Interval Report on the Delegation of Statutory Personal Social Services Functions

1st April 2019 – 30th September 2019

For approval by Trust Board

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1.0 Introduction

This is an interval report on the discharge of delegated statutory functions and Corporate Parenting (CC302), within the South Eastern Health and Social Care Trust (the Trust); covering the period 1st April 2019 to 30th September 2019.

The report has been completed in line with regional guidance. The report combines the interval report on the discharge of statutory functions (updates on actions identified in August 2019) and Corporate Parenting (CC302) reporting requirements, as agreed through the Association of the Executive Directors of Social Work, (AEDSW), the Health and Social Care Board, (HSCB) and the Department of Health (DofH)

The report provides a summary of the discharge of statutory functions across all directorates from 1st April 2019 to 30th September 2019, (Section 1). Each directorate provides information outlining their progress against the actions agreed with the HSCB, (Section 2). The Corporate Parenting Report (CC302) is presented in Section 3 of the report.

1. Executive Summary by Director of Social Work

During this reporting period the Executive Director of Social Work is reporting significant compliance with delegated statutory functions. Some of the ongoing challenges in relation to the provision of care across social care and social work are as follows;

Mental Health

The mental health directorate continue to retain Approved Social Worker (ASW) recruitment on the directorate risk register. The workforce appraisal and draft strategy has been completed and remains under review. There has been a further increase in the number of staff attending ASW training in 2019. A review of the ASW role and responsibilities is currently being undertaken within the Trust

The implementation of the Mental Capacity Act (MCA) has significant implications for the ASW workforce. A regional steering group and identified work streams are progressing in preparation for implementation of this legislation.

Recruitment remains a priority for adult mental health services particularly, team leader / manager positions. Successful recruitment to one social work team leader post was achieved and this will strengthen the line of accountability within the service.

Disability

Adult Disability Services continue to report the lack of domiciliary care provision is having an impact on the delivery of care packages across the system and this has been identified as a risk for 2019.

The Trust continues to liaise with HSCB in relation to the delayed discharge of people from Muckamore Hospital. Work is progressing to identify suitable community living places to ensure patients are re resettled into the most appropriate placement. There are significant financial implications which the Trust has been liaising with the HSCB to address.

Older People & Primary Care

There remain a number of challenges within the Older People and Primary Care services. The issues relating to commissioning care and governance assurance has been escalated to the Trust corporate risk register. The Trust has established a Permanent Placement Team for older people's services who will support individuals in both residential and nursing homes.

In relation to future needs, a workforce review has been completed to identify the steps required to strengthen the care management process for people living in their own homes. An improvement project is underway to enhance staffing structures and improve the capacity of teams to reassess need and review care plans within agreed timescales.

The Trust continues to balance and manage risks and resources in relation to domiciliary care provision which continues to remain on the directorate risk register. Transformation of domiciliary care provision is currently being progressed supported by funding from the HSCB.

Children's Services including Mental Health and Disability

During the period of reporting there is a decrease in the number of children in need and a reduced number of children on the child protection register for longer periods. The number of unallocated cases has also decreased in the last six months.

There is an increase in the number of Looked After Children in this reporting period. The number of independent foster placements has subsequently increased creating additional pressures within the system. The rising number of unregulated placements is reviewed by the Trust senior management team across children's directorates.

The Trust continues to be involved and lead on the regional work plans in relation to the fostering recruitment activity Within Children's Disability services, teams are experiencing pressures in meeting current demand this is likely to continue as the systemic pressures remain and capacity will be further challenged as we predict increasing future needs.

The transformation agenda has had a significant impact on staffing within the safeguarding sub-directorate with a number of staff moving to Signs of Safety and GP multidisciplinary posts. This is a regional issue and is included in the current regional workforce review.

BRig Mongan

Mrs Bria Mongan Director of Children's services, Executive Director of Social work.

Directorate Reports

2.1 Adult Mental Health

1. Professional Line of Accountability

Within adult mental health there remains a defined line of professional responsibility and accountability with the designated social work lead reporting directly to the assistant director of adult disability services and Director of children's services & Executive Director of social work for professional social work issues. One social work team leader has been successfully recruited which will strengthen the line of accountability and ensure delivery. A second team leader post is in the process of recruitment.

2. Supervision

Supervision is offered to all social work staff monthly and professional supervision on a quarterly basis. Due to on-going difficulties in recruiting and retaining social work team leaders this will impact on total compliance with the Trust policy

The professional social work fora continue on a quarterly basis has facilitated the discussion of reflection on cases, educational component and information sharing on social work development and initiatives.

The annual supervision audit action plan has identified areas of improvement and a further targeted supervision audit is planned for November 2019. Professional supervision structure is updated 3 monthly due to significant changes in staffing. There are three newly qualified social workers employed in mental health and this is a new approach to try and create social work career pathway in mental health.

The social work and social care register is maintained to ensure compliance with the NISCC registration requirements.

3. Risk Register

The ASW workforce continues to meet current requirements but remains on the Trust directorate risk register whilst we address improving recruitment to this role. The partial implementation of the Mental Capacity Act (MCA) on the 01 December 2019 has significant implications for ASW work force. The MCA steering group and work streams are progressing preparation for the implementation of this legislation. A change management process has commenced with Unions, Human Resources (HR) and social work leads to improve efficiency of existing ASW resource. Two options are being explored; one around the ASW team and second option is to implement a similar model as in the Northern Trust. This year seven candidates have gone forward for ASW course. These candidates will be supported by some current ASW's taking on the role of professional assessor.

4. RQIA Inspection

One supported housing scheme has been due for inspection from RQIA since July 2019, but has not occurred.

5. Audits & Reviews

The "carers conversation wheel" documentation continues to improve the service to carers and additional funding has been agreed to employ a second part-time carer project worker. This will reduce the current waiting time of six weeks for a carers conversation appointment.

The care management service is undergoing a number of audits due to the learning from the Dunmurry Manor findings. These involved improvement in recording and documentation. As the team is now fully staffed it allows quality improvement work to commence.

6. Update on HSCB Action notes 18/19 and any service delivery issues arising

The mental health services are preparing for the implementation of MCA and Deprivation of Liberty (DoL) from new date of 01 December 2019. There has been a co-ordinated approach since the commencement of the MCA steering group in July 2019. The ASW workforce have been prioritised in all levels of the MCA training due to their role being essential on the Trust panel meetings and as advisors to the social workers who will carry out the role of short-term detention authorisers. All ASW's have completed the training however their feedback has identified the limitations of this training. The ASW lead has been freed up from other duties and responsibilities to lead and support the ASW workforce in this new role.

Young carers assessments - It has been difficult to quantify the number referred from our current IT system. A manual audit of all families with children is not practical. Therefore a new system for recording was designed and due to be implemented by December 2018. This system has only commenced in October 2019, due to delays in upgrade of IT system.

Funding has been approved for a pilot project between the Trust carer worker and Action for Children services. This work will try to identify and target young carers between 18 - 25 years as this has been identified as a gap in service provision.

The Think Family pilot was completed in early 2017. Funding has been secured to employ a permanent family support worker to assist with identifying young carers. The recruitment to this role is to progress now due to issues with funding. There will be two part-time band 4 workers employed to cover all mental health community services.

There are a minimum number of team leader posts identified within the Trust which are ring fenced for social work staff only. These posts continue to prove

difficult to appoint and retain. Whilst this is a regional issue, the HR department and social work lead are reviewing this post and its considerable responsibilities.

7. Outline any areas where the Trusts is concerned about/or unable to meet delegated statutory functions

An ASW workforce appraisal document has been completed and remains under review. There has been an increased number of ASW's from five to seven this year to attend the training from 2019 (which includes all programmes of care) to match current service requirements.

Training has been organised to inform staff of the changes and developments within adult safeguarding. The Designated Adult Protection Officer (DAPO) role within the mental health services has been made permanent and this has significantly reduced the DAPO queries/work for social work team leaders. This role has been reviewed and the demand for advice and guidance along with increased referral rates would suggested a second full-time post required. This would reduce social work team leader's responsibility to continue to do the DAPO role.

3.1 Adult Physical Disability and Sensory Impairment

1. Professional Line of Accountability

Within adult physical disability and sensory impairment services, there is a defined line of professional accountability with designated social work leads reporting directly to the director of children's services and the executive director of social work. The assistant director and operations managers have a professional social work background.

2. Supervision

Supervision is provided to all staff in accordance with the trust supervision policy. The annual audit of supervision will take place during December 2019.

3. Risk Register

The service has identified that the lack of domiciliary care provision is having an impact on the delivery of care packages across the system and this continues to be reported through the risk register.

4. RQIA Inspections

RQIA inspections are continuing with positive feedback. The Ardarragh inspection identified two areas of improvement, one in relation to an estates issue and one in relation to a previously unidentified need. Both areas have been addressed and are progressing successfully. Rowan day centre has not been inspected within the interim time frame. The regulated services managers shared learning group continues to review quality improvement plans from all inspections to effect improvements across the range of registered services.

5. Audits & Reviews

An annual adult disability audit plan is implemented across services for key priority areas and is reviewed regularly in senior managers meetings. The International Standards Organisation (ISO) audit is expected in February 2020 which will focus in the down sector and supported living services and a report will be available for the full Delegated Statutory Functions (DSF) report in April 2020.

The adult disability programme continues to be engaged in the Trust's Investors in People (IIP) internal review programme. One disability staff member continues to be an active IIP accredited member of the trust's internal review team.

As part of this rolling staged programme adult disability was reviewed in October 2018. Within the new sixth generation framework, information was

collated through a combination of an on-line survey with all staff, a random selection of 1:1 staff interviews, desktop information and observations. The outcome of the review and the valuable information collected has been shared with the programme and will inform its ongoing continuous improvement process. The IIP standards are now integral to the programme at all levels and are embedded in planning processes across all teams. The evidence from the survey and the 1:1 interviews demonstrated that the adult disability service is established in eight out of the nine identified areas of the thematic index.

The "carers conversation" approach to assessment has been positively received by carers and staff and is now fully embedded across the service. The uptake of assessments has improved.

6. Update on HSCB Action Notes 18/19 and any service delivery issues arising

All actions have been completed. See updated action plan in Appendix 1.

7. Outline any areas where the Trusts are concerned about/or unable to meet delegated statutory functions

There remains a lack of designated living and respite options for people under 65 with a physical, sensory, or neurological condition.

4.1 Adult Learning Disability

1. Professional Line of Accountability

Within adult learning disability services, there is a defined line of professional accountability with designated social work leads reporting directly to the director of children's services and Executive Director of social work. The assistant director and operations managers have a professional social work background.

2. Supervision

Supervision is provided to all staff in accordance with the Trust supervision policy. The annual audit of supervision will take place during December 2019.

3. Risk Register

The Trust currently has 10 delayed service users awaiting discharge within Muckamore Abbey hospital. Work is progressing to identify suitable community living places to comply with the minister's vision of having all patients resettled into the most appropriate community placement. There are financial implications which the trust has been liaising with the HSCB to address.

The service has identified that the lack of domiciliary care provision due to difficulties in social care staff recruitment is having an impact on the delivery of care packages across the system and continues to be reported through the risk register in 2019.

4. RQIA Inspections

RQIA inspections have been completed with most being unannounced, all with very positive outcomes. Recommendations and areas of improvement are progressing successfully.

The regulated services managers "shared learning group" continues to review Quality Improvement Plans (QIP) from all inspections to effect improvements across the range of registered services.

5. Audits & Reviews

An annual adult disability audit plan is implemented across services for key priority areas. Adult disability services have further developed an electronic system to manage data processing for all audits within the programme of care for the 2019/20 period. The ISO audit is expected in February 2020 which will focus in the down sector and supported living services in Ards and Bangor and a report will be available for the full DSF report in April 2020.

The adult disability programme continues to be engaged in the trust's IIP internal review programme. One disability staff member continues to be an active IIP accredited member of the trust's internal review team. As part of this rolling staged programme adult disability was reviewed in October 2018. Within the new sixth generation framework, information was collated through a combination of an on-line survey with all staff, a random selection of 1:1 staff interviews, desktop information and observations. The outcome of the review and the valuable information collected has been shared with the programme and will inform its ongoing continuous improvement process. The IIP standards are now integral to the programme at all levels and are embedded in planning processes across all teams. The evidence from the survey and the 1:1 interviews demonstrated that the adult disability service is established in eight out of the nine identified areas of the thematic index.

The "carers conversation" approach to assessment has been positively received by carers and staff and is now fully embedded across the service. The uptake of assessments has improved.

6. Update on HSCB Action Notes 17/18 and any service delivery issues arising

All actions have been completed. See updated action plan in Appendix 1. The Trust is aiming to achieve the resettlement target. The operations manager is leading on a project to discharge patients and develop an assessment and treatment unit.

7. Outline any areas where the Trusts are concerned about/or unable to meet delegated statutory functions

Appropriate placements for people with forensic histories remain a challenge. However, there is inter-Trust work ongoing to address the placement needs of those with a forensic profile.

5.1 Primary Care and Older People

1. Professional Line of Accountability

The Assistant Director of Older People's Services is responsible for professional social work within the directorate and there is an unbroken line of professional accountability through to the Executive Director of social work. The operational managers for nurse lead and social work lead are now in post.

2. Supervision

Supervision is provided to all social work and social care staff in accordance with the Trust supervision policy. Audits of compliance in all areas are carried out on a quarterly basis and action taken to address any non-compliance.

3. Risk Register

There are three risks on the directorate risk register within older people's services.

Fire safety concerns were raised in Ravara Court, Bangor (Ark Housing); Cuan Court, Newtownards (Apex Housing) and Cedar Court, Downpatrick (Choice Housing). All three Housing Associations have been made aware of the areas of non-compliance and actions have been agreed and are in progress to minimise risks identified.

Capacity within domiciliary care remains on the directorate risk register and actions are in progress to ensure risks are minimised.

Continuing Health Care enquiries and complaints also remain on the directorate risk register, the Trust is awaiting guidance/policy from the Department of Health.

The independent sector governance arrangements for management and oversight of commissioned care remain on the corporate risk register.

4. RQIA Inspections

There have been seven unannounced care/ pharmacy/ medicines inspections in statutory regulated services (residential, domiciliary, day care, supported living/ since 1st April 2019. All quality improvement plans have been returned and relevant actions taken.

5. External and Internal Audits

An ISO external audit was carried out from 9th to 23rd September 2019 across community social care teams for older people and mental health services for older people, residential care homes and domiciliary care. The report received identified one minor non-conformity in social care and a corrective action plan is in place.

All teams participated in the Investors in People (IIP) survey during April and May 2019. Positive reports were received across service areas with particular reference to the value base and quality improvement ethos embedded throughout the service. Some areas for improvement have been noted around staff recognition and reward and an action plan is in place.

6. Update on HSCB Action notes 18/19 and any service delivery issues arising.

Please see updated action plan in Appendix 1.

Domiciliary care update

The Trust continues to balance and manage risks and resources in relation to domiciliary care provision some of the actions being taken within the Trust are:

- Domiciliary referral hub processes and allocates all domiciliary packages of care within the Trust. This a single hub, streamlining access to all social care
- The hub maintains the waiting list, produces reports to managers and escalates issues re service provision with independent sector providers and contracts department
- All requests are issued to all care providers, both Trust in-house and to independent sector providers, twice daily
- All service users are assessed and have a support plan according to self-directed support.
- All service users have a key worker, there are no unallocated cases.
- All people on the waiting list are reviewed and risk assessed regarding waits for care
- Where risks are high, interim care will be offered, free of charge, until a package of care is secured
- Senior managers are reviewing all activity to target future plans for service and recruitment to address need.
- Proactive recruitment continues to in-house team. A recent recruitment day in the Down sector was successful with 78 appointments. The next recruitment day is 5th December in North Down and Ards sector.
- The Trust is proceeding with implementing a prototype proof of concept for local social wellbeing teams. Evaluation will be shared regionally through the providing community care forum and HSCB

- Future commissioning will be planned around geographical / neighbourhood zones and based on broader population needs rather than time / tasks for individuals.

7. Outline Areas where the Trusts are concerned about or unable to meet Delegated Statutory Functions

The issues relating to commissioning care and governance assurance in the Independent sector has been escalated to the corporate risk register 2019.

All 11 recommendations from the Trust governance review are in progress. This included the completion of a workforce review and caseload analysis for older people's and mental health services for older people community teams. This has been completed and phase 1 of enhancing staffing and structure is underway.

Continuing Health Care

The Trust is continuing to receive further enquiries regarding eligibility for continuing health care. The Trust continues to await the outcome of the DoH consultation and further guidance from DoH regarding clearer policy in respect of the NI context. A number of these enquiries are not stretching over a considerable period of years and relatives are seeking a response. This has been raised by the Trust at the providing community care forum and the DoH representatives are in attendance at this meeting.

Mental Capacity Act Implementation.

A project board has been established with work streams to manage implementation across directorates. The required assurance framework is being returned to the DoH indicating compliance towards implementation. This includes ensuring staff are attending relevant training and testing of applications, panels and processes has commenced.

Staff are requesting additional support and guidance following the clinical education centre training programmes as they do not feel equipped to undertake these roles. Five hospital social work staff have undertaken the level 5 training for the short term detention authorisation role. Issues are being raised by trade union colleagues regarding the role of ASWs participation in this work. Challenges remain with access to the medical support required to complete the medial reports and populate panels.

Shared Lives

Through funding from the transformation programme, the HSCB is working with the 5 Trusts to expand the adult placement approach of care through a shared lives model. The aim of a shared lives approach is to provide support through short breaks to service users by matching them with compatible shared lives carers and families who provide care in their own homes.

Through transformation funding each Trust has appointed a project lead to take forward regional developments which are needed in order to progress a shared lives approach within adult services. Within the Trust funding has only enabled the recruitment of a part time project lead which has limited the progression of the work required for such a project. Additionally, unlike other Trusts, the Trust learning disability programme of care does not have an established shared lives approach, which means this approach to care has to be established in learning disability as well as in older peoples programme of care. This provides the Trust with an exciting opportunity to learn from other Trusts but it also presents a challenge in that there is no established model, structure or funding stream for the implementation of this service. As a result, the Trust will be unable to progress with a shared lives approach for older people unless funding is made available to staff the structure required. A business case is currently being developed for submission to the HSCB to take shared lives forward.

6.1 Children's Services – Family Support & Safeguarding

1. Professional Line of Accountability

Within the family support and safeguarding sub-directorate there remains a defined and unbroken line of professional responsibility and accountability from frontline social workers, to the Director of children's services and Executive Director of social work. Within the sub-directorate there are four senior managers who report to the assistant director. There is a senior manager lead for gateway services plus family support hubs, signs of safety and family meeting service. The three remaining senior managers cover three sectors (Down, Lisburn and Ards). Within the sectors each senior manager has operational responsibility for five generic child and family teams (CAFT covering family support, child protection and looked after children) one children's disability team, one intensive support team and one leaving care and after care team. There is a senior manager lead for leaving care and after care service and children's disability services. In addition to operational responsibilities one senior manager is the lead for Child Sexual Exploitation (CSE) and domestic and sexual violence strategy for the Trust.

There currently is no designated Looked After Children (LAC) lead within the Trust but this matter will be revisited as part of future restructuring. The present structure for the safeguarding sub-directorate was the result of a significant reform process which took place in 2018 and whilst this work has been largely effective there are a small number of service areas that present governance issues and require further restructuring. This restructuring work is in its infancy and any further changes will also take cognisance of the aims and objectives of the regional review of Trust pathways.

There are unfilled permanent and temporary posts within the sub-directorate, particularly in the Down and Ards Sectors where there are currently ten posts vacant (i.e. no agency cover). Given the difficulties to attract applicants in these areas the Trust is going out with a bespoke advertisement to recruit. There are still candidates on the waiting list for Lisburn following a recruitment campaign in April. In the interim some permanent and temporary social work posts are filled by a total of nineteen agency staff across the safeguarding sub-directorate.

2. Supervision

Individual supervision is provided to all social work staff in accordance with the Trust's policy for professional and managerial supervision within children's services. An audit of supervision practice, experience, and frequency is completed annually. The last audit (report April 2019) revealed a number of areas of non-compliance. This has been addressed and a detailed action plan has been drafted to address the areas. Each senior manager will be leading on this within their operational area.

The sub-directorate has a number of newly qualified social workers completing their Assessed Year in Employment (AYE). This requires the staff to be supervised on a fortnightly basis, to complete a portfolio that is submitted to NISCC before they can progress beyond their AYE status. This requirement is being met within the sub-directorate. The sub-directorate is working with the social services development team and piloting an AYE support programme. The aim of this is to build AYE resilience and confidence. This pilot will be evaluated in December 2019.

The senior management team within the children's directorate monitor staff compliance with the completion of KSF appraisals. Regular reports are provided and remedial action put in place by operational managers. There was a slight improvement in the number of appraisals completed but there is still room for improvement and an action plan is in place.

The social work and social care register has been maintained to ensure compliance with the NISCC registration. This is reviewed by the senior management team for the children's directorate via the monthly governance meetings. Any issues arising from the NISCC are directed to the assistant director and addressed promptly. No registrations lapsed in this reporting period. One bank staff member had received a warning but was not prohibited from practicing by the NISCC.

3. Risk Register

The sub-directorate has three risks on the register. These are reviewed at the senior management monthly governance meetings.

i. Unallocated Cases - the current number of unallocated cases has reduced and now sits at 92 cases waiting over 20 days. The majority of the unallocated sit within CAF teams and children's disability services. This reduction has been achieved by putting additional resource into gateway. The Trust has contributed to the regional outline business case which has been presented to DoH for consideration. Unallocated cases will remain on the 'risk register' to monitor progress. The safeguarding sub- directorate has fully engaged with Signs of Safety which may have had an impact on unallocated cases. The harm matrix is used by CAFT to assist in the reviewing of unallocated cases and this also assists with consistent thresholding.

The transformation agenda is having an impact on the safeguarding sub- directorate with a number of staff accepting Signs of Safety and GP multidisciplinary posts. Back filling safeguarding posts has created difficulties for the service and the ability to allocate work. This is a regional issue and is included in the regional workforce planning review.

- ii. **Unapproved Placements** there are a number of unapproved placements that are detailed in the Corporate Parenting report. These include:
 - Kinship assessments being out of timeframe either because of staffing pressures or because the carers have been asked to complete additional work
 - Placements that will never be regulated but it is in the child's best interest to stay in the placement (this mainly refers to kinship arrangements). Along with staff in the children and young people's care services directorate these processes are being reviewed
 - Residential placements where the facilities are outside the DOH regulations.

A robust procedure is in place to manage and review these unapproved placements and there is assistant director oversight.

iii. Administration Pressures - there are insufficient band 3 staff to record child protection and LAC minutes resulting in significant delays. Recruitment for band 3 posts is proving difficult in Down and Ards Sectors. We are currently progressing re-banding of these posts as band 4 to be aligned with other Trusts as per Agenda for Change.

4. RQIA Inspection

RQIA undertook an unannounced inspection of the Leaving Care and Aftercare service took place in May 2019. The inspection assessed if the service was delivering safe, effective and compassionate care and if the service was well led.

Evidence of good practice was found in relation to care planning, commitment to long term involvement in young people's lives to support transition, governance issues, training and supervision of staff, and quality improvement.

Two areas requiring improvement were identified in relation to SMART action plans and an escalation policy for providers of supported accommodation.

5. Audits & Reviews

Four audits were undertaken within the safeguarding sub-directorate within this reporting period:

- 1. Compliance with self-directed support payments.
- 2. Application of the management of the unallocated cases protocol
- 3. Children's case files analysis of placements 2013 2018 by HSCB
- 4. Think child, think parent, think family Children's and MH interface by QUB

Final analysis is awaited on all four audits which will direct future Trust actions.

The senior practitioner working in Child Sexual Exploitation (CSE) audits all cases where a young person goes missing on more than three occasions on a monthly basis. This information is shared with operational managers and staff and HSCB.

There was one case management review (CMR) notification over this reporting period and a further CMR was endorsed by the safe guarding board Northern Ireland (SBNI). The individual agency review (IAR) has been completed and the review team established. The Trust continues to monitor the implementation of Codie and Donavan CMR recommendations and implements any recommendations arising from CMR's across the region.

6. Update on HSCB Action notes 18/19 and any service delivery issues arising

The main issues arising from the action plan are:-

Unapproved placements

As highlighted in the corporate parenting report the Trust have fifty-three unapproved placements within kinship. We have devised a robust system to oversee and monitor these. Senior managers and staff have been trained on the procedure for reporting and managing these.

Young Carers

Despite streamlining processes and raising awareness, the number of referrals received for support has been disappointing. A more radical approach is required in the incoming months and will be kept under review by the Assistant Director.

Going the Extra Mile (GEM)

The number of GEM placements has decreased significantly from the previous reporting period. Joint conversations with other Trusts to take place, to review how other Trusts have grown their GEM numbers, whilst this is decreasing in the Trust.

7. Outline any areas where the Trusts is concerned about/or unable to meet delegated statutory functions

The transformation programme has been welcomed; however, this has impacted on the ability of the safeguarding sub-directorate being able to deliver core services. A number of staff have been recruited to these new initiatives and back filling positions has been difficult, if not impossible. The assistant director is representing children's services at the regional workforce review and ensuring children's social work issues are kept to the fore. We are reviewing different recruitment methods but demand currently exceeds supply and Trusts are in competition with one another. Within children's services we have developed an internal transfer procedure and this is about to be piloted. It is hoped this arrangement may help staff retention within the Trust.

Finding regulated placements continues to be a difficulty for all our children and young people. The demand for support services, respite and placements for children with a disability/complex needs continues to far exceed capacity.

