

SHEFFIELD CITY COUNCIL

Children, Young People and Family Support Scrutiny and Policy Development Committee

Meeting held 24 November 2021

PRESENT: Councillors Mick Rooney (Chair), Maroof Raouf (Deputy Chair), Mike Chaplin, Anne Murphy, Kaltum Rivers, Richard Shaw, Ann Whitaker, Cliff Woodcraft, Ann Woolhouse, Sioned-Mair Richards (Substitute Member) and Colin Ross (Substitute Member)

Non-Council Members in attendance:-

Sam Evans, (Diocese Representative - Non-Council Voting Member)

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1. APOLOGIES FOR ABSENCE

1.1 Apologies for absence were received from Councillors Vickie Priestley and Jack Scott, with Councillors Colin Ross and Sioned-Mair Richards attending as their respective substitutes, and from Peter Naldrett (Parent Governor Representative - Non-Council Voting Member), Alice Riddell (Healthwatch Sheffield, Observer) and Alison Warner (School Governor Representative - Non-Council Non-Voting Member).

2. EXCLUSION OF PUBLIC AND PRESS

2.1 No items were identified where resolutions may be moved to exclude the public and press.

3. DECLARATIONS OF INTEREST

3.1 In relation to item 8 on the agenda (Fostering Service – Annual Report 2020/21) (Item 7 of these minutes), Councillor Anne Murphy declared a personal interest as a respite foster carer.

4. MINUTES OF PREVIOUS MEETING

4.1 The minutes of the meeting of the Committee held on 13th October 2021, were approved as a correct record and, arising therefrom, (a) the Policy and Improvement Officer (Alice Nicholson) reported that she had spoken to the lead officer in connection with the Multi-Agency Support Teams (MAST) Update, and would hopefully be in a position to report to the Committee shortly with regard to the review of Early Help Services and (b) the Chair reported that he and the Policy and Improvement Officer had not yet met with the Youth Cabinet to draft actions for the Committee, following the views expressed at the meeting, but would make arrangements to do this as soon as possible.

5. PUBLIC QUESTIONS AND PETITIONS

5.1 The Chair reported that several questions had been received from members of the public in connection with item 7 on the agenda (Adoption Service - Annual Report 2020/21) (item 6 of these minutes) and, in the light of the number and complexity of such questions, he proposed to allow for a number of questions to be raised at the meeting, and that a separate meeting be arranged, comprising Members and relevant officers, to enable the adopters to raise their concerns/issues privately.

5.2 The following questions were raised by members of the public, and responses were provided:-

(a) **David Kelly**

Q1 Co-Production Request

Sheffield Adopters and Sheffield Adoption Services together created a modern, leading-edge, co-production model based on documented issues/objectives. This was resulting in the quick resolution of issues and in progress on longer term improvements such as MAPs. It was an amazing relationship. This was facilitated by Adopter Voice. This productive co-production model is reported in the article provided to the Committee. On moving to One Adoption we appear to have reverted to a more 'consultation model'. Will the Committee promote the adoption of a co-production approach by One Adoption?

In response, it was stated that the Committee would fully support the promotion of a co-production approach by One Adoption. The Committee considered that there were benefits to those people receiving adoption services offering their help and experience with the aim of producing a better service.

Q2 Multi-Agency Approach Delivery

Adopters and Sheffield services jointly recognised that multi-agency joined-up support is critical to improving post adoption support for our children. Disconnects between Education, Health, Justice and Support services can cause serious delays in helping children and families in serious need. A multi-agency meeting to start the project was planned for early 2019. The pandemic caused some delay but since the inception of One Adoption there has been no reported progress on the multi-agency approach. Yet children need this approach. A meeting may occur early next year. Will the Scrutiny Committee add the MAPs project as a key performance indicator for One Adoption?

