

# MEETING OF THE CHILDREN, YOUNG PEOPLE AND EDUCATION SCRUTINY COMMISSION

DATE: TUESDAY, 23 SEPTEMBER 2025

TIME: 5:30 pm

PLACE: Meeting Room G.01, Ground Floor, City Hall, 115 Charles

Street, Leicester, LE1 1FZ

#### **Members of the Commission**

Councillor Batool (Chair)
Councillor Bonham (Vice-Chair)

Councillors Barnes, Cole, Gregg, Dr Moore, Singh Sangha and Westley

Co-opted Members (Voting)

Dr Joycelin Eze-Okubuiro Parent Governor Representative

Standing Invitees (Non-Voting)

Youth Representatives

Jennifer Day Teaching Unions representative Janet McKenna UNISON Branch Secretary

Members of the Commission are invited to attend the above meeting to consider the items of business listed overleaf.

For the Monitoring Officer

#### Officer contacts:

Katie Jordan (katie.jordan@leicester.gov.uk) or Julie Bryant (julie.bryant@leicester.gov.uk).

Alternatively, email Governance Services e-mail: committees@leicester.gov.uk

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#### **Further information**

If you have any queries about any of the above or the business to be discussed, please contact: Katie Jordan (katie.jordan@leicester.gov.uk) or Julie Bryant (julie.bryant@leicester.gov.uk). Alternatively, email committees@leicester.gov.uk, or call in at City Hall.

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# USEFUL ACRONYMS IN RELATION TO OFSTED AND EDUCATION AND CHILDREN'S SERVICES

(updated November 2015)

Acronym	Meaning
APS	Average Point Score: the average attainment of a group of pupils; points
AFO	are assigned to levels or grades attained on tests.
ASYE	Assessed and Supported Year in Employment
C&YP	Children and Young People
CAMHS	Child and Adolescent Mental Health Service
CFST	Children and Families Support Team
CICC	Children in Care Council
CIN	Children in Need
CLA	Children Looked After
CLASS	City of Leicester Association of Special Schools
COLGA	City of Leicester Governors Association
CPD	Continuing Professional Development
CQC	Care Quality Commission
CYPF	Children Young People and Families Division (Leicester City Council)
CYPP	Children and Young People's Plan
CYPS	Children, Young People and Schools Scrutiny Commission
Scrutiny	Officially Conficially Continuesion
DAS	Duty and Advice Service
DCS	Director of Children's Services
EAL	English as an Additional Language
EET	Education, Employment and Training
EHA	Early Help Assessment
EHCP	Education Health and Care Plan
EHP	Early Help Partnership
EHSS	Early Help Stay Safe
EIP	Education Improvement Partnership

ELG	Early Learning Goals: aspects measured at the end of the Early Years
ELG	Foundation Stage Profile
EY	Early Years
EYFS	Early Years Foundation Stage: (0-5); assessed at age 5.
EYFSP	Early Years Foundation Stage Profile
	Foundation Stage: nursery and school Reception, ages 3-5; at start of
FS	Reception a child is assessed against the new national standard of
	'expected' stage of development, then teacher assessment of
	Foundation Stage Profile areas of learning
FSM	Free School Meals
GCSE	General Certificate of Education
GLD	Good Level of Development
HMCI	Her Majesty's Chief Inspector
HR	Human Resources
ICT	Information, Communication and Technology
IRO	Independent Reviewing Officer
JSNA	Joint Strategic Needs Assessment
KPI	Key Performance Indicator
KS1	Key Stage 1: National Curriculum Years (NCYs) 1 and 2, ages 5-7;
KOT	assessed at age 7.
KS2	Key Stage 2: NCYs 3, 4, 5, and 6, ages 7-11; assessed at age 11.
KS3	Key Stage 3: NCYs 7, 8 and 9, ages 11-14; no statutory assessment.
KS4	Key Stage 4: NCYs 10 and 11, ages 14-16; assessed at age 16.
KTC	Knowledge Transfer Centre
LA	Local Authority
LADO	Local Authority Designated Officer
LARP	Leicester Access to Resources Panel
LCCIB	Leicester City Council Improvement Board
LCT	Leicester Children's Trust
LDD	Learning Difficulty or Disability
LESP	Leicester Education Strategic Partnership
LLEs	Local Leaders of Education
LP	Leicester Partnership

LPP	Leicester Primary Partnership
LPS	Leicester Partnership School
LSCB	Leicester Safeguarding Children Board
LSOAs	Lower Super Output Areas
MACFA	Multi Agency Case File Audit
NCY	National Curriculum Year
NEET	Not in Education, Employment or Training
NLEs	National Leaders of Education
NLGs	National Leaders of Governance
OFSTED	Office for Standards in Education, Children's Services and Skills
PEPs	Personal Education Plans
PI	Performance Indicator
PVI	Private, Voluntary and Independent
QA	Quality Assurance
RAP	Resource Allocation Panel
RI	Requires Improvement
SA	Single Assessment
SALT	Speech and Language Therapy
SCR	Serious Case Review
SEN	Special Educational Needs
SEND	Special Educational Needs and Disabilities
SIMS	Schools Information Management Systems
SLCN	Speech, Language and Communication Needs
SLEs	Specialist Leaders of Education
SMT	Senior Management Team
SRE	Sex and Relationship Education
TBC	To be Confirmed
TFL	Tertiary Federation Leicester
TP	Teenage Pregnancy
UHL	University Hospitals Leicester
WIT	Whatever it Takes
YOS	Youth Offending Service

#### **PUBLIC SESSION**

#### **AGENDA**

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#### 1. WELCOME AND APOLOGIES FOR ABSENCE

To issue a welcome to those present, and to confirm if there are any apologies for absence.

#### 2. DECLARATIONS OF INTEREST

Members are asked to declare any interests they may have in the business to be discussed.

#### 3. MINUTES OF THE PREVIOUS MEETING

Appendix A (Pages 1 - 14)

The minutes of the meeting of the Children, Young People, and Education Scrutiny Commission held on Wednesday 18<sup>th</sup> June have been circulated, and Members are asked to confirm them as a correct record.

#### 4. CHAIR'S ANNOUNCEMENTS

The Chair is invited to make any announcements as they see fit.

## 5. QUESTIONS, REPRESENTATIONS AND STATEMENTS OF CASE

Any questions, representations and statements of case submitted in accordance with the Council's procedures will be reported.

#### 6. PETITIONS

Any petitions received in accordance with Council procedures will be reported.

#### 7. SEND TRANSPORT UPDATE

The Strategic Director for Social Care and Education will give the commission a verbal update on the current position.

#### 8. CHILDREN'S SERVICES FINANCES

Appendix B (Pages 15 - 30)

The Strategic Director of Social Care and Education submits a report and will deliver a presentation on the financial position for Education and Children's Services up to the end of the first quarter to 30 June 2025.

#### 9. EDGE OF CARE STRATEGY 2025 - 2027

Appendix C (Pages 31 - 78)

The Director of Children's Social Work and Early Help submits a report setting out understanding of current needs, the availability of provision and plans for the development of the Edge of Care offer over the next three years. The strategy provides information on the range of approaches and the impact achieved from the services and interventions provided. It outlines how new innovations, being developed in Leicester, will support a cohort of children and young people as well as covering and addressing the challenges, evidence of impact as well as value for money.

#### 10. YOUTH JUSTICE PLAN

Appendix D (Pages 79 - 164)

The Director of Children's Social Work and Early help submits a report providing a summary of the five-year Youth Justice Plan 2025-30, highlighting strategic and operational priorities. This will be received at Board level and across the partnership and proceed through due diligence processes onto Full Council.

The executive summary/briefing addresses the statutory Youth Justice Plan for 2025-2030 and provides an opportunity to direct any comments to the Head of Service for Prevention Services.

#### 11. WORK PROGRAMME

Appendix E (Pages 165 - 170)

Members of the Commission will be asked to consider the work programme and make suggestions for additional items as it considers necessary.

#### 12. ANY OTHER BUSINESS

# Appendix A



Minutes of the Meeting of the CHILDREN, YOUNG PEOPLE AND EDUCATION SCRUTINY COMMISSION

Held: WEDNESDAY, 18 JUNE 2025 at 5:30 pm

#### PRESENT:

Councillor Batool (Chair)
Councillor Bonham (Vice-Chair)

In Attendance:
Councillor Gregg
Councillor Moore
Councillor Singh Sangha

Joycelin Eze-Okubuiro – Parent Governor Representative (Primary)

Also Present:
Sarah Sampson-Vincent – Youth Representative
Councillor Pantling – Assistant City Mayor for Education

Jennifer Day – Teaching Union

#### 149. WELCOME AND APOLOGIES FOR ABSENCE

The Chair led on introductions and welcomed those present to the meeting.

#### 150. DECLARATIONS OF INTEREST

Members were asked to declare any interests they may have had in the business to be discussed.

Councillor Moore declared that she is the Chair of the Advisory Board at Millgate School and a Member of the Alderman Richard Newtons Charity Trust.

#### 151. MINUTES OF THE PREVIOUS MEETING

AGREED:

1. That the minutes of the meeting of the Children, Young People and Education Scrutiny Commission held on 8<sup>th</sup> April 2025 and 22<sup>nd</sup> May 2025 be confirmed as a correct record.

#### 152. MEMBERSHIP OF THE COMMISSION 2025/26

The Membership of the Children's Young People and Education Scrutiny were noted.

#### 153. DATES OF MEETINGS FOR THE COMMISSION 2025/26

The Chair clarified that the agenda had stated that the following meeting would be 19<sup>th</sup> August 2025. This meeting had been re-scheduled to 23<sup>rd</sup> September 2025.

The dates of the meetings for the Commission were confirmed as follows:

18 June 2025 23 September 2025 28 October 2025 20 January 2026 3 March 2026 14 April 2026

#### 154. TERMS OF REFERENCE

The Commission noted the Scrutiny Terms of Reference

#### 155. CHAIR'S ANNOUNCEMENTS

The Chair reminded members that their role in scrutiny was to be transparent, to challenge, and to hold officers to account, while remaining respectful.

#### 156. QUESTIONS, REPRESENTATIONS AND STATEMENTS OF CASE

Dr Nizamuddin Patel asked:

- 1. Ofsted's latest report for children's services states LCC 'requires improvement' in every area. Whereas our neighbouring council Leicestershire County Council has received 'outstanding' in all areas bar one. Is your department planning on working with the county to share good practices to improve LCC children's services?
- 2. Ofsted have stated that the overall effectiveness of the department has declined since its last inspection in 2021. It also notes that there is not enough challenge from managers or that they 'were not sufficiently sighted on issues'. Have senior leaders considered 'open door' policy for any level of their staff to speak with them openly?
- 3. Further to this, will senior leaders consider emailing/contacting parents and other professionals involved with children's social service on a regular basis with a simple feedback form/questionnaire to gauge an understanding of how well the service is currently operating and if there can be any

improvements to the service?

