North Tyneside Safeguarding and Looked After Children Services Inspection 2012

Action Plan 2012 - 2013

Recommendation 1

Update as at: September 2012 Agency: Northumbria Police

	GREEN
1.	Area for Improvement
	Ensure effective contribution by the police to strategy meetings.
2.	Lead DCI Max Black
3.	What action(s) has been taken
	The Chief Constable has agreed that specialist child protection investigator's can withdraw from the interoperable business model of the Crime Department to a bespoke stand alone model.
4.	The Progress Made
	From 3 July 2012 the Child Protection Teams have reverted to a predominantly Office hours model.
5.	The evidence/data that shows the changes required have been/are being made
	This has enabled improved attendance at strategy meetings and Initial Conferences in all cases where there is a police investigation (or one is likely) or where there is significant police information to share. The police contribute to strategy discussions in all cases.
6.	Timescale for Completion
	In place from July 2012

North Tyneside Safeguarding and Looked After Children Services **Inspection 2012**

Action Plan 2012 - 2013

Recommendation 2

Update as at: September 2012 Agency: Northumbria Police

	AMBER
1.	Area for Improvement Improve the effectiveness of arrangements with the police for the risk management of information where there may be concerns about children, including sharing domestic violence notifications with health colleagues.
2.	Lead DCI Max Black
3.	What action(s) has been taken
	The effectiveness of risk management information from police sources has been revised.
	2. The criteria for police alerts to Children's Services has also been revised.
	In respect of sharing information with health colleagues, a positive dialogue is ongoing.
4.	The Progress Made
	Safeguarding refresher training was rolled out to all frontline police staff in May and June 2012.
	Police Central Referral Unit staff are risk assessing alerts in a more focused way.
	 The necessary IT work is scheduled once health colleagues have configured an infrastructure to receive and triage/assess the police information.
5.	The evidence/data that shows the changes required have been/are being made
	In relation to risk assessing alerts, the period May – July 2012 show a 38% reduction in the number of alerts submitted compared with the same period in 2011 whilst there has been a 3% increase in the same period in the number of referrals
6.	Timescale for Completion In relation to point 3., timescale is dependent on the necessary IT work being finalised.

North Tyneside Safeguarding and Looked After Children Services Inspection 2012

Action Plan 2012 – 2013

Recommendation 3

	Amber (audit undertaken; report being prepared)
1.	Area for Improvement
	Children's Views
	Ofsted evaluation was that children's views are not consistently gathered and recorded in all assessments and plans.
2.	Lead
	Cath McEvoy
3.	What action(s) has been taken
	- Guidance note produced covering:
	 How to gather children's views Where to record views on the system and in assessments When to record views
	- Raised within Team Managers meeting.
	- Workshop to be provided in November 2012 for social work staff to reinforce the message.
4.	The Progress Made
	The guidance note (attached) is has been distributed to all teams and discussed at Team Meetings.
5.	The evidence/data that shows the changes required have been/are being made
	An audit is to be undertaken in December 2012 to gauge progress made, additional reports will be provided following this exercise.
6.	Timescale for Completion
	March 2013

North Tyneside

Preventative & Safeguarding Service

Guidance Note

Recording of Childrens Views

Introduction

Good assessment matters and is the key to effective interventions and to improving outcomes for children. Significant and life changing decisions are made on the basis of social work and other professional assessments that affect outcomes for children in both the short and long term.

Key legislation and related initiatives instruct and expect professionals to take account of children's wishes and feelings. It is crucial that children should be facilitated and encouraged to participate in assessment processes and to be consulted about decisions that affect them and involved in plans that are being made for them.

Legal Context

- Children Act 1989
 - recognises children as citizens with the right to be heard
 - legal requirement for views of children to be taken into account in any court decisions that may affect them
- National Assessment Framework
 - includes guidance about how children should have their views sought and considered
- UN convention on the Rights of the Child
 - Article 12 asserts children's right in general
- Children Act 2004 (Section 53)
 - requires when working with children in need, their wishes and feelings should be ascertained and used to inform decision making

Ensuring the child's voice is heard

There are many reasons why children should be listened to:

- Many children have an understanding of what is causing their problems and what underlines their needs.
- They have insight into what might or might not work with the context of their family or social network.
- They know what sort of support they would most value and be able to access.

