

# healthy care

## briefing



January 2010

This briefing is for a range of practitioners who are involved in Healthy Care Partnerships, including social care, health, education and other children's services. It:

- describes how strong corporate parenting can promote the physical and mental health and well-being of looked after children
- provides examples of how corporate parenting is supporting the delivery of Healthy Care
- offers signposts to resources and other information.

The Healthy Care Programme is funded by the Department for Children, Schools and Families (DCSF) through regional government offices. It is a practical means of improving the health of looked after children and young people, in line with the DCSF and Department of Health *Statutory Guidance on Promoting the Health and Well-being of Looked After Children* (2009), *Every Child Matters*, the Change for Children Programme and *Care Matters: Time for Change* (2007).

Through partnership working, policy development and with the participation of looked after children and young people, the Programme ensures that children's services are child-focused, provide a Healthy Care environment and support the National Healthy Care Standard.

### The National Healthy Care Standard

This Standard is based on a child and young person's entitlement to:

- appreciation, love, respect and consistency
- a safe, protective and Healthy Care environment
- opportunities to develop personal and social skills to enable them to care for their health and well-being now and in the future
- effective health care, assessment, treatment and support.

Find out more at:

[www.ncb.org.uk/healthycare](http://www.ncb.org.uk/healthycare)

# Corporate parenting can promote health and well-being

Through multi-agency partnership working, corporate parenting is responsible for improving the health and well-being of looked after children, young people and care leavers.

## Introduction

The vital contribution of corporate parenting to improving the health and well-being of looked after children and young people is acknowledged to be more than just the legal responsibility of local authority officers, elected members and officers for the children and young people in their care. All services for children and young people are being challenged to consider their contribution

to the corporate parenting role, to listen to and understand the needs of looked after children and young people, and to support them. Increasingly, services across a children's trust, including health services and those provided by the community and voluntary sector, are becoming part of the 'corporate family', and these services and resources are being made available to looked after children and young people.

## Corporate parenting

In 1998, Frank Dobson, then Secretary for State, introduced the concept of 'corporate parents' to local authority councillors: '... you should do your utmost to make sure that children in public care get a good start in life.'

He also highlighted the 'legal and moral duty to provide the kind of loyal support that any good parent would give to their children' (1998; quoted in Department of Health 2000).

The concept of corporate parenting was introduced when the government launched its Quality Protects initiative in 1998. In broad terms, the principle is quite simple: that as the corporate parent of children in care, a local authority has a legal and moral duty to provide the kind of loyal support that any good parents would provide for their own children. In other words, the local authority must do at least what a good parent would do. Corporate parenting also emphasises that it is the local authority as a whole, not just its social services department, which has responsibility for that child! (HM Government 2006, p.108)

As the corporate parent of children in care the State has a special responsibility for their well-being. Like any good parent, it should put its own children first. That means being a powerful advocate for them to receive the best of everything and helping children to make a success of their lives.

HM Government (2006) *Care Matters: Transforming the Lives of Children and Young People in Care* pp31 and quoted in DCSF and DH (2009) *Statutory Guidance on Promoting the Health and Well-being of Looked After Children* p46

## Responsibility for corporate parenting

Corporate parenting is a responsibility of local authorities – it is led by the Director of Children's Services (DCS) and the lead elected member (LM). The DCS and the LM are identified in statutory guidance as having 'clear and unambiguous top line [of] accountability for children's well-being' (DCSF 2009).

The DCS must act as the corporate parent for looked after children to help them lead a happy, healthy life and receive a good education (para 3.36).

... the LM has the lead political role in ensuring that children looked after by the local authority have their interests protected, their opportunities maximised, their educational achievement enhanced, their voices heard and care services shaped to meet their needs (para 2.20).

While local authorities hold the corporate parenting responsibility, other services such as health are key to improving the health and well-being outcomes for looked after children and young people, for example, through the 'duty to cooperate' outlined in statutory guidance on children's trust arrangements (DCSF 2008). This guidance addresses the requirement for all Children's Trust partners to work together to improve outcomes for looked after children and young people:

Local authorities are the corporate parent for looked after children, responsible for the care placement and for improving all outcomes for these children, including their education and their health. All partners involved in the Children's Trust should ensure that their strategy and practice takes particular account of how they work with the local authority to improve the prospects of these vulnerable children (DCSF 2008, p.31 para 3.8).