- 4. There is a national shortage of skilled social workers. I understand council has plans of international recruitment. However, what perks or additional benefits do LCC give domestic social workers which will entice them to continue working with LCC?
- 5. From exit interviews with social workers leaving LCC, what are the 3 most common reasons of them leaving? Can this be mitigated?

The Director of Children's Social Care, Early Help and Prevention gave the following responses:

- Officers were involved in several regional groups across the LLR (Leicester, Leicestershire and Rutland) area that shared good practice and support improvement.
- 2. Senior leaders held a number of staff engagement events throughout the year to share information with staff about key developments and which provided opportunities for staff to give feedback. Senior leaders also attended team meetings, undertook practice observations as part of our twice-yearly practice weeks and had an open door policy for staff to raise any issues.
- 3. Parents whose children had an allocated social worker have the opportunity to provide feedback at a range of points in the support that was provided to them, for example child protection conferences, core groups, Looked After Children reviews. Professionals were also able to provide feedback at a range of key meetings and there was a well-established professionals escalation process to raise any concerns about social work practice or decision making. As part of our quality assurance activity monthly case audits took place on a selection of cases, and this included contacting parents to seek their views on the support their family had received.
- Leicester City Council is not alone in seeking to recruit qualified social workers from overseas to address continuing recruitment challenges for experienced social workers, numerous councils across the country are doing so.

All council staff were provided with an employee benefits offer as detailed in the attached document:



LCC - Benefits Booklet - External (2).

- 5. January 2024 to June 2025
  - 1. Retirement
  - 2. Career development as with most hierarchical organisations, as levels of seniority increased the number of roles reduced, so at times some staff were ready to progress but there were not vacancies, as Leicester had been very successful at recruiting and retaining staff in management positions at all levels. There were currently no agency staff at Team Manager, Service Manager or Head of Service level and only had one Team Manager vacancy.
  - 3. Career change

#### 157. PETITIONS

The Monitoring Officer reported that none had been received.

#### 158. INTRODUCTION TO CYPE SCRUTINY COMMISSION

The Assistant City Mayor for Education introduced the item welcoming old and new members. She noted it was good to relook at where the commission was and what officers bring to the commission.

The Strategic Director for Social Care and Education welcomed members and stated that ir was good to see the work within each department and a break down across the Children, Young People and Education portfolio. He advised that he was the Joint Strategic Director for Social Care and Education with the ability to think across line supports, to maximise support across the areas.

The Director of Education and SEND gave an overview of what her services cover and the role of scrutiny in these areas in these areas using the slides as attached with the agenda. In addition, it was noted that there had been a lot of changes to early years entitlement for families, as well as around breakfast clubs. Work was being overseen in relation to wrap around childcare, including before and after school care, with both capital and revenue funding used to support its development. A wide range of work was undertaken across all areas relating to children accessing education from early years to school and college. Efforts were focused on ensuring there were enough places available, that they could be accessed by those who needed them, and that the best possible support was provided within those settings.

The Director of Children's Social Care, Early Help and Prevention outlined the seven service areas under Children's Social Care and Early help as set out in the slides attached to the agenda. He further added that some issues were

government led and that we worked also with charities and organisations. He added that with regard to safeguarding, there were regulatory expectations with independent oversight from reviewing officers. Children's services areas were also judged by Ofsted and other regulatory inspectors.

The Committee were invited to ask questions and make comments. Key points included:

- It was queried how many of the 600 staff were funded through the High Needs Block, and what percentage of the block was used to fund the body, noting that not all were funded from it. Further information was to be circulated.
- Questions were raised about which team would be responsible for supporting schools that do not have SEND support in place, particularly if a school were to decline a large number of placements due to insufficient SEND provision. It was confirmed that Heads of Service would follow up in such cases.
- Clarification was sought on why adventure playgrounds had been discontinued and commissioned.
- Adventure playgrounds had never been formally commissioned or part
  of the delivered services but had instead received grant funding in
  previous years. The last year of funding from the Local Authority had
  now passed, and a working group had been established, with a decision
  taken back in February.
- A question was raised as to why there were fewer looked after children compared to children supported by children in need teams. It was noted that there were more children on child protection plans than in looked after care.
- Concerns were expressed that only having one multidisciplinary team within Children and Families Services could reduce efficiency, particularly when dealing with children's behaviours and placement moves.
- It was highlighted that feedback from foster carers informed the level of support needed, and that in-house foster carers were provided with support, while private providers were expected to fund that support themselves.
- A question was asked about whether a report existed evaluating the efficiency of the Family Service. Officers agreed to locate the relevant minutes and report from a previous meeting where the service had been discussed and circulate.
- The structure of the service was acknowledged as being very in-depth, with recognition given to the day-to-day work of dedicated practitioners who were committed to the children they supported.
- Clarification was sought on how the Emergency Duty Team (EDT) functioned outside of regular hours. The EDT handled emergency calls, often from police or hospitals, checking records and attending as necessary. Examples included cases where a young person was arrested and could not return home, or when emergency services found an injured child. The EDT would coordinate next steps to safeguard the

- child and ensure smooth handover to daytime teams.
- It was noted that the EDT was run by separate staff, who did not always have the same access to training and development. However, their varied shift patterns enabled a better quality of response and stronger support mechanisms.

#### AGREED:

- 1. That the presentation be noted.
- 2. That the minutes from the previous meeting on Efficiency of the Family Service be circulated.

#### 159. FAMILIES FIRST PROGRAMME

The Strategic Director for Social Care and Education submitted a report to the Commission to outline the vision for the development of services in Leicester in response to the governments reforms to children's social care known as the Families First programme.

The Assistant City Mayor for Children and Young People introduced the item as an exciting and ground-breaking piece of work that aimed to break down barriers through strong partnership working in communities. Emphasis was placed on the importance of helping families stay together, stay safe, and remain supported within the family unit.

The Strategic Director presented the report. It was noted that:

- The work had originated from a government initiative and aligned with Leicester's priorities.
- A previous review of children's social care had not resulted in significant change, but the current government had embraced the "Stable Homes Built on Love" report and introduced a new programme called Families First.
- The aim of the programme was to intervene as early as possible to reduce the number of children going into care.
- The approach aimed to keep children at home with their families, which would free up foster placements and allow more funding to be directed toward intensive family and community support.
- Six locally based Family Help Teams were being developed, building on existing early help services and the children's centre network.
- It was noted that social workers often lacked knowledge of local areas.
   The new model proposed merging child in need and care home functions into the six local teams to improve coordination.
- There were no reductions in multi-use centres, and a single front door remained in place for referrals from professionals or concerned individuals.
- Family Help Practitioners would lead more multi-agency work, involving partners such as local policing, youth services, education, housing, schools, public health nursing, GPs, and therapy services.

- Families would be encouraged to create their own social care plans, with support from the teams. The aim was to empower families to take greater responsibility for their futures, with practitioners there to help deliver those plans.
- It was acknowledged that some families had trust issues with councilbranded services. The programme intended to increase the role of the VCSE sector, especially in cases of chronic neglect and long-term support.
- In cases where abuse or complex safeguarding issues were present, experienced social workers and health and safeguarding specialists would step in and lead on child protection and court proceedings.
- Health practitioners would work alongside the family help teams to provide support and allow continuity of care.
- The programme placed emphasis on avoiding temporary settings for looked-after children and aimed to deliver better value for money by placing more Leicester children within the city.
- Continued support would be provided to families even after children entered care, including working with parents and the wider family network.
- Leicester currently had seven children's homes, with plans underway for an eighth. The city had received government grants to support this and was recognised for effectively managing homes on a larger scale.
- These homes were not used for the most complex children, who were instead supported locally to ensure proper care.
- Longer-term plans included forming a partnership with a non-profit provider to expand city-based services and reduce reliance on high-cost independent placements.
- The new staffing model and commissioning approach had already been signed off.
- The programme was not a cost-reduction exercise, and it included £2.5 million of additional government investment this year.
- A recent spending review confirmed continued funding, including the expansion of therapy services.
- It was noted that previous austerity programmes had used change as a cover for cuts, but this was not the case with Families First.
- Community-focused commissioning would go out to tender for areas such as drug and alcohol support, domestic violence, and other areas of VCSE led work.
- The staffing model had been finalised, with the aim of having teams in place by April 2026, ahead of the April 2027 deadline.
- Child protection teams would take longer to establish, and work was ongoing with senior health managers, public health teams, and housing partners to develop integrated pathways.
- The six local networks would continue to evolve, having been coproduced with families and children in local areas to ensure they reflected local needs.

In discussions with Members, the following was noted:

• Questions were raised about how engagement would be widened

- across agencies such as GPs and schools, and how the model would be publicised.
- Officers confirmed they had begun engagement, including conversations with headteachers and public health colleagues. A senior change manager and police representative had also been appointed.
- Members supported the approach, describing it as positive and a step towards building trust following the pandemic.
- Queries were raised about whether hubs based in libraries and community centres could help ensure local provision was maintained.
- Officers responded that there were no plans to close hubs, apart from one site that was not fit for purpose. The aim was to use buildings more effectively and explore co-location of services.
- It was suggested that more support should be available at front-desk level in council buildings to help people navigate services.
- Members reflected on the importance of supporting a wider range of family structures beyond the traditional nuclear family and involving local organisations in decision-making processes.
- Questions were asked about whether new staff would be recruited or if existing staff would be redeployed, and when the success of the programme would be assessed.
- Clarification was sought on why fostering was mentioned in the context of keeping children with families.
- Officers explained the village approach, emphasising the value of extended family, neighbours and community in supporting families. They also noted that while some children would still require care, efforts were focused on creating better outcomes and value for money.
- Members noted that the programme felt like a much-needed shift after years of reduced funding and uncertainty.
- Communications around previous changes had caused confusion, and members requested that the presentation be shared more widely.
- Concerns were raised about recent closures of youth centres and how this aligned with the new strategy.
- Officers acknowledged variation across the city and recognised the need for targeted engagement with communities to understand gaps in provision.
- A note of caution was raised regarding the scale of transformation required. It was emphasised that the quality of leadership, staff engagement, and multi-agency collaboration would be key to success.
- Officers acknowledged previous challenges with similar initiatives but stressed that this programme was informed by successful past practice, government backing, and lessons learned.
- It was noted that while some previous attempts failed due to lack of resources or poor structure, there was now greater clarity about roles and delivery.
- Officers recognised that there would be challenges, trial and error, and some mistakes along the way, but maintained that the drive to succeed remained strong and that measurable success might not be seen for 2–3 years.
- It was raised how equality, diversity and inclusion would be embedded in

the programme. The model had been co-produced with communities and designed to reflect the unique needs of each local area. Ongoing responsiveness and listening would be crucial.