Child at the Centre of the Assessment Process

The principles outlined below follow a child centred approach to assessment. Social workers and managers should ensure that:

- The assessment process focuses on the child.
- Assessment seeks to bring together all professionals already involved with the child to plan the assessment around the child.
- Direct work with the child is at the centre of the assessment process. It should not be possible to overlook the child's views or to ignore their voice.
- The worker undertaking direct work with children should be viewed as the child's advocate in all respects:
 - first in facilitating each child having a voice in the assessment process
 - second in gathering together information from all those who hold vital information in relation to the assessment

Communicating with Children

In general terms, it is usual to seek the views of children aged 8 years or over when there are no additional/obvious reasons why this should not take place. This should be a given standard in any assessment that is undertaken and for any child that is subject to a plan of any kind.

It should not be assumed, however, that children who are under 8 or who have additional special needs cannot offer their views in some way. This can be undertaken by observation of behaviour, responses to situations or individuals and general presentation in different environments. There are a range of tools available to assist with working with children (see Appendix 2).

Recording the child's wishes and feelings

Assessments

Children's views should be explicitly recorded throughout an assessment, particularly when direct work has been undertaken in relation to specific aspects of the assessment.

The current assessment documents are designed to ensure that children's views are recorded both explicitly within relevant sections and also recorded in the relevant sections of the Initial and Core Assessment.

Social workers should ensure that in all assessments reference is made to:

- children's views about their current situation
- what children/young people see as the priority problems/issues
- what they would like to change
- children/young people's views of the assessment
- views about the proposed plan

Managers should ensure that the views are explicit both within the assessment and also at the conclusion of the assessment where the child's views should be recorded in the relevant section of the assessment.

Reports

In addition, child/young person's views should be recorded in the relevant section of the:

- Child Protection Conference Report
- Child Protection Review Report
- Looked After Review Report

Independent Review Officers should ensure that such views are recorded and discussed within the relevant meetings.

<u>Plans</u>

A child/young person should have an opportunity to give a view about any plans that they are the subject of. These views should be explicitly recorded within the Plan and the reasons for not adhering to their views should be provided when appropriate.

Children's views should be incorporated in the Core Group minutes when age appropriate and reflected in the updated planning arrangements.

Conclusion

Good assessment in crucial and is vital to the provision of good quality and timely service provision. Assessments should have a clear focus on the child which uses the child's views to reach the conclusion.

Appendix 1

Standards

Standard

1. Children and young people will participate in their assessment.

Criteria

- All children will be seen in their home situation (if appropriate), seen alone and purpose of the assessment explained to them.
- Social workers will communicate directly with the child/young person by seeing children, observing them, engaging in discussion or activities with them.
- Children's views to be recorded throughout the assessment.
- Children's views to be recorded in the relevant boxes "Children/young person's views".
- 2. Children's communication needs will be identified and addressed.
- Communication with a child will be facilitated in child's language or language of their choice.
- Use of relevant interpreters (language or sign language) will be accessed where appropriate.
- Use of advocates will be encouraged or facilitated to enable effective communication when necessary.
- 3. Feedback will be provided to the child/young person at the conclusion of the assessment.
- Feedback will be provided verbally and in writing.
- The views of the child/young person will be incorporated into the assessment and the relevant section of the assessment document completed.

Create ways to help children to communicate

Draw & Write A child is asked to think about a topic such as

"things that make me happy", "things that make me sad" and asked to draw and write anything they can think of. If the child states they cannot draw/write they can shout out loud and the worker will write it

down. Alternatively, they can use

magazines/cartoons, graffiti etc to assist.

Think / Say This is a variation on "draw and write" and allows a

child to represent what they would say - 'speech bubble' and what they would keep private - 'thought bubble'. This can be useful for older children to explore what they feel able to say as opposed to

what they think about certain issues.

Role Play / Creative Writing Using dolls, teddies etc acting out or discussing a

story or narrative they have invented can be a good way of giving some children a voice, allowing them

to discuss issues in a non-threatening way.

Music and Sound Young children can be encouraged to use different

types of sounds to describe feelings and step towards helping them tell you how certain situations

have made them feel.

<u>Eco-mapping for reflection on</u> Eco-mapping is a generic term for the mapping out roles, routes and relationships of relationships, ideas or systems. This can

of relationships, ideas or systems. This can encourage children to map out where they live, asking what is near their home, how safe is their neighbourhood and encourage some children to map out who is in their family, and who and what is

important to them.

