

## NOTICE OF MEETING

# CORPORATE PARENTING ADVISORY COMMITTEE

**Thursday, 17th October, 2024, 7.15 pm or on the rise of the ASPIRE meeting whatever is the later. George Meehan House, 294 High Rd (watch the live meeting [here](#), watch the recording [here](#))**

**Councillors:** Zena Brabazon, Felicia Opoku, Elin Weston, Lotte Collett, Marsha Isilar-Gosling, Cressida Johnson and Ibrahim Ali

**Quorum: 3**

### **1. FILMING AT MEETINGS**

Please note this meeting may be filmed or recorded by the Council for live or subsequent broadcast via the Council's internet site or by anyone attending the meeting using any communication method. Although we ask members of the public recording, filming or reporting on the meeting not to include the public seating areas, members of the public attending the meeting should be aware that we cannot guarantee that they will not be filmed or recorded by others attending the meeting. Members of the public participating in the meeting (e.g. making deputations, asking questions, making oral protests) should be aware that they are likely to be filmed, recorded or reported on. By entering the meeting room and using the public seating area, you are consenting to being filmed and to the possible use of those images and sound recordings.

The Chair of the meeting has the discretion to terminate or suspend filming or recording, if in his or her opinion continuation of the filming, recording or reporting would disrupt or prejudice the proceedings, infringe the rights of any individual, or may lead to the breach of a legal obligation by the Council.

### **2. APOLOGIES FOR ABSENCE (IF ANY)**

### **3. URGENT BUSINESS**

The Chair will consider the admission of late items of urgent business. Late items will be considered under the agenda item they appear. New items will be dealt with at item 11 below.

### **4. DECLARATIONS OF INTEREST**

A member with a personal interest in a matter who attends a meeting of the authority at which the matter is considered must disclose to that meeting the existence and nature of that interest at the commencement of that consideration, or when the consideration becomes apparent.

A member with a personal interest in a matter also has a prejudicial interest in that matter the interest is one which a member of the public with knowledge of the relevant facts would reasonably regard as so significant that it is likely to prejudice the member's judgement of the public interest.

**5. MINUTES (PAGES 1 - 8)**

To approve the minutes of the meeting held on 11th July 2024.

**6. PERFORMANCE MANAGEMENT : CHILDREN AND FAMILIES (PAGES 9 - 14)**

This report provides an analysis of the performance data and trends for an agreed set of measures relating to looked after children on behalf of the Corporate Parenting Advisory Committee. This will include updates on performance of schools and health and education performance data for looked after children.

**7. ANNUAL REPORT FROM CHILDREN IN CARE (PAGES 15 - 36)**

This will include an update on the Children in Care service, the strategic outcomes for next year, as well as the strategic work of the team. Introduced by Lynn Carrington.

**8. FOSTERING RECRUITMENT REPORT (PAGES 37 - 64)**

**9. CORPORATE PARENTING WEEK - A VERBAL UPDATE.**

**10. CORPORATE PARENTING ADVISORY COMMITTEE FORWARD PLAN (PAGES 65 - 66)**

**11. ANY OTHER BUSINESS**

Date of next meeting  
14<sup>th</sup> January 2025  
25<sup>th</sup> March 2025

Serena Shani Interim Principal Committee Co-ordinator  
Email: [Serena.Shani@haringey.gov.uk](mailto:Serena.Shani@haringey.gov.uk)

Fiona Alderman  
Head of Legal & Governance (Monitoring Officer)  
George Meehan House, 294 High Road, Wood Green, N22 8JZ

Wednesday, 09 October 2024

This page is intentionally left blank

**MINUTES OF THE CORPORATE PARENTING ADVISORY COMMITTEE  
MEETING HELD ON THURSDAY 11 JULY 2024 AT 7:00PM – 8:31PM**

**PRESENT:** Councillor Zena Brabazon; Councillor Felcia Opoku; Councillor Lotte Collete

Also present: Nazyer Choudhury (Principal Committee Co-Ordinator), Yeside Odumade (Principal Committee Co-Ordinator), Ann Graham (Director of Children's Service) Beverley Hendricks (Assistant Director for Safeguarding and Social Care); Richard Hutton (Senior Performance Officer); Keith Warren (Head of Children in Care and Placement); Andrea Hull (Service Manager) and Eghele Eyituoyo (Headteacher, Virtual Head of School)

**1. FILMING AT MEETINGS**

The Chair drew attention to the information included on the agenda front sheet and noted that the meeting was being recorded.

**2. WELCOME AND APOLOGIES FOR ABSENCE**

Apologies for absence were received from Councillor Johnson, Councillor Ali, Councillor Isilar- Gosling.

**3. URGENT BUSINESS**

There were no matters of urgent business.

**4. DECLARATIONS OF INTEREST**

There were no declarations of interest.

**5. MINUTES**

**RESOLVED:**

That the minutes of the meeting held on 27 February 2024 be agreed and signed as a correct record.

## 6. PERFORMANCE REPORT

The Senior Performance Officer introduced the report which included updates on performance of schools, including the virtual school and health and education performance data for looked after children.

It was highlighted that:

- There had been a steady decrease of the number of children that come in to be looked after. It was noted that of the 89 Children Looked After (CLA) with an Education Care Health Plan (ECHP). 63% were being placed in schools outside of Haringey.
- In March 2024, there were 334 children in care, 29 children fewer than reported in March 2023. This was the lowest it had been in many years.
- The number of unaccompanied asylum seekers had fallen by twenty-four children (0.04%), below the national transfer scheme threshold.
- There was a reduction on the rate of children becoming looked after over a six-month period, which was now sixty children. This was below the rate for the year 2022-2023.
- As of May 2024, 77% of children who were looked after children had an up-to-date care plan.
- Completed Personal Educational Plans achieved in the summer of 2023, reached 95%. The focus remained on the quality and the impact of the Plans.
- Under 16s in care for at least 2.5 years and in the same placement for two years was at 51%.
- Dental checks for looked after children had increased to 80%, although it was still a challenging area.
- The pressure on the department was on substance misuse, mental health, and accommodation.

There were 921 care leavers in receipt of, or eligible, for leaving care services which was an increase of 15 children from the previous quarter. The figure included young people who were:

- Eligible: 16–17 year-olds and had been looked after for at least 13 weeks since the age of fourteen or currently looked after.
- Relevant: 16–17-year-olds who had been looked after for at least 13 weeks since the age 14, looked after on or after their 16<sup>th</sup> birthday and were no longer looked after.
- Former relevant qualifying: and aged 16 to 21, (or 25 if in education) looked after on or after their 16<sup>th</sup> birthday.
- Children or care leavers not looked after for at least 13 weeks since the age of fourteen, or privately fostered after the age 16, but, before the age of eighteen, or were looked after prior to becoming subject to a Special Guardianship Order (SGO).

Councillors asked questions and the following information was noted.

- That young people in care had reduced. This was owing to the better support for children and young people in care. External factors included the reduction in the number of asylum seekers, developing relationships with partners to provide early intervention. Also, family mediation was undertaken in appropriate circumstances and was a good way for resolving issues between young people and their families.
- There was a pod model, which would enable a child in care to have 9 years with a stable team who all knew about the child. Some of the children who formed the 934 figures were returnees to care.
- That the completion of Education Children Health Plan (ECHP) (63%), was not the service target that was set, and the lower percentage completion rate was owing to a period where the department experienced administrative and staffing challenges.

A report was requested by the committee on the pressures that Children's services were facing to be presented by the meeting on 14 January 2025. **ACTION**

The committee requested whether Tavistock could present an item on the good partnership work with Haringey Council's children and care leavers. **ACTION**

## **RESOLVED:**

To note the report.

## **7. STABILITY PANEL**

The report was introduced by the Head of Children in Care and Placements. The purpose of the report was to update members on the stability of placements for Children in Haringey's care.

The report contained information on what happened to children and young people who were removed from their home and family, who suffered rejection, separation and had a feeling of loss. It was noted that those feelings were deeper if they were placed in multiple placements.

The Committee noted that the Placement Stability Panel was formed in 2020, to improve the experiences of children who were in care and to minimise placement disruptions and breakdowns. The Panel consisted of designated leads from virtual schools, First steps, designated nurse for Children in Care, and Independent Reviewing Officers.

There were five sources of referrals to the placement stability panel. These were: Inhouse Fostering Placements; Residential Provision; In house Fostering Placements; Semi Independent Accommodation and Independent Fostering Agencies (IFA).

It was noted that placement instability in children reduced their opportunity to develop secure attachments.

The Committee noted that the council were corporate parents to all children who were looked after by the Local Authority. The preference for any child would be to place them with a connected person (i.e. a friend or relative). Placements should be close to home and should not disrupt the child's education. It should enable siblings to live with one another, suitable for a child's need if disabled, and within the local authority area, unless further location was the more suitable option.

Short term stability placement was measured by children or young people who have had three or more placement in a year. In the year 2023-2024, 10 children were said to have been in over three placements, which was in line with national average, but slightly below neighbouring boroughs.

Long term placement stability was measured by a child under the age of sixteen who had been in placement for 2.5 years or more. In the year 2023, 71 children had experienced long term placement stability which was in line with national statistic, but slightly lower than the national average.

Independent Fostering Agencies (IFA) were taking on more complex children, with higher needs and the average cost of an IFA placement was £1300 per week (it would include foster carers and other infrastructures), this was compared to an in-house placement costing £450 per week. An in-house placement required that Haringey be in charge and have influence over partnerships. However, an Independent Fostering agency was not as easy to influence.

There was a need for collaborative work whilst mobilising the work needed, there may be a need for therapeutic support through Child and Adolescent Mental Health Services (CAMHS). There was a need for open discussions with partners, collaborative thinking would help bringing a solution.

The "berry tool" helped the understanding of Haringey Council to match children and what was next with permanency planning. The information was shared with foster carers which helped the foster carers to understand the science of matching children.

Haringey were not part of the pathfinders yet, there were other local authorities who were going to receive financial grant from the government.

It was requested there be a cost analysis comparison between the Independent Fostering Agencies and the In-house fosters and it be presented to the committee.

**ACTION**

The committee requested that there be an update on the Josh McAlister report, looking at the private market, private provider and standards which had been part of the recommendation. **ACTION**

It was requested by the committee for there to be an update on broader strategic changes taking place on the Stability Panel for the next meeting. **ACTION**

### **RESOLVED:**

To note report.

## **8. CORPORATE PARENTING STRATEGY**

The report was introduced by the Assistant Director of Safeguarding and Social Care. The report followed on from a previously agreed Corporate Parenting Strategy. The Corporate Strategy stated that all actions should be in the best interest of children.

The Committee noted that corporate parenting was Haringey's responsibility for all children and young people who were in care or had recently left care as adults. The priority of the strategy, and for the organisation, was to protect children and young people from harm and to keep them safe. There was high importance given to striving for the best interest of the child, nurturing their ambitions, and ensuring that the children and young people got the best opportunity in life. Corporate parenting was about asking: "Would this be good enough for my child?"

Haringey's promise was developed by the young people who were in care and was rooted in their lived experience. There were five principles:

1. Support you: To be happy, healthy and achieve goals.
2. Inform you: To know what your background is, why you are in care and to understand all you need to know while you are in Haringey's care.
3. Involve you: To be included in conversations about you, get your voice heard, and help you be in control of your life as much as possible.
4. Respect you: To have your own space, be confident in who you are and be treated fairly.
5. Celebrate you: To make happy memories, know your strengths as an individual and understand what you are capable of achieving.

There was a task set to the Participation and Engagement Worker, to increase the number of children in Aspire (a youth-led group for young people in, or leaving care in Haringey) and to note what was said. This would form the voice of the child annual report which would be brought to the Corporate Parenting Advisory Committee.

There were some outcomes set between the Independent Reviewing Officer, Children in Care team and the service leads. This was attached with the Report of A Child in the appendix, and included some of the outcomes which have been achieved by the department.

The report stressed the important role of corporate parents to work together, work restoratively and put the views and experiences of children and young people at the heart of all that was done.

Corporate parenting was a joint effort by organisations and the policy was agreed and worked on by children, young people, and by partners such as, Haringey Council, the NHS, the police, schools, and the voluntary sector.