- Concerns were raised about the high costs of external care placements and how the programme aimed to reduce these through better local provision.
- Officers reported a 9% reduction in looked-after children since 2023, saving approximately £3 million annually. Local provision had significantly reduced weekly placement costs while delivering improved outcomes for children.

#### AGREED:

- 1. That the report is noted.
- 2. That regular updates on the progress of the Family First Programme would come to the commission.

#### 160. SOCIAL CARE AND EDUCATION PERFORMANCE DASHBOARD

The Strategic Director for Social Care and Education submitted a report to update the Commission of the Social Care and Education Performance Dashboard that was being produced.

The Strategic Director for Social Care and Education presented the report. It was noted that:

- From April 2025, the Social Care and Education department began producing a new quarterly performance dashboard, which included key data on performance, volumes, and finance across children's services, education, and adult social care.
- The dashboard was produced approximately two months after the end of each quarter and was presented to the Lead Member and the City Mayor's Education, Health and Care Board (EHCB).
- It was proposed that a version of the dashboard would be provided to members of the Children, Young People and Education Scrutiny Commission and the Adult Social Care Commission following its presentation at the EHCB. This allowed Scrutiny Commission members the opportunity to scrutinise performance and use the information to generate future work plan items for deeper exploration of areas of interest.
- The dashboard was initially produced in Excel, with plans to move it onto a webpage that would allow users to view trend information, comparisons, and data across different areas in graph form. It included specific content relating to Adult Social Care, as well as data that could help identify placement patterns for children, although a sanitised version was required for official publication due to sensitivities.
- The dashboard contained a much wider range of data and was expected to support the generation of future items for the forward plan, while also reporting on financial data. It was acknowledged that some members

might need support in navigating the information, so efforts would be made to ensure it was as accessible as possible. The aim was to focus on both successes and challenges, helping to strengthen the role of scrutiny.

In discussions with Members, the following was noted:

- It was noted that the dashboard had previously been in place for many years and was seen as a valuable tool, providing regular feedback that supported scrutiny in carrying out their role.
- A question was raised about what mechanisms were being put in place to ensure the dashboard's sustainability and prevent it from being discontinued.
- It was acknowledged that changes in the political cycle could impact such initiatives, but reassurances were given that the dashboard had now been embedded into how data was gathered and used.
- While the format would likely evolve over time, this was expected to be a
  positive development, with continued focus on transparency and
  creating a culture of data-informed decision making.
- The aim was to produce the dashboard quarterly, with publication approximately two months after the end of each quarter.
- It was hoped that the dashboard would soon be made available via a website, improving accessibility.
- The next meeting was expected to include a full year's worth of data from the previous year, including information on the most expensive placements, although it might instead cover either the final quarter of the previous year or the first quarter of the current year.

#### AGREED:

That the report be noted.

## 161. CHILDREN'S SOCIAL CARE, EARLY HELP AND PREVENTION IMPROVEMENT PLAN

The Director for Children's Social Care, Early Help and Prevention submitted a report to provide the Commission with an update on the Children's Social Care, Early Help and Prevention Improvement Plan. Members of the Children, Young People and Education Scrutiny Commission were recommended to note the action plan and the progress made to date in delivering the required improvements.

The Assistant City Mayor for Education introduced the item, noting that it was something the Commission had been awaiting. The Children's Social Care and Early Help Improvement Plan had been set out and was now underway. It was hoped that officers would be able to provide assurance on the direction of travel and the progress being made in delivering the plan.

The Director for Children's Social Care, Early Help and Prevention presented the item, it was noted that:

A report was provided to update on the previously shared development plan. The plan was structured around every Ofsted grading outcome, with specific areas for improvement identified by officers.

Five key areas were highlighted for improvement:

- Accuracy
- Quality and impact of supervision
- Timeliness and robustness
- Quality of care
- Support for care leavers and those in unregistered children's homes

It was noted that some care leavers were reluctant to ask for help. A more detailed summary of improvement activity and its impact was included on page 49 of the agenda pack. The first three areas listed above had been rated amber, both for progress and impact.

The remaining two areas had been addressed more quickly due to the more defined nature of the tasks involved. These were rated green for progress, and amber or green for impact.

Additional detail was provided on page 51 of the report, which included specific feedback from inspectors explaining why each area had been identified for improvement. This informed the development of a more detailed action plan.

- Significant progress had been made across several areas.
- Some actions had not yet started due to the planned sequencing of tasks.
- A skills development plan was being created for both individual staff and the wider workforce.
- Specific training was being developed to cover both health and social care roles simultaneously.
- Some of this work was delayed until later in the month, partly due to the need to incorporate new guidance.
- The work extended beyond one service area and would form part of a wider organisational approach.

The Commission was invited to ask questions and make comments. Key points included:

- A connection was noted between the performance dashboard and the improvement plan information, with comments made on the importance of communication between the two tools.
- Pride was expressed regarding the improvement indicators within the plan.
- It was observed that the format resembled earlier versions of the dashboard, and a request was made to receive that format again.
- Officers confirmed the intention to bring the item back on a regular basis for continued monitoring.
- Clarification was sought on point 18 of the report, specifically regarding the review of visiting frequency and whether new guidelines were in

place. It was confirmed that actions had been taken to improve oversight for unregistered children's home provision, including the introduction of weekly visits.

- A question was raised about the reference in section 2.11 to early identification of carers through networking, and who those carers were.
   It was explained that this referred to identifying individuals within a child's wider family or social network who could potentially care for the child, as an alternative to entering care.
- Concerns were noted that in some cases, these conversations with families were not happening early enough. In some situations, parents might acknowledge they could no longer care for the child, yet still not accept the concerns held by professionals.
- It was emphasised that during care proceedings, officers were expected
  to have explored all possible support avenues with the family first,
  including offering practical and financial help to avoid the child coming
  into care.
- A comment was made on the importance of incorporating the real-life experiences of care leavers, especially those in custody or at risk of homelessness, and ensuring their voices were reflected in improvement actions.
- Officers confirmed that all care leavers were assigned a care advisor and had a support or pathway plan in place. However, it was acknowledged that engagement could be difficult, particularly with those in custody.
- Additional challenges were highlighted due to prison rules, such as the need for care leavers aged 18+ to give explicit consent for communication, which could be refused. This created barriers in maintaining contact and providing consistent support.
- It was reiterated that, as legal adults, care leavers could not be forced to accept support, even where services were available and offered.

#### AGREED:

- 1. That the report be noted.
- 2. The improvements be an agenda item at the next meeting in September.
- 3. Quarterly updates be added to the work programme.

#### 162. WORK PROGRAMME

Members of the Commission were invited to consider content of the work programme and were invited to make suggestions for additions as appropriate to be brought to future meetings.

#### 163. ANY OTHER BUSINESS

Concerns were raised regarding the accuracy of the previous meeting's minutes, particularly in relation to the discussion around the recent call-in, which had been constructive and amicable. Members discussed growing concerns over individual assessments for Post-16 SEND school transport

assistance. A number of emails had been received from distressed parents who felt recent decisions were unfair and potentially unsafe. Specific examples were shared involving students at Millgate School, where transport had been withdrawn despite alternative provisions being named in their EHCPs. In some cases, school staff had been required to transport pupils themselves.

It was noted that these issues seemed to stem from decisions being made without a full understanding of individual needs or full communication down the line. Members highlighted that many affected families lacked the capacity or knowledge to challenge decisions, and there was a strong desire to avoid situations escalating into legal challenges. There was a call to review the current assessment processes and clarify which transport provisions would be funded.

Officers responded with an apology and acknowledgement of errors, including administrative mistakes where incorrect letters had been sent to families. A review had been undertaken that day, with senior officers manually rechecking each case. It was confirmed that ten families would receive transport and a further eight were being followed up for additional information. All affected parents were to receive a new letter and apology by the following day, and a new team had been tasked with handling cases moving forward.

Questions were raised about how applications were being processed, how the system could be audited, and how to ensure families were properly supported. It was suggested that school subcontracting of alternative provision needed policy review, particularly around whether associated transport costs were being fairly included. Technical issues with the application platform were also flagged. Finally, members stressed the need for clear communication with parents, including signposting to support services such as SENDIASS and other council teams who could assist families through the process

There being no other business, the meeting closed at 8.20pm.

# Finance Presentation

Children, Young People and Education Scrutiny Commission

Date of meeting: 23 September 2025

Lead Director: Laurence Jones

#### **Useful information**

■ Ward(s) affected: All

■ Report author: Laurence Jones

■ Author contact details: Laurence.jones@leicester.gov.uk

■ Report version number: 1.1

#### 1. Summary

1.1 A presentation will be made to the Children, Young People and Education Scrutiny Commission to present the financial position for Education and Children's Services as at the end of the first quarter, 30 June 2025.

#### 2. Recommended actions/decision

2.1 Children, Young People and Education Scrutiny Commission are asked to note the presentation.

#### 3. Financial, legal, equalities, climate emergency and other implications

#### 3.1 Financial implications

Financial implications are included in the presentation.

Signed: Mohammed Irfan, Head of Finance

Dated: 09 September 2025

#### 3.2 Legal implications

There are no direct legal implications arising from this report.

Signed: Julia Slipper

Dated: 11 September 2025

#### 3.3 Equalities implications

There are no direct equalities implications arising from this report.

Signed: Equalities Officer, Surinder Singh, Ext 37 4148

Dated: 11 September 2025

#### 3.4 Climate Emergency implications

There are no direct climate emergency implications associated with this report.

Signed: Phil Ball, Sustainability Officer, Ext 372246

Dated: 10 September 2025

## 3.5 Other implications (You will need to have considered other implications in preparing this report. Please indicate which ones apply?)

None			

#### 6. Background information and other papers:

Budget papers presented to Council 19 February 2025

7. Summary of appendices:

Appendix A Finance Presentation

8. Is this a private report (If so, please indicate the reasons and state why it is not in the public interest to be dealt with publicly)?