The Trust has a number of unapproved placements (see above). The most significant challenge in this area is those historical cases that are not approved and will be difficult to approve due to family circumstances. The children in these placements are usually settled and well cared for by their carers. We are currently in discussions as to how we can corporately address this and ensure robust decision making and effective monitoring.

A further pressure for the service is the increase in court directed contact. Again the demand far exceeds the supply of contact workers. This results in social workers completing contact visits and limits the time for core business, resulting in a rise in unallocated in children and family teams (CAFT), as work cannot be allocated. Hopefully a positive outcome from the Department of Health (DoH) regional outline business case will see a positive impact on this.

7.1 Children's Services – Children and Young People Care Services (CYPCS)

1. Professional Line of Accountability

The Trust's Children and Young People Care Services (CYPCS) division has a defined line of professional accountability with 3 designated social work leads reporting directly to the assistant director responsible for CYPCS who reports to the Executive Director of social work.

Within the division the 3 senior managers are responsible for Fostering and Adoption Services, Residential Services and Family Centres and Specialist Residential Services and Children's Disability Homes.

2. Supervision

Supervision continues to be prioritised and undertaken in line with regional policy and procedures. Formal supervision processes are supported by reflective practice sessions facilitated by colleagues from therapeutic support services.

There has been no further audit since last reporting period and we continue to action the findings from March 2019.

In line with the findings in relation to residential service, a revised supervision model is being developed in consultation with the Trust's quality improvement and workforce team and Queen's University Belfast. The aim of the new model is to ensure reflective practice is a central aspect of on-going learning and development. Use of the model will provide a structure and framework that supports professional development and encourages evidence based practice within this dynamic environment.

The Trust aims to pilot this model with view to implementation during the next reporting report period.

Appraisals

The senior management team within the directorate monitor staff compliance with completion of appraisals and continue to implement the new appraisal conversation tool / documentation.

3. Risk Register

Placement availability is currently on the Trust directorate risk register. Across placement services there have been challenges in ensuring that appropriate placements are available for children and young people in line with their specific needs. Often this is at the point of entry to care and at specific

transition points within care. Children and young people care services continue to expand the range and availability of placements.

As a consequence of a lack of placements 1 young person is facing a delayed discharge from Iveagh children's hospital. This matter is subject to an ongoing Judicial Review as it is considered that the Trust is breaching this young person's rights under Article 8. This issue has been escalated to the regional assistant director forum and the children's services improvement board.

The Trust continues to experience increasing demand for fostering placements and diminished capacity to respond. The Trust continues to progress an action plan to promote the recruitment and support of foster carers at both a regional and local level.

4. RQIA Inspections

The RQIA carried out statutory unannounced inspections across the residential homes during the reporting period. The inspections were conducted within the four thematic areas which assess whether the care afforded to young people was safe, effective, compassionate and well led.

In this reporting period RQIA inspections have taken place across 4 homes. The focus of inspections within this period has included care, estates and medicines management.

Cuan Court Childrens Home

In February 2019 an inspection took place in Cuan Court which highlighted positive care being afforded to children and young people. In March 2019, following the inspection, whistleblowing procedures were implemented as a result of Cuan Court staff raising concerns directly with RQIA regarding management of the home and the impact on the delivery of compassionate and effective child care practices. The Trust enacted whistleblowing procedures and an independent investigation was completed. The 2 areas of concern were not upheld however there were recommendations in relation to improving team and management effectiveness. This work is being progress in partnership with the HSC Leadership Centre.

5. Audits & Reviews

Regional Reviews

Children and young people care services continue to contribute to a number of reviews and action plans arising out of regional reviews. These plans have been agreed for both residential and fostering services and set out a range of recommendations which will impact on the future service delivery in each of these areas.

Regionally the fostering heads of service, in conjunction with HSCB and the regional fostering and adoption service and marketing company ASG, have

completed a marketing and communications service evaluation. The regional interagency project board is progressing the outcomes of the service evaluation. Work is ongoing to relaunch the HSC Northern Ireland adoption and foster care service in 2019/20.

The review of regional facilities has concluded, and reform of regional facilities has commenced. An inter-departmental board has been established to take forward the recommendations.

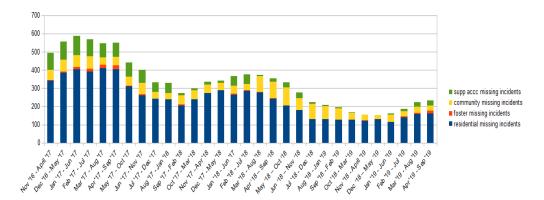
Internal Reviews

Review of Children Missing from Residential Care

The Trust has continued to track the number of young people who have gone missing either from home in the community or a care setting. The Trust's missing incidents tracker records young people reported missing three or more times at six monthly intervals and if required an additional investigation process is undertaken with a specific focus on the potential for child sexual exploitation (CSE).

April 2019 - September 2019 figures are 34% lower (120 fewer missing incidents) than the figures for the corresponding period last year. This period continues the year on year decrease in missing incidents across the Trust. The data shows a continuing positive picture overall.

The information gathered shows a considerable reduction in both the pattern and trend of young people reported missing, demonstrated in the graph below.



Children's Homes

European working time directive (EWTD)/ residential staffing models

The Trust, working through the regional children's services improvement board (CSIB), has developed the initial phase of an options appraisal to inform the future staffing model for residential care.

The Trust has finalised the completion of the regional investment proposal template in conjunction with the other Trusts and the HSCB. This has been

presented to the Department of Health with regard to the additional revenue to resource the new staffing model.

Incorporated within this proposal are projected costings required to upscale the residential staffing model across the region to a regionally consistent model. The implementation would incur an additional cost of approximately £9.5 million regionally. The Trust awaits the outcome of the pending industrial tribunal in relation to EWTD and the clarity this will bring going forward with regard to the issue of sleep-ins. The Tribunal is currently on hold to await the outcome of an external appeal of a related working time issue.

In a separate and positive development the HSCB secured an additional £2.5 million through transformation funding to support the regional residential estate in developing and implementing peripatetic support teams. The peripatetic team is now established with 3 band 5 staff, 1 band 7 senior social worker, 1 band 7 occupational therapy post and 1 band 8b clinical

psychologist. Recruitment is being concluded in relation to 2 further band 5 posts.

Audit

Social work leads continue to progress the yearly action plan across children and young people's care services. Within fostering services an audit has taken place of annual reviews which were identified as out of timescale and recommendations to improve compliance are being progressed. There has been a 48% reduction in the number of outstanding annual reviews since that previous reporting period.

Emerging Trends

Fostering

On both a regional and local level within the Trust, the availability of foster placements continues to create significant challenges in providing a range of placement choice to respond to the needs of children and young people.

Whilst recruitment activity continues and has been successful in recruiting an additional 11 new non kinship foster carers during the reporting period, there has also been the depletion of 15 carers across this period also. This turnover in the foster carer population when set against the increase demand for placement, with the increase number of children in care (n=34) over the same period, continues to highlight that the demand for placements exceeds the Trust capacity to offer placement choice and meet the needs of children in care. It is of note that the LAC population has risen by 123 since March 2018.

Consequently the Trust has experienced an increased reliance on the use of independent sector placements over the past year. There is a total number of 98 LAC in independent sector placements (an increase of 17 since March 2019) and subsequent limited capacity for the Trust to offer long term placements should these children's care plans progress to long term fostering. This has placed considerable fiscal challenges on the Trust which has been brought to the attention of the HSCB.

The Trust is actively working with the other four Trusts to develop a marketing strategy to respond to the increasing needs regionally. At a local level the Trust has actively progressed recruitment across a range of platforms.

Edge of Care Schemes

Whilst children and young people's care services acknowledge the role and remit of the safeguarding programme in actively working with families to prevent care admissions, the children and young people's care services continues to manage a range of Trust and commissioned services to support this task.

Trust Services:

Fostering Positive Family Relationships (FPFR) 13 – 16 years Step Up Step Down (SUSD) (8-12 years). Big Lottery funded project in conjunction with Fostering network.

Commissioned Services:

Extern Linx/Janus – 12-17 years Extern Time Out – 12 -17 years Barnardo's Strength to Strength – under 12 years

Accommodation for Young People aged 16+

The Trust continues to jointly commission supported accommodation placements across the Trust area.

The Trust is committed to expanding the range and scope of appropriate placements for those young people who are hard to place given the complexity of their needs in the overall population. The Trust, in collaboration with Belfast Trust, is currently exploring the development of a responsive housing solution with bespoke 24 hour wrap around support for those young people who cannot be accommodated in fostering or residential care. The Trust was instrumental in bringing forward a paper to the DoH to explore alternative placement provision. This has influenced the decision to alter the minimum standards for children homes to allow a more flexible approach to the development of alternative accommodation solutions.

William Street Childrens Home

The senior management team have drawn up proposals to reconfigure the children's residential estate with aim being to transform William Street. An options appraisal is being developed to ensure the model of William Street best meets the needs of children and young people with the overarching aim of placement stability for children in care.

6. Update on HSCB Action notes 18/19 and any service delivery issues arising

Please see updated action plan in Appendix 1.

7. Outline any areas where the Trusts is concerned about/or unable to meet delegated statutory functions

Kinship assessments

The increased number of children in care has increased the demand for kinship fostering assessments which has impacted on the fostering service's capacity to meet statutory responsibility to complete assessments within a 12 week timescale. This has been an influencing factor on the increased number of unregulated placements within the Trust.

The rising number of unregulated placements is reviewed by the Trust senior management team on a bi-monthly basis across safeguarding and children and young people care services. This issue will be considered for inclusion on the Trust risk register.

Regional Restriction of Liberty Panel

On 4th September 2019 the regional Restriction of Liberty Panel became operational. Cases are now allocated on the basis of priority need on a regional basis. The Panel fulfil the function of determining whether a young person meets the criteria for secure accommodation as well as prioritising the allocation of secure placements to those deemed to be most in need. The panel does not take into consideration the appropriateness of the secure placement in relation to the match of existing young people within the home. Consequently there is a potential for young people to be placed in secure accommodation in which they can either present or be presented with unacceptable degrees of risk. The secure facility therefore is unable to safely safeguard admissions.

8. Provide a summary of actions undertaken to adopt a Human Rights based approach in your work with service users and carers.

Children and young people's care services manage the following panels within the Trust:

Permanence Panel

The Trust has two permanence panels per month chaired by the head of service for fostering and adoption, which reviews the care plans of all children and young people in care. This process ensures that care plans are being progressed in a timely, child centered manner in line with the regional permanence policy, respecting the rights of the children and their parents.

Adoption

The Trust adoption panel is independently chaired and provides oversight of the Trust care planning processes to ensure these are compliant with the human rights of children and their parents. The Trust adoption service also convenes a pre-linking panel which matches children with prospective adoptive parents in an open and transparent process. This pre-linking panel will also make certain that the rights of both the adopters and children are upheld.

Foster care services

Since Autumn 2018, fostering panels within the Trust have been independently chaired. This promotes the rights of our kin and non-kinship carer applicants to a panel review (assessment and annual reviews) which is independent from operational line management structures. The independent chair interfaces with fostering managers regarding operational and practice issues being observed by the panel members.

Resource Panel

The resource panel is chaired by the head of service for residential care at a frequency of once per month. During the last reporting period children and young people's care services has reviewed the role and function of the resource panel. This review aims to merge pre-existing forums to ensure a single point of review in relation to resource provision to support children and families on the edge of care and those transitioning within care. This will be implemented with the next review period.

16+ Panel

The 16+ Panel is chaired by the head of service for residential care at a frequency of once per month. This panel considers and prioritises referrals of young people aged 16+ who are transitioning from care and in need of supported accommodation. The panel is attended by representatives from the accommodation providers.

Family Centre Panel

In line with the review of family centre services a single point of entry has been operational throughout the review period. Through the amalgamation of 3 preexisting referral mechanisms the Trust is launching one streamlined multidisciplinary panel process. This panel will intersect across and within services to manage access to assessment services, tracking allocated cases to ensure timeliness and reduce delay for children and families.

SECTION 2

HSCB Action Notes

South Eastern HSC Trust Delegated Statutory Functions Monitoring

Actions to be taken forward 1st April 2019 – 31st March 2020

REGIONAL DSF ISSUES 2018/19 REPORTING

Date	Issue / Action / Outcome	To be actioned by:	Date completed
June 2017	Domestic Violence (Childrens PoC)		
	Issue This is linked to the inter departmental work being taken forward to implement the regional strategy. Trusts are experiencing pressure in responding to this issue and as a priority have indicated the task of a perpetrator programme.		
	Action June 2017 - Issue being addressed at DoH level. Martin has already met with DoH officials. He has addressed at CSIB and will place on the agenda at the AD forum. Domestic violence and the lack of regional resources especially in relation to non-adjudicated perpetrators remains an issue. There is a direct link between DV and referrals to Trusts with implications re names on the CP Reg. and LAC numbers.		
	Update January 2018 - Lack of resources re domestic violence (and sexual violence) continue to be highlighted as a significant regional need. Concerns to be raised with DoH Work continues on implementation of the regional strategy. Reference made to work of local Domestic and Sexual Violence Partnership		

Date	Issue / Action / Outcome	To be actioned by:	Date completed
	 Update June 2018 - Initial discussion has taken place between HSCB and PBNI about providing service to non-adjudicated alleged perpetrators. A proposal has been developed jointly by the HSCT's in partnership with Marcella Leonard to train and support staff to complete risk assessments and interventions with alleged perpetrators of DV&SV. This proposal will be presented to the AD's Safeguarding group on the 7.11.18 Update January 2019 – This issue was discussed within the AD forum and additional non recurrent funding has been provided to train 3 staff from each HSCT in Domestic and sexual violence risk assessment and interventions. The training is ongoing and will be completed in December 2019 		
	Update June 2019 – It is acknowledged there are significant constraints in taking forward the Regional Domestic Violence Strategy. This needs to be driven jointly by the DoJ and the DoH.	Martin Quinn	
June 2017	Children with complex needs, including placement options and domiciliary care		
	Issue Trusts report continuing concerns about the range of services including availability of domiciliary care options and placements available for children with complex healthcare needs and children with complex needs and challenging behaviours particularly younger children. The latter is currently under review.		
	Action June 2017 - A regional workshop was held on the 15th June 2018 under the auspices of CSIB. The objective is to undertake a wider service review process in line with other Service Reviews currently ongoing across children's services.		
	Update January 2018 - Demand for services continues to increase in excess of availability. This		

Date	Issue / Action / Outcome	To be actioned by:	Date completed
	 is compounded by complexity of need with all HSC Trusts highlighting problems in identifying suitable community placements to safely manage forensic / challenging behaviour with Learning Disability patients. Work re domiciliary care is being taken forward by the regional Providing Community Care Group. Review of services to commence/continue. Interfacing with wider LAC issues as appropriate. Update June 2018 - Following Workshop a draft Strategic Plan has been developed. Kieran McShane has presented this to the ADs Forum who have requested further clarification. Once approved this will go to CSIB for ratification. Update January 2019 - Following the issues which have arisen in Muckamore the DoH has written to each Trust in relation to discharge planning for children within Iveagh. This matter is also being discussed through CSIB. Issue is not solely confined to Iveagh. There are cumulative pressures across Trusts in relation to placements for children with a disability. There is ongoing work in relation to the contract currently provided by Children's Hospice and the need to ensure community services and placements including Hospice at Home enhancement. Update June 2019 - The issue of alignment with the appropriate programme of care and the funding lines associated continues to be a significant challenge. There needs to be clarity in regard to the determination that children with disability are children first and all the statutory functions pertaining to children apply. The issue of placements is further complicated by the ongoing reviews in respect of Muckamore, including Iveagh and Glencraig. HSCB and the Trusts to work collaboratively to develop a strategic plan for children with a disability. 	Board & Trusts	

Date	Issue / Action / Outcome	To be actioned by:	Date completed
June 2018	Placement availability for LAC		
	Issue All Trusts report extreme difficulty in terms of placement sufficiency for LAC. Issues exist across fostering, residential, 16 plus and children with a disability.		
	Action June 2018 - Work continues in relation to Trust endeavours to recruit and develop a range of placements types to meet the needs of LAC entering and leaving the care system.		
	 In collaboration the HSCB/Trusts are working:- with an Independent Marketing Company to review systems and process and to inform medium to longer term recruitment endeavours in relation to foster care; to develop a regionally consistent model of Resource Panel in each Trust to identify possible safe alternative/ resources to care; review ECR referrals and identify if/how need may be met within the jurisdiction 		
	Update January 2019 - The increasing needs of children entering and within the system have been highlighted by the Review of Regional Facilities and the Reviews of mainstream residential care and fostering work ongoing to respect of children with disabilities / complex health needs. There is no evidence to suggest children are being inappropriately admitted to care. The relationship between domestic and sexual violence and admission to care is underscored.		
	Concerns to be raised with the DoH. HSCB to place on the agenda of CSIB. Regional Recruitment – work undertaken by ASG now complete. Development of regional recruitment strategy and utilisation of IPT funding has commenced. ECR Review ongoing.		
		Board &	

Date	Issue / Action / Outcome	To be actioned by:	Date completed
	 Update June 2019 - Issues raised in terms of sufficiency of placements pertains across foster care, residential, children with disabilities, 16+ etc. The complex needs of many of these children/young people has increased across all areas adding to service pressures. Regarding children with a disability, it was noted that SHSCT had developed a model regarding children with disabilities i.e. Bluebell Residential Unit, and further details will be shared with HSCB. The Trust has worked collaboratively with RQIA in the development of this. However while this has proved positive for those children availing of this model of care unmet need remains. Work to continue as per the transformation agenda. This includes the regional recruitment strategy in relation to foster carers and the specialist foster care initiative. Outcomes of the ECR Review to be taken forward and the development of the recommendations of the regional residential review. 	Trusts	
June 2019	Lack of investment in CAMHS & Children's Disability Services		
	Issue Impact of the lack of investment in service delivery. Action June 2019 – It is acknowledged that there has been no significant investment in CAMHS or children with disabilities services for some years. The lack of resources was highlighted and the need for significant investment in both areas is required urgently. Interdepartmental Group to take forward work in relation to the NICCY Report. Development of Emotional Health and Well Being support services.	Board, ADs for CAMHS & ADs for LD	

Date	Issue / Action / Outcome	To be actioned by:	Date completed
June 2019	Transitions to Adult services for children with SEN		
	Issue Impact of the new legislation on existing strained services?		
	Action June 2019 – SHSCT confirmed they have a transition services in both children and adults. The new legislation has implications with regard to the new statutory duty for transition planning between Education and HSC across PoCs. NHSCT have appointed 4 Senior Social Work Practitioners whose remit is to manage transition from Children to Adult Services. They also have a working group looking at transitions with CAMHS and Autism to Adult services. They are giving consideration to setting up transition panels.	Board & Trusts	
	 WHST advised that their transitions between children with disabilities into adult services works well, there are however challenges in the areas of Autism and CAMHS. Development of transitions will form part of the Strategic Plan for children with a disability as noted above. The interface 8A posts appointed under the transformational funds will continue to review current processes and report back their analysis and outcomes. 		
June 2019	Unallocated cases		
	Issue Rise in the number of unallocated cases across the region.		
	Action June 2019 – Business case being prepared for submission to DoH in the hope of additional	Board &	

Date	Issue / Action / Outcome	To be actioned by:	Date completed
	support to the management of unallocated cases across all children's teams. All Trusts report a direct link between workforce issues i.e. the recruitment and retention of staff and complexity of referrals and unallocated cases.	Trusts	
June 2018	Additional support to address unallocated cases will also encompass children with disability. Workforce Issues across all programmes of care		
	Issue Trusts are experiencing significant challenges in terms of recruiting and retaining staff		
	 Action June 2018 - This matter has been raised by Directors at the recent quarterly meeting with Mr Sean Holland. Difficulties exist across the spectrum of children's programmes i.e. Gateway, Safeguarding and Family Support, Looked after Children's Teams and more recently fostering. Trusts are experiencing a high level of sickness. Funding via Transformation monies while welcome may give way to further challenges. To be raised with DoH. Update December 2018 - Trust advise staffing issues are critical – these include sickness and absenteeism plus recruitment and retention. Position exacerbated by opportunities provided by Transformational funding. Update June 2019 – Significant and untenable pressures across all programmes of care was noted in relation to recruitment and retention of staff. These includes a number of factors; demographics; impact of transformational posts; recruitment to MDT in Primary Care; Delays in HR/BSO systems; difficult recruitment to Band 7 posts, cross border salary. The DoH, Board and Trusts are working collaboratively to develop a workforce strategy. 	DoH, NISCC, Board & Trusts	

Date	Issue / Action / Outcome	To be actioned by:	Date completed
June 2019	Domiciliary Care		
	Issue All reports note significant challenges in accessing timely and appropriate care packages for adults. How are Trusts managing waiting lists/unallocated cases within domiciliary care services?Action June 2019 – Pressures in this area were acknowledged across all Trusts who continue to balance resources with service pressures. Each Trust to provide written detail of how they are managing these pressures as part of their interim report. HSCB to progress work on the proposed model and to follow up on prototype work being undertaken by Trusts.Updated September 2019 – update provided within primary care and older people report.	Board & Trusts	
June 2019	Care Homes		
-	Issue All reports note challenges in securing placements within care homes, with the regional rate cited as only one of many causal factors. The impact of planned as well as unforeseen closures is noted. How are Trusts ensuring that a person-centred compassionate response to individual residents in these circumstances is being maintained at a time of significant organisational and institutional transition?		
	Action June 2019	Board & Trusts	June 2019

Date	Issue / Action / Outcome	To be actioned by:	Date completed
	Issue being addressed through the AD Forum group and oversight received from the Providing Community Care Directors' Group. There is a Regional Contingency Group designing a system-wide response.		
June 2019	Mental Capacity Act / Deprivation of Liberty		
	Issue HSC Trusts are required to develop the infrastructure to support Trust Panels for Deprivation of Liberty in line with the requirements of the Mental Capacity Act (to be enacted October 2019). The HSCB will work with the Trusts to ensure that these are regionally consistent and compliant with the requirements of the new legislation. Action June 2019 – DoH have indicated that Depravation of Liberty measures from the Mental Capacity Act Northern Ireland (2016) will be enacted from 01/10/19. HSCB will be leading on a cross programme initiative to support HSC Trusts to develop processes and infrastructure to implement new legal requirements in a regionally consistent way. HSC Trusts will review an IPT with funding to implement DoLs arrangements over within the next few weeks. DoH have commissioned training form the Clinical Education Centre and HSC Trusts for nomination for seconded places to complete Train the Trainers programme so that they can continue to deliver training in house post implementation	DoH, Board & Trusts	

LOCAL ISSUES

	FAMILY & CHILD CARE		
Date	Issue / Action / Outcome	To be actioned by:	Date completed
June 2017	Detention under Mental Health Order		
	Issue Nos detained under Mental Health Order (11) Trust to clarify nos pertaining to relevant facilities as figures same as BHSCT return		
	 Action June 2017 - Trust confirmed data was correct. HSCB said this required further discussion and a deeper understanding. HSCB is particularly interested in relation to individual cases where CLC are pursuing alternatives to detention. Trust to carry out a piece of work in this area in conjunction with BHSCT as it is noted that the volume of MH Order Detentions are within BHSCT and SEHSCT which coincides with the location of the particular facilities concerned. Billy Hughes, Head of CAMHS has undertaken a review and will report back through the CAMHS interface meeting. Trust to share report. 		
	Update January 2018 – Discussion with Beechcroft to take place to clarify the situation Update June 2018 -Report to be requested from Beechcroft Update January 2019 – Report not yet received Update June 2019 – To be taken forward through the CAMHS interface meetings.	Board / Trust	June 2019

Date	Issue / Action / Outcome	To be actioned by:	Date completed
June 2018	Young Carers		
	 Issue Low level of uptake re assessment and support Action June 2018 - Increase in numbers noted from last year. Monitoring to continue. Continued increase in number of young carers being identified through focused efforts by team leaders. Update January 2019 – Board will continue to monitor the returns provided through the Young Carers projects in relation to activity and will relate to the returns provided by the Trust to ensure consistency. Update June 2019 – see figures on (i) page 436 (Childrens services poc – 42 assessments) (ii) page 414 (Adult LD – 8 assessments) (iii) page 386 (MH – 6 assessments) There is a significant variation in these figures and those reported under the Young Carers contract held by HSCB. Work is ongoing within the Trusts to promote this. Update September 2019 – A review meeting is planned with Action for Children and the Trust's carer implementation officer to address this issue. 	Board / Trust	June 2019

FAMILY & CHILD CARE			
Date	Issue / Action / Outcome	To be actioned by:	Date completed
June 2018	Reporting of Untoward Events including Unregulated Placements		
	Issue Quality and accuracy of data		
	 Action June 2018 - Low level of report re Glencraig, and mainstream Residential Facilities compared to number of assaults etc. Also Unregulated accommodation 16 plus to include notification re Joint Accommodation. Trust to ensure data correct and all notifications provided to the HSCB. All U/E notifications to be forwarded to the HSCB via relevant AD as had been agreed at previous DSF meeting but reports now coming from a number of sources and initial focus on governance should remain with ADs who will forward in line with other processes. Update November 2018 – Trust to address the following issues: 56 unregulated kinship placements were referred to in the report but the formal notifications from the Trust were much lower. An SAI in Glencraig has not come through to HSCB. SAIs coming through from staff directly without screening from Managers as previously agreed. 		
	 Issues coming through as Untoward Events when they should actually be categorised as SAIs. Update June 2019 – Review re Glencraig now being undertaken by Colm McCafferty, SHSCT. The Trust report states there are 61 unregulated placements within fostering services. These have not been notified to the HSCB as required. Linda McConnell agreed to undertake an update on unregulated placements not yet forwarded to 	Trust to forward update by 31.8.19	27.8.19

	FAMILY & CHILD CARE			
Date	Issue / Action / Outcome	To be actioned by:	Date completed	
	HSCB Update August 2019 - This is work in progress. Fostering Services and Safeguarding have quantified the number of historical unregulated placements which require notification and developed a spreadsheet for SM and AD monitoring and review. Unregulated/Unapproved is addressed monthly at SM meeting. A new procedure has been developed within Trust where AD approval is sought to continue with Kinship assessment at 12 week period. Awareness raising has taken place with all SM's and staff are being trained via sector forums of the new process. This is a lengthy process. New unapproved cases are being notified to HSCB as soon as they become unapproved.			
June 2019	Children's Home			
	 Issue HSCB notes that Cuan Court Children's Home has been referred to RQIA regarding management of the Home. This requires further discussion and clarification. Action June 2019 – Following an inspection by RQIA concerns were made by a whistleblower to RQIA. 16 areas of concern were set out. Maurice Largey explained that following a meeting he felt that they had rebutted 15 of the 16 of these concerns. However feedback from RQIA does not entirely support that assumption. An Independent Review was to be undertaken – this was carried out by SEHSCT staff. Feedback to RQIA is overdue but Bria Mongan plans to meet with RQIA to discuss this. It is important that this is resolved including the differing perceptions and that the HSCB is notified of the outcome. 	Trust to forward report to RQIA. HSCB to be notified of outcome		

	FAMILY & CHILD CARE		
Date	Issue / Action / Outcome	To be actioned by:	Date completed
	Updated September 2019 – An independent investigation has been completed. Recommendations in relation to improving team and management effectiveness are being progressed in partnership with the HSC Leadership Centre and the Trust.		
June 2019	Residential Care		
	 Issue Development of Peripatetic Support Team – HSCB note difficulties with recruitment. Further update required. HSCB notes inconsistency in reporting of Untoward Events – Trust to provide an assurance re consistency of approach. Children placed in non statutory placements – Trust to provide explanation. Use of Residential Care - Trust have 587 Looked After Children which is second lowest figure regionally, yet have the second highest number of children in residential care (47). Four Residential Care Trust facilities continue to operate at 8 beds while other Trusts have reduced capacity. This seems contrary to TYC and the aim to reduce the reliance on residential care? Please explain. 		
	 Action June 2019 - (i) The 8b Psychologist has been appointed and four Band 5 posts have now been offered through BSO. The Band 7 post is just out for recruitment. Given the need to report back to the DoH, the deadline for response is tomorrow (25th June) so SEHSCT need to formally report to the HSCB with the most updated information by tomorrow. 	Trust to respond to HSCB by 25.6.19	August 2019

	FAMILY & CHILD CARE			
Date	Issue / Action / Outcome	To be actioned by:	Date completed	
	 Update August 2019 – Band 8b Psychologist (job share) in post 1x band 5 is in post 2x band 5 start dates 27.08.19 2x band 5 in recruitment process (1 who was offered post declined to take up) 1x band 7 recruitment - successful applicant has accepted post and working notice period (ii) Part of this issue relates to a lack of reporting on unregulated placements in supported accommodation. This will be addressed by the Trust. Update September 2019 – Internal processes are under review to ensure that reporting systems are robust. 		June 2019	
	(iii) In relation to placements the HSCB had noted that 8 children were placed in Voluntary Units and had asked for explanation of this. The Trust confirmed that these were the children in supported accommodation. In relation to the 4 children placed in Private Un under ECRs the HSCB had also asked for clarification regarding these. It was confirmed that these children were placed in Ashdale and Fresh Start.	its	June 2019	
	(iv) Maurice Largey made the point that they have to deal with their existing Residential estate but that they have put a submission into the DoH to replace this. They have also done individual business cases as appropriate properties become available. However was accepted that this involves significant amounts of revenue.			