The Committee noted that the virtual school aimed to make sure all children in care enjoyed their education, had access to the highest quality learning environments and achieved the best possible outcomes. Although it was a virtual school, the school was very similar to any other physical school, helping every child fulfil their potential and thrive throughout their educational journey.

The Committee were advised that the Annual Voice of The Child report would need to be considered and understood by the children themselves. And also feedback given as to whether, any aspect of the Corporate Parent strategy would need to be changed.

It was noted that the strategy was not due for a review until 2026, and the success of the strategy would be governed by the children's assessment. There was still some work to be done to ensure children and especially Haringey children with complex needs were safe and protected.

## **RESOLVED:**

To note the report.

## **9. Care leavers to be considered a protected characteristic under the Equality Act 2010.**

This was a verbal update by the Assistant Director of Safeguarding and Social Care.

The Assistant Director for Safeguarding and Social Care highlighted that work had previously started in 2019 to pass a Council motion for care leavers to be considered a protected characteristic under the Equality Act 2010.

In Josh McAlister's report, recommendations were made to make new legislation to broaden corporate parent responsibility. Furthermore, that cost cutting for Care Leavers could not be considered with a wider set of commitments across a public body. A care leaver should be treated as a 'protected characteristic'. It was noted that

19 local authorities in London had passed motions to have care leavers considered as a 'protected characteristic'. In 2022 the conversation was taken to cabinet on this matter. It was imperative that work was done to ensure that care leavers were considered a 'protected characteristic' under the Equality Act 2010.

The committee agreed that there was further work to be done, and the need to have a motion at Full Council passed, for care leavers to be a 'protected characteristic'.

**ACTION**

**RESOLVED**

To note the report.

**10. Any Other Business (AOB)**

It was noted that this was the Assistant Director of Safeguarding and Social Care, Beverley Hendricks last meeting. The Chair and the committee commended and thanked Beverley for her hard work in this role and to the Council.

This page is intentionally left blank

**Report for:** Corporate Parent Advisory Committee: October 2024

**Item number:**

**Title:** Performance for Quarter 1 2024/25 with updates to Quarter 2 where available

**Report**

**Authorised by:** Ann Graham, Director Children's Services

**Lead Officer:** Richard Hutton, Performance and Business Intelligence  
[richard.hutton@haringey.gov.uk](mailto:richard.hutton@haringey.gov.uk)

**Ward(s) affected:** All

**Report for Key/ Non Key Decision:** Non key

## 1. Describe the issue under consideration

- 1.1. This report provides an analysis of the performance data and trends for an agreed set of measures relating to looked after children on behalf of the Corporate Parenting Advisory Committee.
- 1.2. Section 4 contains performance highlights and key messages identifying areas of improvement and areas for focus. It provides an overall assessment relating to Children in Care so that Members can assess progress in key areas within the context of the Local Authority's role as Corporate Parent.
- 1.3. The report covers the first quarter of the year 2024/25 with updates for quarter 2 where appropriate.

## 2. Recommendations

- 2.1. For members to note.

## 3. Reasons for decision

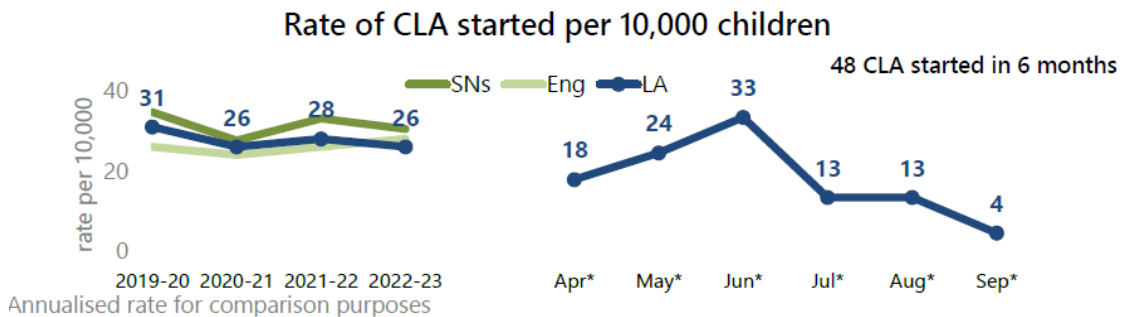
N/A

## 4. Background information

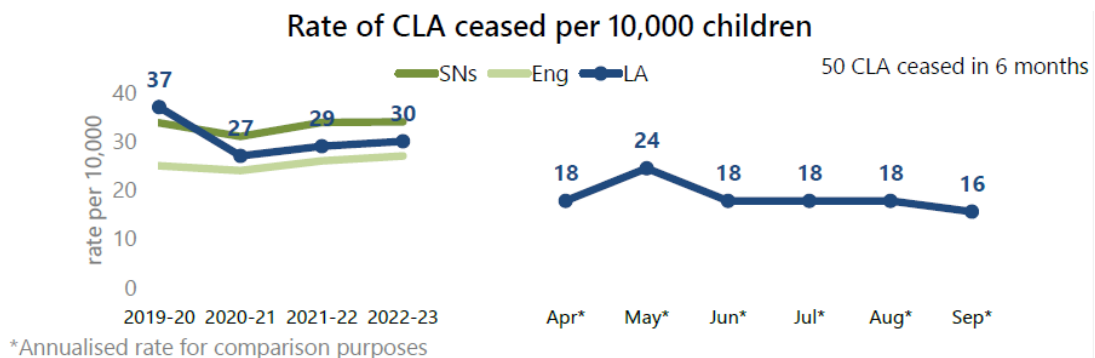
- 4.1. As of September 2024, there were 334 **children in care** (rate of 63 per 10,000). This is same number children as reported in June 2023 and remains within the interquartile range of our statistical neighbours latest published rates of 60-69. This represents a decrease of 10% since 2020 it is now the lowest rate for many

years. This is a result of a combination of intentional work to enhance the support for children and their families and outside factors such as regional trends.

- 4.2. The number of unaccompanied asylum seeker children (**UASC**) has increased since the summer to 26 0.05% 0-17 population, still some 28 children below the national transfer scheme threshold.
- 4.3. The rate of children **becoming looked after** over the past 6 months (18 per 10,000) equates to 48 children. This is well below the rate for the 12 months of 2022/23 with 141 children



- 4.4. 50 children (rate 19.0) **ceased to be looked after** over the 6 months to September this compares to 75 in the six months to June



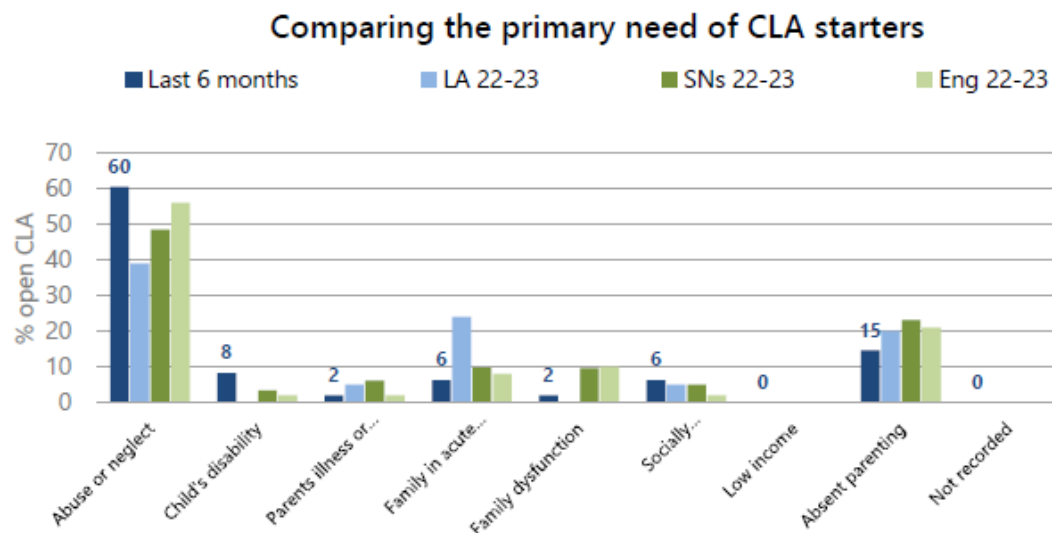
- 4.5. Of the 334 children looked after as at the end of September, 42 are **aged 3 or under** (18 fewer than in March 2022). Thirteen of these are placed with parents or family & friends and 2 with potential adoptive parents

CLA aged 3 or under

March 2020	March 2021	March 2022	March 2023	March 2024	September 24
49	67	60	54	40	42

- 4.6. Family in acute stress has fallen as a reason **for starting to be looked after** from an unusually high percentage last year. Over the past 6 months only 6% of new Children Looked After fell into this category down from 21% in the 6 months to October 2023 and below our statistical neighbours and national

rates. Abuse & Neglect and Children with Disabilities are now comparatively overrepresented, but this is volatile due the lower number of children entering care as mentioned above.



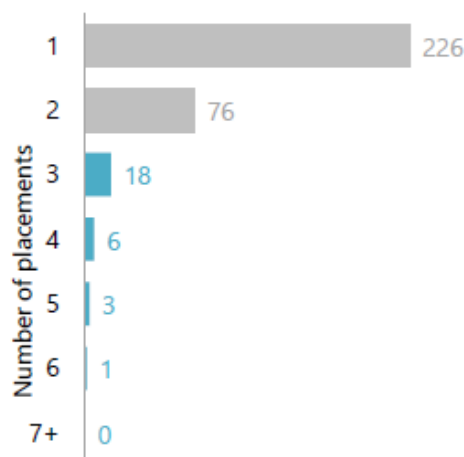
4.7. As of September 2024, 77% of 212 looked after children aged under 16 had an **up-to-date Care Plan**.

4.8. Of the 116 children in care aged 16 & 17 who require a **pathway plan**, 67% had up to date plans (up 4% points).

Personal education plans (PEPs) have performed well this year, with up to date reviewed PEPs 92% at the end of the spring term. And 95% for the summer term.

4.9. At the end of September, 8% (28) of children with an open episode of care had **three or more placement** in the last 12 months. This is lower than the previously reported figure (10% in April) and just below National and statistical neighbour averages

#### Number of placements in the last 12 months

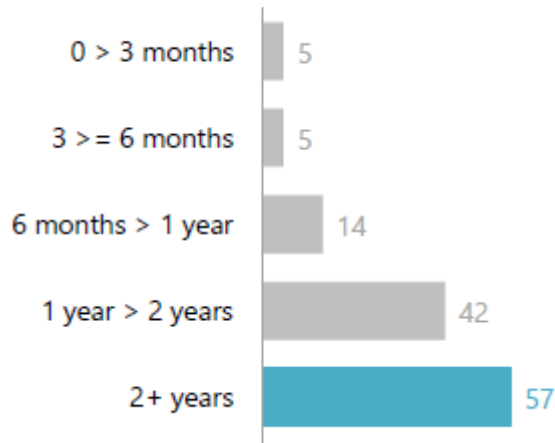


Moves in placements are usually as part of the child's care plan and can be a positive benefit. For example, a baby may move from foster care to a mother and

baby assessment unit, and then on to being placed with a permanent arrangement.

Children **under 16 who had been in care for at least 2.5 years in the same placement for at least 2 years**, is now 57% (51% 6 months ago) (%). This indicator and the three or more placements indicator, above, should be viewed together to gain a view of placement stability for Haringey's children in care.