No

9. Is this a "key decision"? If so, why?

No

# Children, Young People and Education

**Quarter 1 2025/26** 

**CYPE Scrutiny Commission 23 September 2025** 

**Laurence Jones - Strategic Director Social Care and Education** 

# Agenda

- 1. Revenue Forecast Period 3 (April-June)
- 2. Capital Forecast Period 3 (April-June)
- 3. Monitoring of Savings and Cost Mitigation Work
- 4. Schools DSG Balance

# Education and Children's Services

Sophie Maltby – Director of SEND and Education

Damian Elcock – Director of Children's Social work and Early Help

#### 22

# **1. ECS Revenue Quarter 1 2025/26**

Education and Children's Social Care	Budget (£000)	Forecast (£000)	Overspend / (Underspend) (£000)	Notes
SEND and Education	25,069	24,054	(1,015)	(£0.8m) SEN transport reduced growth in demand and dynamic
Children's Social Care	93,183	91,148	(2,035)	purchasing (£2.1m) vacancies
Resources	1,109	1,113	5	(£2.±III) Vacancies
Total ECS	119,361	116,315	(3,046)	2.6% of budget

#### 23

# 2.ECS Capital Forecast

Dept/ Division	Project	Approved Budget (£000)	2025/26 Spend	O/(U)spend		Completion		Project RAG Rating @ P3
SCE (ECS)	Additional SEND Places (including Pupil Referral Units)	5,716	711	0	Jan-24	Sep-27	Green	Green
SCE (ECS)	S106 School Places	847	0	0	Sep-26	Sep-26	Green	Green
SCE (ECS)	Pindar Nursery	825	0	0	Mar-23	TBC	Purple	Purple
SCE (ECS)	Expansion of Children's Homes	538	287	0	May-23	Sep-25	Green	Green
SCE (ECS)	Education System Re-tender	1,486	295	0	Mar-26	Mar-27	Green	Green
<b>Total</b>		9,412	1293	0				

Pindar Nursery – work is underway to review the requirements of the scheme and associated costings

# **ECS Capital Forecast**

Work Programmes summary...

Work Programme	Dept / Division	Approved £000	2025/26 Spend £000	Slippage	
School Capital Maintenance	SCE (ECS)	17,653	329	3,947	0
Foster Care Capital Contribution Scheme	SCE (ECS)	395	0	0	0
Total		18,048	329	3,947	0

# **ECS Capital Forecast**

Substantially complete works

25 Work Programme	Dept / Division	Approved £000	2025/26 Spend £000	Over/(Under) Spend £000
Additional Primary School Places	SCE (ECS)	20	-15	0
Expansion of Oaklands Special School	SCE (ECS)	710	-24	0
Overdale Infant and Juniors School Expansion	SCE (ECS)	219	45	0
Family Hubs	SCE (ECS)	102	-19	0
S106 Additional School Places	SCE (ECS)	366	0	0
Children's Homes Refurbishments	SCE (ECS)	1	14	13
Winstanley Contact Centre	SCE (ECS)	18	10	0
Total		1,436	11	13

Credit amounts shown where invoices are awaited to clear prior year accruals.

# **ECS Capital Forecast**

Provision and Policy Provision

Dept/ Division	Project		•	Remaining Budget (£000)
Early Years - Two Year Olds	SCE (ECS)	593	0	593
Total		593	0	593

Dept/ Division	Policy Provision		•	Remaining Budget (£000)
SCE (ECS)	New School Places	1,923	0	1,923
Total		1,923	0	1,923

# 3. ECS - Monitoring of savings

ECS	25/26 (£000)	26/27 (£000)	27/28 (£000)	Comments
Adventure Playgrounds	400	1,000	1,000	Removal of £1m Adventure Playgrounds Budget
SEND Transport Policy	900	1,900	2,100	Policy change for post 16 transport.
Total	1,300	2,900	3,100	

## 3. ECS - Cost Mitigation

ECS	£000	Comments
In house residential Homes	400	2 new council owned homes built in last 2 years – one onstream since October 2024
Re-allocation of therapeutic resources	1,300	Pilot programme supporting reunification of children in care with families – (£1.3m per annum)
Total	1,700	

## 5. Schools Cumulative DSG Balance

	23/24	24/25	25/26
DSG	£m	£m	£m
	Actual	Actual	Forecast
DSG Deficit	9.6	22.2	43.1
	9.6	22.2	43.1

The balances reported above are cumulative balances.

Due to special Government "override" we are able to maintain this as negative balance. This expires in March 2028.

Range of strategies in place to mitigate the cost impact of the growth in demand for and complexity of SEN support as part of the HNB Management Recovery Plan and Transformation Project.

## **SEND Transformation Plan Aims**

- Aim 1: New DFE Reforms The SEND and AP Change Programme
- Aim 2: Developing Ordinarily Available offer: LA, Schools, Settings & Colleges
- Aim 3: Local Authority Process reforms & Sufficiency
- Aim 4: Increase confidence for parents and carers
- Aim 5: Placement reforms
- Aim 6: Stakeholder Engagement



# Edge of Care Strategy 2025-2027

**CYPE Scrutiny Commission** 

Date of meeting: 23/09/2025

Lead director/officer: Damian Elcock

Karen Manville

Tiernan Welch

#### **Useful information**

■ Ward(s) affected: All

■ Report author: Karen Manville and Tiernan Welch

■ Author contact details: <u>karen.manville@leicester.gov.uk</u>

tiernan.welch@leicester.gov.uk

■ Report version number: v2

#### 1. Summary

- 1.1. The Edge of Care strategy sets out our understanding of current needs, the availability of provision and our plans for the development of our Edge of Care offer over the next three years. The strategy provides information on the range of approaches and the impact achieved from the services and interventions provided. It outlines how new innovations, being developed in Leicester, will support a cohort of children and young people as well as covering and addressing the challenges, evidence of impact as well as value for money.
- 1.2. Following recommendations from a series of reviews published in 2022, the government invested £200 million to set the path for longer term reform. This funding is on top of:
  - £142 million to be invested by 2024 to 2025 to take forward reforms to unregulated provision in children's social care.
  - £160 million to be invested over the next 3 years to deliver our Adoption Strategy.
  - £259 million over this Spending Review period to be invested to maintain capacity and expand provision in secure and open residential children's homes.
  - £230 million to be invested over this Spending Review period to support young people leaving care.
- 1.3. This new strategy reflects how we will test some of the most complex reforms to assess the impact of new measures and learn from our approach to inform future decision making at all levels. We will be learning through co-design through our Families First for Children and Regional Care Cooperative Pathfinder programmes. We will achieve this while ensuring practice aligns to our divisional priorities and align with the implementation of a Family Help model.

#### • Recommendation(s) to scrutiny:

Scrutiny Commission are invited to:

- Note the new Edge of Care strategy and the offer in place.
- That any comments and amendments are made to the strategy and a refresh presented on a yearly basis.
- For the Edge of Care progress report to be presented to scrutiny on a yearly basis (with the refreshed strategy) to update on Performance indicators, metrics and delivery outcomes.

#### 2. Detailed report

#### 2. Our legal duties

- 2.1. There is no recognised or official definition of what constitutes 'edge of care'. Consequently, the cohort of children and young people on the edge of care is not generally well tracked or understood. However, in Leicester we have a well-established history of offering edge of care services. Therefore, not only are these at-risk children visible, but for the last twelve years they have also been discussed and understood, with their needs carefully considered and actively responded to.
- 2.2. The characteristics of the children who meet the edge of care threshold vary significantly: including both in terms of age and where they are on their journey. To address this, the offer has grown to accommodate services which can be responsive to differing needs. When the threshold for the edge of care is met, robust processes are in place as part of the Children Act, 1989, to secure intervention and permanence for children at the 'edge of care' within the local authority area.
- 2.3. Where children are living in an environment where their safety is compromised to an extent that the child protection plan is no longer sufficient, it is incumbent upon the social worker and team manager to request a legal planning meeting. At this meeting there are various options, including referrals to the following edge of care services:
- Family Decision Making
- Multi-Systemic Therapy (MST)
- Multi Systemic Therapy for Building Stronger Families (MST-BSF)
- Functional Family Therapy
- Other prevention services within the Youth Support Offer
- Partnership offers
- 2.4 The legal planning meeting is chaired by a service manager who is advised by a legal representative. Additional options may include both not to engage in pre-proceedings or to escalate with and issue care proceedings. Following the meeting, the decision is made with social care as to what service can best meet the child's need. Managers from the Family Therapies service provide a critical role is supporting this assessment as teams have strengths in different areas.

#### 3. Leicester's Edge of Care offer

- 3.1 It takes a village to raise a child. Similarly, it takes a dedicated network to make a difference to the lives of children and young people who are open to children's social care. Family therapies offer therapeutic support to meet the identified issues while bringing families together to ensure robust and ongoing support away from statutory intervention.
- 3.2 The edge of care services specifically referenced within this strategy are:
  - Multi Systemic Therapy (MST), a 3 5-month programme targeting children aged 11
     -17 at risk of custody or care due to behavioural issues.

- MST Building Stronger Families (MST-BSF), a 6 9-month programme targeting families with at least one child aged 6 – 17at risk of care following one or more episodes of physical abuse and/or neglect.
- Functional Family Therapy for Child Welfare (FFT-CW), a programme of approximately six months duration for any child aged 0 7 where there is a risk of care due to ongoing child welfare needs (except active sexual abuse) where the family isn't eligible for an MST intervention.
- Family Decision Making specialist independent service coordinating a personalised community response to prevent family breakdown.
- 3.3 The aim of these programmes is to provide a targeted response to those children most at risk of coming into care with a view to:
  - reducing looked after episodes
  - reducing the financial cost of these
  - improving outcomes for children, young people and their families, including:
  - keeping families together
  - - offering assurance that children are safe
  - reducing adult and child substance abuse
  - reducing offending
  - increasing child attendance in education, employment and training
  - reducing mental health difficulties
  - increasing natural social supports

#### **Multi Systemic Therapy (MST)**

- 3.4 MST is an intensive family- and community-based intervention for children and young people aged 11-17 who are on the edge of care. It is targeted at high-risk families where the young person's behaviour across several systems (home, school, community) is unmanageable within the current capacity of the family and supports parents to develop new strategies to keep their young person safe. Therapists carry low caseloads to support intensive contact and work with families for up to 20 weeks.
- 3.5 MST is firmly embedded within the edge of care offer with referrals screened and approved at a weekly panel. The MST Supervisor attends the Edge of Care Panel every week and on average the service accepts around 6 new referrals a month for suitability screening.
- 3.6 MST focuses on family strengths which has numerous advantages, such as building on strategies the family already know how to use, building feelings of hope, identifying protective factors, decreasing frustration by emphasising problem solving and enhancing parents or carers' confidence.
- 3.7 There is strong evidence to suggest that MST has had a positive and sustained effect on changing participant's behaviour, reducing demands on public services and providing an overall saving on investment.