Metaphors and imagery You can use the idea of travel or a map to plan a

route from where or how a child is now (in life) to where or how they would like to be. You might encourage them to write in and draw the obstacles and the helpers along the way, or the points where they might be tempted to follow a different path.

The worst ever In this activity the worker asks a child to deliberately

design 'the worst ever' of something: a day at school; the worst review meeting; the worst placement as a starting point for discussing what they want and need and how to make things better.

Voting For a very basic response to closed questions or

options, you can give a child the chance to vote on

options, using:

- thumbs up/thumbs down

- happy/sad faces

- yes/no or agree/disagree cards

If you could take charge?: Handing back control to a child can be very powerful. Young people may just need permission to be the expert on their own situation. Giving children a voice starts the process.

Messages for Children

- Wishes and feelings about what is happening in your lives are important.
- Adults should listen to you before they try to change anything.
- You have the right to be listened to and to tell people what you think in your words and in your own way.

Messages for Social Workers

- A number of statutory assessments require or encourage direct work with children.
- Direct work with children should be at the heart of every assessment.
- You should listen to a child before you try to make changes in their life at the same time as ensuring their safety.
- Children have knowledge and understanding that will help you to help them.
- Direct work with children should use child centred methods of communication.
- Creative and activity based ways of communicating can help adults to listen to children and children to communicate with adults.
- Listening to children is a skill that you can learn with support.

Messages for Managers

- Assessment should be centred on the child and carried out in partnership with other agencies and the family.
- Planning the assessment to maximise the child's input will maintain the focus on the child in question.
- Good recording is key to the assessment and safeguarding of children and promoting the welfare of children.
- Active management of staff and case files must include the monitoring of work with children and should ensure that children are given advice in assessment.

North Tyneside Safeguarding and Looked After Children Services Inspection 2012

Action Plan 2012 – 2013

Recommendation 4

	Amber (quality assurance framework to be concluded)
1.	Area for Improvement
١.	Area for improvement
	Improve the response to learning from serious case reviews (SCR's), audits
	and the Quality Assurance Panel to ensure the action plans resulting from
	quality assurance activities are properly evaluated and lead to demonstrable
	improvement to services.
2.	Lead
	Mark Longstaff, Head of Commissioning and Quality Assurance
3.	What action(s) has been taken
	The Quality Framework is being revised to ensure that there are measurable
	outcomes and the impact of improving local safeguarding will be clearly
	captured. The terms of reference are also being revised including the
	membership of the group to ensure that the audits are multi agency and offer
	external challenge.
	The Local Safeguarding Children Board (LSCB) considered 2 options in relation
	to embedding the learning from SCRs.
	Northumbria University
	The Tavistock Clinic/NSPCC initiative.
	The LSCB has approved the Tavistock Clinic/NSPCC initiative as more suitable
	for its operational goals. Work with the partners will start in January 2013.
4.	The Progress Made
	Task group formed:-
	December hains accept and info acthored from other LA's
	Research being sought and info gathered from other LA's.
	Consultation with multi agency re representation for the panel.
	Consultation with multi agency te representation for the panel.
	The Tavistock Clinic/NSPCC initiative has been agreed for a January 2013 start
	and further joint activity throughout 2013.
5.	The evidence/data that shows the changes required have been/are being
	made
	The task group will, once the QAF is finalised, carry out audits to establish its
	effectiveness. Baselines will be established.
	The impact of the learning from SCR's is a key priority for the LSCB in 2012/13.
6.	Timescale for Completion
	The framework and terms of reference will be completed November 2011.

Recommendation 5

Update as at: September 2012

Agency: NHFT

	GREEN
1.	Area for Improvement
	Northumbria Healthcare NHS Foundation Trust (NHCFT) to complete training needs analysis to identify those staff that require safeguarding children training. This analysis should lead to action to ensure that all staff are appropriately trained.
2.	Lead
	Rosemary Stephenson
3.	What action(s) has been taken
	Complete review has been undertaken of the training needs analysis in relation to safeguarding children. Those staff requiring levels 1, 2 and 3 training have been identified.
4.	The Progress Made
	Review complete
5.	The evidence/data that shows the changes required have been/are being made
	There is a link to Northumbria Safeguarding website and audit will be undertaken via the training records for those staff via ESR.
6.	Timescale for Completion
	Complete