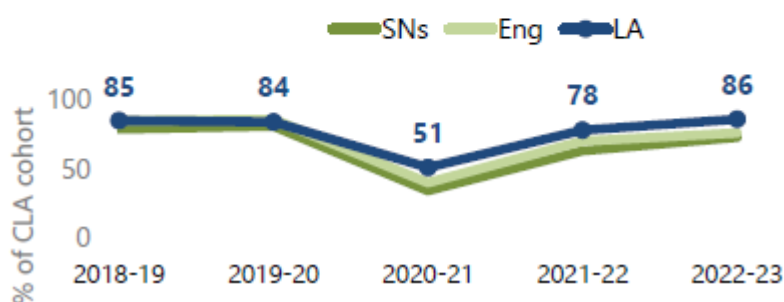
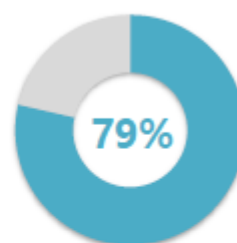
### Length of time in current placement



- 4.10. At the end of September, 94% of children who were looked after for at least 12 months had an up-to-date **health assessment**, this is up from 88% and is now in line with levels of our statistical neighbours (92%).
- 4.11. **Dental visits** are steady at 79%. Unfortunately, dental checks especially for older children has always been a challenging area.

### Dental checks

Current open CLA who have been looked after for at least 12 months who have had a dental check in the last 12 months.



- 4.12. There are now 588 male and 317 female **care leavers** in receipt of or eligible for leaving care services, in line with the definitions used by Ofsted, the figure includes young people who are:

<b>Eligible</b>	Age 16 or 17 Has been looked after for at least 13 weeks since age 14 (can be multiple periods) Currently looked after
<b>Relevant</b>	Age 16 or 17 Has been looked after for at least 13 weeks since age 14 (can be multiple periods) Looked after on or after their 16th birthday are no longer looked after
<b>Former Relevant</b>	Aged between 18 and 25 Previously an eligible or relevant child
<b>Qualifying</b>	Aged between 16 and 21 (or 25 if in education) Looked after on or after their 16th birthday Not looked after for at least 13 weeks since age 14 or privately fostered after the age of 16 but before the age of 18 or were looked after prior to becoming subject to a SGO.

Our cohort consists of:

- 107 young people under the age of 18 who will be Eligible when they leave care,
  - 208 who are classed as “qualifying” (all but 34 are already aged over 18)
  - 583 Former relevant
  - 10 Relevant
- 4.13. All of the care leavers aged 21 or under have a currently **allocated Personal Advisor**.
- 4.14. 95% of those aged 19–21 year olds were considered as **in touch with the local authority** up from 92% in April.
- 4.15. 48% of the 205 19–21 year olds and 52% of the 89 17&18 year olds were known to be in **Education Employment or Training (EET)**. Both figures improved since April. The main reasons recorded for NEET are that the young person is unavailable for EET due to disability, parenthood or prison.
- 4.16. 84% of 19 to 21 year old care leavers were known to be **in suitable accommodation** and 91% of 17–18-year-olds, up from 85% reported in December
- 4.17. **Education Health Care Plans (EHCP)**  
Both the overall number of children with an EHCP and the percentage of CLA with a plan has increased steadily over time.  
So far, we have received 421 requests for EHCPs in 2024, at a similar rate to 2023
- 91 of the 326 current CLA (28%) have active EHCP plans

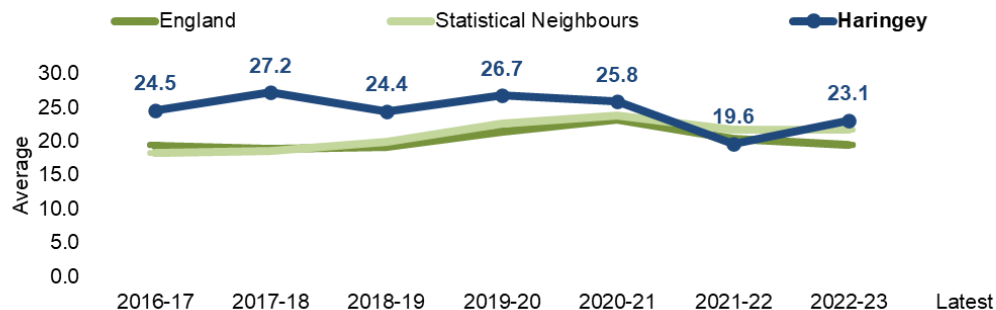
- 4.18. **Virtual school**

To support the champions model in future this report will include more details on specific issues relating to our CLA's Educational progress.

Outturns for 2024 are expected to be published in spring 2025

### Attain 8 score for CLA at key stage 4

Average Attainment 8 score per pupil at Key Stage 4



#### 4.19. Youth Justice Service

As of the end of March 2024 there were 68 active young people on the YJS caseload. This has increased to 74 as of September 2024. Of the 74:

- 24% of the current cohort are also Children in Care,
- 4% are currently Children in Need and
- 4% have an active Child Protection Plan
- 81% have up to date Asset +

### 5. Contribution to strategic outcomes

N/A

### 6. Use of Appendices

### 7. Local Government (Access to Information) Act 1985

**HARINGEY**

**Children and Young People's Service**

**Annual Report**

**Children in Care Service**

**April 2023 - March 2024**

Authors: Lynn Carrington Designated Nurse, Children in Care; Dr Hajera Sheikh, Named Doctor, Children in Care; Dr Paul Sender, Designated Doctor, Children in Care

Contribution from: Dr Bridget Mulvany, Medical Advisor for Adoption

Date 10/07/2024

Annual report 2023-2024

## Contents

<b>Executive Summary</b> .....	1
<b>Introduction</b> .....	1
Context.....	2
Team Values .....	2
Legal Status .....	2
Aims .....	3
<b>Haringey CIC service and staffing structure</b> .....	3
Staffing structure 2023/2024 .....	3
Key Roles and Responsibilities .....	4
Referrals .....	6
Health Assessments.....	6
Initial health assessments .....	6
Review health assessments.....	7
Children Leaving Care .....	8
Young People remanded into detention .....	8
Challenges and Positives.....	<b>Error! Bookmark not defined.</b>
Updates / Progress 2023/2024 .....	8
<b>Key 2024/2025 Strategic and operational priorities</b> .....	12
<b>Data - Children in Care Service</b> .....	14
<b>Strategic Work of the Team</b> .....	17
<b>Training and Seminars</b> .....	18
<b>Risk Management, Incidents and Complaints and Compliments</b> .....	18
<b>Supervision</b> .....	19

## **Haringey Children in Care Service**

### **Annual Report**

**2023-2024**

#### **Executive Summary**

##### **Key metrics 2023/2024**

1. 73% of Haringey Children in Care seen with 20 working days for Initial Health Assessment – 17% improvement between Q1 and Q4 – achieving 73% by Q4
2. 97% of Haringey Children in Care for 12 months or more seen for their Review Health Assessment
3. 84% of Haringey Children in Care have seen a dentist during the preceding 12 months
4. 51% of Haringey Children in Care fully immunized in line with UK vaccination schedule; 75% of Children in Care when excluding influenza vaccination
5. 87 % Haringey Children in Care have had a Strength and Difficulty Questionnaire (SDQ) completed. This is collected by First Step which is a commissioned service provided by the Tavistock-Portman.

#### **Introduction**

The Haringey's Children in Care (CIC) annual health report outlines the work undertaken by the team. The objective of the CIC health service is to ensure that all Haringey children and young people in care have their physical, emotional, and mental health needs assessed and that health plans are in place detailing how identified needs will be addressed to improve health outcomes. For each and every Haringey child and young person in care, health should be reviewed at their interval assessments and a set of guiding recommendations formulated. The team's focus is working together to enable children and young people to reach their full potential and enjoy the same opportunities in life as their peers.

## Context

The report is written in accordance with The Statutory Guidance on Promoting the Health and Well-being of Looked after Children (DCSF 2015). We are commissioned by the North Central London Integrated Care Board to undertake initial and review health assessments for Haringey CIC.

## Team Values

Our team values are:

- Always show respect and kindness for all
- Always go the extra mile for our clients
- Always learning and improving
- Always enabling and empowering children and young people to achieve their potential
- Always put the child and young person first, challenging where needed and advocating for children.

## Legal Status

The legal status of CIC differs amongst children and young people.

Most children and young people in care are placed in care under a care order. This is a court order placing a child in the care of a local authority.

Some children and young people can be placed in care under a voluntary agreement. This allows a local authority to provide accommodation for a child where there is parental consent, or when no-one with parental responsibility is in place - for example if the young person is an unaccompanied asylum-seeking child.

A placement order is a court order allowing a local authority to place a child for adoption or when a child is detained due child protection concerns or under youth justice legal statuses.

## Aims

The CIC service aims to meet the health needs of children and young people in care aged 0-18 years by promoting and contributing towards improving the health and well-being of children and young people in care<sup>1</sup>. The CIC service is responsible for:-

- Completing statutory Health Assessments (initial and review), with reports, within designated timeframes. An Initial Health Assessment is to be completed within 20 days of a child/young person children entering care; Review Health Assessments are undertaken every six months until a child is aged 5 years and thereafter on an annual basis.
- Identifying an individual child's health needs and advising Social Workers of the health needs of individual children, in the form of a set of health recommendations
- Making recommendations regarding health promotion activities and health interventions
- Ensuring all young people leaving care have a Care Leavers Summary
- Representing and contributing to Adoption panels and multiagency assessments and reviews
- Providing Paediatric Permanency Reports for individual children
- Providing medical advice to prospective adopters regarding individual children with whom they have been matched
- Reviewing and commenting on medical examinations for adults being assessed as carers (foster carers, special guardians, connected persons and adoptive parents).

## **Haringey CIC service and staffing structure**

### Staffing structure 2023/2024

During 2022/2023, the North Central London Integrated Care Board (NCL) completed a scoping exercise to review the core offer for CIC across the NCL benchmarking against the NICE guidelines (2021).

This work resulted in additional funding being made available to recruit an additional CIC Nurse, alongside additional paediatric clinic availability. Recruitment took place as soon

---

<sup>1</sup>

[https://assets.publishing.service.gov.uk/media/630623bdd3bf7f3660de63da/Promoting\\_the\\_health\\_and\\_well-being\\_of\\_looked-after\\_children\\_August\\_2022\\_update.pdf](https://assets.publishing.service.gov.uk/media/630623bdd3bf7f3660de63da/Promoting_the_health_and_well-being_of_looked-after_children_August_2022_update.pdf)

as the funding was received. Alongside this action, the Designated/Named Drs role has been divided into two consultant posts - a Named Dr for CIC and a Designated Dr for CIC. The posts are within the Haringey Community Paediatric medical teams and the doctors have other clinical responsibilities within community paediatrics. The post of Designated and Named Nurse is combined. The team works with Haringey's Adoption Advisor who is a Consultant Paediatrician also working within the Haringey Community Paediatric team<sup>2</sup>.

During 2023/2024, staff were recruited to all vacant positions and all senior leadership positions within the team now have postholders. The current postholder for the Designated and Named Nurse combined role has held the role for the last 10 years. The Designated Doctor has been in post since May 2023 whilst the Named Doctor has been in post since November 2022. All are substantive appointments.

With funding for an additional one post and following recruitment to the position, there are now 4 specialist nurses employed within the team. Three members of the nursing team (2 Specialist nurses and the Designated nurse) have been in post for over 10 years and have developed good relationships with the children, carers and the wider professional network. Bank and agency staff members have been working within the team.

The team are supported by two Administrators who make a huge contribution to the team.

### Key Roles and Responsibilities

The Designated Nurse and Designated Doctor for CIC are statutory roles.

Job descriptions and competencies for the Designated and Named Doctor and Nurse roles are based upon joint Royal College of Paediatrics and Child Health and Royal College of Nursing guidance<sup>3</sup>.

Post holders in Designate roles are responsible for providing a strategic lead for the health and wellbeing of CIC within the borough and provide clinical expertise to partner agencies and across the NCL.

Dr Paul Sender, Consultant Paediatrician, was appointed to the Designated Doctor role in May 2023 and also works within the Community Paediatric Medical team. Lynn Carrington is the Designated Nurse, also holding the Named Nurse role.

---

<sup>2</sup> The Designated Doctor is employed 2PAs in the role, The Named Doctor is employed 2Pas in the role; the Designated/Named Nurse is full time; The Adoption Advisor is employed 2 PAs. 1PA = 4 hours work/week

<sup>3</sup> <https://www.rcn.org.uk/professional-development/publications/rcn-looked-after-children-roles-and-competencies-of-healthcare-staff-uk-pub-009486>

Dr Hajera Sheikh, Consultant Paediatrician, is the Named Doctor and has been in post since November 2022 and also works within the Community Paediatric Medical team. The role includes completing Initial and review assessments, supervising and overseeing other Paediatricians who undertake initial and review assessments, providing medical advice, support and advice for the Children in Care nurses. The analysing of adult health reports from GP's providing evidence-based comments for the fostering panel is included in the role.