The government's Care Matters White Paper (2007) also clearly states that responsibility for corporate parenting is a shared responsibility across services:

Responsibility for providing excellent corporate parenting must be shared across all services for children and at all levels ... In addition to local authority services, other agencies share in these responsibilities as public sector services

providing support to children in the care of the state. Section 10 of the Children Act 2004 names those agencies (including health, the police and all tiers of local government) which have a duty to co-operate to secure the welfare of children and this duty underpins the arrangements for effective corporate parenting (HM Government 2007, p.20 para 1.22).

The *Statutory Guidance on Promoting the Health and Well-being of Looked After Children* (DCSF/DH 2009) issued to local authorities, Primary Care Trusts (PCTs) and Strategic Health Authorities (SHAs) states that local authorities, SHAs and PCTs have a shared responsibility in helping to achieve Every Child Matters outcomes for looked after children:

The partnership between the local authority and the PCT is the driving relationship of the Children's Trust and neither a PCT nor a local authority can deliver its priorities without the active co-operation of the other. Para 9.1.2

In addition, the House of Commons' *Children, Schools and Families Committee Report on Looked After Children* recommended that:

Looked after children must have a higher profile in NHS performance frameworks. Children in care need 'champions' in senior strategic positions in the health service, and corporate parenting training should be mandatory for relevant senior NHS officers and board members with relevant responsibilities (2009, Recommendation 42, discussed in paragraph 156).

## Corporate parenting – a shared agenda?

The guidance on the role of the DCS and LM is clear that corporate parenting is a responsibility that is shared by:

- all elected members, with the LM having a lead political role to ensure that looked after children have their needs met
- local authority services, which must work corporately to improve the well-being of looked after children and young people and young people leaving care – for example, housing and leisure services should support looked after children
- the DCS, who should ensure that services support good parenting from

every person involved in the child's life

- other local agencies, including schools, health and youth justice organisations which should be engaged by the DCS through the children's trust.

The study undertaken to provide the evidence base for the revised DCSF and Department of Health guidance on the health and well-being of looked after children (Mooney and others 2009) identified seven problematic areas including: 'understanding and acceptance of the role of corporate parent in promoting health and well-being' (p.50).

The study identified the characteristics that are associated with higher performing local authorities, which include developing more specialist multi-agency teams and specialist posts to promote the health of looked after children, and initiatives such as free access to leisure facilities for looked after children. Case studies of good practice from around the country are included. Many of these describe effective multi-agency practice through Healthy Care Partnerships. In some areas, the concept of corporate parenting has brought agencies and services together to share understanding of the needs of looked after children and young people and to explore responses that cross traditional service boundaries.

Effective multi-agency partnerships and joint working were characteristic of areas where the guidance\* was being more successfully implemented. Shared targets, pooled or aligned budgets, and joint appointments can all facilitate multi-agency partnerships and joint working ... Developing mechanisms to bring together all those with strategic responsibility for children's health and focus their attention on looked after children, such as auditing the work of Healthy Care partnerships within a region, has been found to significantly improve joint working (Mooney and others 2009, p.46).

\*Refers to guidance issued by the Department of Health 2002 *Promoting the health of looked after children*.

## Successful corporate parenting

The Care Matters implementation plan (HM Government 2008) stresses that delivering good outcomes for looked after children 'requires excellent corporate parenting based on high aspirations, stable relationships and taking time to listen to the voice of the child'.

The plan makes it clear that corporate parenting is the responsibility of all of those who have a role in the care and support of looked after children. The plan states:

1.3 Every child needs a good parent who looks out for them, speaks out on their behalf and responds to their needs. For children in care, this is a statutory role for local authorities – all local councillors and council officers share the corporate parenting responsibility. This responsibility is paramount and councillors and council officers should carry it with them as they go about their daily business. They should also be clear about how, as corporate parents, they work with and support the Lead Member and Director of Children's Services, in their strategic roles.

1.4 However, it is not just local authorities that have a parenting role. In the same way that a family shares responsibility for bringing up their children with their extended family members, the corporate parenting responsibility must be shared by everyone involved in supporting children in care. This includes health bodies, education services such as schools and colleges, the police, youth and youth justice organisations, and the private and third sectors too. The responses to the Care Matters Green and White Papers emphasised that unless this wide range of partners accept their responsibilities, we will not make a difference to the lives of children in care. (HM Government 2008, p.7 Section A)

## How IROs strengthen corporate parenting

Independent Reviewing Officers (IROs) have an essential contribution to make to corporate parenting. They must ensure that consistent, timely and appropriate care planning takes place for looked after children and young people.

They are required to provide an annual report to the lead member with responsibility for children's services, in which they should identify good practice and highlight issues for development (see the *Independent Reviewing Officers Guidance* 2004). This 'independent' view can inform corporate parents about the effectiveness and quality of their services for looked after children and young people. Such information will also contribute to inspections.