Recommendation 6

Update as at: September 2012

Agency: NHFT

	Green
1.	Area for Improvement
	Northumbria Healthcare NHS Foundation Trust Safeguarding Committee should ensure that it fulfils its responsibilities to coordinate activity on safeguarding children practice across the organisation
2.	Lead
	Rosemary Stephenson
3.	What action(s) has been taken
	To review the roles and responsibilities of the committee. There have been two workshops with the designated and leads for safeguarding. A third and final workshop took place in October 2012.
4.	The Progress Made
	The draft plan that has been developed was agreed at the NHS Foundation Trust Safeguarding Committee meeting and recommendations made to the Executive Management Team.
5.	The evidence/data that shows the changes required have been/are being made
	There is a draft "Plan on a Page". Agendas and attendance of workshop meetings note progress against this recommendation.
6.	Timescale for Completion
	Completed

Recommendation 7

	Green
1.	Area for Improvement
	Ensure that child protection and child in need plans are SMART and focused consistently and appropriately on the identified needs of, and risks to children and young people.
2.	Lead
	Angela Glenn, Fieldwork Manager Sue Burns, LSCB Business Manager
3.	What action(s) has been taken
	A task and finish group, chaired by the Fieldwork Manager (Angela Glenn) has been established to agree a template for use at child protection conferences which will outline the broad child protection plan. This focuses on how the risk will be managed.
4.	The Progress Made
	The draft template has been piloted and some amendments were subsequently recommended by the task and finish group.
	The revised document was implemented on 1/12/12.
5.	The evidence/data that shows the changes required have been/are being made
	The documentation has been revised to ensure child protection plans are SMART and focus on risk.
6.	Timescale for Completion
	Template in use as of December 2012.
	Initial impact/effectiveness to be evaluated in March 2013.

Recommendation 8

	AMBER (service reorganisation due for March 2013)
1.	Area for Improvement
	Ensure that thresholds for the use of the Common Assessment Framework (CAF) are appropriately understood across all agencies and that where they are undertaken their focus is clear.
2.	Lead
	Paul Cook
3.	What action(s) has been taken
	The Council and partners have initiated service re-design across Preventative and Early Help services (0-19 years). The specification for the renewed service includes:
	 The embedding of a single assessment process and the development of a single multi agency screening and assessment team Early help and support services commissioned by the Council being explicitly required to use the CAF as the assessment process for vulnerable children and young people The implementation of a multi agency assessment team directing Family Partners in their work with vulnerable and challenging families
4.	The Progress Made
	Task and Finish Groups covering: a) A single multi agency screening and assessment team b) A model of Family Partner teams have begun their work
	 The Children and Youth Provision Group has renewed its Terms of Reference and will report to the CYPL Board on young people's services commissioned for diversionary, targeted and specialist provision; CAF usage will be included in the monitoring programme
	The Training and Workforce Development programme regarding CAF continues and will be refreshed as required following the service review

5. The evidence/data that shows the changes required have been/are being made

- The commitment of multi agency partners to the new model is evident in their attendance and involvement in the Task and Finish Groups
- Consultation with staff and users indicates the direction of travel is supported by them
- A Senior Manager Early Help and Vulnerable Families took up post on 7 January 2013

6. Timescale for Completion

The period September 2012 to March 2013 is the timescale for the model to be developed, consulted upon and delivered.

Recommendation 9

Update as at: September 2012 Agency: Children's Social Care

	GREEN
1.	Area for Improvement
	Ensure that increased resources within the Independent Reviewing Officer (IRO) service result in the service being in line with statutory guidance on care planning.
2.	Lead Sue Burns, LSCB Business Manager
3.	What action(s) has been taken
	The service budget has been increased which will allow an additional IRO post of 30 hours and for an existing IRO to increase her hours to full time from an 18.5 hour post.
4.	The Progress Made
	The IRO increased her hours to full time from 1 June 2012. The new post has been advertised and interviews have taken place.
5.	The evidence/data that shows the changes required have been/are being made
	The increased resources within the team will allow for all aspects of the Care Planning Regulations to be fulfilled.
	The Multi Agency Looked after Partnership (MALAP) will oversee the progress.
6.	Timescale for Completion
	The new post holder will be in post as soon as possible.