	FAMILY & CHILD CARE		
Date	Issue / Action / Outcome	To be actioned by:	Date completed
June 2019	Workforce issues impacting on statutory visits and supervision		
	Issue Trust reports 58 overdue reviews compared to 18 previously. Please provide an explanation.		
	Action June 2019 - These relate to Fostering Reviews [Point 10.5.4]. As a result of the backlog, the Fostering Manager is trying to prioritise these reviews and staff have been offered overtime to try and undertake these reviews. To be discussed at local meetings. Update	Board & Trust to review & update November 2019	
	September 2019 - Over the past six months the fostering service has progressed an action plan to reduce the number of outstanding annual reviews. This has been successful with the number of outstanding annual reviews being reduced from fifty-eight to twenty-six across the fostering service. A breakdown is provided within 10.5.4	Board & Trust to review & update November	
	It was also noted that workforce issues have also impacted on the provision of Supervision [Point 7.2] A recent Audit indicated only 47% adherence to supervision arrangements as opposed to 100% achieved last year. The Trust indicated dissatisfaction with the existing Regional Policy on Supervision. Their approach is to now address this systemically to try and ensure that supervision is used for reflective practice only and not for other ancillary issues e.g. caseload weighting. The Trust hopes that by re designing the supervision process this will address the lower level of adherence. To be discussed at mid point.	2019 Board & Trust to review & update November	

	FAMILY & CHILD CARE		
Date	Issue / Action / Outcome	To be actioned by:	Date completed
	A workforce review is currently being undertaken as outlined under regional issues.	2019	
	 Update September 2019 – Supervision Framework has been developed in consultation with Trust therapeutic services to ensure reflective practice is a central aspect of on-going learning and development. The Trust aims to implement this model during the next reporting report period. As another relevant issue to workforce, the Trust has changed it's structural arrangements. There are now generic teams dealing with all child care issues. Given the span of responsibility which falls within 1 ADs remit this current configuration is being considered internally. Update September 2019 – A meeting is scheduled for 11th November to review Trust internal structures. 		
June 2019	Early Years Inspection Backlog		
	Issue Trust acknowledge this backlog and have indicated a plan in place to address. Update required.		
	Action June 2019 - Jason White indicated that previous arrangements re annual Inspections have been revised. To date this is having some impact in reducing the backlog. Jason indicated that there	Board & Trust	

Date	Issue / Action / Outcome	To be actioned by:	Date completed
	was some discussion with Una Lernihan HSCB about the nature of the current Inspection regime as the Trust would want to see some changes. While it was accepted that this discussion may be timely, there was a reminder that the current statutory arrangements remain and should be adhered to.		
	Reference was also made to the fact that there has to be particular arrangements for the professional supervision of the Early Years Manager as Jason is unable to provide this as a non Social Worker. He undertakes the managerial role. This professional oversight and support role is fulfilled by Linda McConnell. Marie Roulston sought assurance from Linda that this was satisfactory from her perspective. She has only been in post for a short time but felt that this was working. To be followed up at local meetings.		
	September 2019 - This is primarily due to the deficit of two social workers for five months during this reporting period. The other reason which may account for a number of these is due to the new inspection cycle introduced this year, which as reported on previously (March 2019), has meant that some inspections will be later in the inspection year. It is anticipated that the impact of the new inspection cycle will be significantly reduced by the next reporting period, as we will be entering into the second year of the new cycle by then.		
June 2019	GEM number of LAC in foster care		
	Issue Number of LAC in foster care moving into GEM continues to be low – how does the Trust intend to address this?		

FAMILY & CHILD CARE					
Date	Issue / Action / Outcome	To be actioned by:	Date completed		
	 Action June 2019 - Linda McConnell is aware that SEHSCT has a much lower number of GEM placements than other Trusts and is trying to address this by identifying 17+ children and how they can be sustained. However she indicated that she is also mindful of the impact that this may have on reducing potential placement space for other children. To be discussed at local meetings. Update September 2019 – Benchmarking with other Trusts to take place, to review how best practice in regards to GEM. 	Trust			
June 2019	Adoption				
	Issue 7 children received a best interests decision and not placed 1+ years on. Trust to provide further details.				
	Action June 2019 - Maurice Largey indicated that three of these cases were in concurrent placements and adoption assessments were now being undertaken. One child remains in foster care and the other three children were registered with ARIS but unfortunately without success. As a result they will be returned to the Panel to rescind the original best interest decision.		June 2019		

	MENTAL HEALTH					
Date	Issue / Action / Outcome	To be actioned by:	Date completed			
June 2019	Team Leader Posts in Mental Health					
	Issue The Trust indicates that the difficulty in attracting social workers to Band 7 team leader posts is having a direct impact on professional supervisor. What action is the Trust taking to address the frequency issue in supervision?					
	Action June 2019 - SEHSCT state the view that this is a regional issue and the team leader job description is under review. The Trust thinks the banding is not attractive and would suggest providing additional financial reward and change in banding.	Board / Trust	June 2019			
June 2109	Care Management Reviews					
	Issue SEHSCT indicate that they were unable to review care packages as required (p219 1.4a / 1.4b). What action is the Trust planning to take to address this?					
	Update 10/06/19 - The SET are looking at a permanent team for all persons placed in Nursing and residential care. It is estimated that this will equate to 1wte for AMH. The care manager role is also being reviewed and will be more integrated with the CMHT's. The role will be described as a keyworker role. Annual reviews are now recorded on a excel sheet which is overseen by the Team leader and service manager to ensure compliance with annual review as a min standard.					

	MENTAL HEALTH					
Date	Issue / Action / Outcome	To be actioned by:	Date completed			
	Action June 2019 - Trust acknowledged that outstanding reviews were due to workforce concerns. System is now in place to ensure accurate recording of completed reviews and flagging up any due or outstanding. The Trust has utilised agency and bank staff to clear back log.	Trust	June 2019			
June 2019	Approved SW in Prison Settings					
	Issue SEHSCT indicate that they have responded to requests for assessments within prison settings. Normally an HSC Trust cannot detain someone who is already in legal custody, and requirement for inpatient treatment for prisons should be facilitated under Part III of the Mental Health Order. Please can the Trust confirm their ASW response in prison settings is in accordance with the legislation?					
	Action June 2019 - Trust noted concern and clarified this was in relation to one service user at Hydebank college. The service user was going to court to be discharged and there were concerns of his welfare at this point. Trust confirmed that they did not complete assessment within the prison but followed up on his discharge from prison.	Trust	June 2019			

MENTAL HEALTH					
Date	Issue / Action / Outcome	To be actioned by:	Date completed		
June 2019	ASW Standard - Report Within 5 Working Days				
	Issue On Page 228 section 9.3a SEHSCT indicate that 57 (17%) of ASW reports were not completed within the 5 working days. Can the Trust advise how they are addressing this?				
	Action June 2019 - Trust to clarify this number. Trust noted that delays can occur due to sick leave or part time workers who are not in the office the next day. RQIA only require form to confirm assessment is completed. They do not require a copy of the ASW report. Trust noted that request for applications has increased and this may be attributed to new GPs in post who sometimes contact for consultation purposes.	Trust	June 2019		

LEARNING DISABILITY					
Date	Issue / Action / Outcome	To be actioned by:	Date completed		
June 2019	Short Breaks				
	Issue SEHSCT note the absence of a Shared Lives service in their area is limiting their capacity to provide Short Breaks. Please can the Trust advise what they are doing in the short term to improve the availability of short breaks generally while they participate in regional work to develop a Shared Lives scheme.				
	Action June 2019 - Trust confirmed that there are no concerns and that short breaks are offered to service users and carers. Trust is currently scoping the range of short breaks available. To be further discussed at mid point.	Trust			
	Update September 2019 - The development of a Shared Lives model within Adult Services, South Eastern Trust remains a priority. A Business Case will be prepared for consideration by the HSCB based on the work completed by the Transformation Project and the SET scoping exercise, by December 2019.				
	There are no concerns that short breaks are not being offered in the interim period.				
	A Regional paper on the use of short breaks has been developed and the draft is currently out for consultation with key staff. A further meeting has been arranged for 21 st November 2019				

	LEARNING DISABILITY					
Date	Issue / Action / Outcome	To be actioned by:	Date completed			
June 2019	Crisis Response to people with a Learning Disability					
	Issue SEHSCT indicate absence of a Community Based Assessment & Treatment 'Unit' is compromising their ability to provide appropriate response to crisis situations in the community. What steps is the Trust taking to address this issue?					
	Action June 2019 - Trust advised that their Intensive Support Service has gone from strength to strength. This supports the behavioural management of challenging behaviour in community settings. They have a dedicated social worker in post to support discharge.	Trust	June 2019			
June 2019	Monthly Monitoring of Regulated Services					
	Issue SEHSCT report a reduction from 95% to 87% compliance for monthly monitoring of regulated services and have developed an action plan to address this. Where is Trust with respect to reaching compliance with monthly monitoring?					
	Action June 2019 - Trust advised that this is in relation to their supported living facilities. They have actions in place which is addressing this. Outcome is being shared with older people services.	Trust	June 2019			

	LEARNING DISABILITY					
Date	Issue / Action / Outcome	To be actioned by:	Date completed			
June 2019	Referrals to the Office of Care an Protection					
	Issue SEHSCT indicate that the Adult Learning Disability Programme did not make any referrals to the Office of Care and Protection during 2018/19 (P259 MHO 9.9) Can the Trust provide assurance that all relevant Adult Learning Disability staff are aware of their duties under Article 107 of the Mental Health (1986) Order, and that the Trust is with requirements?					
	Action June 2019 – Trust to clarify return. A new system is in place to collate this return and requires additional work.	Trust to confirm figure by 31.7.19				
	Update August 2019 – Trust confirm that there have been 8 referrals to OCP and SW teams are aware of the process		August 2019			

ADULT SAFEGUARDING					
Date	Issue / Action / Outcome	To be actioned by:	Date completed		
June 2019	Issue What are the Trust's plans and timescales for the proposed move to a single Adult Protection Gateway team?				
	Action June 2019 - Trust advised workforce issues have been challenging. Their priority in this reporting period is to stabilise the team which has been small in numbers, however this is now increasing. Trust advised it is difficult to recruit Band 7 posts. In addition there are a high number of duty calls which require response and impacts on capacity within the team. To be discussed at local meetings.	Trust			
	Update October 2019 - The Adult Protection Team was established in October 2017. Over the past year the team has experienced staff shortages. New DAPOs are starting between November 2019 and January 2020. Recruitment is also in progress for Investigating Officers.				
	Due to inescapable pressures around Nursing Home Governance two Adult Safeguarding Nurses (Band 7) in the Permanent Placement Team are progressing in recruitment.				

_	OLDER PEOPLE		
Date	Issue / Action / Outcome	To be actioned by:	Date completed
June 2019	Hospital Social Work		
	Issue SEHSCT report relates that "Social work staff rotate on a yearly basis between hospital and intermediate care services." Can the Trust please outline how staff covering childcare and mental health cases, keep up-to-date with training requirements, policy development etc.		
	Action June 2019 - Trust confirmed that maternity and children social workers do not rotate as these are recognised as specialist areas. Hospital and intermediate workers have joint team meetings and training. These services have strong links and outcome has demonstrated they now have a better and mutual understanding of work roles.	Trust	June 2019
	Update October 2019 - Following liaison with the assistant director for safeguarding children it was agreed that the hospital staff covering children's and maternity wards will attend safeguarding community social work forums and will make use of relevant training opportunities.		
June 2019			
	Issue A 7 day service has been introduced to Lagan Valley Hospital. Can the Trust provide an update on progress?		

	OLDER PEOPLE, PHYSICAL DISABILITY & SENSORY IMPAIRMENT POC – OLDER PEOPLE					
Date	Issue / Action / Outcome	To be actioned by:	Date completed			
	 Action June 2019 – This was introduced in December and Trust continues to review its effectiveness. Saturday working is ongoing but can be increased to Sunday when required. To review at local meeting. Update October 2019 - Monitoring of six day working at Lagan Valley Hospital is ongoing. 1.0wte social worker provides cover on Saturday dealing with restarts of care packages, commencing the discharge planning for patients who have reached medical optimisation, case finding on the wards and attending pressure meetings. Current activity would not warrant a move to 7 day working at the present time, however, this will be kept under review. 	Trust to provide update Nov 2019				

Date	Issue / Action / O	utcome							To be actioned by:	Date completed
June 2019										
	Issue									
	In relation to data are not reflective explanation for th	of the oth								
		Blind	Partially Sighted	Deaf with Speech	Deaf without Speech	Hard of Hearing	Deaf/Blind			
	South Eastern	621	1422	57	46	658	261			
	Belfast	769	400	199	139	2536	112			
	Southern	585	320	127	109	2432	95			
	Northern	899	818	164	204	3699	209			
	Western	421	331	135	123	3245	236			
	<i>Action</i> June 2019 – Trust Partially sighted fig Trust does not dor other Trusts.	jures are h	nigher as they	record the	low vision	data which	other Trusts	may not.		June 2019

D /	PHYSICAL DISABILITY & SENSORY IMPAIRMENT	- ·							
Date	Issue / Action / Outcome	To be actioned by:	Date completed						
June 2019									
	Issue There are 4881 adults in receipt of a social work/social care. This figure is significantly higher than other Trusts (e.g. Belfast: 1701, Northern: 1156, Southern: 1352 and Western: 1200). Can the Trust provide an explanation for this? Action June 2019 – Trust confirmed this figure was not correct and will provide new return. Update provided by Trust (amended figure 1,238)	Trust	June 2019						
	Issue The Trust has noted the benefits for service users utilising the assisted technology within Meadowvale supported living unit. One apartment has now been converted into a fully environmental controlled system and will be a prototype for future developments. It would be interesting to learn more details about this?								
	Action June 2019 – Trust shared evaluation of the scheme. Noted that service users require additional support to fully utilise the technology available to them.		June 2019						

SECTION 3

Corporate Parenting

1st April 2019 – 30th September 2019

10.1.1

10.1 CHILDREN IN NEED

How many Children in Need are there in your area as at 30th Children September? (exclude children on the caseloads of statutory In Need mental health services) 30.9.19

<1 1-4 5-11 12-15 16+ Total F F F Μ F Μ F Μ F Μ Μ Μ

Children	81	63	392	325	838	628	450	392	192	171	1953	1579
TOTAL	81	63	392	325	838	628	450	392	192	171	1953	1579

The number of children in need within the Trust is 3532. This is a slight reduction from 3598 at 31st March 2019. There are a combination of factors that explain this trend which have been highlighted in the previous corporate parenting report.

10.1.2	Ethnic Origin of Children in Need	Children
		in Need
		30.9.19

Ethnicity	<	1	1 - 4		5 -	11	12	-15	10	ô+	То	tal	
Ethnicity	м	F	М	F	М	F	М	F	М	F	м	F	Total
White	53	46	223	202	593	433	340	305	154	127	1363	1113	2476
Chinese	0	0	1	0	2	1	2	0	0	0	5	1	6
Irish Traveller	1	0	1	1	2	3	1	1	0	0	5	5	10
Roma Traveller	0	0	1	0	0	0	0	2	0	0	1	2	3
Indian	0	0	0	0	1	0	1	0	0	0	2	0	2
Pakistani	0	0	0	0	0	1	0	0	0	0	0	1	1
Bangladeshi	0	0	1	0	2	0	2	1	1	1	6	2	8
Black Caribbean	0	0	0	0	0	0	0	0	0	0	0	0	0

Black African		0	0	0	1		2	1	0		0	0	0		2	2	
			_									_					
Black Other		0	0	0	0		0	1	0		0	1	1		1	2	
Mixed Ethnic Group		3	0	9	7		6	12	3		4	1	1		22	24	1
Any Other Ethnic Group		0	0	1	2		5	5	3		1	3	5		12	13	
Not Stated		24	17	155	112	22	25 1	71	98	7	78	32	36	5	34	414	9
TOTAL		81	63	392	325	83	88 6	28	450	39	92 1	92	171	19	53 1	579	35
10.1.3 Religion of Children in Need Children in Need 30.9.19																	
Religion	<	:1	1	- 4		5 - ⁻	11	12	- 15	;	10	ô+	. т		tal		
liengien	М	F	м	F	N	Λ	F	М	F	:	М	F		Μ	F	Т	otal
Roman Catholic	16	9	73	73	3 20	01	160	137	12	2	66	55	4	93	419	9	12
Presbyterian	12	5	23	25	5 7	9	55	44	37	7	25	18	1	83	140	3	23
Church of Ireland	2	4	21	17	7 5	4	34	37	27	7	12	18	1	26	100	2	26
Church of England	0	0	1	1	6	6	7	0	1		0	1		7	10	1	17
Methodist	0	0	4	2	4	4	12	3	4		2	4	1	13	22	3	85
Other Christian	10	13	40	42	2 10	03	64	53	53	3	27	12	2	33	184	4	17
Jewish	0	0	0	0	()	0	0	0)	0	0		0	0		0
Muslim	0	0	1	1	-	7	4	3	1		2	6	1	13	12	2	25
Other	0	0	7	9	1	3	10	4	3	5	5	1	2	29	23	Ę	52
Not Known	29	23	181	13	6 3 ⁻	16	228	139	12	3	45	47	7	10	557	12	267
Not Completed	0	0	0	0	()	0	0	0)	0	0		0	0		0
None	12	9	41	19	9 5	4	53	30	2	1	8	9	1	45	111	2	56
Refused	0	0	0	0		1	1	0	0		0	0		1	1		2
TOTAL	81	63	392	32	5 83	38	628	450	39	2	192	171	19	953	1579	35	532

10.1.4	Ass	essment of	dren have be Need durir tember 201	ng the		for an ing period i.	e. 1st	Ne	Children in Need 30.9.19			
		<1	1-4	5-1	11	12-15	16	ô+	Total			
Number of Ch Referred	ildren	174	442	81	4	477	17	74	2081			
	(b) What was the source of referral for children referred for assessment of need during the reporting period i.e. 1st April – 30 th September 2019?											
	Referral Source/Agent No of Children											
	Police					541						
	Social	Worker				304						
	Out of	Hrs Co-ord				4						
	Relativ	е				128						
	Teache	er				170						
	Anonyr	nous				105						
	-	al Social Wo	orker			29						
	GP					59						
		al Nurse				158						
	Health	Visitor				49						
	Court					10						
	Probati	ion Officer				42						
	Vol. Or	ganisation				32						
	Self					81						
	Comm	unity Psych	. Nurse			36						

NSPC	CC			8					
NIHE				12					
Comr	n. Mental H/C Nurs	se		0					
Educa	ation Welfare Offic	er		17					
Other	S								
Total			2	2081					
Need a	any children are cu t period end by len ng disability as at 3	gth of wait (unallocated c		Children in Need 30.9.1				
Category	Type of Referral	1/2 weeks over (>20 working days <=30 working days) (WEEKS 5 and 6)	3/4 weeks over (>30 working days <=40 working days) (WEEKS 7and 8)	5 weeks + over (40 + working days) (WEEK 9+)	Total Unallocated > 20 working days				
	Child Protection	0	0	0	0				
Gateway	Family Support	3	0	1	4				
	Disability	0	0	0	0				
Family	Child Protection	0	0	0	0				
Family Support/Family Intervention Team	Family Support	12	8	63	83				
	Disability	0	0	0	0				
	Child Protection	0	0	0	0				
Disability	Family Support	3	6	37	46				
	Disability	0	0	0	0				

	Child Protection	0	0	0	0
Total	Family Support	18	14	101	133
	Disability	0	0	0	0
		18	14	101	133

There continues to be a number of unallocated cases (133) within the service. This figure is a slight decrease from the previous reporting period (151). Auditing of unallocated cases within child and family teams continues, and Signs of Safety harm matrix is being used to assess unallocated cases. The evidence from these indicates that consistent thresholding is being applied within Gateway teams and cases that are transferring require a social work service.

Of note is the increase in the number of children with a disability awaiting an assessment of need.

10.1.6	How many of these Children in Need are Disabled and known to Trust Social Workers (by major category) at 30th September 2019?	Children in Need 30.9.19
	Guidance – grand total will match the total row at 10.1.1	

Major Disability	<1		0-4		5 -	11	12·	-15	1	6+	То	tal	
	М	F	М	F	М	F	М	F	М	F	М	F	Total
Physical (Ex. Sensory)	0	0	7	8	25	15	17	5	7	0	56	28	84
Sensory	1	0	12	5	13	8	6	6	4	4	36	23	59
Learning	0	0	34	13	173	76	104	43	29	25	340	157	497
Chronic illness	0	0	0	0	0	0	0	0	0	0	0	0	0
Autism(ASD)/ADHD/ Asperger's	0	0	1	1	85	31	70	37	16	9	172	78	250
Other	0	0	0	0	0	0	0	0	0	0	0	0	0
TOTAL (With Disability)	1	0	54	27	296	130	197	91	56	38	604	286	890

No Disability	80	63	338	298	542	498	253	301	136	133	1349	1293	2642	
Grand Total	81	63	392	325	838	628	450	392	192	171			3532	

The Trust currently has 890 children in need who have a diagnosed disability; this is a reduction of 26 from the last reporting period. Children's disability teams continue to offer services to children with physical, sensory, learning disability, chronic illness and ASD/ADHD. The majority are defined as having a learning disability. Demand for services for children with a disability continues to increase and is creating significant challenges for the Trust. The number of children with ASD/ADHD has increased from 232 to 250.

Disabled children known to the Trust who left school during the reporting period and the transition plans that are in place.