## Healthy Care and corporate parenting

There are four themed, interlinked evidence areas of Healthy Care work:

### Policy

At the strategic level corporate parenting must ensure that policies and partnerships support and enable effective service delivery that is targeted at improving health and well-being outcomes for looked after children and young people. Two strategic documents underpin local planning and service delivery for looked after children and young people. If corporate parenting is to be effective in improving outcomes for looked after children and young people, then these two documents must address their needs and how they will be met.

The starting point for commissioning health services for looked after children should be the **Joint Strategic Needs Assessment (JSNA)** and the **Children and Young People's Plan (CYPP)**. The CYPP should inform and be informed by the statutory JSNA. The JSNA should identify current and future health needs of the local population, across all age groups. The CYPP will be the agreed joint strategy of the partners in the Children's Trust on how they will co-operate to improve children's well-being. Para 9.2.2 (DCSF/DH 2009)

### The Joint Strategic Needs Assessment

(JSNA) identifies priority areas for action through Local Area Agreements. Since 2007 PCTs and local authorities have been required to produce a JSNA of the health and well-being of their local community. It will assess needs over three to five years, but will also take a longer term view. Guidance on JSNA best practice (DH 2007) recommends taking note of vulnerable groups such as looked after children and young people. The

study that provided evidence for the revised health guidance found that looked after children were often not prioritised in JSNAs (Mooney and others 2009). It suggested that they should be a priority group and JSNAs should include information from carers and looked after children and young people themselves. A further suggestion was to make explicit the links between the JSNA, Local Area Agreements, PCT operating plans and the commissioning agenda.

### The Children and Young People's Plan

(CYPP), the overarching plan of children's trusts, sets out the strategic planning and priorities for children, young people and families in an area. A comprehensive needs assessment must be carried out to inform the plan, and should be done in partnership with all those involved in planning and reviewed on a regular basis. The JSNA should be consistent with the CYPP. All members of the children's trust board have a duty to prepare, publish and monitor a strategic CYPP for the local area (Apprenticeships, Skills and Learning Act, HM Government 2009).

The CYPP should identify children's needs and how they will be met. A 2006 analysis of 75 CYPPs (Lord and others 2006) found that looked after children were the most frequently mentioned group in all Every Child Matters outcomes except for the 'Achieving economic well-being' outcome, where they were the second most frequently mentioned group. However, the plans failed to identify the actions that would be taken to achieve improved outcomes, other than to address improving nationally set targets and indicators such as completion of annual health assessments and dental checks.

The CYPP and its latest annual review will provide evidence for Comprehensive Area Assessments, the new inspection process which started in 2009. Ofsted has identified the CYPP as a key source of evidence that will be reviewed as part of this inspection process (see Table 1, p.5).

### Partnership

Local authorities are the corporate parent for looked after children, responsible for the care placement and for improving all outcomes for these children, including their education and their health. All partners involved in the

Children's Trust should ensure that their strategy and practice takes particular account of how they work with the local authority to improve the prospects of these vulnerable children (DCSF 2008, p.31 para 3.8).

The Healthy Care Programme advocates a multi-agency partnership to drive forward improvements in health and well-being for looked after children. Such partnerships recognise that a range of agencies have a role to play in achieving good health and well-being outcomes. Healthy Care Partnerships are often characterised by shared plans and budgets, joint posts, targeted interventions, better data collection and have a more holistic overview of looked after children's health and well-being. They also provide evidence for inspections and act as a local champion for the well-being of looked after children.

The *Statutory Guidance on Promoting the Health and Well-being of Looked After Children* (DCSF and DH 2009) identifies underpinning principles which include the use of integrated working and commissioning at strategic level and individual case level to improve service delivery. It also states that it is vital for local authorities, PCTs and SHAs to work collaboratively with other children's trust partners, such as housing and leisure services, to meet looked after children and young people's needs.

The government's child health strategy *Healthy Lives, Brighter Futures* also notes the need for children's trusts to develop robust joint plans and be clear about overlapping responsibilities for services for vulnerable groups such as looked after children and young people (DH/DCSF 2009, p.84 para 7.14). Case study 1 (see p.8) describes how a multi-agency partnership is focusing on promoting the health of looked after children through consistent planning and delivery, clarity about roles and responsibilities, and attention to quality. The healthy care audit tool (see p.6 and Case study 3, p.9) is being used by multi-agency Healthy Care partnerships to identify areas for improvement in health and well-being outcomes and to develop more coordinated and innovative approaches to delivering services.