Recommendation 10

Update as at: September 2012

Agency: NHFT

	Amber (currently draft plan)
1.	Area for Improvement
	Commissioners and Northumbria Healthcare NHS Foundation Trust to develop a clear priority pathway for looked after children and young people to access emotional health and well-being services without delay
2.	Lead
	Rosemary Stephenson
3.	What action(s) has been taken
	Discussions have taken part with the leads for the service.
4.	The Progress Made
	There is a documented pathway currently being consulted on by Julie Owens and Belinda Bateman.
5.	The evidence/data that shows the changes required have been/are being made
	Draft pathway
6.	Timescale for Completion
	January 2013

Recommendation 11

Agen	cy: Children's Services
4	GREEN
1.	Area for Improvement
	Improve the quality of written pathway plans and ensure that they drive the delivery of effective multi-agency services to care leavers
2.	Lead
	Paula Clough (Corporate Parenting Manager)
3.	What action(s) has been taken
	The Service's Team Plan identifies this as a priority April 2012.
	 The Research and Intelligence Team have undertaken an audit of current Pathway Paths to identify strengths and weaknesses. A meeting took place with the Head of Preventative & Safeguarding Services 29/08/12 to discuss the key findings of the audit and an action plan agreed to cascade the learning to the staff team.
4.	The Progress Made
	The audits findings have been shared with the team.
	 Staff have benefited from a session on Needs, Actions and Outcomes at a team training day 13/09/12.
	20 Cases files linked to the Fostering Inspection have been identified as a priority for the up dating of Pathway Plans.
5.	The evidence/data that shows the changes required have been/are being made
	There is a clear time line in place to ensure that all Pathway Plans are up dated and evidence the wide range of support care leavers receive.
	Pathway Plans will be audited as part of staff supervision.
6.	Timescale for Completion
	 Keyworkers have been given 3 weeks to up date the 20 identified Pathway Plans.
	 The remaining 134 Pathway Plans will be up dated as they are reviewed over the coming six-months.

Recommendation 12

	GREEN
1.	Area for Improvement
	Life Story work
	Review the delivery of Life Story work for those children and young people looked after long term.
2.	Lead
	Cath McEvoy
3.	What action(s) has been taken
	- Life Story work guidance (attached) has been completed and given to all social work staff.
	- Life Story training has been updated to ensure Life Story work for children placed in permanent placements is addressed / highlighted.
	- Supervision Template has been updated to ensure Life Story work is addressed at each session.
	- Audit of current baseline undertaken which is with Research & Intelligence for analysis.
4.	The Progress Made
	Profile of Life Story work has been raised and staff aware of need to complete such work for all children when rehabilitation has been ruled out.
5.	The evidence/data that shows the changes required have been/are
	being made
	Guidance is improved
	Supervisors knowledge is increased
	Training is provided
6.	Timescale for Completion
	The initial stage is completed. The 2013 audit will identify the projector of progress.

Life Story Work With Looked After Children

When undertaking Life Story Work, careful thought and planning is required. Life Story Work is often seen as the completing of a book that outlines the life events of a Child or Young Person, however it is also much more than that.

Children separated from their birth families are often denied the opportunity to know about their past and how this connects to their present situation. Losing track of the past can make it difficult for children to develop emotionally and socially. Life Story Work is an attempt to give back this past and can help children to move more positively into the future. Life Story Work is a means of helping children acknowledge and make sense of their past as well as come to terms with what has happened along the way including up to the present. It also provides children a structure and understandable way of talking about themselves to which they can refer to and carry with them through their life.

The completion of Life Story Work and ultimately a Life Story Book can address the following:

- Help a child understand their past and enable them to move forward to the future
- Provide a child with a history of their past and insight into themselves
- Capture a child's own memories that they can reflect back on
- A medium to help a child to begin to work through their feelings
- Identify a child's wishes and feelings
- Promote identity formation and should address issues of ethnicity and cultural background
- Dispel myths and magical thinking by the child
- Facilitate and reinforce current attachments
- Promote a child's self esteem
- Explain future plans for a child and enable them to work through their fears
- Identify connections between past, present and future
- Help a child share their history with others
- Increase trust with adults

Which Children and Young People does Life Story Work apply to

All Children and Young People who are separated from their birth families should have some form of Life Story Work undertaken. The main categories for such work is referenced below. However the list is not static and children's needs should be the determining factor in what work to undertake.

1) Children who are in the care of the Local Authority should as a minimum have:

From day one a memory box and materials reflecting events they have undertaken since being in the care of the Local Authority. The foster carer will

be the primary person collecting this with advice from their fostering support worker and child's social worker.

This should include significant written information about events, holidays, interests, achievements, school attainments, clubs and photographs of significant people (birth family, friends, foster family) and places, as well as keepsakes.