#### **Multi-Systemic Therapy for Building Stronger Families (MST-BSF)**

- 3.8 MST-BSF is an adaptation of MST and designed for families with serious clinical needs who have come to the attention of children's services due to physical abuse and/or neglect. MST-BSF clinicians work on a team of three therapists, a crisis caseworker, a part-time psychiatrist who can treat children and adults, and a full-time supervisor. Each therapist carries a maximum caseload of four families.
- 3.9 Treatment is provided to all adults and children in the family. Services are provided in the family's home or other convenient places. Extensive safety protocols are geared towards preventing re-abuse and placement of children and the team works to foster a close working relationship between children's services and the family.
- 3.10 When needed, the following empirically based treatments are used: functional analysis of the use of force, family communication and problem solving, Cognitive-Behavioural Therapy (CBT) for anger management and post-traumatic stress disorder (PTSD), clarification of the abuse or neglect and Reinforcement Based Therapy (RBT) for adult substance abuse.
- 3.11 MST BSF offer Reinforcement-Based Treatment (RBT) for drugs and alcohol. It is a therapy approach that helps people reduce substance use by rewarding positive steps like staying sober or attending therapy sessions. When individuals show progress or make healthy choices, they receive incentives or rewards, which encourages them to keep up those behaviours. This method motivates and supports lasting change by focusing on positive reinforcement rather than punishment.

#### Functional Family Therapy – Child Welfare (FFT-CW®)

- 3.12 Functional Family Therapy Child Welfare (FFT-CW®) is an adaptation of Functional Family Therapy (FFT) designed to serve families with children aged 18 or younger. FFT-CW aims to improve child and family outcomes and keep families together by offering a continuum of services tailored to individual family needs. Families receive one of two levels of services based on a preliminary risk assessment. Families can move between levels of services if later assessments indicate that risk factors have changed.
- 3.13 Families assessed as high-risk receive a developmentally adapted FFT intervention with enhanced behavioural and mental health targets delivered in five phases by a trained clinical therapist. The first three phases focus on increasing engagement, building motivation for change, and understanding relational patterns. The next phase focuses on behaviour change and identifying and addressing family needs. The final phase helps families generalise these behaviour changes to their everyday lives and to contexts outside the immediate family.
- 3.14 For families with younger children, programme content is more parent-driven, focusing on building skills for creating a family context in which children can flourish. For families with adolescents, programme content focuses on how problem behaviours can motivate families to engage in change.
- 3.15 Across both levels of services, families are supported by a treatment team that includes the interventionist or therapist as well as a clinical supervisor who provides ongoing supervision and training. Other team members can include recruitment/intake workers and family resource specialists to help with referrals. The treatment team for the high-risk intervention should have plans to access a clinical psychiatrist who can provide as-needed

psychiatric assessments, treatment planning, medication management, referrals, and therapy services.

#### **Contingency Management Policy and Protocol**

- 3.16 The FFT service have now received training in Contingency management (CM), which is a highly effective therapeutic intervention for people with problematic drug and alcohol use, which utilises theories of conditioning to reinforce or reward' positive behavioural changes with the aim of achieving abstinence. CM is purely a behavioural intervention but may work alongside external prescribing services.
- 3.17 Contingency management has been introduced to the FFT CW team in Leicester, in response to a growing awareness that over 80% of cases which resulted in a child being removed from parental care featured drug or alcohol use. It will be employed as an addition to the already successful FFT work and be fully integrated into the behaviour change plan.
- 3.18 Abstinence from problematic drug and alcohol use will always be the goal of any CM intervention, however it needs to be recognised that this achieving consistent abstinence may take some time and there may be lapses or relapses during this process. It is particularly important that no-one advises someone who has become physically dependent on alcohol to stop drinking suddenly, as this can lead to serious withdrawal symptoms, which can in some cases be fatal. Where an individual is assessed to have a healthy relationship with alcohol or cannabis, and its use is not deemed to be posing safeguarding concerns, these substances will not be addressed by the CM intervention.

#### Identification of appropriate cases

- 3.19 Cases where CM will be offered will be identified by the allocated therapist during the initial FFT phase of Motivation. CM may be offered to a anyone in the immediate household of a family who have been referred to FFT CW, where drug and/or alcohol use is assessed to be a contributing factor to the child protection concerns; this can include under18 years old.
- 3.20 Whilst Social Workers or Independent Chairs can suggest that a therapist considers offering CM, it is the decision of the therapist and the family whether to proceed with this. This decision will be made based on assessment of motivation and likelihood of compliance.

#### Family Decision Making (previously referred to as Family Group Conference)

- 2.21 Family Decision Making (FDM) is a process led by family members to plan and make decisions for a child who is identified as being at risk. It is a voluntary process that starts with the promise that all relevant family and friends are invited to take part, especially the child or young person, as long as it is safe to do so. Children and young people are normally involved in their own FDM, although sometimes with support from an advocate.
- 3.22 The aim of the FDM is recognition that often a child's best, most loving and consistent support comes from within their own family. We recognise that families can be transitory, they may not have spoken in some time or may have had disagreements and fall outs, but that when it comes for the best interests of the child, most families will put

aside these differences. This is fundamental action to supporting families 'where they are at' in line with Family Help.

- 3.23 The philosophy underpinning FDM is that:
  - Children and young people are paramount to the FDM process
  - The family network is central to the FDM process
  - FDM is family led decision making in partnership with formal systems
  - FDM is a safe, respectful and effective environment for all participants
  - Private family time is a vital element to FDM process

Families have the right to be involved in decisions that affect their children and that as long as the plan is safe for the child(ren) it should be fully resourced.

#### 4. Governance and accountability

- 4.1 All family therapy interventions are governed by the Edge of Care Interventions Board. The key aims of the board are to ensure the programmes operate within the purpose and structure for which they were designed and to ensure a collaborative approach towards reducing the number of children who are looked after. The Board, which is independently chaired and made up of senior members of key stakeholders, serves to hold all interventions and their management to account. It meets four times annually, with briefing papers presented quarterly. The board is chaired by the Head of Service for the Prevention Service and is well represented by a range of partners including Social Care, Health, Police and Education.
- 4.2 There is strict oversight of the team's performance and what we refer to as adherence. Adherence includes a range of factors, including the therapist's ability to work across the whole of the child's ecology, the ability to collaborate in a strength-based manner and the ability to create sustainable change for our families.
- 4.3 As the service grows to incorporate the expansion of the FFT model to accommodate children being returned from care, the exiting Edge of Care panel will also house eligible children who can be considered for a return from care to their carers. Such decisions are not taken lightly, recognising the impact of potential trauma and risk of further harm. As such, only children and families who have shown clear dedication to persistent contact and close working with the local authority will be considered. The decision to progress with the therapeutic work, timescales and agreement for placement with parents (thus not revoking the care order but allowing the child to share parental responsibility with the local authority while being at home) can be ratified by Head of Service.

#### **Quality Assurance**

4.4 Adherence (or client satisfaction) is captured across all five teams via a monthly anonymous interview with family members, generating an adherence score for each therapist. These scores are based on questions designed to ensure that the therapist is being complaint to the relevant model, e.g.: promoting responsibility, strength focused, onus on sustainably. MST and MST BSF teams use a Therapist Adherence Measure (TAM-R) to measure adherence, and FFT-CW use a Family Self-Report (FSR). Leicester continues to be highlighted nationally as a highly adherent service, with a strong reputation for keeping children safely at home.

- 4.5 In 2023/24, 113 TAM-R interviews were conducted across MST and MST BSF teams. The average adherence score across the therapists remains consistent at .81 (adherence is a target of .61), continuing to be above the national average.
- 4.6 87% of all families open to MST and MST BSF were interviewed every month, demonstrating the full range of families working across the service providing feedback, despite levels of engagement in the programme.
- 4.7 The Family Self-Report (FSR) is a 7-item inventory completed by every family member a minimum of six times throughout FFT. Each family member completes a feedback form, including every child living within the home. Families score confidence at each of the 5 phases in treatment. It is expected that as treatment progresses there will be an increase in score by at least 1 point per phase. Families score 1 (very bad) to 7 (very good) to the questions. 29 FSR interviews have been conducted, with an average of +2.25 across the quarter. This is above the target of +1 range.
- 4.8 In the year of 2023/24, 29 FSR interviews were conducted, with an average of +2.25 across the quarter. This is above target of +1 range.
- 4.9 In respect of auditing and quality assurance (QA) activity, Family Therapies are included in Local authority audit processes and use a ratified Ofsted framework for assessment. On a monthly basis, managers use an Ofsted-aligned case file audit which is then moderated by a different manager. Any files which are graded as 'Requiring Improvement' or 'Inadequate' are also reviewed by the Head of Service. There is a clear focus on closing the gap between actions from audits and improvements seen.

#### 5. Value for money

- 5.1 Evidence increasingly demonstrates that interventions at an early stage are more likely to lead to improved outcomes for children and their families and reduce demand across the whole "children's system". This is essential for cost effectiveness but also recognises the inherent difficulties in repairing trauma in later years.
- 5.2 Different types of interventions in families are often age related with specific early years or adolescent focused interventions. All should focus on securing of permanency and this has been our approach along with ensuring cost avoidance (where safe and appropriate) with savings arising from young people not entering care. The sustainability in the longer term of outcomes requires more research and generally longer interventions are more suited to a chronic type of persistent neglect.
- 5.3 The cost of Edge of Care interventions varies significantly and should not be compared to one another as they are different approaches for children at different stages. If MST-FFT-FDM is identified as needed, due to the evidence base and ecology of the model, this becomes priority and all other edge of care interventions supporting the family cease. Family Decision Making used at any stage when risk of family network is identified as breaking down. It can be used at any stage as an alternative to MST, MST BSF. FFT and MST BSF should only take cases where a decision has been made that they meet the threshold for removal into care.

- 5.4 While the cost of MST-FFT is significantly higher than other edge of care interventions, this service is subject to rigorous adherence and evaluation, evidencing that placement costs avoided are in excess of the cost of the service. Owing to the nature of more specialised placements utilised, Family Therapies meet with finance regularly to calculate a projected placement (avoided) based on several factors: the risks the child/ren poses or are posed, their behaviours and needs, and placement availability on the day the child/ren is referred. This data is frequently cross checked with social workers and the placement team for accuracy. The average annual placement cost avoided is £84k.
- 5.5 For other programmes such as FDM, these approaches are encouraged by the Department for Education, with the national consensus that programmes such as these reduce the number of children who come into care.
- 5.6 The below represents year on care diversion against target goals and cost avoidance savings.