Children in Need 30.9.19

Age at leaving school	>16	>16 <17		>17 <18		3+	То	tal	Number with Transitions in place		
Disability Type	М	F	М	F	М	F	М	F	м	F	
Physical disability	0	0	0	0	2	1	2	1	2	1	
Sensory Impairment	0	0	0	0	0	0	0	0	0	0	
Learning disability	1	0	0	0	13	5	14	5	14	5	
Chronic illness	0	0	0	0	0	0	0	0	0	0	
Autism (ASD)/ADHD/Asperger's	0	0	0	0	0	0	0	0	0	0	
Other	0	0	0	0	0	0	0	0	0	0	
TOTAL	1	0	0	0	15	6	16	6	16	6	

No child with a disability has left school without an individual transition plan in place during this reporting period. Each plan takes account of the young person's assessed need. Statutory services, private providers (for our most challenging young people) and direct payments are all considered to deliver individual and flexible services.

10.1.9	What preventative action is being taken by the Trust to ensure that children in need are not involved in offending behaviour (offending behaviour is defined as: formally cautioned or convicted)?	Children in Need 30.9.19
	The Trust has partnership arrangements with a number of key agencies including PSNI, Youth Justice Agency (YJA), Extern and Barnardo's to deliver schemes to prevent involvement in offending behaviour. A number of preventative programmes have been developed through the Outcomes Board, locality planning groups and family support hubs.	

10.1.10	How many of the Children in Need are Young Carers?	Children in Need 30.9.19
	statistics from PSNI partners regarding young people reported missing in order to drive referrals, assessments and responses in relation to the potential of CSE for vulnerable young people. The Trust currently facilitates risk assessment and intervention for young people who are engaged in sexually harmful behaviour through the Aim to Change. This helps the Trust to identify the risk of harm young people to self and others. The service identifies a safety plan for each child and undertakes intervention to reduce the level of risk posed by each child. NSPCC recently provided evidence to confirm that those young people who have engaged in the Aim to Change programme are less likely to reoffend.	
	reviews criminal activity involving young people. A significant amount of progress has been achieved in improving our response to child sexual exploitation (CSE). The CSE senior practitioner provides support and advice to fieldwork and looked after social workers surrounding the assessment of risk in relation to our young people and CSE. Multi-disciplinary meetings are utilised with partner agencies and regular coordination takes place with Barnardo's safe choices, drug and alcohol workers, youth justice agency etc. Regular joint meetings take place at both operational and strategic management levels involving the Police and Trust personnel. The CSE senior practitioner also utilises information and	

	Period 1 April 2019 – 30 September 2019
Total Number of Service Users	85
Level 1	0
Level 2	5
Level 3	72
Level 4	8
Assessment Stage	1

There has been a reduction in the numbers of young carers, from 100 to 85, within this period.

0.1.12	(a) How many Trust spo through any means i are there for Childrer	ncluding Article 18	, Fostering or others	5 Childre 30.9.19		
	Day Care	Number of Pu				
		0 – 4	5-12			
	Day Nursery	16	2			
	Playgroup	1	0			
	Childminder	12	3			
	Out of School hours club	0	9			
	Total	29	14			
	(b) How many of these of	children have a dis	ability?	Children in Need 30.9.19		
		0 - 4	5-12			
		1	7			
		L	1	1		

10.1.13	Trust usage of Family Centre Places for interventionsChildren in Need30.9.19									
			FAMILIE	5						
Name of Centre	Stat/Vol	Number of by Primary for Interve	Referrals / Reason	Completed D	od On					
		Primary Reason	Number of Referrals	Average Wait from Referral to Start of Intervention (Weeks)	Average Length of Interventi (Weeks)					
Colin Family Centre	Stat	Family Support	1	0	0	1				
		Child Protection	13	9	25	11				
		Looked After	1	8	36	0				
Knocknashinna Family Centre	Stat	Family Support	0	0	0	0				
		Child Protection	11	11	44	6				
		Looked After	2	3	45	1				
SET Connects	Stat	Family Support	0	0	0	0				
		Child Protection	0	0	0	0				
		Looked After	91 Total (includes 16 new referrals for Narrative clinic and 11 internal referrals for Narrative clinic	4 weeks	81 week					
Simpson Family Centre	Vol	Family Support	N/A	N/A	N/A	N/A				
		Child Protection	23	6 - 8 weeks	12 - 14 weeks					
		Looked After	9	6 - 8 weeks	12 - 14 weeks					

10.1.15	Please provide a Supervision / In (moved from Ch	terim	Sup	ervis	sion	Ord	er at				to	_	0.19	en in Ne)
			:1	1	-4	5-	·11	12	-15	16	j+	Тс	otal	
Supervision Orders		м	F	м	F	м	F	м	F	М	F	М	F	Total
Art. 50 (1) (b) S Order	Supervision	0	0	1	2	2	4	3	0	1	1	7	7	14
Art. 57 (1) Inter Order	im Supervision	0	0	0	0	2	1	0	2	0	1	2	4	6
Total		0	0	1	2	4	5	3	2	1	2	9	11	20
10.1.16	During the perior children (if any)									ion /		-		n in Nee
10.1.16	During the peric children (if any) Interim Supervis section).	that	beca	me s	subj	ect c	of a S	Supe	ervisi		,	-	ldre 9.19	n in Nee
10.1.16	children (if any) Interim Supervis	that sion (beca	me s r (mo	subj	ect c	of a S m Ch	Supe	ervisi Prote	ectio	,	30.9		n in Nee
10.1.16 Supervision O	children (if any) Interim Supervis section).	that sion (beca Drdei	me s r (mo	subj ovec	ect c I fror	of a S m Ch	Supe hild F	ervisi Prote	ectio	n	30.9	otal	n in Nee
	children (if any) Interim Supervis section).	that sion (beca Drdei	1-	subj ovec	ect c I fror 5-	of a S m Ch 11	Supe hild F	Prote	ectio	6+	30.9	otal	
Art. 50 (1) (b) Order	children (if any) Interim Supervis section).	that sion (beca Drdei	1. M	-4	ect of from	of a S m Ch 11 F	Supe hild F 12-	•15 F	ectio	6+	30.9	9.19 otal	Total

10.2 Children (NI) Order 1995

Article 18 (2)Schedule 2 Para 1, Article 18 (2)Schedule 2 Para 5(2) ,Article 18 (2)Schedule 2 Para 9, Article 27 (1)(2),Article 27 (1)(2), Article 27 (8), Article 35,Article 36 (1) Article 44,Article 45 (1)(2) ,Article 45 (3)(5)(6)(7)(8), Article 108 (1), Article 118, Article 130,Article 174 ,Article 175, Article 177

	CHILD PROTECTION	
10.2.1	How many children are on the Child Protection Register as at 30th September?	CP 30.9.19
	340 children are on the Child Protection Register as at 30 September 2019. This is a decrease from 366 at 31 st March 201	9.
10.2.2	How many of these children have a learning disability?	CP 30.9.19
	Seven children have a learning disability.	
10.2.3	How many of these children have a physical disability?	CP 30.9.19
	Two children have a physical disability.	
10.2.4	Religion of children on the Child Protection Register	CP 30.9.19

			r	Aale				Overall					
Religion	<1	1-4	5-11	12-15	16+	Total	<1	1-4	5-11	12-15	16+	Total	Total
Roman Catholic	10	17	25	9	7	68	2	15	20	7	4	48	116
Presbyterian	5	7	8	3	0	23	2	4	6	5	0	17	40
Church of Ireland	1	0	8	2	0	11	1	2	2	2	0	7	18
Methodist	0	0	1	1	0	2	0	0	4	0	0	4	6
Other Denomination	2	4	17	1	3	27	7	8	11	5	0	31	58
None	7	13	8	2	1	31	3	6	7	3	2	21	52
Refused	0	0	0	0	0	0	0	0	0	0	0	0	0
Unknown	4	7	11	5	0	27	2	5	9	5	2	23	50
Total	29	48	78	23	11	189	17	40	59	27	8	151	340

10.2.5

Ethnic origin of children on the Child Protection Register (Note new categories now used in quarterly child protection template)

CP 30.9.19

	(Note new	calego	mesi	low t	isea in	quart	eny chi	a pro	tecti	on tei	mplate)		30.9.19
				N	lale					F	emale	Э		Overall
Ethnic Ori	gin	<1	1-4	5-11	12-15	16+	Total	<1	1-4	5-11	12-15	16+	Total	Total
White		26	41	74	21	10	172	17	36	48	25	6	132	304
Chinese		0	0	0	0	0	0	0	0	0	0	0	0	0
Irish Traveller		1	0	0	0	0	1	0	0	0	0	0	0	1
Roma Travelle	r	0	0	0	0	0	0	0	0	0	0	0	0	0
Indian		0	0	0	0	0	0	0	0	0	0	0	0	0
Pakistani		0	0	0	0	0	0	0	0	0	0	0	0	0
Bangladeshi		0	0	0	0	0	0	0	0	0	0	0	0	0
Black Caribbea	an	0	0	0	0	0	0	0	0	0	0	0	0	0
Black African		0	0	0	0	0	0	0	0	0	0	0	0	0
Black Other		0	0	0	0	0	0	0	0	1	0	0	1	1
Mixed Ethnic Group		0	2	1	0	0	3	0	2	6	0	0	8	11
Any Other Ethnic Group		0	0	0	1	1	2	0	0	0	0	0	0	2
Not completed		0	0	0	0	0	0	0	0	0	0	0	0	0
Not Stated		2	5	3	1	0	11	0	2	4	2	2	10	21
Total		29	48	78	23	11	189	17	40	59	27	8	151	340
								•						
10.2.6	How ma	ny reg	istra	tions	s have	e the	re bee	n du	iring	the	perio	d?		CP 30.9.19
	There we	ere 13	1 re	gistra	ations	s duri	ng the	per	iod.					
10.2.7	How ma	ny de-	regi	strat	ions h	ave	there b	beer	n dur	ing t	the pe	eriod?	?	CP 30.9.19
	There we	ere 16	6 de	e-reg	istrati	ons d	during	the	perio	od.				
10.2.8	What pe	rcenta	ige c	of reg	gistrat	ions	are re-	-regi	istra	tions	6?			CP 30.9.19
	19.8% (2 re-regist reporting	rations	s has										of	

10.2.9	How many re-registrations were there within 6 months? NB include an explanation for each incidence.	CP 30.9.19
	There were no re-registrations within this six month period.	
10.2.10	For children on the register, how long have they spent on the Register (as at 10.2.1)?	CP 30.9.19

	Duration	Age Groups											
		Under one Year	1-4	5-11	12-15	16+	TOTAL						
1	less than 3 months	15	9	16	7	1	48						
2	3 months < 6 months	14	8	28	11	4	65						
3	6 months < 1 year	17	29	43	12	7	108						
4	1 year < 2 years	0	32	32	14	4	82						
5	2 years < 3 years		9	11	4	2	26						
6	3 years or more		1	7	2	1	11						
	TOTAL	46	88	137	50	19	340						

10.2.12	Commentary on Trends of Child Protection Register
	There has been a slight decrease in the number of children (340) on the child protection register (CPR). It has consistently been around three hundred and sixty for the past three years.
	There has been a decrease in the number of children on the CPR between 3 months - 6 months from one hundred to sixty-five in the last reporting period. This may be due to Signs of Safety approaches being implemented with families.
10.2.13	Commentary on length of time children spend on register, particularly >1 year
	During this period the number of children on the CPR for more than one year has increased from 112 to 119. There has been a slight increase in registrations over two years plus, the Trust will be exploring this further.

10.2.14	Commentary on what measures are being taken to tackle overdue case Conferences and the length of time children spend on the register.
	Overdue conferences are monitored monthly by the assistant director and explanations are requested from the service. The main reason for delays in convening conferences is in respect of quorum, staff sickness or requests made by the parent /carer.
	A quality improvement (QI) project took place in the Down Sector in addressing attendance at conferences by GP's and AHP's. This service improvement initiative is a QI priority for children's services and we are in the process of scaling and spreading this across two further GP practices.
	An audit is scheduled later this year to understand the reasons for length of time spent on the register.

10.3 Children (NI) Order 1995

Looked After Children

10.3.1Provide the current legal status for all Looked After Children at
30th September (excluding any who are LAC on that day only
by virtue of a short break arrangement)LAC
30.9.19

	<	1	1	-4	5- 1	1	12	-15	16	ô+	То	tal	Tota
Legal status	м	F	М	F	М	F	м	F	М	F	М	F	I
Art 21(1) Accommodated <16	4	0	8	6	26	16	15	11			53	33	86
Art. 21(3) Accommodated 16+									15	13	15	13	28
Art. 21(4) Accommodated	2	1	9	7	10	13	2	12	0	0	23	33	56
Art. 21(5) Accommodated 16+ <21									7	5	7	5	12
Art. 44 (5) Secure	0	0	0	0	0	0	0	0	0	0	0	0	0
Art. 44 (6) Interim Secure	0	0	0	0	0	0	0	1	0	0	0	1	1
Art. 50 (1) (a) Care Order	1	0	21	20	59	44	50	47	20	18	151	129	280
Art. 57 (1) Interim CO	12	7	24	26	17	17	7	3	0	2	60	55	115
Deemed Care Order	0	0	0	0	0	0	0	0	0	0	0	0	0
Emergency Protection Order Art. 63	0	0	3	2	1	4	0	0	0	0	4	6	10
Art. 23(2) Accommodated	0	0	0	0	0	0	0	0	0	0	0	0	0
Other	0	1	3	3	7	5	5	3	3	3	18	15	33
TOTAL	19	9	68	64	120	99	79	77	45	41	331	290	621

There has been another increase in the number of children being looked after in this period, from 587 to 621.

Religion and Ethnic origin of Looked After Children (please provide by
new list of ethnic minorities).L30

LAC 30.9.19

				_		_		_		_			
D. P. C.	<1		1-4		5-1	5-11		-15	16+		То	tal	Total
Religion	м	F	М	F	М	F	М	F	М	F	М	F	
Roman Catholic	3	1	26	29	53	45	38	32	15	12	135	119	254
Presbyterian	4	2	6	8	22	21	15	10	14	12	61	53	114
Church of Ireland	0	0	11	7	19	12	15	14	5	6	50	39	89
Church of England	0	0	1	0	2	1	0	0	0	0	3	1	4
Methodist	0	0	0	0	1	0	1	1	1	1	3	2	5
Other Christian	4	2	10	12	15	8	3	11	6	3	38	36	74
Jewish	0	0	0	0	0	0	0	0	0	0	0	0	0
Muslim	0	0	0	0	0	0	0	0	0	2	0	2	2
Other	0	0	3	2	1	1	0	1	1	0	5	4	9
Not Known	3	0	1	0	0	1	1	2	0	1	5	4	9
Not Completed	0	0	0	0	0	0	0	0	0	0	0	0	0
None	5	4	10	6	6	9	6	6	3	4	30	29	59
Refused	0	0	0	0	1	1	0	0	0	0	1	1	2
TOTAL	19	9	68	64	120	99	79	77	45	41	331	290	621

	<	<1		-4	5 -	11	12 [.]	-15	10	δ +	То	tal	
Ethnicity	м	F	М	F	М	F	М	F	М	F	м	F	Total
White	16	9	60	62	116	94	76	71	43	39	311	275	586
Chinese	0	0	0	0	0	0	0	0	0	0	0	0	0
Irish Traveller	1	0	1	1	1	0	0	0	0	0	3	1	4
Roma Traveller	0	0	1	0	1	2	0	2	0	0	2	4	6
Indian	0	0	0	0	0	0	0	0	0	0	0	0	0
Pakistani	0	0	0	0	0	0	0	0	0	0	0	0	0
Bangladeshi	0	0	0	0	0	0	0	0	0	0	0	0	0
Black Caribbean	0	0	0	0	0	0	0	0	0	0	0	0	0
Black African	0	0	0	0	2	1	0	0	0	0	2	1	3
Black Other	0	0	0	0	0	0	0	0	1	1	1	1	2
Mixed Ethnic Group	2	0	3	1	0	2	1	3	0	1	6	7	13
Any Other Ethnic Group	0	0	0	0	0	0	1	0	0	0	1	0	1
Not Stated	0	0	3	0	0	0	1	1	1	0	5	1	6
TOTAL	19	9	68	64	120	99	79	77	45	41	331	290	621

Number of Looked After Children (as at 10.3.1) by type of placement at 30th September 2019.

LAC 30.9.19

		<	1	1	-4	5-1	1	12	-15	16	ô+	То	tal	
All Looked	I After Children	М	F	м	F	М	F	М	F	м	F	м	F	Total
Residential	Statutory	0	0	0	0	0	1	5	11	9	8	14	20	34
	Voluntary	0	0	0	0	1	0	3	1	0	2	4	3	7
	Private inc ECR's	0	0	0	0	1	2	1	1	1	0	3	3	6
	Secure	0	0	0	0	0	0	0	0	2	1	2	1	3
	Residential Total	0	0	0	0	2	3	9	13	12	11	23	27	50
Fostering	Foster Carers excluding relatives [Stranger]	10	3	26	16	39	26	33	28	5	8	113	81	194
	Kinship Care In Kinship Placement less than 12 weeks	1	0	1	0	6	1	4	3	0	1	12	5	17
Kinship Care	Kinship Care (Friends/relatives) – Approved at Stage 1	0	0	0	0	0	0	0	0	0	0	0	0	0
	Kinship Care (Friends/Relatives) – Approved at Stage 2	1	1	16	18	31	30	13	16	11	6	72	71	143
	Unregulated (In Placement >12 weeks and not yet approved)	2	0	4	5	13	11	8	2	4	4	31	22	53
	Independent Providers	3	4	12	13	20	21	8	8	1	8	44	54	98
	Fostering Total	17	8	59	52	109	89	66	57	21	27	272	233	505
Placed at Hon	ne with Parents	1	1	3	6	8	6	3	7	7	3	22	23	45
Placed for Ad Children, with		0	0	4	4	1	1	0	0	0	0	5	5	10
Other	. ,	1	0	2	2	0	0	1	0	5	0	9	2	11
Overall TOTA	L	19	9	68	64	120	99	79	77	45	41	331	290	621

There has been a decrease in the number of unregulated placements from 61 in March 2019 to 53 in September 2019.

10.3.4	Age bands a at period en													30.9.19
Length o	<	1	1-4		5-1	5-11		12-15		16+		otal		
period end		м	F	м	F	м	F	М	F	М	F	м	F	Total
< 3 mont	ths	6	1	4	1	9	2	5	8	2	1	26	13	39
3 months	s to < 1year	13	8	18	10	16	22	12	13	4	4	63	57	120
1 year < 3 years		0	0	39	47	35	34	8	14	15	9	97	104	201
3 years <	< 5years	0	0	7	6	31	23	13	13	6	8	57	50	107
5years <	10 years	0	0	0	0	26	15	18	19	8	11	52	45	97
10+ year	10+ years		0	0	0	3	3	23	10	10	8	36	21	57
Total		19	9	68	64	120	99	79	77	45	41	331	290	621

10.3.5

Number of children provided with a short break during the period who become Looked After by virtue of the short break arrangement

LAC 30.9.19

o Total Over night	o No. of Ch/YP	F-1	Total Over night	No. of Ch/YP	Events / 11-5	Total Over night	No. of Ch/YP	Events/ Episodes	Total Over night	No. of Ch/YP	Events / +91	er night		tota	
				No. of Ch/YP	Events /	Total Over night	No. of Ch/YP	ts/ Episodes	Over night	f Ch/YP	nts /	er night	Ch/YP	ts /	r night
0	0	0						Even	Total (No. o	Eve E	Total Over night	No. of Ch/YP	Events	Total Over night
			0	3	10	32	5	14	26	1	6	20	9	30	78
0	0	0	0	2	26	96	7	50	239	3	24	52	12	100	387
0	0	0	0	11	85	139	11	81	156	3	16	31	25	182	326
0	0	0	0	129	171	200	113	130	278	42	58	74	284	359	552
0	0	0	0	145	292	467	136	275	699	49	104	177	330	671	1343
	0 0	0 0 0 0	0 0 0 0 0	0 0 0 0 0 0 0 0 0 0 0 0	0 0 0 0 129 0 0 0 0 145 Number of children acco 145	0 0 0 0 129 171 0 0 0 0 145 292 Number of children accommon	0 0 0 0 129 171 200 0 0 0 0 145 292 467 Number of children accommodated	0 0 0 0 129 171 200 113 0 0 0 0 0 145 292 467 136	0 0 0 0 129 171 200 113 130 0 0 0 0 145 292 467 136 275 Number of children accommodated for 3 mo	0 0 0 0 129 171 200 113 130 278 0 0 0 0 145 292 467 136 275 699 Number of children accommodated for 3 months of the second se	0 0 0 0 129 171 200 113 130 278 42 0 0 0 0 145 292 467 136 275 699 49 Number of children accommodated for 3 months or mediated	0 0 0 0 129 171 200 113 130 278 42 58 0 0 0 0 145 292 467 136 275 699 49 104	0 0 0 0 129 171 200 113 130 278 42 58 74 0 0 0 0 145 292 467 136 275 699 49 104 177 Number of children accommodated for 3 months or more in a here	0 0 0 1	0 0 0 129 171 200 113 130 278 42 58 74 284 359 0 0 0 0 145 292 467 136 275 699 49 104 177 330 671 Number of children accommodated for 3 months or more in a hospital.

10.3.7		dren accommodate ample Residential (
Facility	Name	Age at Pla	acement		Number Resident at Period End
		Under 16	16+	Total	
None		0	0	0	0
		0	0	0	0
		0	0	0	0
		0	0	0	0
		0	0	0	0
		0	0	0	0
		0	0	0	0
Total		0	0	0	0

10.3.8 (a) What facilities – care for these Lo residential home	oked	After	Childre	en i.e.	how m			LAC 30.9.19
Name of Residential Unit	Statutory	Voluntary	Private	No of Beds	No of Beds available to	Trust % occupancy 1.10.18-31.3.19	No of Respite beds	Respite % occupancy
William St children's Home	Х			8	8	75%	Nil	Nil
Marmion Children's Home	Х			8	8	75%	Nil	Nil
Flaxfield Children's Home	Х			8	8	75%	Nil	Nil
Cuan Court Children's Home	Х			8	8	100%	Nil	Nil
Belfast Central Mission Supp Acc		х		6	6	100%	Nil	Nil
MAC Supported Accommodation		x		9	9	100%	Nil	Nil
Barnardo's children's House			Х	1	1	100%	Nil	Nil
Barnardo's Supported Accommodation		х		2	2	100%	Nil	Nil
Oaklands specialist children's home	x			6	6	100%	Nil	Nil
Ashgrove specialist children's home	x			5	5	80%	Nil	Nil
Glenmore Cottage	Х			5	5	100%	Nil	Nil
Beechfield			х	5	5	89.5%	5	100%
Lindsay House	х			8	4	97%	4	97%
Forest Lodge	x			8	3	62%	8	Nil
Somerton Rd	x			5	1.5	100% as only one bed available at this time	0	Nil

	(b) Provide your number of foster carers (should agree with 10.5.1) Provide the number of approved places offered (should agree with 10.5.2)								
	Number of Foster Carers 378								
	Number of Approved Places Offered 428								
please re	t current has 15 Foster Carers who are not available for placement on 30/								
10.3.9	How many Looked After Children have had placement moves throughout the period?	LAC 30.9.19							
	Trust must provide separate narrative / detailed explanation of every								

Placement changes	0-4		5-11		12-15		16+		То	tal
Placement changes	М	F	М	F	М	F	Μ	F	м	F
Number who moved once	16	13	12	10	6	7	4	1	38	31
Number who moved twice	0	1	0	1	0	2	0	0	0	4
Number who moved 3 times	0	0	0	0	0	0	0	0	0	0
Number who moved 4 times or more	0	0	0	0	0	0	0	0	0	0
Total	16	14	12	11	6	9	4	1	38	35

The Trust has a system to track placement moves. This allows the identification of reasons and trends for children being moved placements. This is reviewed by the senior management team.

The above table excludes:

- children and young people who have short breaks
- kinship approvals at panel
- changes to legal status
- change in status of an adoptive placement

Over the reporting period no children have moved four or more times, no children moved three times, four children have experienced two moves and sixty-nine children have moved once. Of the moves that have taken place, the Trust analysis highlights the following trends (these trends also include children who moved once):

- Nine moves resulted from breakdown of kinship placements. An increase of four since the last reporting period.
- Fourteen moves were due to foster carers feeling unable to meet the needs of the child/young person. An increase of two since the last reporting period.
- Thirteen moves were due to children moving on from temporary care arrangements to a more appropriate placement to meet their needs.
- Eight moves were due to moves within the residential sector. A reduction of six since the last reporting period.
- Five moves resulted from the Trust considering the placement to be inappropriate and alternative care arrangements were identified. A reduction of three since the last reporting period.
- One move resulted from a young person moving to semi-independent living arrangements.
- Twelve moves were due to a child moving from a short term to a long term care arrangement. An increase of eleven from the last reporting period.
- Eleven moves were due to children moving to adoptive placements. An increase of one since the last reporting period.

It is of note that there has been an increase in the number of moves resulting from kinship break down and carers feeling unable to meet the needs of the children. It is also noted that there has been a significant rise in the number of moves due to children moving to permanent care arrangements, including long term fostering arrangements and adoptive placement, which is a positive indicator for the Trust for our capacity to achieve stability of children in care.

10.3.10	 How many Looked After Children are awaiting assessment or treatment with child and adolescent mental health services at 30th September 2019? 	LAC 30.9.19
	Seven children were awaiting assessment or treatment with child and adolescent mental health services as at 30 September 2019.	

(b)

How many Looked After Children have been referred for therapeutic services and their waiting time?