It should also include the child's likes, dislikes, favourite toys and so on in keeping with their age and include their contributions where possible.

2) Children in care as their long term plan, usually through Fostering, although may be with Friends and Family or Connected Persons or even Residential.

This group of Children and Young People should have specific Life Story Work undertaken, which also produces a book or similar material which captures the information and can be used and referred to as they grow.

3) Children who are to be adopted.

These children are usually younger (often pre school) and should always have a Life Story Book which can be taken with them into their Adoptive Family to refer to with their Adopters as they grow. This should capture information about their birth family, foster family and significant events, people and places. It should be visual and include photographs and narrative telling the child's Life Story of how they came to be Adopted.

Things to Consider when Undertaking Life Story Work

A clear decision needs to be made about when Life Story Work should begin. This can either be at a Care Team Meeting or the child's Review following agreement in supervision. Consideration needs to be given to when it is the right time for the child, however if the work is undertaken with sensitivity and planning anxieties about the emotional impact of Life Story Work can often be managed.

The worker needs to be able to meet with the child on a consistent and regular basis. The worker should benefit from supervision and support as Life Story Work can be emotionally draining and comes with responsibility. To embark on this work you need time, sensitivity, empathy for the child and a commitment to the work.

Doing the Work

Gather as much information about the child's current level of functioning and how they express their feelings, emotions and views. What are the child's interests and talents and how do they relate to their current carers. This will inform what arts and crafts, materials and toys you can effectively use with the child. Get a sense of whom and where a child's safe base is and use this to promote the working relationship.

After gathering information about the child, you need to know about the child's history. A flow chart of significant events, such as moves of house, important people and events can be a good place to start. It is important not only to look at formal case records, but also explore other people's and professionals recollections and memories. This includes birth parents and family members. The timing of when to talk to birth family members about this needs careful consideration to get the most beneficial information.

For many older children separated from their birth families for a number of years they often want to know personal things about their parents, extended family members and themselves. For example, how was their name chosen, parents interests, colour of eyes and hair or what did they think about or do when they were born. What were they good at doing or have a talent for. As the child may have few memories of their parents, these small intimate details are often important to them, and also allows their family to be more real and connected to themselves.

List of Information that could be of Value for a Child's Life Story Book

- As much information about the child's experience coming into care or separation from family
- When and where they were born and as much information as possible about their birth
- Information about significant family members
- Record of all child's developmental milestones and childhood illnesses
- Places they have lived
- Information about injuries or hospitalisations
- Schools attended including nursery and childcare provision
- The way the child shared affection and who they were close to in their birth or foster family.
- Favourite friends, activities, toys, food etc
- The story around the child's birthday's, Christmas and other celebrations
- Trips, holidays and events taken with birth family and current carers and any special memories the child and others may have
- Members of the foster family and previous foster families and their extended family members, events undertaken and their relationships
- Any funny, humorous stories attached to a child
- Any family pets
- Nicknames
- Contact details regarding birth family. Who, where and when. What happened, who supervised it, A written account and photographs of any goodbye contacts including with siblings
- Any religious or cultural experiences
- Obtain as many photographs as possible of the child's birth family and relations, places, events and other significant people
- Information on siblings, (full and half) if seperated

It is important to remember that a child's Life Story Book belongs to the child and it is important that the child knows where it is. It is worth considering having a duplicate copy in case it becomes lost or the child in times of emotional crisis damages it or destroys it.

Tools to use within Life Story Work

Paper, pens, scissors, glue, glitter glue, stickers, paints, brushes, mirror, face paints, baby wipes, tissues, tape measure and calendar. Play people, puppets, storybooks, small dolls house, clay, play dough, a feely bag, buttons of various sizes and colours, various games, materials to be creative for arts and crafts.

DVD is also worth considering of family members and significant people and places such as teachers, schools attended, former foster carers, social workers and friends.

It is also worth considering audio recordings of the child singing, reading or talking.

As well as providing a Life Story Book you could also make Life Maps or Life Records with the children (like a river or railway journey). They can stick on miniature people to represent significant people in their lives as well as mark significant events or birthdays.

The use of expression or faces to express feelings is also useful to represent being happy, sad, frightened, worried, angry and so on. Children will often process information better through such mediums.

For very young children it is helpful to make simple Life Story Books which can be built upon over time.

Endings

When the work is completed it is important to explore this with the child and revisit what has been done.