In response, it was stated that the Committee would be in agreement to adding the MAPs project as a key performance indicator for One Adoption. The needs of those children receiving services were often so complex, and it would be difficult to provide them with a quality lifestyle without the help of a number of services, and experts within those services. Whilst One Adoption was in its infancy, it would have been expected that they would have started to look at adopting a multi-agency approach. Paul Dempsey had liaised with Stephanie Evans (Head of One Adoption South Yorkshire), and it was understood that she had met with adopters to discuss such an approach. In addition, at the request of the Regional Adoption Agency

Governance Board, One Adoption was looking to create a multi-agency strategy, as well as establishing a Multi-Agency Adoption Sub-Board, which would be required to report to the Governance Board on progress. Ms Evans was working with health and education representatives across South Yorkshire to develop this approach.

Q3 Trauma informed Schools, Embedding the Programme

The Sheffield Trauma Informed Schools programme is outstanding and a national exemplar of how to assist all disadvantaged children in Education. It is described in the article provided to the Committee. Can the Committee provide details as to how this programme will be embedded long term into the ethos of our schools in the same way that child safeguarding is embedded?

In response, it was stated that the Chair of this Committee was due to meet with Steven Betts (Chief Executive, Learn Sheffield), and would be happy to raise the issues now mentioned with him, and respond to Mr Kelly on the outcome of such discussions. There was a Multi-Agency Steering Group which had been established to oversee the implementation of this programme. Schools had been invited to be involved, with 70 schools in Sheffield having a Trauma-Informed Schools UK-acclaimed practitioner. 2540 staff had attended the Level 1 training, and Levels 2 and 3 training had been offered to schools. It was the aim that 140 schools would have undertaken Level 3 training by the end of the calendar year/academic year ???. There were also school leadership events promoting the programme.

(b) Gillian Badby

Q1 Objectives and Outcomes for Children Living in Adoptive Families:

Are there outcomes which are measured after the child is adopted?

The adoption order is not the end of the story of the impact of ACES and developmental trauma. It is the beginning of working towards better outcomes.

Outcomes such as stability of family life? Age of leaving home? Completing Education to Y11? Educational outcomes? And recording the prevalence of negative outcomes to measure need in specific areas? Including contextual safeguarding issues.

In response, it was stated that it was accepted that the report was heavy on data regarding the child's journey, specifically the number of adopters recruited, and the number of children adopted, which was data that the Authority had to provide to the Government. Whilst the Authority was not required to provide similar data regarding those children who had been with their adoptive parents for a long period, it was believed that the Authority needed to start recording this kind of data. One Adoption was planning to undertake a local adoption barometer survey in early 2022, and it was the intention that the agency would work with adopters on this. The findings of the survey would be used to inform the Authority's development plan and to improve services overall. It was hoped that this process could be undertaken on an annual basis to enable progress to be measured, and so that local authorities and One Adoption could be called to account.

Q2 Lessons Learned:

Will the lessons learned from the 8 children who left their adoptive families in an

unplanned way, be made available? Is the lack of respite from intense family stress a contributory issue? As the stress of imported trauma intensifies, the family's support networks can be overwhelmed and withdraw. The lifelong complex difficulties of many adopted children require long-term multi-agency support to sustain stability for their family. For some, could Short Breaks maybe a part of the plan?

Q3 Proactive Support:

Can we have proactive reassessment at key points to attend to developing need so that outcomes can be improved?

The child and their family need access to updated assessments of their needs as they grow together by services who understand the enduring nature of multiple ACES.

Once the children join our families, and, as the gap widens between our children and the Age Related Expectations, their needs become much clearer. Often this may be where flags indicating further assessment for neurodevelopmental conditions become clearer (including FASD). Transitions are invariably challenging and this would be a logical point for planned reassessment of need for the child and their family.

Q4 Objectives for Trauma Informed Schools?

Stress is a major factor affecting family life for adoptive families and difficulties in education which could be drastically cut if the system were more in tune with the impact of Trauma. How many of Sheffield schools have signed up to the Trauma Informed Pledge and can we monitor the impact of this against SMART objectives. For example number of exclusions, long term absences, progress in attendance and attainment.