Dr Sheikh and the Designated Nurse work together leading the nursing team to ensure the health needs of children in care are met and quality improvement plans are in place. Our exceptionally dedicated team of nurses provide health assessments for children living both in and out of borough and make health recommendations that are highlighted to social workers and carers to ensure children's health needs can be met. They also provide duty cover daily dealing with queries and attending strategy and professional meetings.

Dr Bridget Mulvany, Paediatric Consultant, is the Adoption Advisor who completes Initial and review health assessments and is a Consultant within the Haringey community paediatric medical team.

Where the care plan is to achieve permanency through adoption, the children will have a Permanency Medical Assessment. The Medical Adviser then produces a written summary of the child's health background, current health and development status and future health and developmental prognosis.

When a match is being considered, the Medical Advisor meets with the prospective adopters to discuss the health and development of the child as well as any significant family history that may have implications in the future for the child. Health information on the adoptive applicants is evaluated by the Medical Advisor to inform the panel of its implications in relation to adoption. This may include seeking further information and disclosure of medical information from Consultant specialists to clarify issues that have been raised and may have an impact on the Forever Family.

Haringey Social Work Adoption team are part of the regional adoption panel, Adopt London North, which includes six North London Boroughs. The Medical Advisor acts as a full panel member to advise the agency and prospective adopters on medical aspects of adoption and may therefore be required to advise on cases outside of Haringey.

Over the last year, 9 meetings with prospective adopters have taken place and the advisor has attended 4 panel meetings. Teaching has also been provided teaching on the health and developmental needs of Looked after children to adoption panel members.

The team are supported by two administrators who make a huge contribution to the team.

## Referrals

The Haringey CIC health team are notified by The London Borough of Haringey when a child is taken into care, moves placement or is no longer looked after. The notification should be received within 48 hours of a child becoming looked after. If an Initial Health Assessment is required, we then arrange an appointment for the assessment to take place and liaise with Social Workers, foster carers, and GPs to obtain a health history and to enquire if they wish to contribute to the report. Consent is received from the Social Worker, parent or young person depending on the legal order and an appointment booked for the next available appointment.

## Health Assessments

All referrals are discussed at a weekly team meeting; available information considered and the referral assigned to an appropriate clinician – nurse or doctor. Dates FOR assessments are booked and Social Workers requested to attend the Initial Health Assessment. On occasions joint visits are made to see children with social workers for reviews.

The team continues to work hard to engage with young people. Young people and carers jointly agree with the CIC health professional the venue to complete the review assessment - which is often at home and frequently involves travelling to where the child is living. Whilst 19% of Haringey children and young people in care reside within the London Borough of Haringey, the majority therefore live outside of the borough. Although a majority live within Haringey or neighbouring boroughs in north central London.

If children live a distance away In Scotland or Wales or a secure accommodation unit, we may ask an out of borough teams to complete the assessments.

When a young person refuses an assessment or is missing, and if it is deemed clinically appropriate, the doctor or nurse then completes a desktop report<sup>4</sup> with all the health information available.

## Initial health assessments

Initial Health Assessments take place at Tynemouth Road Health Centre. A report is written, and health recommendations should be made available for the child's first statutory

---

<sup>4</sup> A desktop report is written by the paediatrician or nurse. This takes place if a young person does not wish to attend the assessment and it is clinically appropriate. If possible the Dr speaks to the young person and others to inform the report. The Social Worker is also contacted and existing health records reviewed. This is following a recommendation of a Serious Case Review (Child O). The report is forwarded to health professionals including the GP and recommendations will be reviewed by SW and Independent reviewing Officers.

review. Assessments are completed by members of the Community Paediatric Team supervised by a paediatrician.

Children placed at a geographical distance from Haringey or who have mobility difficulties are in some cases referred to other CIC Teams. Those well-known to another Paediatric team may be seen by their Paediatrician.

Assessments for those who are unaccompanied asylum-seeking children often require an interpreter.

Offer for unaccompanied asylum seekers:

- a. For all unaccompanied asylum-seeking children, a referral to University College London Hospital NHS Trust is arranged for infectious disease screening.
- b. Referral and signposting to a sexual health clinic
- c. Input from Virtual School until an appropriate higher educational placement found, including ESOL courses
- d. Specialist social worker for support around experience, including referral to third sector organisations, eg Freedom from Torture and Red Cross Family tracing services.
- e. A gym pass for young people placed within Haringey and certain allied boroughs.
- f. Some children and young people require referral for specialist mental health support and have post-traumatic stress disorder.

### Review health assessments

Review Health assessments are carried out by paediatricians or specialist nurses working within the CIC team. Each child is allocated a nurse and for continuity we aim for the same allocated nurse to see each child on their caseload each year. This may include nurses travelling to where the child is placed, if the journey can be completed within a day. Occasionally, if the child is unable to travel to Haringey, we may ask other health teams to complete Review Health Assessments.

Following assessments, recommendations from the health assessments are sent to Social Workers and may be incorporated in the 'The All about me report' written by The Independent Reviewing Officers.

If a permanency plan is required for the child, the adoption advisor sees the child or oversees the assessment.

### Children Leaving Care

A care leavers summary is completed at a child's last health assessment or as soon as the child reached 18 years. The summary is sent to the young person and a copy is uploaded to Liquid Logic.

Information about services that may assist care leavers to transition successfully to adulthood and independent living is provided by social care. This includes advice regarding financial support, housing, health, education, and training. This ensures that all care leavers have a clear idea of what services are available to them and can highlight any gaps in provision or support that the young person may need.

An app is available 'skills for life for young people' to better enable young persons to access relevant information - and includes health information materials.

### Young People remanded into detention

Since May 2013, statutory requirements for young people remanded into detention (and who were not previously looked after) has changed.

These young people no longer require a statutory health assessment (Care Planning, Placement and Case Review (England) (Amendment) Regulations 2013).

The young person will be seen by the facility they are remanded into or by the nurse working with the youth offending team.

### Updates / Progress 2023/2024

Although children and young people were less affected by Covid 19 than adults in regard to mortality rates, there were safeguarding risks to vulnerable children and there has been increase of complex cases with children entering care post pandemic, with a rise in children throughout England requiring mental health support.

#### 1. Effective working with partner agencies

With a leadership team now consisting of a Designated/Named Nurse, Named Doctor and Designated Doctor, alongside now 4 Specialist CIC Nurses, there is now the capacity to more effectively engage with partner agencies. This is a need to improve health assessments, recommendations and interventions for individuals as well as to drive improvements in service delivery. Also to drive policy and system changes. Work in relation to mental health service provision is describe in another section.

The importance of re-instituting operational meetings between Health and Social Care has been helpful for each agency and will overcome some of the challenges due to working at different sites.

A fully resourced CIC Health Team is able to more effectively advocate for the particular needs of Children in Care, especially when seen against a background of a specific set of vulnerabilities.

Over time, and as a team, we intend to develop closer working relationships with counterpart LAC teams in boroughs where significant number of Haringey CIC are placed. Also, with counterpart in boroughs whenever an individual need arises.

2. Timely and relevant health assessments – including high quality assessments completed within 20 working days of Children initially entering Care.

The number of child in care for 12 months or more and who received a review health assessment is now at 97%, which represents a slight improvement against the 2022/2023. The numbers of child receiving an Initial Health Assessment within 20 working days of entering care has improving over the year. There was a 17% improvement in this statistic with 73% of children entering care receiving a timely assessment.

A significant bottleneck remains the consent process, without which a health assessment cannot be undertaken. During 2023/2024, a new consent form for health assessments was agreed between Haringey Community Paediatrics and Haringey Children's Services. This is anticipated to result in further gains in terms of achieving timely assessments. Social Workers are now able to obtain consent for initial health assessments at the same time that legal processes are agreed for a child entering into care.

A further significant area of work initiated in 2023 and to be completed in 2024/2025 is a redesign of how initial and review health assessments are delivered. This work was initiated as part of a joint review with Children Social Care and involving inputs and feedback from Children in Care. A re-design will focus upon delivering:-

- Health assessments which are more relevant for children themselves and which cause less anxiety and stress, especially to older children/young persons

- Individualized recommendations which highlight a prioritization of actions to be undertaken by health, social care and other agencies, alongside a set of more standardized, generic recommendation
- Agreed timelines for dissemination of a summary and full report so that delays are obviated.

### 3. Improving access to health services

- Immunizations: targets have not been met for immunizations coverage. Whilst coverage is at 75% (excluding influenza), there is clearly a significant challenges in terms of uptake of influenza vaccination. Full coverage, including influenza, is only 51%. Multiple barriers exist which limit target coverage attainment. These include lack of reliable data (due to multiple immunization providers/multiple recording databases); challenges with the consenting process especially for school age children. A further set of challenges relate to coverage attainment for children living outside of Haringey.

A series of meeting were held with Haringey Public Health and at the time of completion of this report, further meetings with the NHS NCL ICB. An audit of immunization of Looked After Children in Haringey will be jointly undertaken by the CIC Team/Haringey Public Health during 2024/2025 to identify gaps in coverage (consent/data/access to services). This is expected to lead to a better service.

- Dentistry: coverage is currently 84%. Target attainment is static as compared to 2022/2023 achievements. Whilst government initiatives including the Pan-London Healthy Smiles Pilot are welcomed initiatives to address inequalities in oral health amongst LAC, there is a need for similar interventions for children living outside of London.

### 4. Early interventions through to crisis mental health services

There is agreement across Haringey partners that there is an urgent need to expand and improve the quality of interventions available for Haringey Children in Care. In 2023/2024, a benchmarking exercise was undertaken in order to define “Psychosocial Care in Children-in-Care – What does Good Look Like? A Mixed-Methods Pragmatic Scoping Review.”

The establishment of a Mental Health working group involving Haringey Social Care and mental health providers (principally BEH CAMHS and Tavistock Portman) partners will

be crucial in order to better specify and better deliver services for LAC. Future directions of work are described beneath.

5. Multidisciplinary educational programme and updates from external speakers and organisations including:

Infectious diseases Screening for UASCs (UCLH team)

Vaccine Hesitancy - Professor Helen Bedford

Trauma informed Care – Wave Trauma trust

ABC Parents Programme – Dr Okereafor (founder and co-lead)

Mental Health Assessments for Children in Care: Professor Rachel Hiller and Clare Evans

Kooth

Open door

Family Functional therapy Team

Markfield Project

Virtual School

Reflective sessions in conjunction with Parent and Infant Psychology service

6. Away Day – 28 September 2023.

Held in conjunction with Islington Children Looked After team.

This was an opportunity for the whole team (doctors, nurses and administrative staff) to share ways of working, hear from service users, and forward plan for the coming year.

The Away Day included presentations from service users and care-leavers about experiences, prejudices and pertinent issues, mental health research (Anna Freud Centre), delivery of integrated psychological services at Islington Health, and the Five Year Forward plan from Haringey Assistant Director of Children's Services. A group Appreciative Inquiry exercise was undertaken in the afternoon, facilitated by Whittington Learning and Organisational Development team.

### **Key 2024/2025 Strategic and operational priorities**

1. Ensuring that Looked After Children are able to access a high-quality and evidenced based package of services spanning early interventions through to enabling timely access to crisis interventions.

The following work packages will be undertaken during 2024/2025:

A Haringey Mental Health for LAC symposium hosted by Haringey Children's Services and jointly convened by the Health LAC team will be held in August 2024.

Work with partners to define services, with a strong focus upon improved assessment of needs and ensuring that interventions are evidenced based.

Areas of change to assessment practices and interventions offered to LAC are expected to include:

- Annual assessment that more clearly identify social and emotional needs
- Strengthening and prioritization of therapeutic life story work, alongside statutory assessments such as SDQs
- Systems/process/expertise to assess for Complex PTSD as soon as an adolescent is taken into care
- Evidence based offer/menu of interventions that is adaptable
- Enhanced access for LAC to CAMHS crisis interventions when they need them

As a health LAC team, we will develop our partnership with other organizations and hope to begin a collaboration with Prof Rachel Hiller's Child Trauma and Recovery Group at UCL including collaboration on research being taken forward in Haringey by a Doctoral Student within her Department.