LAC 30.9.19

Referrals	Foster Care (non kin/traditional)	Kinship Foster Care	Field Work Social Worker	Residential Care	Young People Exiting Care	Post Adoption Support	TOTAL
Total Number of Referrals received this period	67	14	0	14	0	5	100
Source of these referrals received from							
Child's Social Worker	67	14	0	14	0	5	100
Carer's Social Worker	0	0	0	0	0	0	0
Adoptive parents	0	0	0	0	0	0	0
CAMHS DAMS	0	0	0	0	0	0	0
FACTSNI	0	0	0	0	0	0	0
Other	0	0	0	0	0	0	0
Number of Referrals Accepted	67	11	0	14	0	1	93
Number of Referrals deemed inappropriate	0	3	0	0	0	4	7
Number of referrals signposted to another service							
CAMHS	0	0	0	0	0	0	0
DAMS	0	0	0	0	0	0	0
Adult Psychiatry	0	0	0	0	0	0	0
Adult Psychology Service Other Post Adoption Service	0	0	0	0 0	0	0	0
Other	0	0	0	0	0	0	0
Children engaged with the Service by substantive p							
Number of children engaged with the Service at period start date	108	61	0	54	0	23	246
Number of children seen on a once off basis during	_	_	_	_	_	_	_
the period	1	2	0	2	0	0	5
Number of children discharged from Service during the period	31	12	0	10	0	4	57
CAMHS	0	0	0	0	0	0	0
• DAMS	0	0	0	0	0	0	0
Adult Psychiatry	0	0	0	0	0	0	0
Adult Psychology Services	0	0	0	0	0	0	0
Other Post Adoption Service	0	0	0	0	0	0	0
• Other	0	0	0	0	0	0	0
Number of children engaged with the Service at period end date	83	54	8	37	0	19	201

Service delivery during the period	
Number of Reviews undertaken	1057
Average waiting time for service (weeks)	4
Number on waiting list at end of period	4
Numbers of DNAs during the period	71
Number of individual sessions cancelled by the Service during the period	3
For those children discharged from the Service during the period what was the average length of involvement	
(weeks)	81
TOTAL	1131

		Number	Number which were repeat						
•	Social worker	477	ongoing						
•	CAMHS	9	ongoing						
•	DAMS	0	0						
•	Teacher	13	ongoing						
•	Psychiatry	0							
•	G.P.	1	ongoing	Remaining 277 appointmen were direct interventions wit					
Carers/ac	doptive parents	275	ongoing	children/young people. Total					
One off'		5	0	figure ie 1057 includes narrative appointments from beginning of September 201					
(c	e) Please provide additional relev		o contextuali.	ze data and provide	LAC 30.9.19				
C ps m W	onnects, namely sychology support anually for these r /hilst the number	 the national staff set of the s	arrative clin support. Data e developmen e consultatio	developments within SET ic, permanence clinical a is currently being collated nts. ons have been included in narrative consultations are					

Looked	After Children	8	1	7	8	8	F	м 7	5	2	1	32	г 19	
		<′ M	1 F	1- M	4 F	5-1 M	1 F	12- M	15 F	16 M	+ F	То	tal F	Total
0.3.11	How many L at 30th Sept						a150					ivey	13101	LAC 30.9.1
	delivery of additional re reflects the i	siden ncrea	itial I se ir	nome n the c	s, na overa	amely all dat	Ash a for	grove resid	e and lentia	d Öak al.	land	s. 1	「his	
	The data in there may b same time.	e two Since	o pra e 1st	actitio t Apri	ners I 201	work 9, SE	ing v ET C	with a onne	a you cts h	ung p nas ta	erso ken	n at over	the the	
	In relation provided by seven of thi people.	the	serv	ice, t	he r	emair	ning	two l	hunc	lred a	and	seve	nty-	
	The data p include the t	otal n	umb	er of	cons	ultatio	ons a	at the	narra	ative	clinic).		
	team and in practice and have been sessions eith	indiv three	vidua e ref	l psy errals	chotł s, fo	nerap urtee	y. Si n cc	nce S	Septe	embei	· 201	I9, th	ere	
	The staff su emotional he residential o	ealth a are.	and Inter	resilie ventic	ence ons a	for st are p	aff w rovis	orking ioned	g wit I at	h you an or	ing p gani	eopl satio	e in nal,	
	Permanence professional moving towa	s and	d me	mber	-									
	narrative con narrative con consultations	nsulta linic.	Τv	vo t	hera	peutio	с р	ractiti	atten ioner	nd a tr	wice			

10.3. ⁻	12	How many Looke period end?	ed Aft	er (Child	lren	are D	isab	led k	oy m	ajor	cate	egory	at	LAC 30.9.	19
			<	1	1	-4	5-1	11	12 [.]	-15	10	6+	То	otal		
	Мај	or Disability	м	F	м	F	м	F	м	F	м	F	м	F	Total	
Phy	/sical	(Ex. Sensory)	0	0	0	0	1	0	0	0	0	0	1	0	1	
Ser	nsory		0	0	0	0	0	0	0	0	0	0	0	0	0	
Lea	arning		0	0	0	0	5	9	13	5	3	5	21	19	40	
Chr	ronic i	llness	0	0	0	0	0	0	0	0	0	0	0	0	0	
Aut AD		SD)/Asperger's/	0	0	0	0	13	14	17	7	6	3	36	24	60	
Oth	ner (ur	ndefined)	0	0	0	0	0	0	0	0	0	0	0	0	0	
_	TAL C ability	Children With y	0	0	0	0	19	23	30	12	9	8	58	43	101	1
No	Disab	ility known	19	9	68	64	101	76	49	65	36	33	273	247	520	
	al Lo ildren	oked After	19	9	68	64	120	99	79	77	45	41	331	290	621	-
0.3.	13	How many Looke Needs (SEN) by								nent	of E	duca	ationa	1	LAC 30.9.	19
	State	ment of Educatio	nal N	lee	ds						Μ		F		Total	
	Prima	ary school									3		2		5	
	Seco	ndary school									6		1		7	
	Spec	ial School									15	5	16		31	
	Total										24		19		43	

10.3.14	(a) Has each Looked After Child an allocated and named social worker at period end?	LAC 30.9.19
	Each looked after child has an allocated and named social worker.	
	(b) Please state the number of Looked After Children who were without an allocated and named social worker during the period and give explanations.	LAC 30.9.19
	There are no looked after children without an allocated and named social worker.	
10.3.15	(a) Did each Looked After Child receive a statutory visit by their allocated and named social worker at least once a month during the period?	LAC 30.9.19
	Not all looked after children received a statutory visit.	
	 (b) Please state the number of Looked After Children who did not receive a statutory visit at least once a month during the period by their allocated and named social worker and give explanations. 	LAC 30.9.19
	A total of 2153 statutory visits took place within this reporting period. 51 of these where outside of the statutory timescales. This has increased from 26 in March 2019. The Trust has been monitoring compliance with this statutory function and analysis of the reasons for non-compliance include:	
	 4 family bereavement 9 parent refused entry to the home 5 rescheduled to suit parents/carers 2 children on holiday 18 social worker was on sick leave and due to staff shortages staff unable to cover visits. 1 young person refused to see social worker 2 unable to contact family 5 family on holiday 1 young person sick 3 staff shortages 1 social worker on annual leave, parents refused to see a different social worker 	

10.3.16	Was the case of each Looked After Child reviewed in line with Statutory requirements?	LAC 30.9.19
	Not all LAC were reviewed in line with statutory requirements. See reasons above.	
10.3.17	No. of looked after children reviews held during the period	LAC 30.9.19
	There were 557 looked after reviews held during this reporting period.	
10.3.18	No. of these Looked After Children Reviews which during the period were outside of statutory timescales and why	LAC 30.9.19
	Of the 557 looked after reviews which took place during this reporting period, 44 LAC reviews took place outside of the statutory timescale. This has increased from 11 in the last reporting period. The reasons for non-compliance are as follows:	
	 19 PSW/SW on sick leave 13 staff shortages 4 rescheduled to suit parents/carers 3 rescheduled as report not ready(addressed within service) 1 bereavement 1 young person on holiday 1 psychology input required to inform care plan 1 change in social worker 1 young person moved placement. Total 44	
10.3.19	For children accommodated by the Trust under Article 21 of the Children's Order, what arrangements has the Trust in place to ensure that it has the appropriate degree of parental responsibility to care for these children?	LAC 30.9.19
	The Trust continually endeavors to work in partnership with those who hold parental responsibility for children and who are accommodated under Article 21. The appropriateness of these arrangements is reviewed via the looked after child review process. Should this arrangement not ensure the needs of the child/young person are met; the Trust will pursue legal steps to share parental responsibility via a care order.	

10.3.20	Is there an adequate supply of placements for children to enable placement choice?	LAC 30.9.19
	The availability of foster placements, at both local Trust and regional level, continues to create significant challenges in providing a range of placement choices to respond to the needs of children and young people in a safe manner.	
	Recruitment activity has been successful in recruiting an additional eleven non-kinship foster carers during the reporting period, there has also been the depletion of fifteen foster carers during this period. The demand for placements exceeds the Trust's capacity to offer placement choice to meet the needs of children in care.	
	In meeting the demand for placements, the fostering service has observed an increase in the demand for kinship assessments. It is of note that there were thirty-six viability and fourteen kinship fostering assessments completed within the reporting period. This demand impacts on the capacity to complete assessments in a timely fashion within the twelve week timescale.	
	Consequently the Trust has experienced an increased reliance on the use of independent sector placements over the past year. There are ninety-eight looked after children cared for in the independent sector (an increase of fifteen since March 2019). This trend will limit the Trust's capacity to offer long-term placements should these children's care plans progress to long-term fostering. This has placed considerable fiscal challenges on the Trust which has been brought to the attention of the Health and Social Care Board.	
	The Trust is actively working with the other four health and social care Trusts to develop a marketing strategy to respond to the increasing needs regionally. At a local level the Trust has actively progressed recruitment across a range of platforms.	
10.3.21	How many exceptions to the normal fostering limit were made to foster care approvals in order for a child to be placed in an emergency in the reporting period?	LAC 30.9.19
	There were a total of seven exemptions throughout this review period. All seven were to provide planned respites to support other foster placements.	

10.3.22	What is the formal scheme of delegation that specifies who can agree such an exemption?	LAC 30.9.19
	In line with policy and procedures the Trust's fostering panel decides whether to exempt a particular foster parent from the usual fostering limit. The panel will ratify foster parents, who have been exempted by the principal social worker/chair of the panel in an emergency. The panel forwards their recommendation to the Assistant Director, who will decide whether to grant approval. Rolling exemptions are reviewed by the fostering panel on an annual basis.	
10.3.23	How many children are deemed to be in an inappropriate placement given their assessed needs?	LAC 30.9.19
	The Trust has fourteen children in an inappropriate placement given their assessed needs;	
	 Eight young people are inappropriately placed in residential care and require foster placements 	
	• One young person was in an independent sector placement which had broken down and they require an alternative long term placement	
	A sibling group of two are in separate short-term placements and require an alternative short term placement together	
	 One young person who is in a short-term foster placement requires a long-term placement 	
	 One young person placed in a disability respite home requires a long-term foster placement 	
	• One young person is placed in a kinship placement alongside other siblings in an emergency and they require a short-term foster placement	

10.3.24

Please provide the number of restraints carried out by staff on young
people within each Home during the period .LAC
30.9.19

Name of Home: Flaxfield	Primary		Secondary		10	6+	Total	
Reason for Use of Restraint	м	F	м	F	м	F	м	F
To prevent injury (to self/staff/other								
young person)	0	0	0	0	0	0	0	0
To prevent serious criminal damage to								
property	0	0	0	0	0	0	0	0
To prevent young person from leaving Home(due to risk of significant harm)	0	0	0	0	0	0	0	0
Other (please specify)	0	0	0	0	0	0	0	0
Total no. of restraints	0	0	0	0	0	0	0	0

How many individual children does this								
return refer to	0	0	0	0	0	0	0	0

Name of Home:GLENMORE								
COTTAGE	Primary		Seco	Secondary		6+	То	tal
Reason for Use of Restraint	М	F	м	F	м	F	м	F
To prevent injury (to self/staff/other young person)	0	0	0	0	0	0	0	0
To prevent serious criminal damage to property	0	0	0	0	0	0	0	0
To prevent young person from leaving Home(due to risk of significant harm)	0	0	0	0	0	0	0	0
Other (please specify)	0	0	0	0	0	0	0	0
Total no. of restraints	0	0	0	0	0	0	0	0
How many individual children does this return refer to	0	0	0	0	0	0	0	0

			1					
Name of Home:LINDSAY HOUSE	Prin	nary	Seco	ndary	16	5+	То	tal
Reason for Use of Restraint	М	F	м	F	м	F	м	F
To prevent injury (to self/staff/other young person)	0	0	0	0	0	0	0	0
To prevent serious criminal damage to property	0	0	0	0	0	0	0	0
To prevent young person from leaving Home(due to risk of significant harm)	0	0	0	0	0	0	0	0
Other (please specify)	0	0	0	0	0	0	0	0
Total no. of restraints	0	0	0	0	0	0	0	0
How many individual children does this return refer to	0	0	0	0	0	0	0	0
Name of Home:ARC SECURE	Prir	nary	Seco	ndary	1	6+	Тс	tal
Reason for Use of Restraint To prevent injury (to self/staff/other	Prir M 0	nary F 0	Seco М 0	ndary F 0	10 M 0	6+ F 0	Tc M 0	tal F 0
Reason for Use of Restraint	М	F	М	F	м	F	M	F
Reason for Use of Restraint To prevent injury (to self/staff/other young person) To prevent serious criminal damage to property To prevent young person from leaving	M 0	F	M 0	F	М 0	F 0	<u>М</u> о	F 0
Reason for Use of Restraint To prevent injury (to self/staff/other young person) To prevent serious criminal damage to	M 0	F 0	М 0	F 0	м 0	F 0	<u>М</u> 0	F 0 0
Reason for Use of RestraintTo prevent injury (to self/staff/other young person)To prevent serious criminal damage to propertyTo prevent young person from leaving Home(due to risk of significant harm)	М 0 0	F 0 0 0 0 0	M 0 0 0	F 0 0 0 0 0	M 0 0 0 0	F 0 0 0	M 0 0	F 0 0
Reason for Use of Restraint To prevent injury (to self/staff/other young person) To prevent serious criminal damage to property To prevent young person from leaving Home(due to risk of significant harm) Other (please specify)	М 0 0 0	F 0 0 0 0 0	M 0 0 0 0 0	F 0 0 0 0 0 0 0	M 0 0 0 0 0	F 0 0 0 0 0	M 0 0 0	F 0 0 0

Name of Home: OAKLANDS	Primary		Secondary		16+		Total	
Reason for Use of Restraint	м	F	м	F	м	F	м	F
To prevent injury (to self/staff/other young person)	0	0	0	0	2	0	2	0
To prevent serious criminal damage to property	0	0	0	0	0	0	0	0
To prevent young person from leaving Home(due to risk of significant harm)	0	0	0	0	0	0	0	0
Other (please specify)	0	0	0	0	0	0	0	0
Total no. of restraints	0	0	0	0	2	0	2	0
	1		1			1	1	•
How many individual children does this return refer to	0	0	0	0	2	0	2	0

Name of Home: ASHGROVE	Primary		Secondary		16+		То	tal
Reason for Use of Restraint	м	F	м	F	М	F	м	F
To prevent injury (to self/staff/other young person)	0	0	0	0	1	0	0	0
To prevent serious criminal damage to property	0	0	0	0	0	0	0	0
To prevent young person from leaving Home(due to risk of significant harm)	0	0	0	0	0	0	0	0
Other (please specify)	0	0	0	0	0	0	0	0
Total no. of restraints	0	0	0	0	1	0	0	0
How many individual children does this return refer to	0	0	0	0	1	0	0	0

Name of Home: PI SECURE	Prir	nary	Seco	ndary	1	6+	То	tal
Reason for Use of Restraint	м	F	м	F	м	F	м	F
To prevent injury (to self/staff/other young person)	0	0	0	0	0	0	0	0
To prevent serious criminal damage to property	0	0	0	0	0	0	0	0
To prevent young person from leaving Home(due to risk of significant harm)	0	0	0	0	0	0	0	0
Other (please specify)	0	0	0	0	0	0	0	0
Total no. of restraints	0	0	0	0	0	0	0	0
How many individual children does this return refer to	0	0	0	0	0	0	0	0

	Prin	nary	Secor	ndary	1	6+	То	tal
Reason for Use of Restraint	М	F	м	F	м	F	м	F
To prevent injury (to self/staff/other young person)	0	0	0	0	0	0	0	0
To prevent serious criminal damage to property	0	0	0	0	0	0	0	0
To prevent young person from leaving Home(due to risk of significant harm)	0	0	0	0	0	0	0	0
Other (please specify)	0	0	0	0	0	0	0	0
Total no. of restraints	0	0	0	0	0	0	0	0
How many individual children does this return refer to	0	0	0	0	0	0	0	0

Name of Home: WILLIAM STREET	Primary		Secondary		16+		То	tal
Reason for Use of Restraint	м	F	м	F	м	F	м	F
To prevent injury (to self/staff/other young person)	0	0	0	0	0	0	0	0
To prevent serious criminal damage to property	0	0	0	0	0	0	0	0
To prevent young person from leaving Home(due to risk of significant harm)	0	0	0	0	0	0	0	0
Other (please specify)	0	0	0	0	0	0	0	0
Total no. of restraints	0	0	0	0	0	0	0	0
How many individual children does this return refer to	0	0	0	0	0	0	0	0

Name of Home:CUAN COURT	Prim	nary	Secor	ndary	16	5+	То	tal
Reason for Use of Restraint	м	F	М	F	М	F	М	F
To prevent injury (to self/staff/other young person)	0	0	0	0	0	0	0	0
To prevent serious criminal damage to property	0	0	0	0	0	0	0	0
To prevent young person from leaving Home(due to risk of significant harm)	0	0	0	0	0	0	0	0
Other (please specify)	0	0	0	0	0	0	0	0
Total no. of restraints	0	0	0	0	0	0	0	0
How many individual children does this return refer to	0	0	0	0	0	0	0	0

Name of Home:MURLOUGH								
SECURE	Primary		Secondary		16+		Total	
Reason for Use of Restraint	м	F	м	F	м	F	м	F
To prevent injury (to self/staff/other young person)	0	0	0	0	0	0	0	0
To prevent serious criminal damage to property	0	0	0	0	0	0	0	0
To prevent young person from leaving Home(due to risk of significant harm)	0	0	0	0	0	0	0	0
Other (please specify)	0	0	0	0	0	0	0	0
Total no. of restraints	0	0	0	0	0	0	0	0
How many individual children does this return refer to	0	0	0	0	0	0	0	0

10.3.25	Do all looked after children have a concurrent plan by the time of their first 3 month statutory LAC Review?	LAC 30.9.19
	No, all children have a twin-track care plan by six months if rehabilitation to birth parents has not been ruled out.	
10.3.26	Permanency Planning for Looked After Children at period end	LAC 30.9.19

Dermononov Dion	<	1	1.	-4	5-1	1	12	-15	16	ò+	То	tal	Total
Permanency Plan	М	F	М	F	М	F	М	F	М	F	М	F	Total
Return to Birth Family	8	3	1 5	1 2	14	1 1	1 0	7	1 0	2	57	35	92
Return to Kinship Carers outside LAC system (Friend/Relative/Family Placement)	3	0	5	6	5	3	4	2	0	0	17	11	28
Adoption	6	4	1 2	1 2	2	3	0	0	0	0	20	19	39
Long term Fostering (Including Kinship)	0	0	3 3	2 8	89	7 0	4 9	4 3	2 0	2 4	19 1	16 5	356
Supported Living/Independent Living	0	0	0	0	0	0	0	0	4	0	4	0	4
Other	0	0	0	0	0	0	6	9	1 1	1 5	17	24	41
Total	1 7	7	6 5	5 8	11 0	8 7	6 9	6 1	4 5	4 1	30 6	25 4	560
		1									r		1
Number of children not included above as they have been in care for less than 9 months	2	2	3	6	10	1 2	1 0	1 6	0	0	25	36	61
	<u>.</u>		<u>.</u>	<u>.</u>		-	<u>.</u>	-	<u>.</u>	<u>.</u>			
Number where plan has been in place for 12 months or more and yet to be achieved	0	0	0	0	0	0	0	0	0	0	0	0	0

10.3.27	Can foster carers get access to support 24 hours a day throughout the period?	LAC 30.9.19
	Foster carers can access the regional emergency social work service when support is required outside of normal working hours. Should the fostering service be aware of issues within a foster placement, the fostering supervising social worker will provide support to the carer out of hours.	
10.3.28	What action is being taken to monitor and reduce the number of placement moves experienced by Looked After Children?	LAC 30.9.19
	The Trust monitors and analyses placement moves which are reviewed by the Director and senior management team on a monthly basis. The number of placement moves within the residential care sector has reduced over the past six months. The placement moves are	
	planned. The Trust has utilised support staff within the general fostering service to provide additional support to foster placements which are considered to be fragile or approaching breakdown. The posts have now been permanently filled with 2.0 wte band 4 staff and are waiting a further 0.6 wte to take up post. These posts are in addition to 1.0 wte band 4 support worker working within edge of care services and 2.0 wte project workers providing wraparound support via the Extern projects to those young people in intensive support placements. In light of the increase within the looked after population in the Trust and the increase in those considered inappropriately placed, as outlined in 10.3.23, such supports have been necessary to meet children and young people's needs and support carers in an increasingly pressurised service.	

Ago	<1		1-4	4	5-1	1	12-	15	1	6	17	7	TO	ΓAL	Total
Age	М	F	М	F	М	F	М	F	М	F	М	F	М	F	Total
Cautioned					0	0	2	1	6	3	8	1	16	5	21
Remanded					0	0	1	2	0	0	0	1	1	3	4
Convicted					0	0	0	1	0	0	3	2	3	3	6
Total	0	0	0	0	0	0	3	4	6	3	11	4	20	11	31
(b		many or alco	/ Look phol?	ed At		hildı						e dr			LAC 30.9.7
		or alco			fter C	hildı		re s		cted			ugs		LAC 30.9.
(b	and/o	or alco	ohol?			hildı	ren a	re s	uspe	cted	to us		ugs		LAC
(b	and/o	or alco 1	ohol?	4	5-^	hildi	en a	re s	usper 16	cted	to us	7	ugs)TAL	LAC 30.9.
Age (b Use Alcohol	and/o	or alco 1	ohol?	4	5-^ M	hildi	en a	re s 15 F	uspe 16 M	cted	to us	7 F	ugs TO M)TAL	LAC 30.9.
(b	and/o	or alco 1	ohol?	4	5 -^ M	hildi 11 F 0	en a	re s 15 F 0	16 M 0	cted F 0	to us 1 M 0	7 F	ugs TO M 0	TAL F 1	LAC 30.9. ⁷ Total

10.3.30	What is being done in partnership with other agencies to reduce the volume of Looked After Children involved in offending behavior?
	Two health and well-being workers are employed within children's homes, to promote engagement and broaden the range of diversionary activities and community based supports for young people and promotes health, social and emotional wellbeing. The Trust considers this development to be an additional measure to divert young people from becoming engaged in negative and risk taking behaviours. This is in conjunction with the employment of alcohol and substance misuse workers within residential care.
	In line with transformation funding, the Trust has established a Peripatetic Team to provide additional support to young people in residential care. This team is deployed on a rota basis across the residential homes in a responsive manner as required. While the intended outcomes of this service are wide ranging, this includes a reduction in offending behaviour of young people in residential care.
	Each children's home has an identified youth diversion officer from the PSNI, whose role is to engage proactively with the young people resident and build relationships. The youth diversion officer work in partnership with residential staff in a preventative manner and can be responsive to specific local need in order to disrupt patterns of behaviour.
10.3.31	What action is being taken to address the health needs of Looked After Children?
	Child Health Directorate
	The Trust follows the guidance of Public Health Agency (PHA) regional guidance: Promoting the health and well-being of looked after children and young people: Guidance for health visitors, school nurses, family nurses (Family Nurse Partnership) and looked after children nurse specialists.
	As part of a universal service, heath visitors and school nurses are able to meet the needs of LAC in a way that is easily accessible and non- stigmatising. In the Trust, on receipt of a CLA1 notification of child becoming looked after or notification from a different source, if the child/young person is in a foster/kinship placement or home with the Trust sharing parental responsibility, caseload responsibility will be allocated to either a health visitor or school nurse.
	An initial looked after children health assessment is routinely completed on all children. Pre-school aged children health assessments are reviewed six monthly, primary and post primary school aged children health assessments are reviewed annually.
1	

decision making and choose not to engage to have a health assessment completed. The social worker and GP are notified if they decline the service. If health needs are identified requiring an intervention by the allocated health visitor/school nurse a health plan will be commenced and a targeted service provided until the health issue is resolved. The health visitor/school nurse also provides advice and support to the foster carer/kinship carer as required/requested. If nursing staff are actively involved with the child they attend LAC review meetings, to share information and ensure a holistic and collaborative approach to addressing needs, or signposting to other services.

The looked after children nurse specialist (LACNS) provides advice and support regarding health issues to young people and staff, primarily within the residential care setting, but can also provide advice and support to young people, foster carers and staff within the community setting on request. On notification of a young person being placed in William Street assessment centre or one of the other residential units, the LACNS commences a looked after child health assessment. The health assessment encompasses a range of issues not only pertaining to detection of ill-health, but focusing on emotional well-being, sexual health and health promotion needs. Undertaking health assessments ensures that health information is provided to the young person on a regular basis throughout their period in the looked after system. It also ensures that adverse childhood events are reviewed with regard to their impact on the child/young person's health and development.

If health needs are identified requiring an intervention by the LACNS a health plan will be commenced and a targeted service provided until the health issue is resolved, or signposted to other services.

The LACNS remains actively involved with the child/young person and attends LAC review meetings to ensure a supportive, holistic and collaborative approach to addressing needs.