(c) Tony Tigwell

Q1 One Adoption has been many years in the planning and has taken considerable staff resources and finance. Given this, why hasn't the Agency been able to hit the ground running?

Q2 Adoption UK have stated that the new regional agencies 'will need support, challenge and scrutiny over the coming years in order to deliver the level of change that will give every adopted child the best chance of a bright future' How do you think that parents can really make their voices heard?

Q3 There appears to be a presumption by the Agency that their work is not open to adoptive parents. It has been very difficult to find out about its Board and the Agency took legal advice about us seeing the minutes of their Board meetings. We were told no. Does this Committee share our concerns about this lack of transparency and openness - in our view a democratic deficiency?

In response, it was stated that the Committee was very concerned to hear these comments, and it was suggested that the Head of One Adoption should be invited to a future meeting to talk about the agency's operation and strategy, and how they intended to include adopters as part of this. The Chair stated that he would make every effort to ensure that Ms Evans attended the private meeting referred to

earlier, to respond to these, and other concerns raised by adopters.

- Q4 For the first time Sheffield's report states that it has been a tough year for some of our adoptive families. It is always a tough time for some of our adoptive families. It doesn't take a pandemic to make it tough. The report tells us that a number of teenage adopted young people have been taken back into care. This is a trauma for the young people and their families and a great sadness to our adoption community. The report goes on to state that this highlights the need for a multi-agency approach to adoption support. It also states that once back in care, these young people have tended to need high levels of multi-disciplinary provision, reflecting their complex needs. So they get it after an adoption breakdown but not to prevent the adoption breakdown. The multi-disciplinary post adoption support offer has been mentioned in a number of adoption reports over the years. One Adoption's report refers to it as being in 'the longer term'. How can this Committee bring its influence to bear to ensure rapid delivery of this absolutely vital project/way of working?
- Q5 The new Regional Adoption Agencies were established to increase the number of children being adopted and to improve adoption support services (Sheffield's report highlights that this is a growing area of need). Sadly, their report of ten pages only has one page on post adoption support and this lacks clarity (as does their three-year plan). Are One Adoption going to produce a plan with clear actions, lines of accountability, and timescales?

(d) **Carolyn Tsang**

On reading the Annual Adoption Service Report, I was disappointed to learn that 6 young teens had gone back into care. This will have had a devastating effect on the children and families involved. Have the reasons for these disruptions been explored and has anything been learnt as a result? I wonder what could be put in place in future to prevent adoption breakdown? In the report it said "the young people have multiple and complex needs, highlighting the need for a multi-agency approach to adoption support". If, in future, families in crisis were identified sooner, and offered the necessary support, could this prevent disruption? The cost of providing support, and also respite, to families who are struggling will be high – but the costs incurred if the child goes back into the care system will inevitably be far higher. What can be done to address this? Is there a way that adoptive families can access the same support that children in foster care should also have access to?

In response, it was stated that it was accepted that the situation regarding the six young people represented a totally unacceptable outcome. Fortunately, such events did not occur on a regular basis, and it was considered that the added pressures and complexities during the lockdowns, which had included the withdrawal of some services, had contributed to such outcomes. In an attempt to stop such outcomes in the future, the Authority had been building stronger, and more edge of care services aimed at adolescents. One such programme was called Aspire, which comprised a speech and language therapist and a psychologist, thereby providing a more multi-agency approach. There was an intensive prevention service working with adolescents on the edge of care, as well

as a multi-Systemic Therapist Team. One of the Authority's principals was to intervene early, with the aim of hopefully avoiding problems later on. The Authority also now had much stronger adoption support plans in connection with matching young people with adopters. The Authority was also working with One Adoption to ensure that there was a strong and effective training programme which would help reduce levels of escalation. At the time children were matched with prospective adopters, the Authority received a medical report, where neurological conditions, such as Foetal Alcohol Syndrome, would be highlighted, and should be addressed in the Adoption Support Plan. In terms of children re-entering care, the parents and children, as well as representatives of other relevant organisations, would contribute to the support plan and decision-making for their care. There was also the Legal Gateway Panel, chaired by an assistant director, and comprising a legal representative, where each case of a child or young person potentially needing to enter care would be considered.