## Practice

The experience of looked after children's everyday lives – where and who they live

with, going to school or college, practising their religion, being involved in local activities, developing interests, making friends and so on – is mediated by the carers and professionals who meet their needs on an everyday basis by providing consistent and safe care, planning for their futures as well as helping them to overcome the effects of neglect and abuse. It is this everyday practice that really matters to looked after children and young people. Effective corporate parenting is about making sure that these children and young people's everyday experiences are the best that can be provided. As John Hutton, then Minister of State for Social Services, said in 1998 when addressing councillors as 'corporate parents': 'You need to be asking yourself, what if this was my child? Would it be good enough for them? Would it be good enough for me?' (quoted in Stein 2009, p.13).

Looked after children and young people do not have a single carer such as a parent to take an overview of what is happening in their lives, to advocate for them, to care and think about their emotional and practical needs. The reality is that carers, social workers, other professionals as well as birth parents in that child's life must perform that role. They need to be trained and supported to perform these roles, which means strategies and policies must be in place to enable them to promote the child or young person's health and well-being.

Officers at strategic levels and elected members can make sure that looked after children and young people's needs are addressed, whether this involves negotiating free passes for leisure facilities, local housing allocation for care leavers or recruiting and training foster carers to care for children. It all adds up to making sure that looked after children and young people experience good practice on a daily basis. Corporate parenting responsibilities continue beyond the point at which a young person leaves care as they will still need support to carve out a successful adult life. All young care leavers will have a Pathway Plan that maps out what help and support they need – for example, to complete further and higher education, to find information and advice about health conditions, financial and housing support. Like any other parents,

corporate parents must continue to support these young people, even after they have left care. As one manager in a residential care home said:

'Sometimes young people come back because something has upset them and they don't have someone who will understand, be sympathetic and supportive. I know if my son came home in that situation we'd welcome him and be there for him – we need to offer something like that to our young care leavers too' (Comment from a residential care manager during a Healthy Care audit 2006)

## Participation

Increasingly, the voices of looked after children and young people are being recognised as crucial in the development of services that meet their needs and ensure their childhood is as safe, healthy, secure and happy as possible. Children and young people have a unique voice and their views and priorities about how to help them grow up can be quite different from those of the adults who care for them and provide services to meet their needs.

The statutory health guidance requires PCTs and local authorities to agree joint action on looked after children's health issues which includes 'joint scrutiny of feedback from children, young people and carers.' (Para 9.1.4 DCSF/DH 2009)

*Care Matters: Time for Change* (2007), the government White Paper on looked after children and young people, recognises this and requires every local authority to develop:

- Children in Care Councils with direct links to the Director of Children's Services and lead member. The aim is to give all looked after children and young people a forum in which to express their views and influence the services, including health services, and support that they receive.
- A 'pledge' to looked after children and young people which should cover the services and support they can expect to receive. In most areas the Children in Care Council is involved in the development of the local pledge.

In addition, the White Paper also acknowledged the importance for looked after children and young people of being able to access and participate in activities of their choice where they live. The White Paper introduced an

expectation that local authorities will:

- make their own leisure provision free for children and young people in care, which is consistent with the role of the corporate parent
  - ensure that leisure activities form a key part of care planning and that children and young people are well supported in getting involved in these activities
  - place a new responsibility on the Director of Children's Services to ensure that children and young people in care participate equally in positive activities along with their peers.
- (HM government 2007) para 12 page 10 and 11)

Statutory health guidance for looked after children states that local authorities should provide free access to positive activities and facilities they own, deliver or commission (DCSF/DH 2009 pp3).

Involvement in activities contributes to meeting the Healthy Care Standard entitlement 5: 'Having opportunities to develop personal and social skills, talents and abilities, and to spend time in freely chosen play, cultural and leisure activities.' Corporate parents must make sure this can happen for looked after children by ensuring they can participate in activities that recognise and celebrate individual children and young people's achievements – just as any good parent would.

Case study 2 (see p.8) describes how children and young people's participation in creative activities supports not only their well-being but also the elected members as corporate parents' understanding of issues that are important to the children in their corporate care.

## Healthy Care Programme and audit

Healthy Care Partnerships are local multi-agency partnerships that promote and effect change for looked after children's health and well-being by leading and coordinating local work on health care. More information about how to develop a Healthy Care Partnership can be found in the *Healthy Care Handbook* ([www.ncb.org.uk/healthycare](http://www.ncb.org.uk/healthycare)). In two regions – the South West and West Midlands – evaluation of the Healthy Care Programme has shown that local Healthy Care Partnerships have demonstrably improved and that services have become more coordinated. The greatest benefit has been in bringing key

people and agencies together, resulting in joint working, joint approaches, joint understanding and higher status for the health of looked after children and young people. It has become a role model of good practice (which has had spin-offs for other groups) and has generated interest from others who want to join.