The LACNS continues to strengthen the relationships developed with the therapeutic LAC nurse, cared for children – looked after children, SET Connects, youth health advice nurse, health development, drug liaison support workers and the young person's residential key workers, to ensure interventions, advice and support are child centred. Pathways for referral to specialist service, in collaboration with the social worker, have been established to ensure efficient and effective access to treatment.

If the responsible social worker becomes aware of a health need/issue that may require an intervention from the allocated nurse, they can make a verbal or written referral at any time.

The LAC nurse specialist and named nurse safeguarding children are members of the PHA, regional health and well-being looked after children forum. The purpose of this forum is to improve the health and well-being of looked after children and those in transition from care through evidence based interventions, effective co-ordination, sharing models of best practice and shaping future services.

	Workshops have been held to discuss a way forward to achieving robust data. Regular health appraisals have been included on the child system (CHS) forms to include health related issues, ie drug/alcohol n and mental health issues. There have also been discussions abo development of an app, with health related information to reach this audience, and a more user friendly family health assessment template. Health Development HOPE mentoring scheme has been developed to offer a range of ac and one to one support for children/young people in residential settings. The LACNS has close links with the youth health advice service nurse has a focus on sexual health as part of a holistic assessment of healt well-being.	health nisuse ut the target tivities e, who
10.3.34	 (b) How many Looked After Children have been reported to the Police for reasons other than having gone missing for 24 hours or more during the period? (This table should be completed for each Residential Facility, it is not required for Foster Carers) 	LAC 30.9.19
OAKLAN	IDS	

	Prim	nary	Secor	dary	16	<u>;</u> +	Tot	al
Reason	No of Children	No. of Events	No of Children		No of Children	No. of Events	No of Children	No. of Events
Unauthorised Absence	0	0	3	18	4	11	7	29
Breach of Bail	0	0	2	10	1	2	3	12
Child At Risk	0	0	2	2	3	5	5	7
Criminal Damage within Placement	0	0	0	0	1	1	1	1
Assault within Placement	0	0	2	4	2	3	4	7
Other	0	0	3	16	3	22	6	38
Total	0	0	12	50	14	44	26	94
	-	-	•	-	-	-	-	-
Total no of individual <i>children</i> this relates to:	0	0	3	3	4	4	7	7

PI SECURE

Reason	Primary		Secondary		16+		Total	
	No of Children	No. of Events						
Unauthorised Absence	0	0	0	0	0	0	0	0
Breach of Bail	0	0	0	0	0	0	0	0
Child At Risk	0	0	0	0	0	0	0	0
Criminal Damage within Placement	0	0	0	0	1	1	1	1
Assault within Placement	0	0	0	0	1	1	1	1
Other	0	0	0	0	1	1	1	1
Total	0	0	0	0	3	3	3	3
		-		-	•	•	-	
Total no of individual		_		_				_

idual lates 0	0 0 0	1 1	1 1
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ARC SECURE

Reason	Primary		Secondary		16+		Total	
	No of Children	No. of Events	No of Childrer	No. of Events	No of Children	No. of Events	No of Children	No. of Events
Unauthorised Absence	0	0	0	0	0	0	0	0
Breach of Bail	0	0	0	0	0	0	0	0
Child At Risk	0	0	0	0	0	0	0	0
Criminal Damage within Placement	0	0	0	0	1	1	1	1
Assault within Placement	0	0	0	0	0	0	0	0
Other	0	0	0	0	1	3	1	3
Total	0	0	0	0	2	4	2	4
Total no of individual <i>children</i> this relates to:	0	0	0	0	2	2	2	2

WILLIAM STREET

	Primary		Secondary		16+		Total	
Reason	No of Children		No of Children	No. of Events	No of Children	No. of Events	No of Children	No. of Event s
Unauthorised Absence	0	0	10	15	0	0	10	15
Breach of Bail	0	0	2	9	0	0	2	9
Child At Risk	0	0	5	11	1	1	6	12
Criminal Damage within Placement	0	0	4	13	0	0	4	13
Assault within Placement	0	0	4	8	0	0	4	8
Other	0	0	3	3	0	0	3	3
Total	0	0	28	59	1	1	29	60

Total no of individual children this relates to:	0	0	14	14	1	1	15	15	
--	---	---	----	----	---	---	----	----	--

MARMION

Primary		Secondary		16+		Total	
No of Children	No. of Events	No of Children	No. of Events	No of Children			No. of Events
0	0	5	43	3	4	8	47
0	0	2	2	0	0	2	2
0	0	5	13	1	1	6	14
0	0	3	3	0	0	3	3
0	0	2	2	0	0	2	2
0	0	5	20	1	2	6	22
0	0	22	83	5	7	27	90
							-
0	0	6	6	4	4	8	8
	No of Children 0 0 0 0 0 0 0 0	No of Children No. of Events 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	No of Children No. of Events No of Children 0 0 5 0 0 2 0 0 5 0 0 2 0 0 3 0 0 2 0 0 3 0 0 5 0 0 2 0 0 2 0 0 2 0 0 2 0 0 2 0 0 2 0 0 2 0 0 2	No of Children No. of Events No of Children No. of Events 0 0 5 43 0 0 5 43 0 0 2 2 0 0 5 13 0 0 3 3 0 0 2 2 0 0 3 3 0 0 2 2 0 0 3 3 0 0 5 20 0 0 22 83	No of ChildrenNo. of EventsNo of ChildrenNo. of EventsNo of Children00543300220002200051310033000220005131002200052010022835	No of ChildrenNo. of EventsNo. of ChildrenNo. of EventsNo. of Events00543340022000022000051311003300002200003300002200005201200228357	No of ChildrenNo of ChildrenNo. of EventsNo. of ChildrenNo. of EventsNo. of

CUAN COURT

	Primary		Secondary		16+		Total	
Reason	No of Children	No. of Events						
Unauthorised Absence	0	0	0	0	3	12	3	12
Breach of Bail	0	0	0	0	3	3	3	3
Child At Risk	0	0	1	1	1	1	2	2
Criminal Damage within Placement	0	0	0	0	2	2	2	2
Assault within Placement	0	0	0	0	1	1	1	1
Other	0	0	0	0	8	8	8	8
Total	0	0	1	1	18	27	19	28
Total no of individual							_	

Total no of individual								
children this relates	0	0	1	1	4	4	5	5
to:								

ASHGROVE

Primary		Secondary		16+		Total	
No of Children	No. of Events	No of Children	No. of Events	No of Children	No. of Events	No of Children	No. of Events
0	0	1	1	3	4	4	5
0	0	1	3	2	5	3	8
0	0	0	0	0	0	0	0
0	0	1	2	3	4	4	6
0	0	0	0	2	3	2	3
0	0	2	6	4	23	6	29
0	0	5	12	14	39	19	51
0	0	3	3	4	4	7	7
	No of Children 0 0 0 0 0 0 0	No of Children No. of Events 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	No of Children No. of Events No of Children 0 0 1 0 0 1 0 0 1 0 0 1 0 0 1 0 0 1 0 0 0 0 0 1 0 0 1 0 0 1 0 0 1 0 0 2 0 0 5	No of Children No. of Events No of Children No. of Events 0 0 1 1 0 0 1 3 0 0 1 3 0 0 1 3 0 0 1 2 0 0 0 0 0 0 0 2 6 0 0 5 12	No of Children No. of Events No of Children No. of Events No of Children 0 0 1 3 0 0 1 3 0 0 1 3 0 0 1 3 0 0 1 3 0 0 1 3 0 0 1 3 0 0 1 3 0 0 0 0 0 0 1 2 0 0 1 2 0 0 0 2 0 0 2 6 0 0 5 12 14	No of Children No. of Events No of Children No. of Events No. of Children No. of Events 0 0 1 3 4 0 0 1 3 4 0 0 1 3 2 5 0 0 0 0 0 0 0 0 1 3 2 5 0 0 1 3 4 0 0 0 1 3 2 5 0 0 0 0 0 0 0 0 1 2 3 4 0 0 0 0 2 3 0 0 2 6 4 23 0 0 5 12 14 39	No of Children No. of Events No. of Children No. of Events No. of Events No. of Children No. of Events No. of Children 0 0 1 3 4 4 0 0 1 3 2 5 3 0 0 1 3 2 5 3 0 0 0 0 0 0 0 0 0 1 3 2 5 3 0 0 0 0 0 0 0 0 0 1 2 3 4 4 0 0 1 2 3 4 4 0 0 0 2 3 2 6 0 0 5 12 14 39 19

GLENMORE

	Primary		Secon	Secondary		16+		tal
Reason	No of Children	No. of Events						
Unauthorised Absence	0	0	0	0	0	0	0	0
Breach of Bail	0	0	0	0	0	0	0	0
Child At Risk	0	0	0	0	0	0	0	0
Criminal Damage within Placement	0	0	0	0	0	0	0	0
Assault within Placement	0	0	0	0	0	0	0	0
Other	0	0	0	0	0	0	0	0
Total	0	0	0	0	0	0	0	0
Total no of individual <i>children</i> this relates to:	0	0	0	0	0	0	0	0

MURLOUGH SECURE

	Prim	Primary		Secondary		16+		Total	
Reason	No of Children	No. of Events							
Unauthorised Absence	0	0	0	0	0	0	0	0	
Breach of Bail	0	0	0	0	0	0	0	0	
Child At Risk	0	0	0	0	0	0	0	0	
Criminal Damage within Placement	0	0	0	0	0	0	0	0	
Assault within Placement	0	0	0	0	0	0	0	0	
Other	0	0	0	0	0	0	0	0	
Total	0	0	0	0	0	0	0	0	
Total no of individual <i>children</i> this relates to:	0	0	0	0	0	0	0	0	

LINDSAY HOUSE

LINDSAT HOUSE								
	Primary		Secondary		16+		Total	
Reason	No of Children	No. of Events						
Unauthorised Absence	0	0	0	0	0	0	0	0
Breach of Bail	0	0	0	0	0	0	0	0
Child At Risk	0	0	0	0	0	0	0	0
Criminal Damage within Placement	0	0	0	0	0	0	0	0
Assault within Placement	0	0	0	0	0	0	0	0
Other	0	0	0	0	0	0	0	0
Total	0	0	0	0	0	0	0	0
Total no of individual <i>children</i> this relates to:	0	0	0	0	0	0	0	0

FLAXFIELD

	Primary		Secon	Secondary		16+		Total	
Reason	No of Children	No. of Events							
Unauthorised Absence	0	0	1	7	3	5	4	12	
Breach of Bail	0	0	0	0	1	2	1	2	
Child At Risk	0	0	4	12	1	1	5	13	
Criminal Damage within Placement	0	0	0	0	0	0	0	0	
Assault within Placement	0	0	4	2	2	1	6	3	
Other	0	0	0	0	0	0	0	0	
Total	0	0	9	21	7	9	16	30	
Total no of individual <i>children</i> this relates to:	0	0	5	5	3	3	8	8	

	(c) What is being done to address the problem of children going missing?	LAC 30.9.19
	A weekly return is completed within the residential home which identifies all young people within residential care who go missing and any risk taking behaviours. The Trust's child sexual exploitation (CSE) lead reviews the weekly return and attends risk strategy meetings/red flag reviews/looked after children's reviews when the issue of missing is raised. Safety planning, adherence to the regional guidance and intelligence information is quickly shared with the PSNI and if necessary, the young person can be placed on the CSE register.	
	The Trust's CSE lead also receives the 'missing three times' figures and follows this up with the field social worker, to ensure that they are aware of the issue and appropriate safeguards are in place.	
	The Trust's operational group, which includes residential and community team PSWs, as well as community police, PPU and ROU meet on a monthly basis to share information, look at trends and agree actions.	
	Within the homes, key-workers continue to discuss the areas of concern and safety planning with the individual young people. The Trust continues to receive a daily update on all police contact with the children's homes - this encourages an understanding and review of all police interventions. In addition, the Trust and PSNI have been engaging with young people through social events. This builds a rapport between young people and youth diversionary officers.	
10.3.35	Number of children accommodated by ELB for 3 months or more by category.	LAC 30.9.19
	None	
10.3.36	(a) Number of sibling groups accommodated:	LAC 30.9.19
	 Together 13 Not accommodated together 3 	
	Siblings placed together	
	Four sets of two siblings were placed in independent agency placements.	
	Three sets of two siblings moved internally from one Trust placement to another long term Trust placement.	
	One set of two siblings were placed in Trust foster care and then	

moved together to an agency placement due to pressures on the Trust foster carer.	
One set of three siblings went to family and friends.	
One set of three siblings, the baby stayed in hospital, the other two siblings went to their granny and all three returned to their parents the next day.	
One set of three siblings went on a short break for three days with Trust foster carer as mum needed support, then returned home.	
Two sets of two siblings were initially in separate placements and were then placed together within a few days, one within the Trust, the other within an independent agency.	
(b) How many sibling groups became Looked After during the period? If placed apart provide an explanation for each occurrence?	LAC 30.9.19
Siblings separated	
Due to a kinship breakdown, one set of three siblings were separated and went to Trust placements, two siblings were placed together and the other sibling was placed with Trust foster carer in close proximity to her older siblings.	
One set of four siblings went to separate placements, two of the siblings were placed together to an independent agency placement and the other two siblings went to separate placements within the Trust. There were no sibling options available for them either within the Trust or across the independent agencies.	
One set of two siblings were separated and went to different Trust placements, as there were no sibling options either within the Trust or across the independent agencies.	

0.3.39	(a)	During the perio Looked After Ch										eca	me a		LAC 30.9.19
			<	4	1.	4	5-2	1.4	10	-15	10	õ+	Та	tal	_
Placeme admissio			< M	F	M	-4 F	5- M	F	M	-15 F	M)+ F	M	F	Total
Resident	ial	Statutory	0	0	0	0	0	0	4	4	1	1	5	5	10
		Voluntary	0	0	0	0	0	0	0	0	0	0	0	0	0
		Private inc ECR's	0	0	0	0	0	0	0	0	0	0	0	0	0
		Secure	0	0	0	0	0	0	0	0	0	0	0	0	0
		Residential Total	0	0	0	0	0	0	4	4	1	1	5	5	10
Fosterin	g	Foster Carers excluding relatives [Stranger]	6	4	1	1	2	4	0	4	0	0	9	13	22
		Kinship care	4	0	5	1	8	2	4	3	0	1	21	7	28
		Independent Providers	0	0	4	0	3	1	0	0	0	1	7	2	9
		Fostering Total	10	4	10	2	13	7	4	7	0	2	37	22	59
Placed a	t Hoi	me with Parents	1	0	0	0	0	1	0	0	1	0	2	1	3
Plac	ed fo	or Adoption	0	0	0	0	0	0	0	0	0	0	0	0	0
		ther	2	0	0	0	0	0	0	0	1	0	3	0	3
0	vera	II TOTAL	13	4	10	2	13	8	8	11	3	3	47	28	75

	· · /	your perio			•							tted	durii	ng		LAC 30.9.1
Children S a full Ac Orc	doption	< M	:1 F	N	<u>1-4</u> Л	F	5-1 M	l1 F	12 M	2-15 F	N	<u>16+</u> Л	F	Tota	al F	Total
No of Child	Iren	0	0	C)	0	0	0	0	0	()	0	0	Г 0	0
	how	those w ma he las	ny ha	ave	prev	iousl	y bee	en on	the	Child						LAC 30.9.1
	Previous I Protecti		n	<	1	1-	-4	5-1	1	12-	15	16	i +	Тс	otal	- Total
Dogistor																
Register				Μ	F	Μ	F	М	F	Μ	F	Μ	F	М	F	
Register				M 12	F 3	M 5	F 2	М 9	F 5	М 4	F 2	M 1	F	м 31	F 12	43
	ildren (d) Nu Aft	mber er du warde	of C	12 hild	3 ren a	5 and Y	2 ⁄oun	9 9 g Pec	5 5 ople v	4 who I	2 Deca	1 me L	0	31		LAC
No of Chi	ildren (d) Nu Afte forv	er du warde	of C ring t ed to	12 hild the j	3 ren a	5 and Y od hav	2 ⁄oun	9 9 CLA1	5 5 ople v	4 who I	2 Deca	1 me L ed ar	0	31 ed		LAC 30.9.1
No of Chi	ildren (d) Nu Aft for	er du warde	of C ring t ed to	12 hild the j	3 ren a perio	5 and Y od hav	2 ⁄ouno d a C	9 9 CLA1	5 ople v form	4 who I	2 Deca	1 me L ed ar	0 Look	31 ed	12	LAC 30.9.1

	(e) Can you as to care are rightly be re breakdown home)?	prop eporte	erly ı ed as	recor s a pl	ded acer	and nent	do n mo\	ot in /e (e	clude g a fe	e wha oster	at sho ring	ould	ns	LAC 30.9.1
	All admissions to Notification form schools.							•••						
0.3.40	(a) During the p Looked Afte													LAC 30.9.1
		<	1	1 -	- 4	5 -	11	12 -	15	1	6+	То	tal	Tatal
Le	gal status	М	F	М	F	М	F	Μ	F	М	F	М	F	Total
Art 21(1 Accommo) odated <16	2	0	3	0	7	3	6	9	0	0	18	12	30
Art. 21(3) Accommo	odated 16+	0	0	0	0	0	0	0	0	1	1	1	1	2
Art. 21(4) Accommo	odated	2	1	3	1	2	0	1	2	0	0	8	4	12
Art. 21(5) Accommo	odated 16+ <21	0	0	0	0	0	0	0	0	1	0	1	0	1
Art. 44 (5) Secure	0	0	0	0	0	0	0	0	0	0	0	0	0
Art. 44 (6 Secure) Interim	0	0	0	0	0	0	0	0	0	0	0	0	0
Art. 50 (1) (a) Care Order	1	0	0	0	0	0	0	0	0	0	1	0	1
Art. 57 (1) Interim CO	7	0	3	0	2	1	1	0	0	0	13	1	14
Emergen Order Art	cy Protection . 63	1	2	1	0	1	1	0	0	0	0	3	3	6
Art. 23(2) Accommo		0	0	0	0	0	0	0	0	0	0	0	0	0
Other		0	1	0	1	1	3	0	0	1	2	2	7	9
		13	4	10	2	1 3	8	8	1	3	3	47	28	75

	(b) (i) Were these emergency;	admi	ssio	ns p	lanr	ied, i	unpl	lann	ed o	r				LAC 30.9.19
		<	1	1 -	4	5 -	11	12	-15	16	ò+	То	otal	Total
	h of the above totals any of these were:-	м	F	м	F	м	F	м	F	м	F	м	F	
Plannec	1	10	0	3	0	6	3	4	3	2	2	25	8	33
Unplanr	ned	2	0	0	1	0	0	4	3	0	1	6	5	11
Emerge	ncy	1	4	7	1	7	5	0	5	1	0	16	15	31
Total		13	4	10	2	13	8	8	11	3	3	47	28	75
	Of the unplanned were admitted to						ssio	ns s	ixtee	en ch	hildr	en		
	(ii) Of those that we were admitted to						rger	ncy l	how	mar	ıy			LAC 30.9.1
	(iii) Of those unpland were admitted by				ency	/ adr	niss	ions	s hov	v ma	iny			LAC 30.9.1
	No unplanned or RESWS.	reme	erge	ncy a	adm	issio	ons v	were	e adr	nitte	d by	/		

10.3.41 During Looked discha	d After)	LAC 30.9.19
Length of time Looked After	<	1	1	-4	5-	11	12-	-15	16	ò+	Тс	otal	
prior to discharge	м	F	М	F	М	F	м	F	М	F	М	F	Total
Under 2 weeks	0	0	1	1	0	2	0	0	0	0	1	3	4
2 weeks < 6 weeks	0	0	0	0	0	0	1	1	0	0	1	1	2
6 weeks < 3 Months	0	0	0	0	0	0	0	1	1	1	1	2	3
3 Months < 6 months	1	0	0	0	0	0	1	0	0	0	1	1	2
6 Months < 1 Year	0	0	0	1	0	0	0	1	1	0	1	2	3
1 yr < 2 yrs	0	0	2	1	1	1	0	1	1	1	4	4	8
2 yrs < 3 yrs	0	0	1	1	0	0	0	0	0	0	1	1	2
3yrs < 5 yrs	0	0	0	1	0	1	0	0	3	2	3	4	7
5 yrs < 10 yrs	0	0	0	0	2	1	0	0	4	1	6	2	8
10+ yrs	0	0	0	0	0	0	0	0	1	1	1	1	2
Total	1	0	4	5	3	5	2	4	11	6	20	21	41

0.3.42 (a) Of all the children their destination a			•		•					.41	what	was	LAC 30.9.1
	<	1	1-	-4	5-′	11	12-	·15	16	+	Tot	tal	
Destination	М	F	м	F	М	F	М	F	М	F	М	F	Total
Returned to Parents/Siblings	1	0	2	2	1	4	2	1	4	0	10	7	17
Returned to Relatives/friends	0	0	0	0	1	1	0	3	2	0	3	4	7
Adopted	0	0	2	3	1	0	0	0	0	0	3	3	6
Independent living/Tenancy (NIHE/H Assoc./Private etc)	0	0	0	0	0	0	0	0	1	1	1	1	2
Foster Carers (GEM)	0	0	0	0	0	0	0	0	2	1	2	1	3
Jointly Commissioned Supported Accommodation Projects	0	0	0	0	0	0	0	0	1	4	1	4	5
Bed + Breakfast	0	0	0	0	0	0	0	0	0	0	0	0	0
Hostel, Foyer	0	0	0	0	0	0	0	0	0	0	0	0	0
Supported Board and Lodgings	0	0	0	0	0	0	0	0	0	0	0	0	0
Prison, Hospital	0	0	0	0	0	0	0	0	0	0	0	0	0
Other	0	0	0	0	0	0	0	0	1	0	1	0	1
Total	1	0	4	5	3	5	2	4	11	6	21	20	41
(b) Of those 16+ yea the period what by age and geno	was	the										•	LAC 30.9.1
Category							1			7		otal	Total
							Μ	F	M	F	M	F	
Number entitled to access Leaving	g Ca	are	Serv	vices	6		2	0	9	6	11	6	17
Number not entitled to access Lea	aving	g Ca	are S	Serv	vices	5	0	0	0	0	0	0	0
Fotal							2	0	9	6	11	6	17

10.3.44		ase provide the total number of esidence Order during the peri		ne subject of	LAC 30.9.19
	Fifteen o period.	children became subject of a R	esidence Order dur	ing the	
	placed v	above please give the number of vith Stranger (Foster Carers), H tial Care or other placement.			LAC 30.9.19
		Placement	No. of Children		
		Stranger (Foster Carers)	1		
		Kinship (Foster Carers)	12		
		Residential Care	0		
		Other placement	2		
		Total	15		
	(b) How	many Residence Orders are ir	n place at period en	d?	LAC 30.9.19
		I number of Residence Orders dred and thirty-three, this is an			

.3.45		ber of (ting pe											LAC 30.9.
		<	1	1 -	4	5 -	11	12 -	15	16 -	17	То	tal
Cause		м	F	М	F	М	F	М	F	М	F	М	F
Natural Causes		0	0	0	0	0	0	0	0	0	0	0	0
Accider	nt	0	0	0	0	0	0	0	0	0	0	0	0
Suicide		0	0	0	0	0	0	0	0	0	0	0	0
Other		0	0	0	0	0	0	0	0	0	0	0	0
Total		0	0	0	0	0	0	0	0	0	0	0	0

Note: Sections 10.3.41 to 10.3.43 should include all discharges including those reported in section 10.4

10.4 CHILDREN (LEAVING CARE) ACT (NI) 2002

Article 34E, Article 34F

10.4.1	Numbe catego						ect to I	_eav	ing (Care	Act	by		Leaving Care 30.9.19	
			M	ale			Total			Fer	nale			Total	
Category	16	17	18	19	20	21 +	Male	16	17	18	19	20	21+	Female	Total
Eligible	18	27					45	13	28					41	86
Relevant	0	6					6	0	2					2	8
Former Relevant			11	26	24	5	66			17	15	28	12	72	138
Qualifying	0	0	0	0	0	0	0	1	1	1	0	0	2	5	5
Total	18	33	11	26	24	5	117	14	31	18	15	28	14	120	237
10.4.2		en O ferei	rder nce t	Lega	al St	atus a	naticall	d en	d.		-		eets	Leaving Care 30.9.19	
Legal Statu	IS						16				17			Total	
Accommoda		icle 2	21)				13				24			37	
Care order	(Art 50 o	r 59))				17				31			48	
Interim Care	e Order (Art 5	57)				0				0			0	
Deemed Ca	are Orde	r					0				0			0	
Other							1				0			1	
Total							31				55			86	