(e) **Sarah Ewbank**

Q1 Given the number of LAC and adopted children with SEND, what steps are taken to ensure all staff involved in adoption have knowledge of these issues, in particular those conditions over-represented in this cohort and less well known, eg FASD?

- ~ Social worker putting relevant info in CPR eg any alcohol consumption during pregnancy (necessary for any diagnosis of FASD)
- ~ Preparation for adopters covering SEND and potential support eg Contact a Family, the local independent parent partnership organisation (eg SSENDIAS) offering free independent advice re any additional needs in education, the local parent carer organisation (eg Sheffield Parent Carer Forum) offering free membership, training etc
- ~ Adoption team knowledgeable about local diagnostic pathways, support organisations, relevant benefits and grants and able to advocate for adoptive families within health, school, etc
- ~ Adoption team aware of interaction between trauma, attachment and SEND and able to refer to appropriate (rather than standard) parenting advice and courses
- ~ Adoption team aware of any diagnoses for adopted children in the area, whether via NHS, ASF or otherwise, and able to target support

Q2 Are there any plans for staff (particularly social workers) within Children's Services to have joint training, and hence joint understanding, of trauma, attachment and SEND issues for adopted kids? ie staff in adoption team, children with disabilities team, the locality child protection teams, inclusion team in education, children in care team and Pathway Advisers, etc, and to work together to support families, or constructively cross refer?

In response, it was stated that the Authority had a workforce strategy, which included a number of fundamentals around attachment theory, as well as child development and signs of safety. With regard to early intervention and children looked after, the Authority used signs of wellbeing and signs of success. The Authority was also in the process of rolling out the Trauma-Informed Schools programme across the whole of the children's workforce.

- Q3 Given the stresses of teenage years, could the adoption teams pro-actively contact all adopters at a certain age of the child to provide information and offer support about pertinent issues possibly upcoming, eg social media and potential unplanned contact with birth family, sex and drugs resources (not all kids engage with PHSE, may need 1:1 work) including CSE, county lines etc, maintaining relationship with teenagers and managing conflict, eg information re NVR, options post 16 for the less academic child etc. This could be by a targeted newsletter at first and then the offer of a follow up face to face session as a group or 1:1 for signposting to targeted support organisations or courses.
- Q4 Can considerations be given to each adoptive family being given a named contact in the adoption team, from placement to age 18/21/25 with notification to them if that person leaves and their family reassigned? Leaving a message on a phone number and maybe getting a call back, from a different person each time, does not feel very supportive.
- Q5 Could a minimum of annual contact be made with each family by the named worker, or the team, to check in and offer preventative support vs crisis support only? This could be by an initial questionnaire.

(f) **Sarah Todd**

Q1 Adopters as Key Stakeholders

Adoption UK have stated that the new regional agencies 'will need support, challenge and scrutiny over the coming years in order to deliver the level of change that will give every adopted child the best chance of a bright future'

Q: How do you think that parents can really make their voices heard?

Idea: Given that adopters are the main stakeholders in the lives of the children placed with us for adoption, (in that we invest our whole lives, homes, finances, and emotions into their situations),

Q: How would OASY feel about giving us a place at the table? For example an Adoption Liaison Committee where representative adopters can regularly have input looking at SMART goals, outcomes, and maintaining transparent accountability within the service, in the interests of increasing positive results all round.

(This being too much for one AUK rep to shoulder, as well as all of his other responsibilities - Andrew Mouse)

Q2 Regarding Adoption Disruptions

Q: Are case learning reviews and significant event analyses conducted in the event of adoption breakdowns? (we note according to the report that there were 2 adoption disruptions of young children and 6 young people "returned into care").

Q: If there have been formal reflections on these events, what were the learning points and what might have been put in place to help better support these young people and their families to prevent adoption breakdown?