Statutory health guidance for looked after children advises that a framework should be developed to assist Children's Trust partners to assess improvement in the health and well-being of looked after children and signposts to the National Healthy Care Standard and Healthy Care Programme resources to help with this (see useful resources section at the end).

The Healthy Care Programme recommends that Healthy Care Partnerships undertake an audit to help identify key areas for action to improve health outcomes. This will form a local Healthy Care Action Plan. A Healthy Care Audit Tool has been developed and revised with Healthy Care Partnerships across the country. It focuses on the six entitlements of the Healthy Care Standard (see audit tool on p.6) and the four dimensions of Healthy Care work: policy, partnership, practice and participation. A systematic review will result in a summary profile of the audit findings that can be used to guide the development of an action plan.

Case study 3 (p.9) describes the findings of an evaluation of 11 Healthy Care audits undertaken in the West Midlands region.

## Inspection and regulation

The new inspection framework that started in 2009 put in place three-yearly joint inspections by Ofsted and the Care Quality Commission of safeguarding and looked after children's services, which sit within the wider Comprehensive Area Assessment process. The inspections include:

- a sharper focus on evaluating outcomes for children and young people and the impact that practice and services have on improving outcomes
- the extent to which service providers have sought and acted on the views of children, young people and carers in reviewing and improving services and outcomes generally
- a focus on the effectiveness of corporate parenting approaches.

Inspections of local authority children's homes, fostering, adoption and private fostering arrangements continue separately (Ofsted 2009a).

The detailed evaluation schedule of the looked after children's inspections lists how inspectors are evaluating the 'Being healthy' outcome for looked after children and young people (see Table 1 below).

**Table 1**

Extract from: Ofsted (2009) *Inspections of Safeguarding and Looked After Children Services: Full Evaluation Schedules*. (London: Ofsted).

## Being healthy

31. In order to make their judgements, inspectors will evaluate the extent to which:

- innovative and accessible multi-agency targeting, planning, reviewing and monitoring of health services for all looked after children and care leavers have led to a sustained upward trend or high performance in outcomes for physical, emotional and sexual health
- joint agency commissioning has been effective in improving health outcomes for looked after children and care leavers with complex needs
- effective information sharing across agencies ensures consistency in meeting the health needs of looked after children and care leavers
- looked after children and care leavers have access to a comprehensive health needs assessment, which they are encouraged to attend
- targeted health promotion services are in place for looked after children and care leavers
- arrangements are in place to ensure that looked after children and care leavers can achieve timely access to health services, including specialist services, when required
- an annual report identifies the health needs of looked after children and this contributes to service improvement
- health outcomes for looked after children and care leavers are better than in similar areas/authorities
- looked after children in external placements have access to a full range of health provision
- clear and effective systems are in place to ensure that looked after children placed out of authority receive health care that addresses their physical and emotional needs.

# HEALTHY CARE PROGRAMME AUDIT TOOL

## SUMMARY LOCATION PROFILE

### Location:

**National Healthy Care Standard, with the Strategies six entitlements**

1. Living in safe, protected and stable care arrangements.

2. Living in a caring, healthy and learning (including educational) environment.

3. Having cultural beliefs and personal identity respected and supported

4. Having access to effective healthcare, assessment, treatment and support.

5. Having opportunities to develop personal and social skills, talents and abilities, and to spend time in freely chosen play, cultural and leisure activities.

6. Being prepared for leaving care by being supported to care and provide for themselves in the future.

### Organisation:

**Participation** of Children and Young People

Insert colour  
**red/amber/green**

Few CYP know who to turn to when they want to discuss their health.

Few looked after children think that their health needs are being met.



## Date Completed:

<b>Practices</b> supporting the standard	<b>Policies</b> supporting the standard	<b>Partnerships</b> and supporting the standard
<p>Some Health Care Assessments and Health Plans are completed and recorded within timescales.</p> <p>The health needs of looked after children are sometimes routinely recorded or shared between people with responsibilities to looked after children.</p>	<p>There are limited designated clinicians to cover looked after children's health needs.</p> <p>CAMHS provide some service to meet the health needs of CYP.</p>	<p>Some limited data on the aggregated health needs of CYP to inform strategy.</p> <p>PCT has a named but limited Senior Advocate for looked after children.</p>

## Case study 1

### Warwickshire Integrated Care Pathway for meeting the health needs of looked after children and young people

In 2005, a multi-agency group met with the aim of developing a Care Pathway that would meet the health assessment needs of looked after children and young people, and address issues of quality. The group consists of representatives from health services (including the designated doctor and nurse) and children's social care services, the education of looked after children team, the lead Independent Reviewing Officer, foster carers and, when necessary, representatives of specialist services such as Child and Adolescent Mental Health Services (CAMHS), Sexual Health Services and Substance Misuse Services.