2. Improving immunization coverage

The following work packages will be undertaken during 2024/2025:

Ongoing work to strengthen systems/processes in order to improve data and delivery.

Audit of immunization services/coverage for Haringey CIC. This will establish reasons for under attainment against nationally agreed targets. We hypothesise that failure to obtain/communicate consent, limitations in data collection/reporting (likely due to multiple providers/registration systems), placement moves/challenges in accessing immunizations following placement moves likely accounts for under achievement. This will be investigated through an audit involving NCL ICB/Haringey Public Health/Haringey LAC services. Recommendations will follow.

3. Ensuring access to dental services

The following work packages will be undertaken during 2024/2025:

We will analyze the dental data (seen by dentist 84%) in order to better understand sub-populations unable to access dental services and to identify whether this is children living within Haringey/NCL ICB/London or beyond. We will work with NCL ICB to ensure that all children within London are able to access dental services, through the Healthy Smiles Pan-London dental pilot

We will meet with NCL ICB at the level of senior governance in order to discuss the results of sub-analysis of data.

#### 4. Data and outcomes – measures of wellbeing

The following work packages will be undertaken during 2024/2025:

Routinely collected data – we intent to improve our use of routinely collected data through sub-analysis of inequalities in order to drive improvements in performance eg identifying geographical areas where children are placed in care – within and outside of Haringey – and where access to health services eg dentistry/vaccination services is difficult

As part of the workstream to improve early interventions through to crisis mental health support, we intend to incorporate measures of emotional well-being beyond SDQs scores. There is a large body of evidence which concludes that SDQs underestimate certain conditions eg depression/PTSD which impact upon well-being/mental health. We will work with academic partners, mental health services and the NCL ICB in order to define a core set of indicators and to develop the systems required for data collection/analysis.

#### 5. Initial/Review Health Assessments

The following work packages will be undertaken during 2024/2025:

##### i. IHA/RHA rebranding (ongoing):

Change of focus of health assessments to health and well-being of child/young person, focussing on positive rather than negative aspects (following feedback from service users).

Co-design with service users to make assessments relevant to child/young person's concerns.

Liaison with social care and IRO's to extract most pertinent information to include within report.

Use of some generic recommendations to improve standardisation, and timeliness of reports

Create information about the assessment as well as local services, means of seeking extra support, including mental health.

Work to ensure recommendations and reports are shared in a timely fashion.

ii. Consent – turnaround.

A new consent form was introduced in 2023, to be signed at the same time as a child coming into care. It was envisaged this would lead to an improvement in timescales for obtaining consent for the Initial Health assessment.

Roll-out is continuing – and further work is planned in conjunction with social care to improve both use of the new consent form and time frames for notification of a child coming into care and obtaining of consent.

### **Data - Children in Care Service**

As of the end of March 2024, 334 Children were placed into Care whilst 119 children entered care during the reporting period. The rate of children becoming looked after is 64/10,000. This is within the interquartile range of our statistical neighbours (60-69). per 10,000 is 62

Within the last 12 months, 156 children ceased to be looked after, out of which 45 who ceased to be looked after and returned home to live with their parents or relatives.

73% of Haringey Children in Care seen with 20 working days for Initial Health Assessment – 17% improvement between Q1 and Q4 – achieving 73% by Q4

97% of Haringey Children in Care for 12 months or more seen for their Review Health Assessment (those in youth offending institutes not CIC prior to being remanded are not the responsibility of the CIC team).

84% of Haringey Children in Care have seen a dentist during the preceding 12 months

51% of Haringey Children in Care fully immunized in line with UK vaccination schedule

75% of Haringey Children in Care fully immunized when excluding influenza vaccination

87 % Haringey Children in Care have had a Strength and Difficulty Questionnaire (SDQ) completed. This is collected by First Step which is a commissioned service provided by the Tavistock-Portman.

Haringey CIC team submit quarterly reports via Whittington Health on performance of the team which is reviewed at NCL commissioning meetings.

### **Quarter 1 2023/24**

		Quarter 1 2023/24			
Activity		April	May	June	Total Q1
Initial Health assessments	Number of new into Care notifications	16	10	8	34
	Total number of children seen in current month	5	14	10	29
	Number completed within 20 days (based on 'date seen')	8	6	5	19
	Number completed over 20 days (based on 'date seen')**	4	8	3	15
Review Health assessments	Number due	33	24	29	86
	Total number of children seen per month	40	23	16	79
	Number completed within timescale this month	31	24	18	73
	Number of children not seen on time	6	3	8	17 not seen on time

## Quarter 2 2023/24

		Quarter 2 2023/2024			
Activity		July	August	September	Total Q2
Initial Health assessments	Number of new into Care notifications	13	10	9	32
	Total number of children seen in current month	9	9	9	27
	Number completed within 20 days (based on 'date seen')	3	7	5	15
	Number completed over 20 days (based on 'date seen')**	10	3	4	17
Review Health assessments	Number due	25	27	22	74
	Total number of children seen per month	20	38	21	79
	Number completed within timescale this month	13	24	16	53
	Number of children not seen on time	13	3	6	22 Not seen on time

### Quarter 3 2023/24

Quarter 3 2023/2024					
	Activity	Oct	Nov	Dec	Total Q3
Initial Health assessments	Number of new into Care notifications	7	19	3	29
	Total number of children seen in current month	4	12	6	22
	Number completed within 20 days (based on 'date seen')	4	13	3	20
	Number completed over 20 days (based on 'date seen')**	1	5	0	7
Review Health assessments	Number due	48	45	31	124
	Total number of children seen per month	39	39	24	102
	Number completed within timescale this month	34	37	21	92
	Number of children not seen on time	11	8	10	29 not seen on time

### Quarter 4 2023/24

Quarter 4 2023/2024					
	Activity	Jan	Feb	Mar	Total Q4
Initial Health assessments	Number of new into Care notifications	2	11	9	22
	Total number of children seen in current month	2	6	11	19
	Number completed within 20 days (based on 'date seen')	2	6	8	16
	Number completed over 20 days (based on 'date seen')**	0	2	1	3
Review Health assessments	Number due	17	28	26	70
	Total number of children seen per month	13	23	22	58
	Number completed within timescale this month	24	32	24	80
	Number of children not seen on time	4	5	2	11 not seen on time

6 children were not seen for RHA by the end of the year. The team continue to attempt to see children who have previously declined to be seen. 97% of children in care received an RHA.

4 RHA'S and 2 IHA's were completed by Out of Borough Team's due to where the children are placed.

### **Strategic Work of the Team**

The Nursing/Medical team represent CIC on the following groups and committees.

<b>Name of group/committee</b>	<b>Representative</b>	<b>Frequency</b>
Whittington Health Safeguarding committee	Designated Nurse/Designated Doctor	Quarterly
Whittington Health Haringey Quality and Performance meeting	Designated Nurse/Designated Doctor	Monthly
Haringey Safeguarding Assurance Group meetings	Designated Nurse	Quarterly
Haringey health safeguarding children learning and quality group	Designated Nurse/Designated Doctor	Quarterly
Haringey Complex care Panel	Designated Doctor	Monthly
Haringey Fostering Panel	Designated Nurse	Monthly
Virtual School Management Committee	Designated Nurse	Quarterly
Haringey Exploitation Panel	Designated Nurse	Monthly
Haringey Pre-MACE	Designated Nurse	Monthly
Corporate Parenting Committee Meetings	Designated Nurse/Designated Doctor/Named Doctor	Quarterly

Meeting with Aspire (Children in Care council)	Designated Nurse/Designated Doctor/Named Doctor	Quarterly
London Designate Nurse Meetings	Designated Nurse	Quarterly
Designated Meetings across the sector	Designated Nurse/Designated Doctor	Quarterly
HSPC Quality performance and outcome meetings	Designated Nurse	Quarterly
HSPC Practice, Learning & Workforce, Development Group	Designated Nurse	Quarterly
NCL Safeguarding System Learning Conversation	Designated Nurse	Quarterly
NCL ICS CLA working group	Designated Nurse	Monthly

### **Training and Seminars**

The nurses provide training to foster carers on child development, health needs and minor ailments and treatment.

We have provided training on The Health Needs of Children in Care via The Haringey Academy to Social workers and foster carers.

The Paediatric registrars receive training from the team during their placement and Health Visitors and School Nurses visit the service as part of their induction.

### **Risk Management, Incidents and Complaints and Compliments**

Following an incident in 2021/2022 where there was a delay in health review reports being shared, a weekly LAC health team meeting takes place which is chaired by the Named Doctor/Designated Nurse. All notification of entry into care are reviewed; health assessment are scheduled and the status of all medical reports is discussed. There remains a delay in some reports being completed due to capacity issues within the medical team. There is also a delay in nurses completing health assessments reports; a system of

uploading recommendations to mosaic takes place if there is a delay of reports being completed.

### **Supervision**

The Haringey Health LAC team leadership includes a Designated as well as Named Doctor for LAC work who alongside the Designated/Named Doctor for Child Protection in Haringey.

Any safeguarding concerns are discussed with the Designated or Named Doctor for LAC and identified concerns are discussed at any time with the Designated/Named Doctor for Child Protection or at the Haringey Community Paediatrics weekly safeguarding peer review meeting.

The nurses discuss cases of concern at team meetings and during 1:1 meeting with the Designated Nurse. Safeguarding supervision is received from the Named Nurse Child Protection. The Designated Nurse receives additional supervision with the other named nurses for CIC in Whittington Health.

Safeguarding is a significant and important part of the workload of the LAC Team and the team is routinely involved and included in any strategy meeting convened, for any Haringey LAC irrespective of where they are living.

The complexity and volume of safeguarding work has certainly increased year-on-year and this work continues to sit alongside more routine aspects of work, especially routine health assessments.

This page is intentionally left blank

**Report for:** Corporate Parenting Advisory Committee

**Item number:** To be added by the Committee Section

**Title:** **Fostering recruitment update**

**Report**

**authorised by :** Ann Graham, Director, Children's Services

**Lead Officer:** Keith Warren

**Ward(s) affected:** N/A

**1. Describe the issue under consideration**

1.1 To update members on the recruitment of foster carers.

**2. Recommendations**

2.1 For Members to Note.

**3. Reasons for decision**

N/A

**4. Background information**

4.1 The Fostering Service is responsible for the recruitment and ongoing support for all in-house foster carers for children in Haringey. Fostering provides a loving, stable family environment for our Children Looked After who are some of the most vulnerable children in our county.

4.2 Nationally, there is a shortage of foster carers. In Haringey, although our numbers have increased over the past year, we still need more foster carers. The recruitment of new carers is of vital importance and is driven by our wider Adolescent, Fostering and Residential Strategy, incorporated within our LAC sufficiency strategy which sets out our plans to increase in-house placement provision in Haringey.

4.3 The Fostering Service's key priorities in recruitment activity are to:

- Provide new placement capacity to meet the demographic and diverse needs of Haringey's Children Looked After
- Recruit, train and support foster carers who can provide the highest quality of care to our children

- Increase in-house placements, reducing the use of Independent Fostering Agency resources

4.4 The Fostering Service in Haringey recruits foster carers from a wide range of cultural and ethnic backgrounds, to reflect the diverse needs of children in care. Applications are welcomed from enquirers of all ages over 21 years, males and females, people in employment/not in employment and homeowners/those living in rented properties. The service also welcomes applications from LGBTQ community and works in partnership with 'New Family Social' ([New Family Social - Home](#)) to promote its recruitment messages.

## 4.5 Haringey Principles

- Where it is right to do so, all children will be supported to remain within the care of their families or communities with connected carers
- Where this is not possible, early permanence with adoptive families or foster carers will be sought to promote a sense of emotional wellbeing and a sense of belonging
- Children and young people's voice will be respected, and we will actively seek their engagement in decisions about their needs, their future and the provision of services
- High quality placements and provision of support to parents and carers to meet the needs of children and young people.
- Where possible and right to do so, children and young people should be placed within Haringey with Haringey carers to maintain a sense of connectivity with their community.
- Parents and carers are an integral part of the service, to be involved in planning for the child and service provision to ensure that the very best care is provided to our children and young people.

