. This increase is in part attributed to the impact of the Somerset Judgement which delayed matches for all children across England.
- The date of a child starting to be Looked After to the date of placement for Adoption increased from 406 to 462 days. This is a small increase on the previous year.

The practice within Together for Children continues to be child led and the slight reduction in Best Interests decisions which have decreased by 25 to 29 are a result of other permanence options being in the best interests of children. Placement Orders are decreased by 10 to 32 due to the Somerset Judgement the majority of adoption agencies have experienced delays in the making of Placement Orders, the matching of children and the granting of Adoption Orders which comes on the back of the Court delays following COVID.

Adoptive family approvals:

During the period 2021/22 a total of 26 prospective adopters were approved, an increase of 6 on the previous year. 6 of the prospective adopters were adopting for a second time and as such were progressed onto Stage 2 of the adopter recruitment process.

Timeliness of adopters' assessments:

Of the 20 approved prospective adopters who entered Stage 1, 7 were completed within stage 1 timescales, this is 35% which is a decrease on the previous year's 65%. For the 7 prospective adopters who did not complete stage 1 in statutory timescales, the delays were linked to DBS and medical timescales. Going forward practice will be amended to introduce an earlier progress check and consideration will be given to an automatic alert on LCS.

Of the above 26 approved, 2 prospective adopters Stage Two Assessments were not completed within the 4-month timescale. The reason for this for one of the adopters was due to further information needing to be explored as well as the availability of the adopters due to ill health of themselves as well as their families. The other adopters required their medicals to be redone as they were completed as TFC foster carers and were unable to arrange this appointment with their GP.

In this period, 36 children were matched and moved to live with their forever families a decrease of 3 on the previous year. The Somerset Judgement has had widespread impact across RAAs and the spokes in Adopt Coast to Coast. A number of children who had links were not able to proceed to matching panel until the outcome of the President of the Family Court's Judgement was released in April 2022. Plans are in place for those children whose matches have been delayed being matched and placed as soon as possible. 36 Adoption Orders were granted. This is an increase of 8 on the previous year. Both the impact of the pandemic on the court's availability to list Adoption Order hearings and the Somerset Judgement have combined to cause delay in Adoption Hearings.

10 ACHIEVEMENTS 2021/22

Children and Adopters

The above data demonstrates the wide-ranging progress in improving outcomes for children and prospective adopters. This is even more impressive in the context of a national pandemic which required adaption to a new way of working. As 13 of the 36 children matched moved to live with prospective adopters approved by other agencies this increased the workload for staff, and it is to their credit.

Together for Children Adoption Sunderland has a consistent enhanced support offer:

- £179 983.34 has been claimed from the ASF following 69 successful applications.
- Disruptions –

17/18 – 2, 18/19 – 0, 19/20 – 1, 20/21 – 0, 21/22 – 1

The thorough assessments of prospective adopters, the strong matching practice and the rigorous oversight of the Adoption Panel and the Agency Decision Maker (ADM) have resulted in only 1 disruption in this period. A disruption meeting was held, and the practice developments actioned by the Agency.

Engagement with Adopters

Together for Children Adoption Sunderland is mindful of the benefits of engaging with prospective and approved adopters around Service Development at all levels. The positive track record has continued despite the challenges of this year and

Microsoft Teams has been utilised for virtual support groups. Regular activity packs for children are well received.

Adopt Coast to Coast's Stakeholder Engagement Strategy sets out the RAAs activity to gather the views and lived experience of enquirers, prospective adopters, and adopters. The experiences and views shared through the engagement activity is shared across the year with each spoke and this supports Together for Children in reviewing their day-to-day practice alongside developing the adoption practice across the RAA.

In addition to local activity, the RAA is part of a national marketing group and the experiences of mystery shoppers engaging with Adopt Coast to Coast and the spokes is now provided quarterly.

Engagement with Children

- Crafty Kidz is an informal support group offering craft-based activities to children and their families. This is being re-established and the yearly dates have now been set.
- An adopted young person is an established member of Together for Children's Change Council.
- We complete an annual 'survey monkey' to seek the views of adopted children/young people on specific issues. This service allows for the completion of anonymous surveys.