The initial task for the group was to create an integrated Care Pathway. This was done by focusing on a specific issue in each of the six meetings – for example, initial health assessments. The resulting Care Pathway addressed not only what should be done, when and by whom, but also focused on providing an evidence-based approach so that planning and recording improved and standards were consistent. A frequent barrier to effective multi-agency working is a lack of communication and understanding of the different roles and responsibilities. The process of working together in a task-focused way enabled these issues to be addressed and the final product – an agreed and written Care Pathway – clarified roles, responsibilities and quality standards.

'Creating an inter-agency team that grew in trust and understanding was an outcome in itself. By all of us getting around a table we unpicked and got to understand each other's language. The product was a management tool – the Pathway – that allows us to make sure looked after children's health needs are being addressed consistently and that we can spot those who are variant to the pathway – for example, who have not had a health assessment – and follow that up quickly.'

(Dr Doug Simkiss, Designated Doctor for Looked after Children, Warwickshire)

As the Care Pathway has been implemented, the statistics have gradually improved and all services are now working to a consistent model, with clear roles and responsibilities, and a sound evidence-base of the health needs of looked after children and young people and how they are being met. A key challenge now is to make sure that accurate data is entered onto information systems, as this will enable effective monitoring of the Pathway.

The Care Pathway multi-agency group now meets twice a year to review progress and integrate new developments such as the strengths and difficulties questionnaire that must be completed for all looked after children and young people. A recent Ofsted inspection of the local authority fostering agency rated the service overall as outstanding and noted that looked after children and young people benefit from a robust and comprehensive set of measures to promote good health and deal with any identified problems.

Warwickshire's Corporate Parenting Strategy includes a section on health and well-being:

**Being healthy** includes initiatives to support the physical, mental, emotional and sexual health of children and young people in care. It also includes helping children and young people in care to pursue healthy lifestyles and avoid taking illegal drugs.

Brenda Vincent, assistant head of children's services, Warwickshire said:

'Health and well-being improvements feature in the Corporate Parenting Service Improvement Plan. This keeps health and well-being for children in care on the agenda. It also provides a reference point for monitoring improvements, and forms part of the Children and Young People's Plan.'

## Case study 2

### Cumbria Community Arts and Corporate Parenting

Whitwood and Fleming, an arts organisation, has been developing work with looked after children and young people in partnership with the local children's services in Cumbria, as part of the National Children's Bureau's 'People with Passion' project, funded by Arts Council England and Creative Partnerships. The aim of the national work was to investigate how to embed creativity in the lives of looked after children and young people.

Whitwood and Fleming spent time building a relationship with the head of services for children and families, and the young people's participation worker. Their work in a residential children's home and early work with individual young people, led to the company being commissioned to deliver a participation project, which resulted in the production of a DVD on the recruitment of foster carers. It also led to training social workers in promoting the emotional well-being of



Photo credit: Whitwood and Fleming and the looked after children of Cumbria.



children and young people in their care and how to build positive relationships with them.

A 'Getting to know you!' event for children and young people and elected members resulted in children and young people being invited to a meeting of Cumbria Council to show their work and discuss the issues raised. One of the young care leavers was asked to show his DVD at the Community Safety Partnership to demonstrate what life in his area is like for young people. Another digital arts project, funded by the Looked After Children's Education Service, has resulted in 12 young people being successfully guided through Bronze Arts Awards.

Apart from the benefits to children and young people – making friends, learning new skills, expressing themselves, and developing interests, etc. – there have been other developments that demonstrate how the concept of corporate parenting can expand to involve non-statutory services. Elected members are always invited to looked after children and young people's performances – and they regularly attend – and the chair of the Corporate Parenting Panel is kept informed of all looked after children's arts projects and is invited to events and performances. Whitewood and Fleming now have a sustainable Service Level Agreement with children's services who have set up a strategic support group of senior managers.

Helen Smith, Head of Service, Child and Family Care, Cumbria County Council commented:

'We are very excited about this work – our young people have grown in confidence and self-esteem during their involvement in these projects. We were proud to see them perform a song they wrote and recorded before government ministers in London in 2009. This unique partnership is now funded by Cumbria Children's Service.'