Can we please see the evidence of learning and written reflection/report of post adoption support service provision in these instances?

Q3 Trauma Informed Schools

Q: How is the Trauma Informed Schools training progressing at Sheffield Hallam

University?

Q: How many schools are involved so far and what does it takes to become accredited as a "trauma informed school"?

Q: Is there a particular link person at the Council for this programme?

It might be helpful to know so we can engage meaningfully with them.

From the perspective of a parent with an adopted or fostered child, the ideal would be to make it mandatory for ALL staff (including unstructured break time supervisors) to undertake TIS training & updates in much the same way as they do with safeguarding certificates. To become familiar in trauma informed behavioural policies and how to support our children effectively.

Q4 Structured Mandated Ongoing Support for Children

Q: Please can OASY put in place structured ongoing mandatory support & assessment systems for adopted children post adoption?

(for example institute statutory reviews of their educational / social/ emotional/ physical needs preschool/end of each key stage. Equip each child with a MyPlan and Ed psych review at each key stage transition & beyond school leaver stage also).

Their trauma & SEN do not disappear because they are adopted. Be proactive not reactive.

In response, it was stated that if the Authority was offering new support, there should be a detailed, written Adoption Support Plan, which should be reviewed. Adopters were able to attend One Adoption at anytime to request help and/or advice. All adopters were entitled to an Adoption Support Assessment. The request for the implementation of structured, mandated, ongoing support for adopted children would be discussed with the Head of One Adoption.

Q5 Optimise Guidance for Post Adoptive Parents

Q: Would it be helpful to fund a specialist type post adoption advisor role in perhaps signposting and practically assisting adopters about support services & funds / grants / how to access DLA / how to apply for EHCP / SENDIAS etc etc?

Just someone who has their finger on the pulse of everything out there & can signpost & help people to access exactly what they need, in terms of post adoption support.

I'm not sure just "throwing money" / adopter grants at families really will necessarily help all that much. It might help them work a bit less, to be able to provide the extra time their child needs of them. But I wonder how long that funding will last.

There are so many services out there which are really good. It's just way too disjointed & there is still a sense that we are "fishing around in the dark"

In response, it was stated that the Adoption Support Fund formed part of a national framework, which required the Authority to follow an assessment process. However, Adoption Support Fund monies could be used to commission an expert to undertake an assessment of a child and/or family's needs. One Adoption was now liaising with the Department for Education to look at how local authorities could use such funds in a different way to improve its assessment process.

Q6 (On the back of Q5...) re: ASF

Q: Please can OASY ensure that a full up to date list of support services accessible via the ASF for families is published, with advice as to what they offer?

Q: Prior to accessing any ASF help, please can children & families have proper assessment by a qualified professional, to determine whether there may be important underlying diagnoses to address, and what kind of therapy might be the most useful in the individual situation?

Otherwise we risk wasting time & the ASF by allocating potentially inappropriate therapies to families.

Q (supp): please can we see demonstrated the evidence base behind the different therapies on offer from the ASF, and how they measure outcomes of success?

(one size does not fit all & we need to determine if each therapy is going to be effective AND cost effective, for each child.)

Q7 CAMHS / Health Access

Q: If there is a question over some kind of neurodiversity/ neurodevelopmental diagnosis (which there seems to be for many of our children), please can we streamline access to CAMHS / Ryegate as soon as issues arise, to get early diagnosis and intervention and to maximise the potential help their needs require both through medication and therapy, as well as via EHCP / other education & therapeutic support?

Many of us fight these battles alone for years and it should be part of the post adoption support package. There are waits of up to 2 years for Ryegate assessment, with no extra provision for adopters. Some of us have paid privately to get earlier diagnoses for our children. This is not right, and would not be the case if they were still in the care system.

Q8 Care System Labels

Q: Please can we rethink labelling around children in care to reduce stigma and feeling "different"?