0.4	.6	(a) \ a	What are th		l at 10.4.1 ker and persona or each categor		Leaving Care 30.9.19
				Nun	nber of Young I	People with	
	Categ	Jory	Named Social Worker only	Named Personal Adviser only	Named Social Worker and Personal Adviser	Awaiting allocation of a social worker	Awaiting allocation of a personal adviser
	Eligil	ole	19	0	67	0	18
	Relev	rant	1	0	7	0	0
	Form Relev	-	3	75	60	0	0
	Qualif	ying	3	2	0	0	0
		how	-		th a named pers		Leaving Care 30.9.19
		Cate	gory		Of the young named Perso how many ha Specific Pers	nal Adviser - ive a person	
		Eligib	le		()	
		Relev	/ant		()	
		Form	er Relevar	nt	1		
		Quali	fying		()	

		period end?	ave an up		ate Pathway		Leaving Care 30.9.19
Catego	ory			N	o. without a Pathwa		te
Eligible					17	7	
Releva	nt				1		
Former	Relev	vant			0	l	
Qualify	ing				0		
Total					18	8	
.4.7	Of the	e young people repo	orted at 10	0.4.1	how many do	o not have	Leaving Care
.4.7	a com	e young people repo ppleted needs asses ig at period end?	orted at 10 ssment ar	0.4.1 nd ho	w long have t	they been	Leaving Care 30.9.19
.4.7	a com waitin	npleted needs asses	orted at 10	0.4.1 nd ho	how many do w long have t Time Wa	they been	Care
.4.7	a com waitin	npleted needs asses og at period end? No. Without a	orted at 10 ssment ar	nd ho	w long have t	they been	Care 30.9.19
.4.7 Category	a com waitin	No. Without a completed Needs	ssment ar	nd ho	w long have to Time Wa 3 - 6	they been aiting 7 - 12	Care 30.9.19
.4.7 Category	a com waitin	No. Without a completed Needs Assessment	<3 Mon	nd ho	w long have t Time Wa 3 - 6 Months	aiting 7 - 12 Months	Care 30.9.19
A.7 Category	a com waitin y	No. Without a completed Needs Assessment	<3 Mon	nd ho	w long have to Time Wa 3 - 6 Months 0	aiting 7 - 12 Months	Care 30.9.19 <1 Year 0
.4.7	a com waitin y	No. Without a completed Needs Assessment	Some of the second s	nd ho	w long have to Time Wa 3 - 6 Months 0 0	aiting 7 - 12 Months 0 0	Care 30.9.19 <1 Year 0 0

10.4.8	Narrative on failure to comply as detailed in 10.4.5, 10.4.6, 10.4.7 at period end.	Leaving Care 30.9.19
	10.4.6	
	Eighteen eligible young people do not have a personal advisor (PA) for the following reasons:	
	• A PA will be appointed once the case has transferred from child and family teams (CAFT), intensive support teams (IST) and children's disability services (CDS).	
	• Some young people have been adamant their relationship is with the social worker and they do not want input from a PA.	
	• We have one relevant young person who is pending transfer and has not yet been allocated a PA.	
	 We have considered PA allocations for the remaining Former Relevant but many of these are aged 20 – 21 years and have planned closures over the forth coming months and remain happy to be supported solely by a social worker. Some have also refused PA involvement. 	
	• Three Former Relevant have a social worker only due to the preference and do not wish to have a PA.	
	10.4.6(c)	
	Seventeen eligible young people are awaiting a Pathway Plan. These cases are due to transfer from child and family teams (CAFT), intensive support teams (IST) and children's disability services (CDS). These plans are in the process of development. Transfers will not be affected to the leaving care and after care service (LCAC) until pathway plans are completed and current delays are due to operational pressures in CAFT and impact of difficulties in recruiting staff.	
	One relevant young person has yet to be transferred from CAFT to the LCAC service.	
	10.4.7	
	Seventeen eligible young people are without a needs assessment. All these young people's cases are managed	

	within CAFTs, children's disability services and intensive support teams. Operational pressures and recruitment issues have prevented these needs assessments being completed and the transfer through to the LCAC service.	
10.4.9	Of the young people reported at 10.4.1 what are their living arrangements at period end? Please complete for?	Leaving Care 30.9.19
	(a) Eligible;	

Placement Type	16	17	Total
Foster Placement (Stranger)	8	16	24
Foster Placement (Kinship)	10	11	21
At Home In Care	5	10	15
Residential Children's Home	5	7	12
Secure Care	0	4	4
Specialist Residential Placement (NI/UK)	0	2	2
Hospital	1	1	2
Jointly Commissioned Supported Accommodation Projects	1	4	5
Unregulated Placement	1	0	1
Other	0	0	0
Total	31	55	86

				Car 30.9	e 9.19	
	1	16	17		Total	
		0	0		0	
		0	8		8	
Project	s	0	0		0	
		0	0		0	
		0	0		0	
		0	0		0	
		0			0	
Prison						
Other						
		0	8		8	
18	19	20	2	21+	Total	
14	0	5		8	27	
3	12	24		7	46	
6	8	6		2	22	
					15	
					8	
					5	
			+		2	
-			+		4	
					8	
34	34	<u> </u>		1	138	
	18 14 3	18 19 14 0 3 12 6 8 6 5 3 2 1 1 0 1 1 1 0 4	0 14 0 14 0 12 24 6 8 6 5 4 3 1 1 1 1 1 1 1 1	$\begin{array}{c c c c c c c } & 0 & 0 & 0 & 0 & 0 & 0 & 0 & 0 & 0 & $	$\begin{array}{c c c c c c c } & 0 & 0 & 0 & 0 & 0 & 0 & 0 & 0 & 0 & $	

'Other' relates to one young person currently in a mental health supported living facility

(d) Qualifying young peop		Leaving Care 30.9.19					
Living Arrangements	16	17	18	19	20	21+	Tota
Former Foster Carers (GEM)	0	0	0	0	0	0	0
Tenancy (NIHE/H Assoc/Private)	0	0	0	0	0	2	2
At Home with Parents/Siblings	0	0	1	0	0	0	1
Jointly Commissioned Supported Accommodation Projects	0	0	0	0	0	0	0
Relatives/friends	0	0	0	0	0	0	0
Hostel, B+B, Foyer	0	0	0	0	0	0	0
Supported Board and Lodgings	0	0	0	0	0	0	0
Halls of residence/Student Accommodation	0	0	0	0	0	0	0
Prison	0	0	0	0	0	0	0
Other	1	1	0	0	0	0	2
Total	1	1	1	0	0	2	5

'Other' relates to one 16 year old qualifying and one 17 year old qualifying both placed in mental health facilities.

10.4.10	Of the young people reported at 10.4.1 what is their current education, training and employment status, and how many are being supported financially at period end?'	Leaving Care 30.9.19
	(a) Eligible;	30.3.13

ETE Status	16	17	Total	No. Receiving financial support
Secondary Level Education	18	20	38	38
Further Education	6	12	18	18
Training (Govt. sponsored training)	3	8	11	11
Pre-Vocational	0	1	1	1
Employment	0	0	0	0
ETE Inactive	4	10	14	18
Training (Non Govt. sponsored training)	0	0	0	0
Other(Sick/Disabled, Parent, Carer)	0	4	4	4
Total	31	55	86	86

(b) Relevant;						Leaving Care 30.9.19		
ETE Status	16		17	Tota		No. Receiving Financial support		
Secondary Level Education	0		3	3		3		
Further Education	0		2	2		2		
Training (Govt. sponsored training)	0		2	2		2		
Pre-Vocational	0		0	0		0		
Employment	0		0	0		0		
ETE Inactive Training (Non Govt. sponsored training)	0		1 0	1 0	0			
Other	0		0	0		0		
Total	0		8	8		8		
(c) Former Relevant; and						Leaving Care		
ETE Status	18	19	20	21+	Total	Care 30.9.19		
	18	19 0	20	21+ 0	Total	Care 30.9.19 No. Receiving Financial		
ETE Status						Care 30.9.19 No. Receiving Financial support		
ETE Status Secondary Level Education	1	0	0	0	1	Care 30.9.19 No. Receiving Financial support		
ETE Status Secondary Level Education Further Education	1 5	0	0 4	0 2	1 13	Care 30.9.19 No. Receiving Financial support 1 13		
ETE Status Secondary Level Education Further Education Higher Education	1 5 1	0 2 2	0 4 4	0 2 6	1 13 13	Care 30.9.19 No. Receiving Financial support 1 13 13		
ETE Status Secondary Level Education Further Education Higher Education Training (Govt. sponsored training)	1 5 1 2	0 2 2 4	0 4 4 6	0 2 6 6	1 13 13 18	Care 30.9.19 No. Receiving Financial support 1 13 13 13 18		
ETE Status ETE Status Secondary Level Education Further Education Higher Education Training (Govt. sponsored training) Pre-Vocational	1 5 1 2 2	0 2 2 4 1	0 4 4 6 1	0 2 6 6 0	1 13 13 18 4	Care 30.9.19 No. Receiving Financial support 1 13 13 13 18 4		
ETE Status Secondary Level Education Further Education Higher Education Training (Govt. sponsored training) Pre-Vocational Employment	1 5 1 2 2 7	0 2 2 4 1 12	0 4 4 6 1 10	0 2 6 6 0 3	1 13 13 18 4 32	Care 30.9.19 No. Receiving Financial support 1 13 13 13 18 4 4 32		
ETE Status Secondary Level Education Further Education Higher Education Training (Govt. sponsored training) Pre-Vocational Employment ETE Inactive	1 5 1 2 2 7 8	0 2 2 4 1 12 15	0 4 4 6 1 10 21	0 2 6 6 0 3 0	1 13 13 18 4 32 44	Care 30.9.19 No. Receiving Financial support 1 13 13 13 18 4 4 32 44		

(c) Qualifying young people.									Leaving Care 30.9.19	
ETE Status		16	17	18	19	20	21+	Tota	No. Receiving Financial support	
Secondary Level Education		1	0	0	0	0	0	1	0	
Further Educatio	n	0	0	0	0	0	0	0	0	
Higher Education	า	0	0	0	0	0	2	2	1	
Training (Govt. sponsored trainir	ng)	0	1	0	0	0	0	1	0	
Pre-Vocational		0	0	0	0	0	0	0	0	
Employment		0	0	0	0	0	0	0	0	
ETE Inactive		0	0	1	0	0	0	1	0	
Training (Non G sponsored trainir		0	0	0	0	0	0	0	0	
Other		0	0	0	0	0	0	0	0	
Total		1	1	1	0	0	2	5	1	
Category Convicted du with		onvic	g this tions ast 12	repor		of vers y ed ne	w many were Number of Care Leave formally remanded during the period	of ers (Leaving Care 30.9.19 Number of Care Leavers formally convicted during the period	
Eligible	_				11		1		2	
Relevant	4				1		0		0	
Qualifying	_				1		0		0	
		t Rec	uired		12		10		12	
Former Relevant	Former Relevant Not Req					25		1	14	

10.4.12	Of the young people redisability by major disa chronic illness, Autism gender at period end?	ability – physic n (see definitio	al, sensory, learning,	Leaving Care 30.9.19
_				
Тур	e of Disability	Male	Female	Total
Physical (E	Ex. Sensory)	0	2	2
Sensory		1	0	1
Learning		6	7	13
Chronic illn	ness	0	0	0
Autism(AS	D)/Asperger's/ADHD	11	2	13
Other (und	efined)	0	0	0
No Disabili	ty	99	109	208
Total		117 120		237
0.4.13	Of the young people restatus at period end?'	eported at 10.4	4.1 what is their parental	Leaving Care 30.9.19
	Parental Status		No of Young People	•
-	Parent		21	
	Lone Parent		7	
Ĺ	Lone Parent		7	

10.4.14	'Of the young people reported at 10.4.1 how many are receiving treatment for mental health issues at period end? Of these, how many were new referrals to mental health services during the period?								
Mental He	alth Co	oncerns	waiting for Menta	oung People or receiving al Health ons/services	g t inte	ber of new o mental he ervention/se ng period (30.9.19)	ealth ervices 1.4.19 –		
Mental He	alth Cor	ncerns		77		24			
Self Harm	Self Harm 41					21			
0.4.15	who c	lied durin	ung People wh g the current rvices by caus	reporting per			Leaving Care 30.9.19		
			<u>16-17</u>	18	<u>}+</u>	То	tal		
Cause		M	F	M	F	M	F		
	Natural Causes 0		0	0	0	0	0		
Natural Ca	1363	nt O		1	1				
	1363	0	0	0	0	0	0		
		0	0	0	0	0	0		
Accident									

10.5 FOSTERING						
10.5.1	(a)	How many foster carers are registered with the Trust at period end? How many of the carers above also provide a GEM placement? Of the carers above how many are Prospective adopters dually approved as foster carers? Of the Prospective Adopters/Dually Approved carers above how many are Concurrent Foster/Adoptive Carers?	FOSTER 30.9.19			

Type of approval	No. of Carers	Non- Kinship (Respite only)	Non Kinship Short- term Only	Non- Kinship (Medium- Long term only)	Non- Kinship (Multi- approved)	Total
Kinship Foster Carers (Stage 1 Approved)	45 *					45
Kinship Foster Carers (Stage 2 Approved)	109					109
Panel Approved Foster Carer (Stranger)		50	76	32	39	197
Professional Foster Carers (Fee Paid carers)		13	1	6	7	27
Total	154	63	77	38	46	378

How many of the Carers above also provide a GEM Placement	14			14
Of the carers above how many are Prospective Adopters dually approved as foster carers	22			22
Of the Prospective Adopters/Dually Approved carers above how many are Concurrent Foster/Adoptive Carers	7			7

Other Foster carers				No. of Carers
ndependent Provider Foster Carer	S			71
Carers providing care only to childr are not available to provide care fo				0
No. of kinship foster care househol being assessed as kinship carers f care who have not been presented Fostering Panel.	or a child/r	en placed in	their	45
Total				116
(c) Please give a brea carers de-registere				Son. 30.9.19
No. of Foster Carers de-registered during the period*, by reason.	Kinship Carers	Non Kinship Carers	No. of Carers Do registere	
Carer has adopted or been granted a residence order	2	3	5	7
	2 0	3 5	5	7 7
granted a residence order				
granted a residence order No longer wishing to foster	0	5	5	7
granted a residence order No longer wishing to foster Retired/phased out Deregistered following concerns	0 4	5 6	5 10	7
granted a residence order No longer wishing to foster Retired/phased out Deregistered following concerns re: care of child/ren De-registered by Trust following	0 4 0	5 6 2	5 10 2	7 14 4

(d) Please advise of the recruit during the period;	ment process activ	vity	FOSTEF 30.9.19
Recruitment Process Activity during the p	period*	No. of	Carers
Numbers receiving information packs	Kinship	;	37
Numbers receiving information packs	Non-Kinship	(60
Number of Initial Home Visits	Kinship		36
	Non-Kinship		28
Numbers of Households attending Skills to	Kinship		0
Foster course	Non-Kinship		8
Number of Completed Assessments during	Kinship		14
the period	Non-Kinship		11
Number of these assessments that were	Kinship		0
already approved as Adopters.	Non-Kinship		4
(d) Please give the number of r received by the Trust	egional enquirers		FOSTEF 30.9.19
Enquiries forwarded from RAFS		No of Ca	arers
Total No. of Regional Enquirers referred Regional Team(RAFS)	from the	30	
Number of RAFS enquirers Approved as within the reporting period*?	foster carers	1	
No. of enquiries progressed to assessme not yet to Panel within the reporting perio		1	

10.5.2	they regi end. Ple	stered for and ase also prov	d the nu vide the	imber numt	1 how many p of vacant plac per of fostering ed with them a	es at period	FOSTER 30.9.19
	approval		Total places	5	Vacant at period end	Fostering Househo no child p at the per	lds with blaced
Kinship 1 Asses		rers (Stage	70)	0	C)
Kinship 2 Asses		rers (Stage	14	4	1	1	
Carers	oproved F (Stranger)		18	5	20	20 * (5 trul	y vacant)
Professi (Fee Pa	onal Foste id)	er Carers	29)	0	C)
Total			42	8	21	21	
approve Total	d as foste	ters dually r carers a break, 7 in	4(4(vestiga)	19 19 , 27 respite		
10.5.3	How man	ny foster care	ers have	annu	al reviews out	standing?	FOSTER 30.9.19
Viability	y Visits	Joint Vis	sits		Visits mpleted by ild's Social Worker	Visits Com Supervisir Wor	ng Social
Number	of Visits	36			0	0	

10.5.4	Please provide details of the reasons for outstanding reviews.
	Over the past six months the fostering service has progressed an action plan to reduce the number of outstanding annual reviews. This has been successful with the number of outstanding annual reviews being reduced from fifty-eight to twenty-six across the fostering service:
	• Five annual reviews were delayed due to the foster carers wanting to take a break in order to determine their future in fostering.
	• Four annual reviews were delayed due to ill health of the foster carer or bereavement in their family and they needed some additional time.
	• Four annual reviews were delayed due to difficulties in arranging fostering panel dates. These have now been rescheduled over the next two months.
	• Four annual reviews were delayed due to a unplanned end of placement. The foster carer required some time to recover and reflect before undertaking the disruption process.
	• Four annual reviews were delayed due to outstanding checks which are in process.
	• Two annual reviews were delayed due to issues having arisen in the foster placement which require further assessment in advance of their annual review.
	• Two annual reviews were delayed due an on-going court process in respect of a Residence Order.
	• One annual review was delayed due an on-going investigation in respect of the foster carer and will be brought to panel in the next two months.

10.5.5	What action is being taken to maintain and increase the range, diversity and supply of foster care places?
	The two recruitment and assessment fostering teams plan a bi-annual schedule of recruitment activities with the aim of increasing the range, diversity and supply of foster carers. In order to respond to additional recruitment opportunities which may arise during a six month period flexible plans are in place.
	In the period 1 April 2019 to 30 September 2019 the following activities were achieved:
	Two Skills to Foster pre-approval training courses for non-kinship carers were delivered in June and September 2019. In addition to this one kinship pre-approval Skills to Foster course was delivered in June 2019.
	The Trust website and social media in respect of Facebook and Twitter were utilised throughout the six month reporting period publicising recruitment events, profiling foster carers and posting good news stories.
	April 2019
	A leaflet walkabout took place in Bow Street, Lisburn and Sprucefield on 6 April 2019, to raise awareness of the need for foster carers. This also coincided with an Easter event in Bloomfield Shopping Centre in Bangor on the same date. Both events were covered on social media.
	Preparation for 'Til I Grow Up' (TIGU) recruitment event scheduled on 21 May 2019, during foster care fortnight. This event was run in conjunction with the Belfast Trust.
	An all users Trust email was utilised to promote fostering within the Trust.
	<u>May 2019</u>
	FOSTERCARE FORTNIGHT
	Monday 14 May 2019 – Sunday 27 May 2019 Social media activity & promotion
	'Til I Grow Up' recruitment event took place on the 21 May 2019, in conjunction with the Belfast Trust. This took place in the Ramada Plaza Hotel in Shawsbridge. The aim of the event was to recruit potential carers who can offer a long term foster placement to children who were profiled on the evening. It was also an opportunity for the public to find out more about fostering.

<u>г</u>	
	Social media and newspaper coverage were utilised alongside leaflet drops to various venues including mother and toddler groups and letters to existing carers to promote the event.
	#changeafuture – a regional campaign promoting fostering fortnight designed to highlight the need for foster carers throughout the province. As part of this regional campaign the Trust compiled two videos profiling two sets of carers which were released on social media.
	<u>June 2019</u>
	Leaflet distribution to leisure centres and family focussed attractions took place to raise the profile of fostering.
	Belfast Telegraph article profiling foster carers, again raising the profile of fostering and the rewards that becoming a foster carer can bring.
	Respite foster carer profile completed.
	<u>July 2019</u>
	Leaflet drop to school uniform shops throughout the Trust.
	New foster carer profile added to the fostering and adoption HSC website.
	Intensive support fostering advert in Irish News and local newspapers
	August 2019
	Speciality Food Fare Moira Hilden Brewery Music Festival Leaflet drop, Exploris Lisburn Arts Centre Bridge Community Centre, Lisburn Lisburn Linen Museum Recruitment stand at Ballycrochan Baptist Church 31/08/2019
	September 2019
	RAFT press release re care experienced young person and her long- term foster carers.

NI	10.5 PRIVATE FOSTERING The Children Order (NI) 1995 - Part X B Advice from DLS is that the 28day period should be contine	uous.
10.5.6	What steps has the Trust taken to encourage notifications?	Private Fostering
	The private fostering leaflet has been disseminated across all Directorates advising of the need to notify. Our partner organisations have also received the leaflet and it has been disseminated across family support hubs. The need to promote and raise awareness of private fostering is an issue for all Trusts and may require a regional approach.	
10.5.7	How many Private Fostering Arrangements under Article 106 are in place within the Trust as at the 30th September?	0
10.5.8	How many Private Fostering notifications under Article 106 has the Trust received during the period?	0
10.5.9	Please provide DOB and Date notification was received in respect of each child/young person reported at 10.5.8.	N/A
10.5.10	Of the notifications received (10.5.8) how many has the Trust accepted?	N/A
10.5.11	Of those notifications not accepted please summarise reasons and action taken by the Trust.	N/A
10.5.12	Number of appeals made during the year under Article 113	N/A
10.5.13	Are supervisory visits undertaken in accordance with Regulation 3(1)(a) and (b) as a minimum to children privately fostered? Please provide details of any circumstances where the Regulation has not been adhered to.	N/A
	Notifications under Regulation 4 of the Children (Private Arrangements for Fostering) Regulations (NI) 1996	
10.5.14	How many notifications has the Trust received in respect of children being adopted from abroad i.e. Intercountry Adoption within the period.	0
	Please specify the child's DOB and the date the Trust received notification	each

Article 3(as amended by HPS	S Order 1994), Art	icle 11
(a) Number of enquiries, by type, rewriting what prompted their initial appre	•	and Adoption 30.9.19
Source of Enquiries	Domestic	Inter-Country
Central Regional Team (e.g. Website)	17	0
Newspaper advertisement	0	0
Radio advertisement	0	0
Word of mouth	31	0
Trust Website	0	0
Specific local campaign	0	0
Total	48	0
(b) Please provide the waiting time from commencement of training Time waiting	om initial inquiry to Domestic	Adoption 30.9.19 Inter-Country
Less than 1 month	0	0
More than 1 month less than 3 months	0	0
More than 3 months less than 6 months	0	0
More than 6 month less than 12 months	0	0
1 year or more	0	0
1 year or more	J. J	

0.6.2		estic applications fo I status of applican		received by		option 9.19
Housel	hold type					No.
Single of	carer					0
Cohabi	tating heterosexua	al couple (where the	is is a joint app	lication)		9
Cohabi	tating same sex co	ouple (where this is	a joint applica	ation)		2
Married						0
Total						11
0.6.3		pective Domestic A		•		Adoptio
0.6.3		pective Domestic A angth of time waitin	g, and reason	waiting		Adoptio 0.9.19
		•		waiting		0.9.19 Tota
Ti	at period end, le	No Social Worker Available to commence	g, and reason Reason w Unlikely that child waiting at this time fits their	aiting Applican t not ready to	Other(please specif y	0.9.19 Tota
Ti Less th	at period end, le	No Social Worker Available to commence assessment	g, and reason Reason w Unlikely that child waiting at this time fits their criteria	aiting Applican t not ready to proceed	Other(please specif y below)	0.9.19
Ti Less th More th than 3 r More th	at period end, le	No Social Worker Available to commence assessment	g, and reason Reason w Unlikely that child waiting at this time fits their criteria 0	vaiting Applican t not ready to proceed	Other(please specif y below)	0.9.19 Tota
Tin Less th More th than 3 r More th less tha More th	at period end, le	No Social Worker Available to commence assessment 0 0	g, and reason Reason w Unlikely that child waiting at this time fits their criteria 0 0	waiting aiting Applican t not ready to proceed 0 0	Other(please specif y below)	0.9.19 Tota 1 0 0
Tin Less th More th than 3 r More th less tha More th than 12	at period end, le me waiting an 1 month an 1 month less months an 3 months an 6 months an 6 month less	No Social Worker Available to commence assessment 0 0 0	g, and reason Reason w Unlikely that child waiting at this time fits their criteria 0 0 0	aiting Applican t not ready to proceed 0 0 0	Other(please specif y below) 0 0	0.9.19 Tota 1 0 0 0 0 0

	Of all adoption assessments (I completed during the period pl												optio 9.19
Outcon	ne of assessment										-	esti ents	С
Counse	elled out in Assessment Process										1		
Went to	Panel and Refused									(0		
Househ	olds approved as Adoptive care	rs								(0		
Househ	olds approved as Dual carers/C	onci	urre	nt C	are	rs				Ç	9		
	nolds where previous Foster Card ad as Adoptive carers for their L/		nave	e be	en					2	4		
0.6.7	Number of looked after childre placed with their prospective a duration of wait since freeing of	dopt	ters	as	at 3	0th					d		optio 9.19
Length form th	placed with their prospective a	dopt	ters <u>r as</u>	as	at 3 nteo	0th	Sep	otem				30.	
Length	placed with their prospective a duration of wait since freeing of of time awaiting placement	idopt order	ters <u>r as</u>	as a grai	at 3 nteo	Oth d.	Sep	otem	ber	; an		30.	9.19
Length form th Order	placed with their prospective a duration of wait since freeing of of time awaiting placement	idopt	ters <u>* as</u> * 1	as a grai 1 -	at 3 nteo -4	0th <u>d.</u> 5-	Sep -9	10	-15	; an 16	ò+	30. To	9.19 otal
form th Order	placed with their prospective a duration of wait since freeing o of time awaiting placement a granting of the Freeing	dopt order <	ters r as r 1 F	as a grai 1- M	at 3 ntec -4 F	0th d. 5-	Sep -9 F	10 M	-15 F	; an 16 M	6+ F	30. Тс М	9.19 otal
Length form th Order Less than More tha	placed with their prospective a duration of wait since freeing of of time awaiting placement re granting of the Freeing	<pre>idopt prder </pre>	ters r as r as r f 0	as a grained as a	at 3 ntec -4 F 0	0th 5- M 0	Sep -9 F	10 0	- 15 F	; an 16 M 0	6+ F	30. Tc M 0	9.19 otal F 0
Length form th Order Less than More tha	placed with their prospective a duration of wait since freeing of of time awaiting placement a granting of the Freeing n 1 month n 1 month less than 3 months	Image: state	ters <u>as</u> 1 F 0	as : grai 1- M 0 0	at 3 ntec -4 F 0	0th <u>3</u> . 5 . M 0	Sep -9 0 0	10 [.] M 0	ber -15 F 0	; an 16 M 0	F 0	30. To M 0 0	9.19 otal F 0 0
Length form th Order Less than More tha	placed with their prospective a duration of wait since freeing of of time awaiting placement a granting of the Freeing n 1 month n 1 month less than 3 months n 3 months less than 6 months n 6 month less than 12 months	Image: state	ters <u>as</u> 1 F 0 0	as : grai 1- M 0 0	at 3 ntec -4 F 0 0	0th 3. 5. M 0 0	Sep -9 0 0	10 ⁻ M 0 0	ber -15 0 0	; an 16 M 0 0	F 0 0	30. To M 0 0	9.19 otal F 0 0