4.6 The fostering service have been successful in securing homes for our Children Looked After with Connected Carers', so they are able to remain within their own network of family and friends. Where this is not be possible, we work hard to ensure that our marketing strategies to attract new carers incorporate the above principles.

4.7 Since the implementation of our Fostering Recruitment Strategy, we have seen an increase in number of enquiries we receive on a monthly basis and also the number of carers being approved at panel.

## 4.8 Key Objectives for Fostering Recruitment in Haringey:

**Objective 1 - To increase the number of in-house Foster Carers in Haringey, reducing our reliance on independent fostering agencies.**

To recruit and approve 8 new foster carers. So that we increase the number of in-house foster carers and the range of high-quality placement options. This includes increasing the overall placement capacity by 30.

**Objective 2 - To increase our recruitment of foster carers from diverse backgrounds.**

We need a wide range of foster carers who are reflective of our children and our community. We need to be creative in our recruitment approach utilising the skills and advice of the existing foster carers from diverse backgrounds and working with our partners in Haringey to extend our reach in the community.

**Objective 3 - To ensure the support offered to foster carers is competitive and attracts the right carers into our service.**

We have reviewed our financial support package, and we work continuously with our foster carers to ensure we provide the best possible support, that is tailored to foster carers individual needs. We have also created a 'Benefits and Perks of Fostering for Haringey' leaflet, highlighting other non-financial incentives to foster carers in Haringey.

**Objective 4 – To expand our specialist fostering provision including Mockingbird Hubs, Secure Based Trained carers and Specialist carers.**

As part of our recruitment strategy, we will inform prospective carers about the options to develop and specialise as they progress as foster carers, increasing our offer of specialist fostering provision.

The Implementation of the Recruitment Strategy has led to the service looking at the key objectives, leading to the development of an action plan to meet each of the objectives.

This has been through the development of a creative and varied approach to reach a wider audience (please refer to presentation on fostering recruitment), which details the various approaches used by the service to raise our profile and awareness of fostering in Haringey.

The success of the strategy is demonstrated through the increase in placement capacity increase, preventing children from being placed in IFA placements or residential homes.

Year	Mainstream	Connected Carers	Reg 24	Variations to approval	Total capacity increase (no. of children)
2022/23	5	5	10 (16)	2	33
2023/24	10 (13)	6 (9)	13 (18)	6	46

**Our overall target for capacity increase in 2023/24 was 35, which the service exceeded.**

#### 4.9 The Fostering Recruitment Journey So Far 2024/25

4.9.1 To further enhance the work we have been doing to recruit new mainstream carers, as well as support family/friends to take on the long-term care of our Looked After Children, we have been working within the service to expand further capacity within our existing pool of carers.

4.9.2 We are keeping all of our carers under regular review and have recently undertaken a piece of work where we have reviewed all of our carers that could potentially have the capacity to take more children. Following the review, we identified the availability of 3 placements to add to the vacancy list.

4.9.3 This will remain an ongoing piece of work, with a 3-monthly review of carers that are on hold for various reasons. The carers currently on hold are for various reasons including: family bereavement, ill health, taking a break, standards of care investigations etc.

##### Since April 2024

	<b>Mainstream approvals</b>	<b>Connected Carers approvals</b>	<b>Reg 24 carers</b>	<b>Variations to existing approval</b>	<b>Total capacity increase</b>
<b>April 24 to date</b>	2 (2)	5 (6)	9 (9)	5	25

4.9.4 In addition to the above, we have a further 9 Mainstream carers in the assessment process, 2 of which are due to be presented to the fostering panel for approval this month (October) and 2 scheduled for approval in November.

4.9.5 Haringey have also collaborated with Islington in undertaking joint recruitment activities. There have been joint events and advertising bringing together both Haringey and Islington.

4.9.6 The trajectory based on the overall work so far in Haringey is promising and we hope to further increase in-house placement provisions for our Looked After Children for 2024/25.

#### 5. Contribution to strategic outcomes

N/A

#### 6. Use of Appendices

Appendix 1 - A Whistlestop Tour From March 2023

#### 7. Local Government (Access to Information) Act 1985



# Haringey Fostering

## Recruitment

*A Whistlestop Tour From March 2023*

# Fostering – background in brief



- Our 2023/24 target was to recruit 20 foster carers. Our 2024/25 target is to recruit **30** (making savings of £250,000). This will be achieved through recruiting and approving 8 new task-centred foster carers (not inclusive of coupled applicants) which will account for a further 16 placements
- In 2023/24, we recruited Ten foster carers this financial year – placing Haringey in the top ranking in the North London Fostering & Permanence Consortium
- In 2024/25, we have so far recruited 2 foster carer and have 9 currently in assessment – 2 going to panel this month (October) and 2 going to panel in November 2024
- Our retainment figures are 40% better than this time last year

# Introduced new branding and graphics

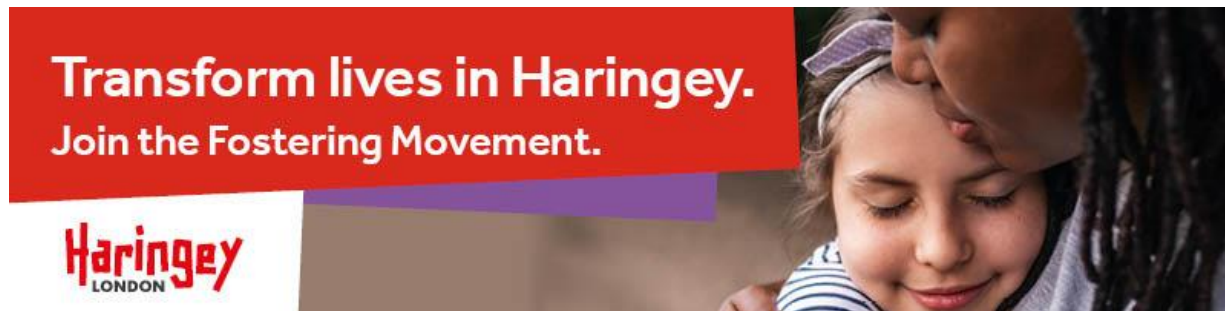
- Introduced new branding/graphics
- Produced and circulated a staff signatures banner for service workforce emails
- Introduced a new-look Foster Carers Newsletter – first edition was released in June 2023. The newsletter is issued bi-monthly and features items on the benefits and perks of fostering with Haringey, fostering community news items and training opportunities



**Apply to become a foster carer**

020 8489 3754  
fosteringrecruitment@haringey.gov.uk  
haringey.gov.uk/foster

**Haringey**  
LONDON



**Transform lives in Haringey.**  
Join the Fostering Movement.

**Haringey**  
LONDON



**Haringey**  
LONDON

foster carers'  
**NEWSLETTER**



**Haringey**  
LONDON

foster carers'  
**NEWSLETTER**

# Advertising – key messages

**Don't be shy to talk about the money!** We met with representatives from CAN Digital Ltd and discussed what works in generating fostering recruitment and best practice – it came up that many may want to foster yet are genuinely concerned they may not be able to afford to do so (with cost-of-living etc).

By being bold and placing the figure in our advertising we believed it would generate interest. We have faith in your fostering panel, so our job is to make it appealing to all, to make people think they can foster if they want to and that **they will be supported** financially and emotionally.

We outlined that **foster carers for Haringey get up to £477 per week, per child.** We boldly mentioned in across all of our communication channels, and look set to continue to do so.

**Become a foster carer in Haringey.**

Earn up to **£477 per week, per child.** Come down and speak to us.

**Haringey**  
LONDON

Page 44

# Community outreach

- Street outreach work has been successful and stalls at engagement events. Engagement outside The Vue cinema, in Wood Green, generated 36 enquiries
- We have printed flyers/posters/leaflets and merchandise such as bags and branded pens for such events
- Attended Black History events throughout October, such as the vibrant, celebratory event held at Marcus Garvey Library (see far right)
- Utilise Council resources e.g we have set up an in-person bi-monthly 'Information Session' hosted at Haringey's Family Hub located at the Family Hub in Tottenham
- Host bi-monthly online 'Information and Q&A Sessions' on Microsoft Teams (booked via Eventbrite/Ticket Tailor)



# Collaboration

We teamed up with The Foster Care Network in highlighting their 2023 'Fostering Communities' campaign which took place over a 2-week period in May.

We shared their campaign graphics and press release and, following helpful discussion with CAN Digital Ltd, we decided to use the community theme to introduce our own on-going campaign.

We invited people to get in touch with us if they would be able to place 10 A4 sized 'call to foster' posters around their local community – in gyms, coffee shops, libraries etc. This is a low-cost campaign and yet can achieve great results. We outlined that you don't have to be a foster carer to help with this, just able and willing to help!



We helped to mark the launch of National Adoption Week in October. The aim of this campaign was to share emotive stories from those who had been adopted and how it positively changed their lives.



We work with bodies such as ASPIRE to highlight such things as a free cinema night for foster children.





# 'Any of Us' – jointly funded film project

- Trailer: [https://youtu.be/\\_R8G10oNwCI](https://youtu.be/_R8G10oNwCI)
- Full film: [https://youtu.be/Wq\\_x\\_rUWJIE](https://youtu.be/Wq_x_rUWJIE)

We participated in jointly funded fostering-awareness raising film project which launched in September.

The 'Any of Us' project is the largest public sector film collaboration yet, with over 80 participants joining forces. The film aims to encourage people from all different backgrounds to consider fostering.

The film has been produced by ReelTwentyFive and project managed by CAN Digital and Rachel Brown.

We built interest in the film's launch across all of our platforms and issued a press release on launch date.



'Any of Us' – trailer and film, was \*embargoed\* until noon on Tuesday 26 September.

# Multi-award-winning fostering team

London Borough of Haringey Council was shortlisted for five 'Unawards' for participation in the fostering film project and **WON!**...

- Best Collaboration  
*And...*
- Best Creative Comms!

## **\*\*Photo Opportunity\*\***

The awards will be presented in-person to representatives of our fostering team and Assistant Director of Children's Services - a good opportunity for a positive news story about our local authority and will further increase the profile of fostering in our local area.

Haringey's award presentation looks set to take place on Monday 15 April 2024 (during the pre-election period) and will be shared on social media platforms prioritising LinkedIn in this instance.

2024's film project will result in the film 'Everything', embargoed for midday on Thursday 17 October.



# Key messages

- Street outreach work has been successful and stalls at engagement events. We have printed flyers/posters/ leaflets and merchandise such as bags, trolley coins etc
- We introduced a new-look Foster Carers' Newsletter in June 2023
- We have increased social media activity – with messaging and events
- We have an ongoing campaign in which people can contact us to ask for A4 posters to display around their community
- We took part in the fostering awareness-raising film 'Any of Us'
- Update our website regularly - with coffee morning info and detail information session events etc
- Utilise the council's other publications/platforms to promote fostering – such as use digital Clear Channel screens to display adverts
- Haringey People Summer edition - [Haringey People - Summer 2023](#)
- Case study of a foster carers experience – Viva Engage
- Topical messaging – on private fostering, remand fostering, emergency fostering or supported lodgings – key messages on these topics are tailored to tie into awareness weeks etc.
- In September 2024, we reached out to Headteachers to place our PF flyer in book bags, which they fully supported

**PRIVATE FOSTERING**



If you care for **someone else's child for 28 days** or more and are not a close relative, you may be a private foster carer and you must notify your local council.



Download on the App Store | GET IT ON Google Play

Scan the QR codes to download the Haringey Private Fostering app for iOS or Android.

Please notify Haringey Council's Multi-Agency (MASH) at  
 [mashreferral@haringey.gov.uk](mailto:mashreferral@haringey.gov.uk)  
 020 8489 4470

Page 50

# Foster carer retainment/satisfaction

We stay in touch with our foster carers and involve them in inputting items into our monthly Foster Carers' Newsletter. We hosted a 'Foster Carers Appreciation Awards' event in July 2024 which was a huge success, with a motivational speech from Steven Russell, who had been fostered as a young person (see photos below). We host an annual Foster Carers Picnic event - this year was very well attended. Such events provide a chance to get together and support each other as Haringey's vibrant fostering community.