They need homes & parent figures, not placements & carers. Humanise the system more. This project has been done in some other councils - please see the PDF provided to the Committee with relabelling suggestions (TACT: Language that cares. Changing the way professionals talk about Children in Care)

5.3 Further to the questions raised by members of the public, Members of the Committee raised questions, and responses were provided as follows:-

- (Sarah Ewbank – Question 4) - A social worker would be allocated for both the child and the adopter. This would be the same social worker post-adoption, but separate prior to this. There would be a legal process in terms of obtaining a legal order post-adoption. It was always hoped that the same social worker could be retained, but due to a number of reasons, such as annual leave, sickness and staff leaving the Authority, this was not always possible. Every effort was made to try and maintain consistency for families.
- (Sarah Todd – Question 6) - An adopter could request an assessment of the child's needs, and the social worker would undertake such an assessment. If further, detailed assessments were required, the Authority would look to involve other professionals in this process. The Authority always tried to

maintain contact with adopters, and would send out a newsletter to them. There were also various support groups for adopters, thereby ensuring there was an ongoing relationship with the adoption community. A request would be made of the virtual school, to see if they could be more pro-active in terms of contacting schools to check if additional support had been provided for adopted children in their schools.

- 5.4 The Chair reported that written responses would be sent to those members of the public in attendance at the meeting, but who did not speak at all, and to those members of the public in attendance, who only asked some of their questions.

6. ADOPTION SERVICE - ANNUAL REPORT 2020/21

- 6.1 The Committee received a report of the Director of Children and Families containing the Adoption Service - Annual Report 2020/21.

- 6.2 In attendance for this item were Carley Speechley (Director of Children and Families) and Paul Dempsey (Assistant Director - Provider Services).

- 6.3 Paul Dempsey introduced the report, which contained information on adoption activity with regard to children and adopters, adoption timeliness, adoption support, the business of the Adoption Panel, an update on the Regional Adoption Agency, other developments during the year and priority actions for 2021/22. Also attached was the One Adoption South Yorkshire - Six Month Report, January to June 2021.

- 6.4 Members of the Committee raised questions, and the following responses were provided:-

- It was acknowledged that it was not suitable for all children to be adopted. The Authority wanted to maintain family relationships for many children that came into care, and many such children did return to their families, either to their parents or other relatives. For some children, particularly older children, it was more suitable for them to be in a foster placement, although every effort would be made to maintain a relationship with their birth parents. It was not always possible to find adopters for some children, due to a lack of suitable adopters, but efforts were made to increase recruitment for this reason. It was particularly difficult to find adopters for children of different ethnicities, children over five or children in sibling groups. The Authority had had a good record in securing permanent outcomes for children outside of care, on different Orders, such as Special Guardianship Orders or Child Arrangement Orders.
- Special consideration was given, which included advice from One Adoption, to ensure that the images used by the Authority in terms of its recruitment of adopters, were representative of the people it was trying to attract. One Adoption would be looking to identify specific networks in different communities, and build-up relationships with such communities. This approach had been successful in improving recruitment in other local authority areas. The Authority had worked closely with mosques and

churches in this regard.

- The Authority provided financial allowances to special guardians, and this was payable until the child reached 18, or up to the end of the academic year if they were still in school. There was a Special Guardianship Support Service, which offered ongoing support to special guardians, and there was also a support group where special guardians could meet up with professionals and obtain peer support. The Authority was also legally required to undertake a Special Guardianship Support Assessment. The Authority also offered guidance and advice, through the Leaving Care Service, and those young people who were subject to Special Guardianship Orders would qualify for additional services. Such services included the Staying Put programme, where children in care, who had reached 18, and had remained with the same carer after turning 18, were offered financial allowances until they reached 21.
- Officers had not met with the Family Rights Group for some time, but had continued to receive their newsletters, which had enabled the Authority to see what the group was offering nationally, as well as any campaigns the group was organising.
- The Authority provided short break care for some children in adoptive families, as part of a package of support, with 10 families having been provided with such support during 2020/21.