Year	Success to date	Gross Savings from
		success
2020/21	67%	£3,380k
2020/22	76%	£2,071k
2020/23	80%	£4,642k
2020/24	90%	£7,515k

5.7 The above details ongoing and consistent savings. While there is a drop in 2020/22, savings were still made above our investment. This period was impacted by the prevalence of Covid-19. While the service continued, government enforced restrictions meant that critical pieces of work such as family meetings, one to one trauma work and aspects of drug treatment such as urine testing/employment goals were either reduced or not carried out in line with clinical processes. The impact of this simply shows that adherence to the models is a significant contributor to its success.

#### 6. Impact

- 6.1 In the past financial year (2023/4), 393 families or 734 children were served with an overall success rate of 90% meaning children were able to stay safely at home.
- 6.2 Since the start of the financial year 2024, the number of children diverted from care is 199 which is 106% of the annual target. This represents annualised gross savings (from new families opened in the year) of £7.5m, 245% of the full year saving target of £3.1m.
- 6.3 Across the full year (2023/4) teams have worked with 393 families and 734 children within these families. Of all 136 families starting in the year, 90% are still together.
- 6.5 Each child is allocated a projected placement cost avoided figure based on several factors: the risks the child/ren poses or are posed, their behaviours and needs, and placement availability on the day the child/ren is referred. This data is frequently cross checked with social workers and the placement team for accuracy. The average annual placement cost avoided is £84k.
- 6.6 The average time between referral and treatment starting for quarter 4 2024, as an example, was 14 days, which is above target of <10. The 14 days average between referral

and start includes a 'sign up and consent' visit before treatment start, so families are contacted and meet the team at least once between referral and start.

6.7 In respect of auditing and quality assurance (QA) activity, over the most recent quarter 4, as an example, 613 file audits took place. There were 34 direct observations of practice. In addition, 85 cases had additional 'deep dive' analysis exploring practice successes and difficulties, these have taken place outside of the usual QA activity. Finally, the teams completed 4 audits against the Ofsted framework, with 1 scoring outstanding and 3 scoring good. This is a tested and robust process, with every case file being independently moderated by a different manager before concluding on a grade. All QAs are graded before and after the 'loop is closed' with actions for completion checked and signed off as achieved before the QA is completed.

#### **Growth and plans for Safe Steps home (reunification)**

- 6.8 The decisions to place any children in care are made following significant assessments or events so worrying that there will have been no other choice. For many children in these circumstances, care is the safest place for them to grow up and achieve their life goals. For others however, whilst this may have been the right decision at that time, it needs to be acknowledged that people and their circumstances can change. For these cases it is appropriate to consider reunifying children into the care of their family. In addition to improving outcomes for children and families, the process of reunification would free up desperately needed care placements.
- 6.9 Based on analysis of cases to identify potential for reunification, a proposal was made to utilise FFT as a Reunification Programme named **Safe Steps Home**, working with an initial cohort of eight children.
- 6.10 The FFT reunification pilot has now formally concluded. The programme has entered its next phase, progressing with reunification work beyond the pilot period. This approach continues to support children aged 9–15 in complex and high-cost placements, with the aim of safely returning them to family care, where appropriate.
- 6.11 Reunification, when safe and supported, improves life chances and alleviates pressure on the care system. The early results of the pilot were positive. However, the transition into delivery at scale brings challenges. These include increased assessment demands, new decision-making processes, and the continued need for close collaboration across care homes, education, and Independent Reviewing Officers.
- 6.12 Despite the current staffing pressures particularly the absence of two key posts that are now in recruitment the FFT team is effectively managing the increased workload. This commitment and adaptability are ensuring that reunification work remains safely on track.

Key recommendations from the pilot have and are continuing to be implemented, including:

- Targeting high-cost, complex placements
- Strengthening early identification of reunification opportunities;
- Enhancing multi-agency coordination; expanding therapeutic capacity in a phased manner
- Recruitment of 2 new posts to meet demand

#### Family Decision Making recognising stable homes build on love

6.13 Family therapies recognise that where possible, the best place for a child is with family and in July 2024, the Family Therapies service welcoming the Family Decision Making team. Leicester City Council will offer a Family Decision Making to all families when the wellbeing of their child(ren) is of such serious concern that an alternative placement to the child(ren)'s current placement is being considered. Family Decision Making Conferences, while available for referral for children on all plans, however edge of care and Court appointed cases will be prioritised with representation at internal Legal Planning Meetings.

#### 7. Joint working

- 7.1 Family therapies have clear protocols which underpin strong working relationships with identified partners. This ensures that the therapeutic offer can be met without compromise or difficulty.
- 7.2 Good practice expects that multi agency decision making provides best outcomes for children and families and as such, it is expected that therapeutic staff are involved in all relevant decision making that could have impact on the long-term outcomes. It means ensuring that the various stakeholders involved with any given family are coordinating care, as needed.
- 7.3 Most, if not all referral families to MST, MST BSF and FFT are open to children's social care. While social care has statutory responsibility for visits, family therapies lead delivery for intervention and should have clinical leadership. This leadership role is not intended to replace or remove the responsibilities of statutory social work. It does however provide the framework for the inclusion of therapists in all relevant decision making that could have impact on the long-term client outcomes. It means ensuring that the various stakeholders involved with any given open family are coordinating care, as needed.
- 7.4 Where substance misuse is identified, it is expected that the MST/FFT-CW teams should have clinical leadership. This leadership role is not intended to replace or remove the responsibilities of statutory agencies or other key workers, in particular criminal justice work and managing prescribing. It does however provide the framework for the inclusion of MST/FFT-CW in all relevant decision making that could have impact on the long-term client outcomes. It means ensuring that the various stakeholders involved with any given family open to one of the teams are coordinating care, as needed. MST/FFT-CW are governed internally by the Local Authority and externally by MST and FFT Services and the DfE on a weekly, monthly and biannual basis following evidence-based scrutiny processes.

Children and Young People's Justice Service (CYPJS)

7.5 Where young people referred are open to Children and Young People Justice Service (CYJPS) MST BSF take referrals where they meet the eligibility criteria. There is no referral form to complete but the team require a rationale for referral and the most recent assessment and report. Once the referral is received, the team will contact the referrer within 48 hours, to advise on eligibility, space and allocation timeframes. If a case is not accepted

for treatment, a rationale will be provided, and alternative suggested interventions will be made.

- 7.6 In cases where families where school attendance is a concern, there will be an introductory meeting with the therapist, Education Welfare Officer and key school staff involved with the child/young person (Special Education Needs Co-Ordinator, staff from alternative provider, learning mentor etc). All relevant professionals will be asked for their desired goals for treatment to ensure the programme is working towards all key agency remits. Regular reviews to take place 4-6 weekly with all professionals and the family, monitoring progress towards goals.
- 7.7 Any safeguarding concerns will be discussed with the Social Worker, the Education Welfare Officer, and the school, or Duty and Advice Service immediately and records of discussions will be logged onto Liquid Logic within 24 hours.
- 7.8 The MST Supervisor will inform the Safeguarding Partnership Manager of cases open to the MST programme when consent is given by the family to share. The Safeguarding Partnership Manager will also be informed when each family is closed to MST. There will be up to 40 families with specialist markers, highlighting MST involvement on the police system at any given time.
- 7.9 MST operates a 24/7 on-call system to provide support to families when crisis occurs. When a family open to MST calls the police, the call taker will be made aware from the specialist marker that the family are open to MST.
- 7.10 Prior to dispatch, police will inform the on-call therapist of the nature of the incident, where a joint decision will be made on the need for immediate police attendance depending on the nature of the incident. The on-call therapist will contact the family and review the incident resulting in the police callout with an attempt to de-escalate with the family over the phone. At each stage, the on-call therapist will remain in contact with the police officer allocated to the call and will make a joint decision on whether police attendance with or without on-call therapist is still required.
- 7.11 Family Therapy services will be available to the community and will be available for discussion, support and referral in community environments in line with Family Help.

#### 8. In conclusion

- 8.1 Leicester has an excellent edge of care offer available to support children and young people. Since 2012 the service has been extended to include a comprehensive offer meeting the many and varied needs of children who are at risk of coming into care. The robust nature of our local legal planning and edge of care panels has enabled interventions to be utilised at an earlier point for some children and young people where there is a clear pathway of escalation.
- 8.2 Following referral to any of our services, managers conduct detailed ecological assessments under a well-managed using a robust assessment framework. All teams are well integrated into social care and early help teams; visible and ready to provide support and guidance, even if a referral is not being considered allowing skills and knowledge to be shared across services.

- 8.3 Teams are respected by professionals, the courts, and families alike with teams and therapists receiving excellent feedback as well as praise and recognition in a national scale for their efforts and tenacity.
- 8.4 Outcomes are monitored not just at the end of treatment, but on-going at both 6, 12 and 18 months to ensure that our interventions 'hold'. We are proud of these results, with our sustainability holding at a 90% longitudinal success rate post treatment.
- 8.5 We will expand our edge of care offer with the development of innovations and ensure children and their families are appropriately supported in their communities. There remains volatility in relation to admissions into care and our edge of care offer needs to be flexible and responsive to achieve good outcomes for children and young people, there is some recent evidence to suggest increasing minimisation of this volatility.
- 8.6 Our investments in a good edge of care offer is a moral and financial imperative and current edge of care services are demonstrating value for money and supporting the achievement of safe, happy, healthy and successful outcomes.

#### 4. Financial, legal, equalities, climate emergency and other implications

#### 4.1 Financial Implications

This report proposes to recruit to 2 Function Family Therapists at a total cost of £133,000. Based on a sample there is the potential of cost avoidance if children can be returned home.

The cost recovery programme for children's services includes funding for these posts however this programme is still undergoing approvals, so the funding is not there yet. On this basis, it is recommended to hold recruitment until the funding is confirmed.

Signed: Mohammed Irfan, Head of Finance

Dated: 11 April 2025

#### 4.2 Legal Implications

Local authorities have a positive duty under the Children Act 1989 s22(C) to make arrangements for a child to live with a parent, someone who has parental responsibility for a child or a person named in a Child Arrangement Order. This requirement does not exist if doing so would not be consistent with the child's welfare or would not be reasonably practicable. This rehabilitative duty reflects the principle that state intervention in family life should be kept to the minimum necessary to protect a child from harm. A child should be brought up by his/her family if that is a safe place for him/her to be.

The authority is under a statutory duty to review the care plan for any looked after child - The Care Planning, Placement and Case Review (England) Regulations 2010, regulation 32. As part of this review, there must be active consideration of whether a child can be cared for by a parent.

This programme supports the authority to meet with this statutory duty.