Find out more at:

[www.whitewoodandfleming.org](http://www.whitewoodandfleming.org)

For more information about the People with Passion report, visit [www.ncb.org.uk/healthycare](http://www.ncb.org.uk/healthycare) and view the report in the arts and leisure resources section.

### Case study 3

#### West Midlands Healthy Care Audits

Healthy Care Audits have been undertaken by 11 of the 14 local authorities in the West Midlands region. An evaluation in 2008 has shown that all areas were committed to promoting the health of looked after children and young people and improving their health outcomes, but the way in which this was achieved varied widely. In particular the evaluation noted:

- significantly improved lines of communication and better understanding of the professionals' roles, particularly in areas where initial inter-agency links had been poor
- where Healthy Care Partnerships were well developed, the positive benefits were demonstrated in improved services and a more coordinated approach
- Healthy Care Partnerships have helped to breakdown 'silo' thinking – where services focus only on their contribution rather than working with other services to provide 'joined up' services – and so have promoted understanding that there is more to Healthy Care than just health assessments and dental checks
- in those areas where increased involvement of young people in the decisions which affect their lives and in the development of policy was already established, the process was becoming more embedded in practice, and those areas which did not have processes in place were actively developing structures.

This has all taken place against a backdrop of considerable organisational change for children's social care services and children's health services. A range of initiatives and programmes were found by the audits, including:

- A health passport for looked after children, which keeps together important medical information that the child or young person can take with them and pass on to their carer.
- A Care2Cook group for looked after young people with a professional tutor, which provides an opportunity for children and young people to develop skills in food preparation, cooking and understanding of healthy meals and lifestyles. The nurse, participating in the group, often finds that young people in this environment also use

the opportunity to discuss other personal issues such as relationships and sexual health issues.

- The appointment of a lead nurse for looked after children together with the designated nurse for looked children has led to an increase in the number of annual health checks that the children and young people undergo. The looked after children's nurse produces and monitors a health action plan for each child or young person.
- Involvement in the national LILAC Project (Leading Improvements for Looked After Children), which trains care-experienced young people to inspect statutory, voluntary and independent children's services. They look particularly at how young people are involved in key decision-making processes, including their choice of school and their placement.
- A dedicated substance misuse worker for looked after children and young people is part of the local Young People's Drug and Alcohol Service.
- A dedicated 'quit smoking' service is specifically targeted at looked after children and young people, and is facilitated through the designated looked after children's nurse.
- A health promotion specialist works in partnership with agencies to develop projects to promote healthy lifestyle choices for looked after children. These include the delivery of health promotion training for foster carers and residential child care officers, and the development of a pilot life skills training programme for care leavers.

The West Midlands region has also established a West Midlands Corporate Parenting Steering Group (WMCPSPG), chaired by a director of children's services and accountable to the 14 West Midlands local authorities and the West Midlands Strategic Health Authority through the West Midlands Children and Young Person's Forum. The WMCPSPG will ensure the coordination of regional activity concerning inclusion, ensuring positive outcomes and facilitating good practice in the provision of services and support for children in care and children leaving care.

For more information about the steering group, contact Mandy Smith at Government Office West Midlands, email: [mandy.smith@gowm.gsi.gov.uk](mailto:mandy.smith@gowm.gsi.gov.uk)

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## Useful resources

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- Arts in Partnerships to Promote Health and Well-being (2006)
- Bereavement, Loss and Children and Young People in Care (2007)
- Healthy Eating and Physical Activity (2005)
- Play and Creativity (2005)
- Promoting the Health of Young People Leaving Care (2008)
- Mental Health (2005)
- Secure Attachments Promote Health and Well-being (2006)
- Sexual Health (2005)
- Substance Misuse (2005)
- Supporting Young Parents who are Looked After (2006)
- Supporting and Training Foster Carers to Promote Health and Well-being (2007)

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IDEA/The Beacon Scheme on Care Matters – Interviews with actor Paul Barber on his experiences of growing up in care, case studies about a disabled young person growing up in care and an education support scheme for looked after children. Plus a downloadable booklet about how two Beacon local authorities have implemented Care Matters, including a focus on corporate parenting.  
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## Useful websites

### Every Child Matters website

<http://www.dcsf.gov.uk/everychildmatters/safeguardingandsocialcare/childrenincare/childrenincare/>  
Links to key documents and resources on looked after children and young people.

### Healthy Care Programme

[www.ncb.org.uk/healthycare](http://www.ncb.org.uk/healthycare)  
Information and resources to promote the Healthy Care Programme for looked after children and young people.