									Add 30.9	-				
		The			of O perio					-	e six			
Type of Order	<	1	1-	·2	3-	-4	5-	.9	10-	15	16	+	То	tal
	М	F	М	F	М	F	М	F	М	F	М	F	М	F
Adoption Orders Article 12 (1)														
Previously Looked After *see note below	0	0	2	2	1	1	0	0	0	0	0	0	3	3
Step Parent	0	0	0	0	0	0	1	1	0	2	1	0	2	3
Inter-country	0	0	0	0	0	1	0	0	0	0	0	0	0	1
Other	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Total	0	0	2	2	1	2	1	1	0	2	1	0	5	7

Inter-country Adoptions in a (Hague Designated Country)		1	1 ·	- 2	3 -	- 4	5 -	. 9	10	-15	16+		Total	
(hague besignated country)	Μ	F	Μ	F	Μ	F	Μ	F	Μ	F	Μ	F	Μ	F
Of the number above how many <u>were adopted in</u> a Hague designated country and therefore not through the courts in NI	0	0	0	0	0	1	0	0	0	0	0	0	0	1

Freeing	Orders	s Art 17 an	d Art	<	:1	1-	-2	1.	-4	5-	9	10-	15	15 16+		То	tal
18				м	F	м	F	М	F	М	F	М	F	м	F	м	F
Freeing C agreeme		Art 17 wit	:h	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Freeing C	Orders	- Art 18 (1)		0	0	1	1	3	1	0	0	0	0	0	0	4	2
Court App	without agreement Court Applications for Freeing Orders <i>not granted</i> during the period					0	0		0	0	0	0	0	0	0	0	0
	ŕth	of those chil ne length of ping to live	time f	rom	bec	omi	ng l	ook	ed a	fter	(las	t ep	isoc			Ado 30.9	
Length Time					-	1 yea			2-<3 ear		3-< yea		у	5+ ear	s	Tot	al
											0			0		6	
No. of Children		1	2	2		3	}		0		0			0		6	
	receiv place	1 e provide ti /ed a best i d with appr s including	he nun interesi	nber t de	cisic ters	child on fo	ren or ac	lopti ado	o, at ion a pter	and s, d	iod had ual	end not	bee ove	d en ed		6 Ado 30.9	
Children 10.6.9 Children best inte	receiv place carers who h	e provide t ved a best i d with appr s including nave receivection an	he num interesi ioved a concur ved a d have	nber t de adop rrent	cisic ters t car	child on fo	ren or ac	lopti ado	o, at ion a pter e du	and s, d ratio	iod had ual	end not appi f tha	bee ove	d en ed ait.		Ado 30.9	
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Children I0.6.9 Children best inte not been	who herest de	e provide t ved a best i d with appr s including nave receivection an	he num interesi ioved a concur ved a d have	nber t de adop rrent	cisic oters t car	child on fo (eit ters)	Iren or acc her and	lopti ado <u>d the</u> 1 -	o, at ion a pter e du 4	and rs, d ratio	iod had ual <u>on o</u>	end not appr f tha	bee ove at wa -15	d en ed ait.	6+	Ado 30.9	.19 otal
Children I0.6.9 Children best inte not been adopter. Less than 1	who h rest de place	e provide t ved a best i d with appr s including nave receivection an	he num interest ioved a concur ved a d have	nber t de adop rrent	cisic oters t car	child on fo (eit rers) <1		lopti ado <u>d the</u> 1 - M	o, at ion a pter e du 4 F	s, d ratic 5 M	iod had ual on o	end not app f tha 10	bee ove at wa -15	d en ed ait.	6+	Ado 30.9	otal
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Children 10.6.9 Children best inte not been adopter. Less than 1 More than	receiv place carers who h rest de place	e provide ti /ed a best i d with appr s including nave receive ecision an ed with app	he num interest oved a concur ved a d have broved		cisic ters t car M 0 0 0	<pre>child on fo (eit rers) </pre>		dopti ado <u>d the</u> 1 - M 1 0 3	a, at ion a pter e du 4 F 1 1	5 M 0 0	iod had ual on o F 0 2	end not appl f tha 10 N 0 0 0	-15 0 0 0 0 0	d en ed ait. 1 0 0 0 0	6+ 6+ 0 0 0	Ado 30.9 1 0 3 1	otal

10.6.10	How ma 30th Sep									•		owa	nce	at		dop 0.9.′	
Adoptio	on Allowa	ncos		<'	1	1.	·2	3	-4	5-	-9	10-	-15	16)+	То	tal
Αάορτιο	n Allowa	nces	-	м	F	М	F	м	F	М	F	М	F	м	F	м	F
	option Allow spect of chile h 2019?			0	0	0	1	3	3	11	17	25	15	5	7	44	42
0.6.11	Of the nu period a									ence	ed du	uring	the			dop 0.9.′	
		<	1		1-:	2		3-4	1	5	-9	10-	15	16	ò+	То	tal
		М	F	ſ	N	F		м	F	м	F	м	F	М	F	м	F
No. of Ac allowance reported that com during the period?	es above, menced	0	0		0	0		0	1	1	1	0	0	0	0	1	2
How mar	iy househ	olds/fa	amilie	es is	this	s?						3]				
10.6.12	Details c	of recru	uitme	ent, a	asse	essn	nent	, tra	ining	j, su	ppor	t for	pros	spec	tive	adop	oters
with fos adoption #Chang	I worker f tering sta n togethe leaFuture ed on the church.	ff to pl r inclu event	an o Iding on	ngo a 21	ing disp May	eve lay / 20	nts/o star 19.	cam nd o Ad	baigi n ao optio	ns to dopti on le	o pro ion a eafle	mote at th ts a	e bo ie 'T nd f	oth fo Til I Tyers	oster Grov S we	ing a w U ere a	and p'/ also
	option tea gn was he																

2019. An information evening was held on 23 October 2019 and a preparation to adopt course is planned from 25 - 27 November 2019.

The total number of enquiries received in the Trust between 1 April 2019 and 30 September 2019 was forty-eight, an increase of eighteen compared to the same period last year. Of the forty-eight enquires eleven couples progressed an application for adoption.

Of the eleven couples, two same sex applications were received by the Trust in this period. Ten couples are progressing while one couple were counselled out. All of the remaining ten couples are at different stages in the assessment process. As part of the assessment we are now linking prospective adopters with experienced adopters, to give them a more practical and realistic understanding of adoption. We have also encouraged some prospective adopters with limited experience of children to become actively involved as volunteers in local community groups which they have found very beneficial. During some assessments we have facilitated meetings with family and friends, who have indicated they would provide support to adopters following placement. This is an ongoing process and we plan to include this in all assessments going forward. We have also had a number of prospective adopters who have included family and friends in training; this is something we will continue to encourage and have found very beneficial, especially in helping family and friends understanding of contemporary adoption and in turn they are able to provide more appropriate support to carers.

Newly approved adopters continue to be given free membership of Adoption UK. Many prospective adopters in the process, particularly those being assessed also join Adoption UK and attend local group meetings including concurrent, LGBT groups and training courses. Many also make use of the Adoption UK support line and library, and we encourage them to do so as part of their learning and keeping up to date with adoption issues.

The Trust recognises the importance of training to prospective and approved adopters in addition to them receiving social work and psychology support. We are continuing to develop training, recognising the importance of this for adopters. Adoption Services have now introduced their second training booklet covering the period 2019/20. This is specifically for adopters and includes courses on post adoption blues and depression, parent and child yoga and infant mental health. Nineteen attended the foetal alcohol syndrome disorder training for adopters in July 2019. We have now introduced a new course "Making the Move". Moving a child from fostering into an adoptive placement for both adopters and foster carers. The first of this training was held on 20 September 2019 and twenty-two people, including foster carers and adopters attended. A psychologist, social worker, adoptive and foster carer were involved in presenting the course.

To date attendance by adopters at training has been excellent and encouraging. The numbers continue to increase. All those who attended have found these courses very beneficial and feedback has been very positive.

Adopters also continue to attend the Trust training organised by the fostering team.

We will continue to build on this and offer training for both foster carers and adopters but will also have courses specifically for adopters including approved inter-country adopters.

We also encourage adopters to self-refer to the TESSA service which has become very popular.

Although the Home on Time scheme has ceased, we are continuing with a concurrent care scheme and there continues to be a steady number of applicants expressing an interest in concurrent care.

Since 1 April 2019 three couples have been approved as concurrent carers and a number of these currently in assessment are considering it.

From 1 April 2019 until 30 September 2019, twenty-six assessments were ongoing. Thirteen were presented to the adoption panel. Nine were dual approved, including four also for concurrent, and four were foster carers. The remaining thirteen are currently being assessed; panel for one of them has been postponed since July 2018, due to ongoing legal issues but is now booked into panel for October 2019.

There are seven step-parent adoption applications ongoing. Four of which were received in the Trust between 1 April 2019 – 30 September 2019.

We currently have four approved inter-country adopters awaiting placement who are reviewed on a six-monthly basis. We are awaiting the granting of Article 23 for another inter-country placement. Support remains ongoing, with regular reports forwarded to the relevant countries.

We continue to see an increase in relation to requests for tracing.

Support is provided to all approved adopters, both those awaiting placement, who are reviewed every six months and those with placements until the adoption order is granted. More intensive support is provided to concurrent carers especially in the early stage of placement.

10.6.13 Details of Post Adoption Support - this section should include data in respect of the number of and action taken in respect of placement breakdowns both pre (i.e. where adoption is the Care Plan) and post Adoption Order

There is now a psychologist connected to the permanence and post-adoption Team from SET Connects, as well as the team continuing to be able to access the SET Connects service generally. Support from the service can be provided through consultation with the social worker supporting the family for advice and guidance, through support and advice to the adoptive parents or via direct work with the children and young people.

There are currently fifty-five supported/supervised contacts (some of these contacts are four times per year).

Thirty indirect contacts/post-box; a significant number of the supervised contacts also have indirect contacts but are not reflected in this figure as they are already counted above.

Support for direct contact varies across the service dependent upon assessed need. For example, some well-established contacts with birth parents that have come to an acceptance of the child/young person's adoption, are supported by the Trust in making arrangements but are facilitated by the birth parents and adopters independently. Trust staff are available if required and are available for support before/after contact if required.

Other contacts require a higher level of support and this can range from setting up contact and supervising it to preparation with all parties before and support during and after. Support is provided to the birth relatives, as well as to the children and adopters in order to ensure that birth relatives are prepared for contact and to assist in making the contact as positive an experience for the child as possible.

Reviews of this contact take place periodically.

Post adoption support activity continues to grow within the Trust and intensive support has been required by a number of families in the area over the past six months. This ranged from counselling, advice, narrative work, theraplay, self-esteem work, addressing issues around contact. Some of these families were referred into the SET Connects service for psychology input. Some were referred through the post adoption referral panel into Extern projects such as Linx and Time out, which provide support for teenagers who are displaying risk taking behaviours. The TESSA service provided support to a number of Trust families in this period also.

We currently have fifty active support cases.

Staff have been trained to Level 1 in dyadic developmental psychotherapy and theraplay trained, therefore adding to their skill set in providing advice and support to adopters and in their work directly with children and young people during waiting times for therapeutic services.

We continue to be more proactive with our post adoption families by organising group activities.

Attachment based swimming – for families with pre-school aged children who are in the early stages of their adoption journey - now on our second round of swimming classes with a new group. The class is followed by lunch together in a private room in the leisure centre. The first swimming group was attended by eight families and the second by six (lower number due to the timing and geography of children placed).

There is also an **outdoor activity day** and bbq arranged for upper primary/lower postprimary age children and parents. Support has been provided in liaising with schools to offer advice in respect of issues relating to children who have been adopted and providing information about 'Let's Learn Together' and the training available for schools through the TESSA service.

Support is also available in assisting parents in managing issues arising, whether that is support around statementing processes, liaising with schools/support for parents and young people when young people have been suspended or experience anxiety around school attendance.

New to the Trust in this period is the one year pilot project funded from social work strategy monies; Equine Therapy. This is proving very popular for our teenagers and is complimentary to any existing therapy they are receiving. It provides the teenagers with companionship, comfort and a strong sense of wellbeing.

The service has also supported an adopted teenager and family through a tumultuous time which saw the young person enter the care system before being reunified successfully with the adoptive family.

10.6.14	Number of inter-country adoption orders pending at period end	\land

10.7 EARLY YEARS

10.7.1	Please provide the current early years provision / places, registrations and de-registrations Include Number of Approved Home Child Carers										
		Current P	ent Provision Registrations/De- registrations/Voluntary Cease De-registra								
	Sector	Total Number of Services	Number of Places	Number New Registration s During period	Number De- registered by the Trust during period	No Voluntar y Ceased during the period					
Day Nur	sery	66	2839	3	0	2					
Out of S Day Nur	chool within serv	51	1379								
	ay Nursery		4218								
Stand-A	lone Crèche	4	117	0	0	0					
Stand-A Playgrou		77	2402	2	0	2					
	lone Out of	41	1256	3	0	1					
Childmir	nder	602	3612	12	0	33					
Approve carers	d Home Child	55	n/a	4	0	9					
Holiday	Scheme	1	80		0	0					
Two yea	r old Prog.	11	132		0	0					
Total		908	11817	24	0	47					

10.7.2	Registration issues and commentary as at period end	Early Years 30.9.19
	In the period since March 2019, there have been some staffing issues with two early years social workers retiring and the majority of administration posts being filled by agency workers.	
	All vacant posts are within the recruitment process; one social work post has been filled since August 2019, the other social work post and administration have been accepted and are both due to start in October 2019.	
	These staffing issues have had an impact on processes across the service and this is reflected in the increased overdue inspections reported on. See more detailed comments below relating to each table.	
	10.7.1. Current Provision/Places/Registrations and De- registrations/Vol Ceased	
	Please note the supplied template has added an additional row <i>total day nursery places</i> with the result that total day nursery places are being counted twice in this column, therefore the formula which was attached to this column has been modified to ensure total day nursery places are only counted once.	
	For total number of out of school places, this is the maximum number of out of school places that a setting could have if all rooms which are registered to provide out of schools places were filled. This may not necessarily reflect the actual number of out of school places, as settings will determine how to use rooms in line with parental demand. Many settings have a dual registration allowing them to provide care for pre-school or school aged children as they need. The total number of day care places is calculated by subtracting the total number of out of schools places from the total number of full day care places which a setting is registered for.	
	10.7.3 Total number of annual inspections required/carried out/outstanding and time outstanding	
	There are a total of fifty-two inspections overdue in this period, the majority within the 0 - 3 month window. This is primarily due to the deficit of two social workers for five months during this reporting period. The other reason which may account for a number of these is due to the new inspection cycle introduced this year, which as reported on previously (March 2019), has meant that some inspections will be later in the inspection year. It is anticipated that the impact of the new inspection cycle will be	
<u> </u>		153

10.7.4 Number of Outstanding ApplicationsThe majority of these are within the 0 - 3 months period which is standard practice until all documentation is complete and the application can be allocated.All of those that are overdue four months or more are as a result of delays in the applicant's own return of paperwork or waiting for a place on the Core Registration training. There is some delay
standard practice until all documentation is complete and the application can be allocated.All of those that are overdue four months or more are as a result of delays in the applicant's own return of paperwork or waiting for
of delays in the applicant's own return of paperwork or waiting for
caused by administration staff not following up on these delays with the applicant directly but it should be noted that the responsibility for progressing applications lies largely with the applicant.
10.7.5 Length of time that applications have been in progress
The majority of these are within time-scales of 0 - 3 months. For those that are in the process longer, this is due to delays caused by the applicant in completing renovations to get their premises ready and in some cases, being understaffed has meant a social worker in not available to allocate the application to.

					spection								Early Years 30.9.19	
								Т	ime C	Dutsta	andin	g		
Sector		Number Requiring Inspection during the period (1.4.19- 30.9.19)	Number of Inspections carried out during the period (1.4.19- 30.9.19)	Total Inspections still to be completed this year (1.4.19- 31.3.20)	Total Inspections still to be completed this year (1.4.19-31.3.20)	0-3mths	4-6mths	7-9mths	10-12mths	13-18mths	19-24mths	2-3 years	3-4 years	5 yrs +
Day Nurse	ry	27	22	5	5	4	1	0	0	0	0	0	0	0
Crèche		3	3	0	0	0	0	0	0	0	0	0	0	0
Playgroup		28	27	1	1	0	1	0	0	0	0	0	0	0
Out of Sch	ool	20	17	3	3	3	0	0	0	0	0	0	0	0
Childminde	er	309	267	42	42	22	20	0	0	0	0	0	0	0
Holiday Sc Two year c		1	1	0	0	0	0	0	0	0	0	0	0	0
Prog. Total		4 392	3 340	1 52	1 52	0 29	1 23	0 0	0 0	0 0	0 0	0 0	0 0	0 0

Overdue inspections are as a result of staff shortages during this period. Some delays are also caused by the introduction of a new inspection cycle this year.

	of outstandir es as at 30th		tions for each c er	of the above		Early Years 30.9.19
		Length	of Time Unalloc	ated from re	ceipt of Appl	ication
Sector	No. of Applications not Allocated	0 - 3 Months	4 – 6 mths	7 – 9 mths	10 -12 mths	12+ mths
Day Nursery	4	4	0	0	0	0
Crèche	0	0	0	0	0	0
Playgroup	0	0	0	0	0	0
Out of School	0	0	0	0	0	0
Childminder	26	20	2	4	0	0
Holiday Scheme	0	0	0	0	0	0
Two year old Prog.	0	0	0	0	0	0
Total	30	24	2	4	0	0

4 - 6 months (2)

- Health visitor reference required and core training to complete
- No Access NI number supplied

7 - 9 months (4)

- Incomplete documentation e.g. GP stamp
- References not returned,
- Access NI not completed for family members and Core Training not completed
- ID checks outstanding despite reminders

	0.7.5 Number of current applications being assessed at period end and duration of assessment											
		Length	of Time tha	at applicatio	ns have be	en in progre	ess					
Sector		Number in Progress	0 - 3mths	4 - 6mths	7-9mths	10-12mths	12+ mths					
Day Nurse	ry	2	2	0	0	0	0					
Crèche		0	0	0	0	0	0					
Playgroup		0	0	0	0	0	0					
Out of Sch	ool	1	1	0	0	0	0					
Childminde	ər	6	2	3	0	1	0					
Holiday Sc	heme	0	0	0	0	0	0					
Two year o Prog.	old	0	0	0	0	0	0					
Total		9	5	3	0	1	0					

For those in the process more than four months this is due to delays caused by the applicant themselves in completing renovations to get their premises ready. In one case a delay has been caused by understaffing.

	10.8 Complaints & Representation
10.8.1	Does the Trust have an appropriately authorised and experienced children's complaints officer?
	The Trust has a complaints manager who undertakes the role of the designated complaints officer under the Children's Order Complaints Procedure, with expert advice from the sector manager (social work lead) for safeguarding children.
10.8.2	Does the Trust have an independent advocacy service for children and their families?
	The Trust has developed a contract with Voice of Young People in Care (VOYPIC) to provide an independent advocacy service to looked after children. Other independent advocacy services are provided by the Law Centre, the Children's Law Centre and the NI Commission for Children and Young People.
	Within the Regional Secure Care Centre, NIACRO provide an independent representation service directly to the young people.
10.8.3	What arrangements are in place to ensure that all complaints – both formal and informal – from children and their families are recorded and dealt with?
	The Trust has a comprehensive complaints procedure for all complaints which is available and accessible for children and their families. Information leaflets on how to make a complaint or representation under the Children's Order requirements is provided for children and families.
	Children and families receive information on how to make complaints about the services they receive. All complaints are referred to the Trust's complaints department who record and monitor themes, trends, issues and timescales of responsibilities to complaints.
	Weekly reports are provided to the Director of children's services. A lessons learnt group has been established which reviews complaints and identifies improvement plans from issues arising. This is a sub group of the children's governance committee whose membership is comprised of senior managers, principal practitioners, social care governance and learning and improvement staff.
	It is of note from a study of complaints and compliments received in a sector that compliments received by children's services out way the number of complaints received.

10.8.4	4 What whistle-blowing arrangements are in place to ensure that concerns raise staff working in children's services are recorded and dealt with?	
	The Trust has a whistle blowing policy which outlines how staff can i	aise concerns.
10.8.5	How many <i>Children Order</i> complaints – both formal and informal have been received since the last report?	
	The Trust received thirteen formal and informal Children Order complaints during the period.	13
10.8.6	How many complaints (which do not fall within the Children Order definition) – both formal and informal have been received since the last report?	
	The Trust received forty-seven HSC formal complaints during the period.	47
10.8.7	How have these been dealt with?	
	The Trust adheres to the complaints procedure, acknowledging receipt of complaint and the matter is then investigated by a manager within the service. Some investigations require face to face meetings with the complainant and on other circumstances the complainant will be written to once the investigation is completed.	
10.8.8	What was the outcome?	
	Forty-four complaints are now closed and three remain open awaiting conclusion of investigation.	44
10.8.9	What percentage of the complaints i.e. Children Order and non Children Order were resolved within the required timescale.	
	46% of Children Order complaints were resolved within the required timescale. 34% of non Children Order complaints were resolved within the required timescale.	46%

10.9 SEPARATED CHILDREN

THIS RETURN IS NOW SUSPENDED AS THERE IS NOW A CENTRALISED SYSTEM TO COLLECT THIS INFORMATION

10.9.1	Number of separated children referred to Gateway Teams by status of children for this period (self-reported age at presentation)	Separated Children 30.9.19
10.9.2	9.2 Please provide the source of the referral of each child.	
10.9.3	Please provide the country of origin for each child referred during the period.	
10.9.4	9.4 This is intentionally blank	
10.9.5	Pathway following completion of UNOCINI: Of those separated children with a UNOCINI completed during this period specify the Pathway/Legal status at period end. Note: Two primary pathways: Looked After and Child ProtectionSeparated Children 30.9.19	
10.9.6	 Separated children and 'Looked After' Pathways Please provide the total number of 'separated' children who are currently Looked After Children within the Trust Area at period end? (This figure must include all separated children looked after irrespective of their admission date) (a) Provide legal status for these children (b) Provide placement, for 'other' category please specify placement type (c) Number where trafficking is suspected / confirmed and a NRM has been submitted (d) Number who are claiming asylum and subject of immigration process (e) Provide the total number of children at period end who are receiving after care support in line with entitlements under the Children (Leaving Care) Act 2002 	Separated Children 30.9.19
10.9.7	Number of Looked After 'Separated' children who have gone	Separated
	 missing from care during the period: (a) Please provide the number of Looked After children who went missing from care during this specific period; (b) Please provide the total number of Looked After 'Separated' children missing from care at the period end; (c) Provide a commentary on each of the children identified in (b) above. 	Children 30.9.19

OVERALL SUMMARY OF ISSUES RAISED WITHIN CC3/02

Children in Need	The number of children in need in the Trust continues to be relatively low and this is mainly due to the family support hubs and early intervention projects, working at a local and community level.
	There is an on-going audit of the unallocated cases in CAFTs which is also looking at the thresholding. The signs of safety harm matrix has also be used to assess the unallocated and evidence to date would indicate that the thresholding is consistent for those cases transferring from Gateway and do require a social work service.
	There is evidence being forwarded from the family support hubs to indicate that early intervention services are dealing with more complex cases.
	Young Carers Despite awareness raising and streamlining the process for financial support referrals remain low. A more proactive approach is to be developed to try and promote young carers within the Trust.
Child Protection	The numbers of children on the CPR have remained relatively consistent albeit the profile is ever changing. There is a slight increase in the number of children on the register over two years. This will be an area for exploration for the Trust.
	There are 51 cases which are managed under dual processes and this will be reviewed.
Looked After Children	There has been an increase in the number of children coming into care by 34 (5.5%) and this has been the upward trend for over a year. This is putting pressure on placements and finances not only at a Trust level but at a regional level.
Children's Disability	Demand for placements, respite and services continue to increase; where demand far exceeds availability. This is compounded by the complexity of need and the ability to safely manage these complex needs in a shared living environment.
	There are 46 cases in children's disability unallocated > 20 days which needs further reviewed as part of the unallocated audit.

Leaving Care	 The Trust continues to find it difficult to give all new young people a PA. This is due to recruitment issues and also the increase in the number of young people requiring a PA. There are significant challenges faced by the 16+ service in relation to accommodation, mental health, drugs and alcohol. There has been a reduction in the number of GEM placements. A joint approach to promote GEM placements at 16 years is to be further developed.
Fostering	The fostering service continues to experience an increase in demand for placements and kinship assessments, arising from the increase number of children in care. As a result the number of independent agency figures has increased. The Trust has established over the review period robust systems to monitor unregulated kinship placements. Furthermore the service continues to strive to ensure service improvement in respect of recruitment and support of our foster carer population.
Adoption	The adoption service has improved the increase of adoptive placement availability, with increase number of adoptive carers available for placements. The service has also achieved development in the area of post adoption support via the provision of additional ITP resources.
Early Years	The number of outstanding inspections has increased in this period due to staffing issues (two staff retired) but these have now been resolved. It is anticipated that the outstanding inspections will be largely addressed in the next reporting period.