Signed: Susan Holmes11/04/25

Dated: 11/04/25

#### 4.3 Equalities Implications

Under the Equality Act 2010, public authorities have a Public Sector Equality Duty (PSED) which means that, in carrying out their functions, they have a statutory duty to pay due regard to the need to eliminate unlawful discrimination, harassment and victimisation, to advance equality of opportunity between people who share a protected characteristic and those who don't and to foster good relations between people who share a protected characteristic and those who don't.

Protected Characteristics under the Equality Act 2010 are age, disability, gender reassignment, marriage and civil partnership, pregnancy and maternity, race, religion or belief, sex, sexual orientation.

The report provides an update on the Functional Family Therapy: Reunification pilot which aims to reunify children/young people with their family, with a view to reducing care placements, the financial cost of these and improving outcomes for children, young people and their families. To make further progress in meeting our public sector equality duties, we need to ensure equality considerations are embedded throughout the programme as it is expanded, evaluated and new cases for referral are identified. Equality monitoring would be beneficial and would help the service to identify any areas for concern/disproportionality, with mitigating actions being put in place to address these.

Signed: Sukhi Biring, Equalities Officer

Dated: 9 April 2025

#### 4.4 Climate Emergency Implications

There are no climate emergency implications arising directly from this report. However, if the project proves to be successful in reuniting young people with their birth families, and this leads to less demand for places in care homes, this might, over time, reduce carbon emissions produced from the operation of care homes.

Signed: Duncan Bell, Change Manager (Climate Emergency). Ext. 37 2249

Dated: 8th April 2025

#### 4.5 Other Implications

Signed:

Dated:

#### 5. Background information and other papers:

#### 6. Summary of appendices:

Copy of Edge of Care Strategy and presentation – heard at CMB May 2025



# **Leicester's Edge of Care Strategy** 2025-2027

### **Foreword**

We know that it is in a child's best interest to remain at home where it is safe for them to do so.

To support this ambition, we have developed our first Edge of Care Strategy which is aspirational in its approach to seek opportunities to grow and shape services to support children to remain safely at home or to safely return home.

I am excited to launch our strategy, which I hope will enable colleagues and partners to:

- 1) get insight into the essence of the Edge of Care work undertaken within the local authority and across the partnership and,
- understand the impact the nationally and internationally recognised Edge of Care therapeutic programmes have for Leicester's children and families.

We are proud of our Edge of Care work and can see tangible evidence of the benefit that our services have on the lives of children and families. You may think it's just a job, but you are changing lives and that's amazing. You have provided the support we needed as a family...Thank you.

#### Karen Manville

Head of Service for Prevention Services and Chair of the Family Therapies Board

October 2024

## 1. Rationale

- 1.1. Within the children's social care system, the priority is to keep families together. We know that children who are looked after are at risk of having poor educational experiences, of leaving school with fewer qualifications, of having an increased risk of offending and of becoming a teenage parent. We also know these children often become adults who are out of work. This is why addressing concerns to keep children at home, when it is possible and safe to do so, is so important.
- 1.2. As well as impacting on children's outcomes, looked after children placements put huge financial pressure on local authorities. The cost of these placements can reach £2,125 per day, with an average cost of £230.07 per day, per child. 19% of children in care in Leicester are in the highest cost placements (based on cost >=£1,000 per day).
- 1.3. Leicester City Council is fully committed to supporting a child's right to family life and to support children and young on the edge of care and protect them from harm, a range of services and interventions are provided in Leicester. This reduces the likelihood of someone becoming looked after.

## 2. Introduction

- 2.1. This strategy sets out our understanding of current needs, the availability of provision and our plans for the development of our Edge of Care offer over the next three years. The strategy provides information on the range of approaches and the impact achieved from the services and interventions provided. It outlines how new innovations being developed in Leicester will support a cohort of children and young people as well as covering and addressing the challenges, evidence of impact and value for money.
- 2.2. Following recommendations from a series of reviews published in 2022, the government is investing £200 million to set the path for longer term reform. This funding is on top of:
  - £142 million to be invested by 2024 to 2025 to take forward reforms to unregulated provision in children's social care.
  - £160 million to be invested over the next 3 years to deliver our Adoption Strategy.
  - £259 million over this Spending Review period to be invested to maintain capacity and expand provision in secure and open residential children's homes.
  - £230 million to be invested over this Spending Review period to support young people leaving care.
- 2.3. The strategy reflects how we will test some of the most complex reforms to assess the impact of new measures and learn from our approach to inform future decision making at all levels. We will be learning through co-design through our Families First for Children and Regional Care Cooperative Pathfinder programmes. We will achieve this while ensuring practice aligns to our divisional priorities and align with the implementation of a Family Help model.

## **Divisional Priorities**

Children's Social Care, Early Help and Prevention

> We are committed to supporting children, young people, adults, and families to live their best life, so they can be safe, be independent and be ambitious for themselves



where safe to do so come support for through Company Exploring for Support Sup Children and young people who need the life is. comprehensive Commissioning in support for early years partnership to find through Children's Centres joint solutions for children and Family Hubs and young people with complex needs vorks

Norkforce is enabled to do their beautiful and experienced workforce

workforce

Necruiting and retaining a skilled and experienced workforce through children's homes our edge of and fostering care offer capacity Developing and Focusing on improving our Making effective strengths and Focusing on services with and timely legal relationshiprebuilding and our children intervention based practice supporting family and families, where required underpinned by relationships through respect, Working in co-production, kindness and an Increasing partnership feedback understanding of understanding with quality assurance trauma of needs housing (Valuing Care) colleagues to address Committing to celebrating, understanding and meeting the needs needs Keeping of our people and challenging Enabling those children and young oppression and discrimination children seeking safety people safe in and to receive appropriate outside their support homes Focusing on the Working in partnership to ensure that wellbeing, support and celebration of our care families receive tailored support and intervention to meet needs (social, health and education)

receive a flexible and responsive children with disabilities and their



## 3. Our legal duties

- 3.1. There is no recognised or official definition of what constitutes 'edge of care'. Consequently, the cohort of children and young people on the edge of care is not generally well tracked or understood. However, in Leicester we have a wellestablished history of offering edge of care services. Therefore, not only are these at-risk children visible, but for the last twelve years they have also been discussed and understood, with their needs carefully considered and actively responded to.
- 3.2. The characteristics of the children who meet the edge of care threshold vary significantly: including both in terms of age and where they are on their journey. To address this, the offer has grown to accommodate services which can be responsive to differing needs. When the threshold for the edge of care is met, robust processes are in place as part of the Children Act, 1989, to secure intervention and permanence for children at the 'edge of care' within the local authority area.
- 3.3. Where children are living in an environment where their safety is compromised to an extent that the child protection plan is no longer sufficient, it is incumbent upon the social worker and team manager to request a legal planning meeting. At this meeting there are various options, including referrals to the following edge of care
  - Family Decision making
  - Multi-Systemic Therapy (MST)
  - Multi Systemic Therapy for Building Stronger Families (MST-BSF)
  - **Functional Family Therapy**
  - Other prevention services within the Youth Support Offer
  - Partnership offers
- 3.4. The legal planning meeting is chaired by a service manager who is advised by a legal representative. Additional options may include both not to engage in preproceedings or to escalate with and issue care proceedings. Following the meeting, the decision is made with social care as to what service can best meet the child's need. Managers from the Family Therapies service provide a critical role is supporting this assessment as teams have particular strengths in different

- 4.1. It takes a village to raise a child. Similarly, it takes a dedicated network to make a difference to the lives of children and young people who are open to children's social care. Family therapies offer therapeutic support to meet the identified issues while bringing families together to ensure robust and ongoing support away from statutory intervention.
- 4.2. The edge of care services specifically referenced within this strategy are:
- Multi Systemic Therapy (MST), a 3 5-month programme targeting children
   aged 11 -17 at risk of custody or care due to behavioural issues.
- MST Building Stronger Families (MST-BSF), a 6 9-month programme targeting families with at least one child aged 6 17at risk of care following one or more episodes of physical abuse and/or neglect.
- Functional Family Therapy for Child Welfare (FFT-CW), a programme of approximately six months duration for any child aged 0 7 where there is a risk of care due to ongoing child welfare needs (except active sexual abuse) where the family isn't eligible for an MST intervention.
- Family Decision Making (FDM) specialist independent service coordinating a personalised community response to prevent family breakdown
  - 4.3. The aim of these programmes is to provide a targeted response to those children most at risk of coming into care with a view to:
  - · reducing looked after episodes
  - reducing the financial cost of these
  - improving outcomes for children, young people and their families, including:
    - keeping families together
    - offering assurance that children are safe
    - reducing adult and child substance abuse
    - reducing offending
    - securing and increasing child attendance in education, employment and training
    - reducing mental health difficulties
    - increasing natural social supports

#### **Multi Systemic Therapy (MST)**

4.4MST is an intensive family- and community-based intervention for children and young people aged 11-17 who are on the edge of care. It is targeted at high-risk families where the young person's behaviour across several systems (home, school, community) is unmanageable within the current capacity of the family and supports parents to develop new strategies to keep their young person safe.

Therapists carry low caseloads to support intensive contact and work with families for up to 20 weeks.

- 4.5MST is firmly embedded within the edge of care offer with referrals screened and approved at a weekly panel. The MST Supervisor attends the Edge of Care Panel every week and on average the service accepts around 6 new referrals a month for suitability screening.
- 4.6 MST focuses on family strengths which has numerous advantages, such as building on strategies the family already know how to use, building feelings of hope, identifying protective factors, decreasing frustration by emphasising problem solving and enhancing parents or carers' confidence.
- 4.7 There is strong evidence to suggest that MST has had a positive and sustained effect on changing participant's behaviour, reducing demands on public services and providing an overall saving on investment.

#### **Multi-Systemic Therapy for Building Stronger Families (MST-BSF)**

- 4.8MST-BSF is an adaptation of MST and designed for families with serious clinical needs who have come to the attention of children's services due to physical abuse and/or neglect. MST-BSF clinicians work on a team of three therapists, a crisis caseworker, a part-time psychiatrist who can treat children and adults, and a fulltime supervisor. Each therapist carries a maximum caseload of four families.
- 4.9 Treatment is provided to all adults and children in the family. Services are provided in the family's home or other convenient places. Extensive safety protocols are geared towards preventing re-abuse and placement of children and the team works to foster a close working relationship between children's services and the family.
- 4.10 When needed, the following empirically based treatments are used: functional analysis of the use of force, family communication and problem solving, Cognitive-Behavioural Therapy (CBT) for anger management and post-traumatic stress disorder (PTSD), clarification of the abuse or neglect and Reinforcement Based Therapy (RBT) for adult substance abuse.
- 4.11 MST BSF offer Reinforcement-Based Treatment (RBT) for drugs and alcohol. It is a therapy approach that helps people reduce substance use by rewarding positive steps like staying sober or attending therapy sessions. When individuals show progress or make healthy choices, they receive incentives or rewards, which encourages them to keep up those behaviours. This method motivates and supports lasting change by focusing on positive reinforcement rather than punishment.