### National Centre for Excellence in Residential Child Care

[www.ncb.org.uk/ncerc](http://www.ncb.org.uk/ncerc)  
Information and resources on good practice in residential child care.

### The National Care Advisory Service

[www.leavingcare.org](http://www.leavingcare.org)  
Information and resources on leaving care for young people and professionals.

### Voice

[www.voiceyp.org](http://www.voiceyp.org)  
Voice is one of the UK's leading voluntary organisations working and campaigning for children and young people in public care.

## The National Healthy Care Standard

Contributes to the achievement of the five outcomes outlined in *Every Child Matters* (HM Treasury 2003):

- Being healthy
- Staying safe
- Enjoying and achieving
- Making a positive contribution
- Economic well-being.

**The Children's Plan: Building brighter futures** (DCSF 2007) is the government's 10-year strategy for children. Five principles, based on consultation and expert evidence, underpin the policies set out in the Children's Plan:

- 1. Parents:** the government does not bring up children, parents do, so the government needs to do more to support parents and families.
- 2. Potential:** all children have the potential to succeed and should go as far as their talents can take them.
- 3. Enjoyment:** children and young people need to enjoy their childhoods as well as grow up prepared for adult life.
- 4. Responsive services:** services need to be shaped by and be responsive to children, young people and families, not designed around professional boundaries.
- 5. Prevention:** it is always better to prevent failure than tackle a crisis later.

**Care Matters: Time for change** (HM Government 2007) sets out the steps the government and local partners will take to improve the outcomes for children and young people in care. It states that improving corporate parenting is key to improving outcomes for looked after children. Government will support local authorities and their partners by:

- expecting every local area to develop a pledge for the children and young people in their care as well as a Children in Care Council to ensure that children and young people's views can be put directly to those responsible for corporate parenting
- disseminating new corporate parenting training materials to help authorities ensure that effective arrangements are in place locally
- identifying and spreading good practice in corporate parenting through the next round of the Beacon

Council Scheme

- issuing revised National Minimum Standards and consolidating updated statutory guidance on the Children Act 1989 to reflect the vision and requirements of the White Paper
- introducing a programme of inspection of services for children and young people in care by Ofsted.

**Care Matters: Time to deliver for children in care. An implementation plan** (HM Government 2008) sets out the practical steps that local authorities need to take to make the plans outlined in the Care Matters White Paper and the Children's Plan a reality for children and young people in care, including:

- the national framework for change for children in care and outlining how the performance management framework will support this
- excellent corporate parenting is required to deliver good outcomes for looked after children and young people, and all services involved in the care of looked after children must share corporate parenting responsibility
- every partner in a children's trust must listen to children and young people in care as this helps identify what changes need to be made
- the local pledge should be a communication tool to reflect children and young people's perceptions about the kind of parenting they need
- Children in Care Councils should enable good quality dialogue with children and young people about what they need and should involve them in developing and delivering looked after children's services.

**The Statutory Guidance on the Health and Well-being of Looked After Children** (DCSF/DH 2009) supersedes the 2002 *Guidance Promoting the Health of Looked After Children*. It is statutory for local authorities, PCTS and SHAs. The guidance:

- Uses a holistic model of health which takes into account wider determinants of health and well-being. It aims to improve health outcomes for looked after children and young people.
- Is relevant to all Children's Trust partners, including education, culture, leisure, youth and community, youth

justice and the voluntary sector.

- Is issued under section 10 of the Children Act 2004 and applies in England. LAs, PCTS and SHAs in England must have regard to it when exercising their functions under this section.
- Defines the statutory roles and responsibilities of LAs and of health authorities but notes that many of these responsibilities are shared and stresses the importance of joint working. It covers the roles of the lead professional, the designated doctor and nurse for looked after children.
- Notes that the starting point for commissioning services should be the Joint Strategic Needs Assessment and the Children and Young People's Plan.
- Encourages Children's Trusts to develop a framework to assess their work on improving health and well-being outcomes for looked after children and young people.
- Includes practice guidance which outlines some of the factors that commissioners and practitioners may wish to bear in mind when commissioning and delivering services in line with the statutory guidance.

**Healthy lives, brighter futures – the strategy for children and young people's health** (DH/DCSF 2009) presents the government's vision for children and young people's health and well-being. It identifies the principles of the relationship between parents and services, which are:

- informed users
- healthy opportunities
- responsive services
- targeted support.

The strategy notes:

- the poorer health outcomes of looked after children
- that corporate parents should use data derived from the strengths and difficulties questionnaire to inform priorities and service commissioning
- the need for children's trusts to develop robust joint plans and be clear about overlapping responsibilities for services for vulnerable groups such as looked after children.