6.5 RESOLVED: That the Committee:-

- (a) notes the contents of the report now submitted, together with the information now reported and the responses to the questions raised;
- (b) thanks Paul Dempsey and Carly Speechley for attending the meeting and responding to the questions raised and expresses its thanks and appreciation to all staff in the Adoption Service for the excellent work undertaken by them during 2020/21; and
- (c) requests the Director of Children and Families to produce a paper setting out all the different options with regard to securing permanence in a family setting outside of care for children and young people, for submission to a future meeting of the Committee.

7. FOSTERING SERVICE - ANNUAL REPORT 2020/21

- 7.1 The Committee received a report of the Director of Children and Families containing the Fostering Service - Annual Report 2020/21.
- 7.2 In attendance for this item were Carly Speechley (Director of Children and Families) and Paul Dempsey (Assistant Director - Provider Services).
- 7.3 Paul Dempsey introduced the report, which contained information on the Authority's vision and aims, looked after children and foster placement data, placement

stability, innovations, recruitment and retention activity and outcomes, recruitment plans for 2020/21, support and supervision for carers, the Fostering Panel, developments in 2020/21 and developments and improvements for 2021/22.

7.4 Members of the Committee raised questions, and the following responses were provided:-

- Whilst it was possible to recruit specialist foster carers for teenagers, it was very difficult on the basis that there were less carers wanting to foster teenagers. Those carers who had just started mainly wanted to look after younger children and/ or children without complex needs. The Authority strived to place as many children as possible into fostering arrangements, including teenagers.
- There was a private fostering team within the Fostering Service. The Authority promoted the need for groups and organisations to inform it of any private fostering arrangements, which they were legally required to do. Part of the role of the private fostering team was to raise awareness of the need for such groups and organisations to inform the Authority of such arrangements. Where cases were reported to the Authority, officers would have to visit the family to make an assessment to ensure that it was a safe arrangement, and liaise with whoever had parental responsibility for the child and the private foster carer, to draw up an agreement between both parties. There were currently only a small number of private fostering arrangements.
- The Mockingbird Family Based Model of Foster Care does allow for other families to become involved, including families who were not necessarily foster carers. There could be a model comprising a cluster of seven or eight foster carer households, as well as a birth parent household, if they have had a child recently returned to their care from a foster carer in the cluster, and possibly an adoptive family, who had recently had a child placed from one of those foster carers in the cluster.
- The possibility of creating a model similar to the Mockingbird Family Model, for adopters, could be explored. There was a peer mentoring scheme across South Yorkshire, where adopters mentored other adopters, with a number of them being paid as peer mentors.
- Regional Adoption Agencies were a Government initiative, which had commenced in 2015, based on the concept that a large number of small adoption services would not be an efficient way of running adoption in the country. It was considered that a smaller number of services, that were larger, would be more efficient as they could pool resources and expertise, and it would make it easier to match children with adoptive families.

7.5 RESOLVED: That the Committee:-

- (a) notes the contents of the report now submitted, together with the information now reported and the responses to the questions raised; and

- (b) thanks Paul Dempsey and Carly Speechley for attending the meeting and responding to the questions raised and expresses its thanks and appreciation to all staff in the Fostering Service for the excellent work undertaken by them during 2020/21.

8. DRAFT WORK PROGRAMME 2021/22

- 8.1 The Committee received a report of the Policy and Improvement Officer (Alice Nicholson) containing the Committee's draft Work Programme for 2021/22.
- 8.2 Further to a query raised by Councillor Cliff Woodcraft, Ms Nicholson stated she would look at whether Youth Services could be considered by the Committee at its meeting to be held in January 2022.
- 8.3 RESOLVED: That the Committee:
 - (a) notes the contents of the report now submitted, together with the comments now made; and
 - (b) approves the draft Work Programme for 2021/22, with consideration to be given to the suggestion now made.

9. DATE OF NEXT MEETING

- 9.1 It was noted that the next meeting of the Committee would be held on Wednesday, 8th December 2021, at 1:00 pm in the Town Hall.