Training and Materials

Life Story Work Training is available to all social work staff, foster carers and residential care staff undertaken by the Fostering and Adoption Service and the Fostering Training Officer. This takes place formally twice per year and can be accessed via North Tyneside's Training matrix.

Additionally the Fostering and Adoption Service have access to a number of materials, books and equipment relating to undertaking Life Story Work. The Team welcome contact from social workers and carers and are to be approached for advice.

Recording and Supervision

The child's case notes should reflect that Life Story Work has been undertaken and be clear in the objectives of the work, what has been done and the outcomes. Each session should be recorded.

The progress of Life Story Work undertaken with the child should be highlighted within supervision so the issues raised can be explored and the emotional impact considered.

The child's care plan should reflect that Life Story Work is being undertaken and the progress of this work should be monitored and evaluated through the care team and Review.

June 2012

Recommendation 13

	GREEN
1.	Area for Improvement
	Advocacy
	Ensure awareness amongst Looked After Children to their entitlement to an advocacy service.
2.	Lead
	Cath McEvoy
3.	What action(s) has been taken
	- Guidance note (attached) produced in relation to roles and responsibilities of professionals in relation to advocacy.
	- All LAC over 8 provided with a pack of information delivered by and discussed with the social worker.
	- Advocacy service continues to promote its core offer through various agreed methods to children and young people.
4.	The Progress Made
	 Audit to be undertaken January 2013 to identify if advocacy awareness amongst staff has increased. If this is not the case additional actions will be taken.
	- To report from the May baseline the % increase in advocacy awareness and use.
5.	The evidence/data that shows the changes required have been/are being made
	Improved procedure in placeHeightened awareness amongst staff of advocacy
6.	Timescale for Completion
	Initial stage completed. The 2013 audit will identify projector of progress.

North Tyneside

Preventative & Safeguarding Service

Guidance Note: June 2012

Advocacy

Introduction

Advocacy is a service offered to young people in the care of the Local Authority or those who have a Care Plan. If a child/young person is unhappy about something or any element of their plan an advocate can assist them to be heard and understood.

Advocacy is used to give young people the right support so as to help them:

- Say what they want
- Secure their rights
- Represent their interests
- Obtain services they need

An advocate can also be used to ensure professionals making decisions about the care of the young person take the views and wishes of that young person into account.

Advocacy in North Tyneside

The Advocacy Service within North Tyneside is based at the Youth Village and can be accessed by contacting the service on:

0191 643 8881 or 07968 693044

Promotion of Advocacy

Within North Tyneside, advocacy is promoted in a number of different ways:

- Information contained in the LAC pack given to each child when they become Looked After.
- Leaflets/posters distributed at all residential homes.
- Advocate visits each new LAC on placement at a residential home.
- Each LAC over the age of 8 is sent a birthday card with advocacy details each year.
- Foster carer training includes information about advocacy.

- Access to advocates is raised via the LAC review.
- All young people aged 15+ get a letter and pack containing information in relation to how to access an advocate.

Social Workers role

The availability of advocates should be reinforced by social workers on a regular basis. Social workers should:

- Familiarise themselves with the role of an advocate and how to access support for the child/young person.
- Discuss advocacy with the child/young person.
- Ensure that the carers are aware of how to access an advocate for the child/young person and the range of circumstances that might warrant the use of an advocate.
- When conflict arises in the Care Planning process or the child/young person disagrees with the social worker/Care Team, then the young person should be encouraged and facilitated to contact an advocate.
- When a child goes missing from placement, an advocate should be offered to the young person when he/she returns. Where this is a regular occurrence then contact should be made with the Advocacy Service and a request made that the young person is contacted by an advocate.

Role of Team Managers

- Where appropriate a check should be made in supervision that advocacy has been discussed with a child where relevant to the child's age and understanding.
- Where a child/young person disagrees with any aspect of the Care Plan, the Team Manager should advise the social worker to discuss this with an advocate and the young person encouraged to speak to an advocate.
- When a child goes missing from placement, the Team Manager should discuss with the social worker the need to access an advocate on behalf of the young person.
- Role of advocacy to be discussed on an annual basis in Team Meetings.

Role of IROs

- The need for an advocate should be discussed at each LA review where age appropriate.
- Where an IRO becomes aware of a disagreement in the Care Plan they should take the lead in ensuring that a young person is aware of their right to an advocate and where appropriate contact the advocacy service on the child/young person's behalf.
- The IRO should record when it has been necessary to access an advocate as part of the LAC review monitoring.