# Case Study

We approached a member of our workforce, who was also a foster carer, to interview him on his experience then publicised this feature to staff and placed it in Haringey People magazine's summer edition.



**Justine Henson**

Jul 24

Seen by 2,039 ...

## **Fostering - Steve Pearson's experience:**

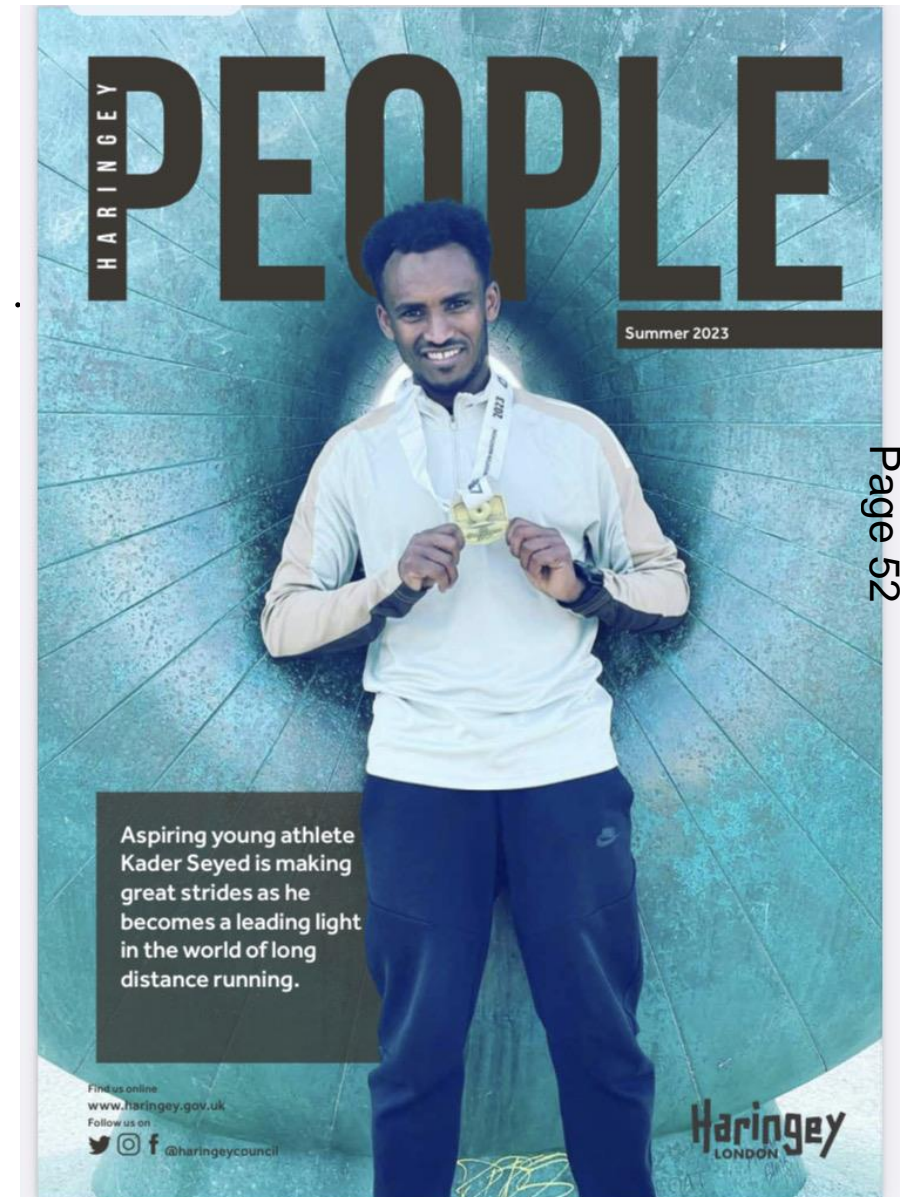
Steve Pearson is a consultant who works in Children's Services for Haringey, he's also a foster carer. Steve was approached to discuss his experience of what it is like to foster and why other staff members might want to consider it. Steve said:

I started fostering when I worked for a local authority as a team manager in child protection and I had to remove some children and place them with a foster carer. When I took these children to the carer's home,... see more

**Transform lives in Haringey.  
Join the Fostering Movement.**



👍 ❤️ Akofala Caliph and 34 others



# Specialist campaigns

## Private Fostering

### What does it mean?

A private fostering arrangement is when a child or young person, under 16 years, or 18 with Special Educational Needs and Disabilities, is living away from home for 28 days or more and is being cared for by an adult who is not their immediate or extended family member.

It is usually an arrangement which is agreed between a child's parents and the private foster carers. A child looked after by the local authority is not a privately fostered child.

Parents or those who have parental responsibility of a child or young person must advise the council of the private fostering arrangement, and where a private foster carers lives, at least 6 weeks in advance of when an arrangement is made, or in an emergency, within 48 hours.

If you become aware of a private fostering arrangement, or if you would like any further information, please email Haringey Council's Multi-Agency Safeguarding Hub (MASH) at [mashreferral@haringey.gov.uk](mailto:mashreferral@haringey.gov.uk) or phone 020 8489 4470.

Scan one of the QR codes to the right to download the Haringey Private Fostering app for iOS or Android.



## REMAND FOSTERING



Could you support young people aged 16,17 or 18 who are going through a difficult period in their lives? If so, you'll be supported by getting paid from £467 per week...



We are looking for 'Remand Foster Carers' whose role is to care for young people while they await court dates for an offence they are alleged to have committed. So, if you are the type of person who is good at influencing a young person to 'turn things around' and would be able to provide short-term foster care in this remit, we would love to hear from you.



The length of placements could vary but are a maximum of few months. By providing this type of specialist fostering, it offers an alternative to a young person living in custodial care before appearing in court.

In October and November 2023, we worked on producing marketing materials for two specialist types of fostering; placed this info in GP's Residents Newsletters, Schools Newsletters, Metropolitan Life magazine and within our Foster Carers Newsletter and shared on 'Viva Engage' to staff. Also produced as A5 flyers to hand out at events.

Page 53

Posted in All Company

 **Justine Henson**  
Nov 20

Seen by 1,183 ...

### Remand Fostering

**Could you support young people aged 16,17 or 18 who are going through a difficult period in their lives?** If so, you'll be supported by getting paid from £467 per week...

We are looking for 'Remand Foster Carers' whose role is to care for young people while they await court dates for an offence they are alleged to have committed. So, if you are the type of person who is good at influencing a young person to 'turn things around' and would be able to provide short-term foster car... see more

# Specialist campaigns

## Do Something Incredible...

Fostering a child with disabilities is so rewarding, we also provide a broad range of training and offer constant support throughout. As you will be delivering specialist care, you will receive an enhanced payment.



[fosteringrecruitment@haringey.gov.uk](mailto:fosteringrecruitment@haringey.gov.uk)

**Haringey**  
LONDON

### Fostering a child with disabilities

The placement could be a child or young person with a range of medical conditions such as developmental disabilities like autism to physical disabilities which limit a child's mobility. We provide training on areas such as: Child Protection and Disability Awareness, First Aid and Safe Caring – Expectations. We will carefully consider which child you should be matched with, in order for you to all to enjoy new gained experiences together.

Bear in mind, the Family Link service is also on hand to offer guidance and support. The service offers short breaks to children and young people who have a disability and their families. This is to enable our foster carers to sometimes have a break from the responsibility of day-to-day care.



If you feel you would like to know more about this topic, or you have the passion to take up this venture, please do get in touch with our fostering service by:

email: [fosteringrecruitment@haringey.gov.uk](mailto:fosteringrecruitment@haringey.gov.uk)  
phone: 020 8489 3754

[fosteringrecruitment@haringey.gov.uk](mailto:fosteringrecruitment@haringey.gov.uk)


**Haringey**  
LONDON

In August 2024, we produced marketing materials to attract potential foster carers for disabled children. We called this campaign **'Do Something Incredible'**.

# Engagement in-person and online

Arranged a series of Information Sessions which are publicised on our website and social media: monthly info sessions take place at: Wood Green library, the Family Hub, and online via Ticket Tailor.


We aim to host Information Sessions within faith group such as Muswell Hill church.

 Fostering Information Session - Q&A

Wed 13 Dec 7:00 PM - 8:30 PM GMT at Teams

PUBLISHED

View event page



Event summary

Event reports

MANAGE

Issued tickets

Waitlist sign-ups

Email broadcasts

SETTINGS

Event summary

TOTAL ISSUED TICKETS	REVENUE	CHECKED IN	EVENT VIEWS
3	£ 0.00	0	48
<a href="#">View issued tickets</a>	<a href="#">View orders</a>		<a href="#">View chart</a>

Event page link

View event page



# Foster Carers' Newsletter – new look edition introduced in June 2023

We currently issue our monthly newsletter to 175 foster carers.

The newsletter's tone of voice is warm and welcoming and provides the perfect opportunity to update our existing foster carers and maintain a fostering community vibe whilst also being aware that we may be 'talking' to potential foster carers that have yet to start the process of recruitment.

Subscribe Past Issues

Ofsted report: we are judged  
'Overall Good'



Most of you will be aware that Haringey Children's Services had their OFSTED inspection in February 2023. We are very pleased to announce that we have been judged

Subscribe

Past Issues

## Taking a foster child on holiday



As we are now in the summer period, holidays are back in the books. Holidaying with the whole family and your foster child(ren) can be extremely fulfilling and a great way to unwind from daily life.



## Welcome to our October 2023 edition

We issue our newsletter bi-monthly (every 2 months) to keep you ahead of what's going on in the world of fostering and fostering for Haringey.

We would also love to hear from you, so if you have any questions on fostering, email us at [fosteringrecruitment@haringey.gov.uk](mailto:fosteringrecruitment@haringey.gov.uk) or call us on [020 8489 3754](tel:02084893754).



## Season's Greetings to all our Foster Carers

With the festive season fast approaching, the service would like to wish you all a very Merry Christmas and a Happy New Year. In whichever way you spend the festive season, we hope you have wonderful break.

# Collaboration opportunities

**Haringey and Islington's 'Better Together'**

**Free Quiz Event**  
On the Topic of Fostering  
Saturday 3 August 2024, 2pm – 5pm

Marie Heywood Roof Garden Room,  
Brickworks, Crouch Hill Community  
Centre, 42 Crouch Hill, Finsbury Park,  
London, N4 4BY

**No need to book just turn up on the day!**

**Family-Friendly Event**

**ISLINGTON**  
For a more equal future

**Change a child's life: foster with us**

**CHILDREN ARE AT THE HEART OF ALL WE DO**

**Haringey**  
LONDON

Come and join us for this family-friendly quiz! Learn more about Fostering and becoming an Emergency Carer, who take care of children at short notice or a Supported Lodgings Carer, who help prepare our older children who seek independent living but still need the nurturing environment of a home.

We will be on hand to answer any questions and can also progress your enquiry to start an assessment! Both councils need Emergency and Supported Lodging Carers and sometimes working together means we are 'better together'!

Afternoon Tea will be provided, and children can have fun in the creative corner.

## Haringey

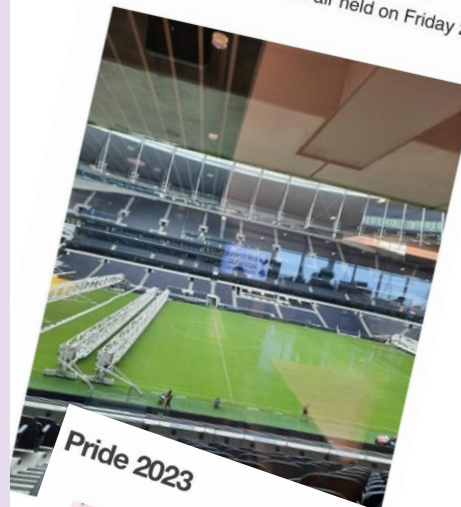
Visit [haringey.gov.uk/fostering](http://haringey.gov.uk/fostering)  
call us on 020 8489 3754 or email  
[fosteringrecruitment@haringey.gov.uk](mailto:fosteringrecruitment@haringey.gov.uk)

## Islington

Visit [islington.gov.uk/fostering](http://islington.gov.uk/fostering)  
call us on 020 7527 7933 or email  
[fostering@islington.gov.uk](mailto:fostering@islington.gov.uk)

## Tottenham Hotspur Jobs Fair

We were out and about recently to engage with members of the public who attended the Tottenham Hotspur Jobs Fair held on Friday 27 October.