11 OUTSOURCED SERVICES

Inter-country Adoption

Together for Children Adoption Sunderland has established a contract with The Inter-country Adoption Centre (<http://www.icacentre.org.uk>) to provide Inter-country Adoption Services to residents living within the Sunderland area who want to adopt from abroad.

The Inter-country Adoption centre (IAC) provides counselling and information to applicants enquiring about adoption from abroad. The IAC also undertakes the preparation and home study assessments of applicants who decide to pursue a formal inter-country adoption application and on completion applicants are considered by the IAC's Adoption Panel.

Birth Family Support

We have extended the contract for the provision of Birth Family Support with ARC. The contract covers support for birth families in engaging with post-box arrangements, facilitating the contribution of birth family members in life-story work,

supporting birth family members in terms of their engagement at all stages of the adoption process, support birth family members meeting adoptive parents and when national restrictions are lifted the support group for birth family members will recommence. Birth families are advised of this independent service, and where they indicate a wish to be supported, a referral is made to ARC on their behalf. Between 1st April 2021 and 31st March 2022, 46 birth family members were engaged with the service, of this number 39 were ongoing referrals for previous years. The activity reporting from ARC for the final quarter indicated 38 active cases, 5 ARC pursuing contact and 3 non-engagement. Quarterly performance and monitoring meetings have been embedded to ensure the service is meeting the needs of birth families and offers value for money. Feedback from birth families has been requested sooner than the end of intervention with the hopes of improving the response rate.

12 NON-AGENCY ADOPTION

Together for Children Adoption Sunderland continues to receive a steady flow of interest from stepparents in respect of in-family adoptions.

In-family applications that relate to children who are within their birth families and not in local authority care are allocated for completion of the necessary enquiries and Court Report/s when notification is received from the Court. It is usual for contact to be made prior to the applicant registering their application with the Court and support/advice is given as appropriate. The decision not to allocate until formal request from the Court is made is in line with the number of applicants that expressed an interest and then did not pursue via the Court.

In this reporting period, Together for Children Adoption Sunderland have had 20 referrals and completed 10 reports, a decrease of 3 on the previous reporting period.

13 THE INSPECTION OF LOCAL AUTHORITY ADOPTION AGENCIES

Together for Sunderland Adoption Sunderland was inspected as part of OFSTED's Inspections of Local Authority Children's Services in June 2021. This framework was introduced in 2018 and includes the inspection of local authorities' fostering and adoption functions. Adoption Agency work is combined within the wider inspection framework.

Together for Children received an overall rating of outstanding within this inspection.

In addition, as Together for Children Adoption Sunderland is registered as a Voluntary Adoption Agency it received an OFSTED inspection relating solely to the Adoption Services that it is registered to provide in September 2018. The agency received an overall 'good' judgement with an 'outstanding' judgement for leadership and management.

The 2 recommendations have been addressed.

14 COMPLAINTS AND COMPLIMENTS

In the period 1st April 2021 – 31st March 2022 there were no complaints relating to Together for Children Adoption Sunderland.

15 CHALLENGES AND PRIORITIES FOR THE YEAR AHEAD

To continue to support the development of relationships between staff across Adopt Coast to Coast, recognising that these relationships will contribute to our shared vision.

To work collaboratively with our partners in Adopt Coast to Coast to improve consistency of practice particularly in the recruitment of prospective adopters, linking, matching and introductions.

To continue to improve the excellent record of the service regarding timeliness.

To continue to enhance the therapeutic support that is provided by the team.

To work with the hub in developing consistent feedback/engagement opportunities from children and young people to help shape Adopt Coast to Coast and the 3 spokes.

To engage in the early permanence, pan regional project to improve the opportunities for children to be placed earlier across the North East and Cumbria.

16 CONCLUSIONS

Together for Children Adoption Sunderland continues to perform highly and this was recognised in the OFSTED inspection. We continue to endeavour to achieve timely forever homes for children requiring adoption through the Link Maker portal for Adopt Coast to Coast. Early Permanence is considered for all children and there is a strong consistent practice across Together for Children.

Positive working relationships are well established between the Adoption Service and the locality teams within Together for Children and shared planning can be clearly evidenced.

The feedback received from adopters engaged with Together for Children Adoption Sunderland is generally very positive.

Michelle Ash
Team Manager Adoption
June 2022