Role of Residential/Foster Carers

- All residential workers and foster carers to familiarise themselves with the role of advocacy and when/how a young person can access an advocate's role.
- When a residential worker or foster carer becomes aware that the child/young
 person does not agree with elements of their Care Plan they should ensure that
 access to an advocate is discussed with the child/young person, social worker
 and/or IRO.
- Residential homes to ensure that leaflets and information about advocacy is accessible to all children and young people who live in the home.
- Foster carers to ensure that the child/young person in placement has access to information about advocacy via their LAC pack.

Role of the Participation Team

Through the various participation/consultation groups members of the team will become aware of the need for a child/young person when advocacy might be necessary. On such occasions the worker should:

- Discuss with the young person about the role of an advocate and the benefits of this.
- Assist the worker in accessing an advocate via the Advocacy Service or by identifying someone who could act as an advocate for the child.
- Advise the social worker that the child needs an advocate.

Cath McEvoy June 2012

Recommendation 14

Update as at: September 2012 Agency: Fostering & Adoption NTC

	GREEN
1.	Area for Improvement
	Ensure that challenging and reflective supervision is available consistently across children's services.
	The lessons taken from implementing reflective supervision in the fieldwork sector will be put into an action plan to ensure successful implementation in the adoption and fostering service.
	Staff will be appropriately challenged and supported in their work
2.	Lead
	Paula Gibbons Service Manager: Fostering and Adoption Service
3.	What action(s) has been taken
	Paula Gibbons met with Bill McLester to discuss the recording of reflection as though challenge and reflection were a part of Fostering and Adoption Supervision the latter was not clearly recorded.
	Supervision form amended.
4.	The Progress Made
	This requirement was met from 1 st May 2012. In addition practice issues that arise from reflection for each team are also discussed within a team meeting on a 3 monthly basis and form the planning for regular practice meetings.
5.	The evidence/data that shows the changes required have been/are being made
	Evidence is available within each supervision record for Fostering and Adoption staff.
6.	Timescale for Completion
	N/A as completed

Recommendation 15

Update as at: September 2012

Agency: NHFT

	Green
1.	Area for Improvement
	Review the resourcing and line management arrangements for the designated nurse to ensure that these meet national guidance and are sufficient to meet the needs of the developing looked after children's health service.
2.	Lead
	Rosemary Stephenson
3.	What action(s) has been taken
	Discussions with designated nurse and commissioners of child health who are currently undertaking a review.
4.	The Progress Made
	The review has agreed additional resourcing of the post
5.	The evidence/data that shows the changes required have been/are being made
	Implementation of the outcome is confirmed
6.	Timescale for Completion
	December 2012

Recommendation 16

	Green
1.	Area for Improvement
	Introduce an electronic case recording system for the Fostering and Adoption Services.
2.	Lead
	Paula Clough, Corporate Parenting Manager
3.	What action(s) has been taken
	- The Service's Team Plan identifies this as a priority area.
	 A task and finish group has been established between the Fostering and Adoption service and the CCM team. The plan is to go live with the new recording system as of 1st November 2012.
	- Staff training for the new recording system has been set up as of 17 th October 2012.
4.	The Progress Made
	It has been identified that recording within the current SWIFT system enables reading via CCM. Electronic recording in foster carer and adopters' records would be accessible to all with access.
5.	The evidence/data that shows the changes required have been/are being made
	- There is a clear timeline in place to ensure appropriate training and set up date of the new recording system.
	- The Service Manager will provide an update once the system is up and running.
	- Training date has been identified. The system to go live 1 st November 2012.
6.	Timescale for Completion
	November 2012

Recommendation 17

	Amber (working group has not to date reported)
1.	Area for Improvement
	Parental Participation with Looked After Children
	Improve the partnership working with parents of Looked After Children and young people to ensure that they are kept informed of key events in their children's lives.
2.	Lead
	Cath McEvoy
3.	What action(s) has been taken
1.	- Issue raised by Team Managers with all social workers.
2.	- Working Group with parental representation to report on action plan.
3.	- Guidance note to be produced to offer input to social workers about inclusion of parents in all processes.
4.	The Progress Made
	The issue of partnership working has been reaffirmed with all social work staff but needs significant further development.
5.	The evidence/data that shows the changes required have been/are being made
	The impact will be evaluated by March 2013.
6.	Timescale for Completion
	March 2013