## Pride 2023



Aspire - seeking to recruit new members

**Aspire**  
HARINGEY'S CHILDREN ARE COUNCIL

Children in Care and Care Leaver  
looking to recruit new members. If  
11 and 25 years old and are  
about to leave care, please  
would love for you to join them.

The North London Fostering and Permanence Consortium hosted a stall on Saturday 1 July at 'Pride 2023', and were joined by members of

- Working with other council's - such as hosting a quiz events on Saturday 9 March 2024 and Saturday 3 August 2024 with Islington to drive interested in recruitment for **Emergency Carers and Supported Lodgings**
- We continue to meet regularly with the **North London Fostering & Permanence Consortium** – taking part in joint advertising and sharing knowledge and information

- We work well together; sharing our resources. The cases that have progressed to assessment are 'interagency' placements that can be accessed by Haringey placements team.

# Social media channels

We have a 'Fostering Haringey' a Facebook, Instagram and Twitter account dedicated to the service.

We use this platform (as well as Haringey's main social media channels) throughout; displaying information and updates regarding fostering, and to share details on engagement events.

Follow us at:



@HaringeyFoster



haringeyfostering



haringey.gov.uk/fostering



Got any burning questions about fostering? and are keen to know more? If so...representatives from our fostering team will be hosting an inf... See more



2

**Come and have a coffee and a chat**

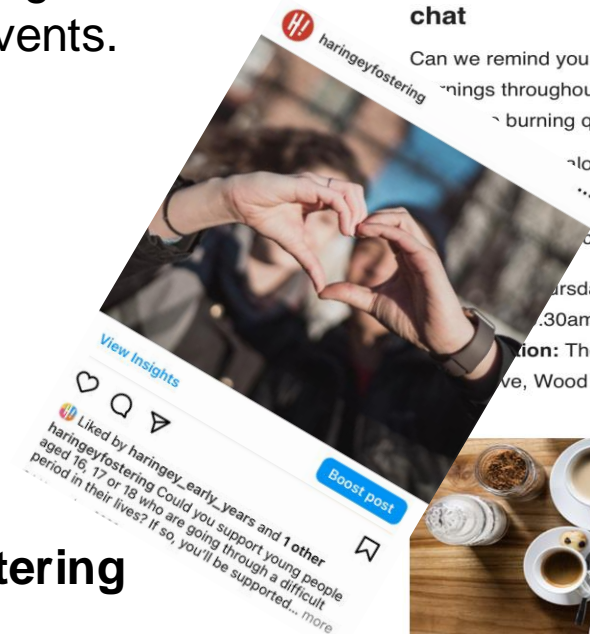
Can we remind you that we host coffee mornings throughout the year for those who have burning questions about fostering.

...long and have a chat with our... yes in a relaxed setting.

...coffee morning:

...Thursday 29 June  
...30am to 12 noon

...tion: The Cypriot Centre, Earlham  
...ve, Wood Green, N22 5HJ



# Regular up-dates to our dedicated webpages

**We launched our new look website in September 2024.**

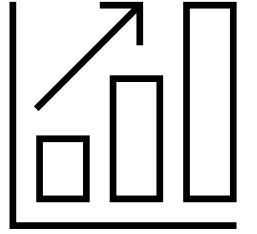
Our webpages host these topics:

- What is fostering?
- Types of fostering
- Why foster with Haringey?
- Become a foster carer
- Our foster carers' stories
- Private fostering
- Blog
- Events

The site has been carefully designed to be more engaging and the 'enquire now' button has been placed on each webpage to maximise ease of contacting our service.

[www.haringey.gov.uk/fostering](http://www.haringey.gov.uk/fostering)

# Other Communications Channels



## Digital

- New look website launched in Sept 2024
- Development of the app (the missing app)
- Video with Cllr Brabazon
- Homepage carousel
- Haringey People Extra (HPX)
- Social media

## Newsletters/Publications

- School's Bulletin
- Member's Briefing
- Partner's Briefing
- WhatsApp messaging
- SEND Newsletter
- Early Years
- GP'S Newsletter
- HPX
- Safeguarding newsletter

## Internal

- 'Viva Engage' – staff email bulletin
- 'In Haringey' (the monthly all staff bulletin)
- A 'Team Brief' goes to all managers each month. They go out the week before 'In Haringey'

## Social Media

- Fostering's own Facebook/Twitter/Instagram
- Regular posts based on themes and services
- Paid social media advertising
- Nextdoor
- Polls
- LinkedIn
- Share best practice, developments, successes

## Programmatic Digital Ads/ Google Search

Met with 'CAN Digital Ltd' in 2023/24 to discuss possibilities – cookies for the Council would have to change for us to go ahead with this. Will discuss in future. In Jan 2024, we discussed 'Google Search' to drive up interest/enquiries

# Press coverage – photo opportunity

Our spokesperson for the service is Cllr Zena Brabazon, Haringey Council's Cabinet Member for Children, Schools & Families.

- 'Any of Us' press coverage
- Helped to highlight fostering awareness-raising campaign



Press release issued - January  
2024:

Prestigious awards for 'Any of  
Us' council fostering film  
project | Haringey Council

Press release issued - May  
2024:

Comms2point0 award  
recognition

# S.W.O.T Analysis



## Strengths

- Haringey's strong sense of community
- Access to ward profile information
- Needs Assessment data
- Co-production events and outreach
- Digital, virtual and physical offering
- Passionate staff members

- Tapping into resources already available
- engagement events
- Social media channels

## Weaknesses

- Staff shortages
- Lack of knowledge on services
- Services being 'missed'
- Wrong services being prioritised
- Language barriers

- Lead times
- Regular meetings with partners
- Information and Q&A meetings
- Paperwork involved

## Opportunities

- Education/training
- Commissioning deals
- Charity offerings
- Cost of Living
- Service development
- Benefits and Perks of fostering for Haringey

- Schools' newsletter
- LinkedIn
- Contact with partners/charities
- Publicising Financial offerings – childcare support etc
- 'Viva Engage' – keeping in touch with staff, sharing expertise

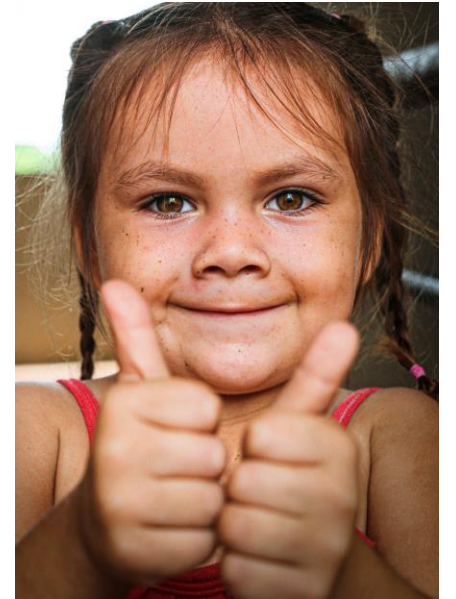
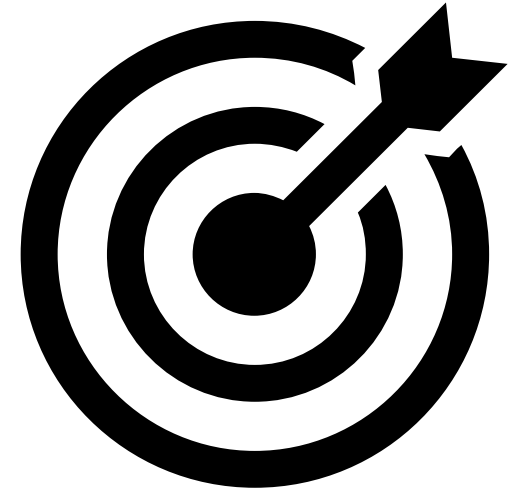
## Threats

- 'seldom heard' groups
- IFA's
- Language barriers
- Cost of Living
- Timeline
- Lack of understanding e.g: 'surely I can't work *and* foster? Etc

- Information on support
- Communication to monitor success of various channels
- Translation services for comms materials

# Future Objectives/Goals

- Populate our 2024/23 marketing plan detailing what topics to focus on at what times of the year – e.g September, ideal time to target empty nester
- Have considered radio advertising – in touch with Greek radio and Gaydio Radio London
- Considering bus adverts costings/effectivity
- Possibility of working with CAN Digital Ltd re: Google Search / analytics – good ROI (costs are being considered)
- Continue collaborate work – collaborated with Islington Council in 2024
- Extending engagement events to even more faith groups/community groups
- Circulate 'Benefits and Perks of Fostering for Haringey' booklet throughout the year - it highlights the Mockingbird Project, LEAP Programme, details the Link Work for Disabled Children's Team, highlights our caravan which foster carers can book at reduced rate, Secure Base Model, Foster Carers Allowances, and much more!



# Core Contacts

## Interim AD for Safeguarding and Social Care

Dionne Thomas

Safeguarding and Social Care

[Dionne.Thomas@haringey.gov.uk](mailto:Dionne.Thomas@haringey.gov.uk)

## Head of Children in Care and Placements

Keith Warren

Safeguarding and Social Care

[Keith.Warren@haringey.gov.uk](mailto:Keith.Warren@haringey.gov.uk)

## Service Manager

Sandy Bansil

Safeguarding and Social Care

[Sandy.Bansil@haringey.gov.uk](mailto:Sandy.Bansil@haringey.gov.uk)

## Team Manger

Maxine Lindsay

Safeguarding and Social Care

[Maxine.Lindsay@haringey.gov.uk](mailto:Maxine.Lindsay@haringey.gov.uk)

## Benefits and Perks of Fostering for Haringey



## Business and Communications Manager

Justine Henson

Communications/Safeguarding Social Care

[Justine.Henson@haringey.gov.uk](mailto:Justine.Henson@haringey.gov.uk)

**Report for:** Corporate Parenting Advisory Committee – 17 October 2024

**Title:** Committee Work Programme

**Report authorised by:** Ayshe Simsek, Democratic Services and Scrutiny Manager  
ayshe.simsek@haringey.gov.uk, 020 8489 2929

**Lead Officer:** Ayshe Simsek, Democratic Services and Scrutiny Manager  
ayshe.simsek@haringey.gov.uk, 020 8489 2929

**Ward(s) affected:** N/A

**Report for Key/  
Non Key Decision:** Non-Key Decision

## **1. Describe the issue under consideration**

- 1.1 Members to note current work programme and put forward any comments on suggested areas of work.

### **14<sup>th</sup> of January 2025**

1. Adopt North London Report
2. Quarterly performance update
3. Care leavers to be considered a protected characteristic under Equality Act 2010 - Report on the ongoing work and actions to enable care leavers to be considered a protected characteristic under the Equality Act
4. Report on Children's Services which considers the issues in Josh MacAllister Report on private market, private providers, and the standards, then further takes account of the Wellbeing Bill. These issues will be further considered in the context of the Children's Service budget following the MTFS report and the Local Government Settlement.

### **25<sup>th</sup> March 2025**

1. Independent living
2. Transition
3. Quarterly performance update

**Meeting in common proposed with the Children and Young People's Scrutiny Committee (CYPSC) on the 7<sup>th</sup> of April 2025** and this to be an annual meeting. This will allow the Corporate Parenting Committee to share issues with the scrutiny Panel and look at cross cutting issues between the two bodies such as missing children, and youth justice with a focus on looked after children that are in the justice system. The meeting can also be used to suggest areas of work for Scrutiny.

CPAC Members to comment on this suggested date.