#### Functional Family Therapy - Child Welfare (FFT-CW®)

- 4.12 Functional Family Therapy Child Welfare (FFT-CW®) is an adaptation of Functional Family Therapy (FFT) designed to serve families with children aged 18 or younger. FFT-CW aims to improve child and family outcomes and keep families together by offering a continuum of services tailored to individual family needs. Families receive one of two levels of services based on a preliminary risk assessment. Families can move between levels of services if later assessments indicate that risk factors have changed.
- 4.13 Families assessed as high-risk receive a developmentally adapted FFT intervention with enhanced behavioural and mental health targets delivered in five phases by a trained clinical therapist. The first three phases focus on increasing engagement, building motivation for change, and understanding relational patterns. The next phase focuses on behaviour change and identifying and addressing family needs. The final phase helps families generalise these behaviour changes to their everyday lives and to contexts outside the immediate family.
- 4.14 For families with younger children, programme content is more parent-driven, focusing on building skills for creating a family context in which children can flourish. For families with adolescents, programme content focuses on how problem behaviours can motivate families to engage in change.
- 4.15 Across both levels of services, families are supported by a treatment team that includes the interventionist or therapist as well as a clinical supervisor who provides ongoing supervision and training. Other team members can include recruitment/intake workers and family resource specialists to help with referrals. The treatment team for the high-risk intervention should have plans to access a clinical psychiatrist who can provide as-needed psychiatric assessments, treatment planning, medication management, referrals, and therapy services.

#### **Contingency Management Policy and Protocol**

- 4.16 The FFT service have now received training in Contingency management (CM), which is a highly effective therapeutic intervention for people with problematic drug and alcohol use, which utilises theories of conditioning to reinforce or reward' positive behavioural changes with the aim of achieving abstinence. CM is purely a behavioural intervention but may work alongside external prescribing services.
- 4.17 Contingency management has been introduced to the FFT CW team in Leicester, in response to a growing awareness that over 80% of cases which resulted in a child being removed from parental care featured drug or alcohol use. It will be employed as an addition to the already successful FFT work and be fully integrated into the behaviour change plan.

4.18 Abstinence from problematic drug and alcohol use will always be the goal of any CM intervention, however it needs to be recognised that this achieving consistent abstinence may take some time and there may be lapses or relapses during this process. It is particularly important that no-one advises someone who has become physically dependent on alcohol to stop drinking suddenly, as this can lead to serious withdrawal symptoms, which can in some cases be fatal. Where an individual is assessed to have a healthy relationship with alcohol or cannabis, and its use is not deemed to be posing safeguarding concerns, these substances will not be addressed by the CM intervention.

#### Identification of appropriate cases

- 4.20 Cases where CM will be offered will be identified by the allocated therapist during the initial FFT phase of Motivation. CM may be offered to a anyone in the immediate household of a family who have been referred to FFT CW, where drug and/or alcohol use is assessed to be a contributing factor to the child protection concerns; this can include U18 years olds.
- 4.21 Whilst Social Workers or Independent Chairs can suggest that a therapist considers offering CM, it is the decision of the therapist and the family whether to proceed with this. This decision will be made based on assessment of motivation and likelihood of compliance.

#### Family Decision Making (FDM)

- **4.22** A Family Decision Making Conference is a process led by family members to plan and make decisions for a child who is identified as being at risk. It is a voluntary process that starts with the promise that all relevant family and friends are invited to take part, especially the child or young person, as long as it is safe to do so. Children and young people are normally involved in their own FGC, although sometimes with support from an advocate.
- 4.23 The aim of the FGC is recognition that often a child's best, most loving and consistent support comes from within their own family. We recognise that families can be transitory, they may not have spoken in some time or may have had disagreements and fall outs, but that when it comes for the best interests of the child, most families will put aside these differences. This is fundamental action to supporting families 'where they are at' in line with Family Help.
- **4.24** The philosophy underpinning Family Decision Making Conferencing is that:
  - · Children and young people are paramount to the FGC process
  - The family network is central to the FGC process
  - FGC is family led decision making in partnership with formal systems
  - FGC is a safe, respectful and effective environment for all participants

Private family time is a vital element to FGC process

Families have the right to be involved in decisions that affect their children and that as long as the plan is safe for the child(ren) it should be fully resourced.

I say this as honestly as I can because at first I was very sceptical of how talking to someone everyday could really help me... I didn't make it an easy job for them at times yet she never felt gave up on me. She saw in me what sometimes I felt hard to see in myself, and a lot of the time I didn't even notice how I was being therapised until on reflection later on and I would be like 'ok, I see what she did there'. Of course, there were more tougher subjects and obstacles to overcome, and it took a little longer than we may have first thought but we got there. If anything, it was a little hard to let go of this amazing woman, who will always be such a poignant person in my life and the team behind her who collectively had actually and no doubtingly SAVED MY LIFE, but it was time to go it alone! There is barely a day that goes by that I don't use the skills I learned and hear her voice in my head or ask myself what she would say or do to make me see things clearly but I know the answers now and most of the time I get it right but hey nobody's perfect we make little mistakes and 'we moove'! If you have the opportunity to work with MST give it all you have got and TRUST THE PROCESS. Happy birthday MST may u continue to transform lives from one happy mother and 2 happy children who no longer have any services involved yet still benefit daily from are time working with you!





- 5.1 All family therapy interventions are governed by the Edge of Care Interventions Board. The key aims of the board are to ensure the programmes operate within the purpose and structure for which they were designed and to ensure a collaborative approach towards reducing the number of children who are looked after. The Board, which is independently chaired and made up of senior members of key stakeholders, serves to hold all interventions and their management to account. It meets four times annually, with briefing papers presented quarterly. The board is chaired by the Head of Service for the Prevention Service and is well represented by a range of partners including Social Care, Health, Police and Education.
- 5.2 There is strict oversight of the team's performance and what we refer to as adherence. Adherence includes a range of factors, including the therapist's ability to work across the whole of the child's ecology, the ability to collaborate in a strength-based manner and the ability to create sustainable change for our families.
- 5.3 As the service grows to incorporate the expansion of the FFT model to accommodate children being returned from care, the exiting Edge of Care panel will also house eligible children who can be considered for a return from care to their carers. Such decisions are not taken lightly, recognising the impact of potential trauma and risk of further harm. As such, only children and families who have show clear dedication to persistent contact and close working with the local authority will be considered. The decision to progress with the therapeutic work, timescales and agreement for placement with parents (thus not revoking the care order but allowing the child to share parental responsibility with the local authority while being at home) can be ratified by Head of Service.

#### **Quality Assurance**

- 5.4 Adherence (or client satisfaction) is captured across all five teams via a monthly anonymous interview with family members, generating an adherence score for each therapist. These scores are based on questions designed to ensure that the therapist is being complaint to the relevant model, e.g.: promoting responsibility, strength focused, onus on sustainably. MST and MST BSF teams use a Therapist Adherence Measure (TAM-R) to measure adherence, and FFT-CW use a Family Self-Report (FSR). Leicester continues to be highlighted nationally as a highly adherent service, with a strong reputation for keeping children safely at home.
- 5.5 In 2023/24, 113 TAM-R interviews were conducted across MST and MST BSF teams. The average adherence score across the therapists remains consistent at .81 (adherence is a target of .61), continuing to be above the national average.
- 5.6 87% of all families open to MST and MST BSF were interviewed every month, demonstrating the full range of families working across the service providing feedback, despite levels of engagement in the programme.
- 5.7The Family Self-Report (FSR) is a 7-item inventory completed by every family member a minimum of six times throughout FFT. Each family member completes a feedback form, including every child living within the home. Families score confidence at each of the 5 phases in treatment. It is expected that as treatment progresses there will be an increase in score by at least 1 point per phase. Families score 1 (very bad) to 7 (very good) to the questions. 29 FSR interviews have been conducted, with an average of +2.25 across the quarter. This is above the target of +1 range.
- 5.8 In the year of 2023/24, 29 FSR interviews were conducted, with an average of +2.25 across the quarter. This is above target of +1 range.
- 5.9 In respect of auditing and quality assurance (QA) activity, Family Therapies are included in Local authority audit processes and use a ratified Ofsted framework for assessment. On a monthly basis, managers use an Ofsted-aligned case file audit which is then moderated by a different manager. Any files which are graded as 'Requiring Improvement' or 'Inadequate' are also reviewed by the Head of Service. There is a clear focus on closing the gap between actions from audits and improvements seen.

Emily has changed my life, if it would not have been for Emily, I would have lost everything. Today I am drug free and it's all because of MST Programme and the work of the team. They are brilliant. I would recommend MST programme to all those families who are suffering like me.



## 6 Value for money

- 6.1 Evidence increasingly demonstrates that interventions at an early stage are more likely to lead to improved outcomes for children and their families and reduce demand across the whole "children's system". This is essential for cost effectiveness but also recognises the inherent difficulties in repairing trauma in later years.
- 6.2 Different types of interventions in families are often age related with specific early years or adolescent focused interventions. All should focus on securing of permanency and this has been our approach along with ensuring cost avoidance (where safe and appropriate) with savings arising from young people not entering care. The sustainability in the longer term of outcomes requires more research and generally longer interventions are more suited to a chronic type of persistent neglect.
- 6.3 The cost of Edge of Care interventions varies significantly and should not be compared to one another as they are different approaches for children at different stages. If MST-FFT-FGC is identified as needed, due to the evidence base and ecology of the model, this becomes priority and all other edge of care interventions supporting the family cease. Family Decision Making Conferencing used at any stage when risk of family network is identified as breaking down. It can be used at any stage as an alternative to MST, MST BSF. FFT and MST BSF should only take cases where a decision has been made that they meet the threshold for removal into care.

Intervention	Annual cost	Comments
MST/MST-	£2.1m	The gross savings of this to the Local
BSF/FFT		Authority are £7.5m 245% of the £3,083k
		full year target.
Family Decision	£160k	£100k funded by Supported Families
Making		reserves, ends Mar 25

6.4While the cost of MST-FFT is significantly higher than other edge of care interventions, this service is subject to rigorous adherence and evaluation, evidencing that placement costs avoided are in excess of the cost of the service. Owing to the nature of more specialised placements utilised, Family Therapies

meet with finance regularly to calculate a projected placement (avoided) based on several factors: the risks the child/ren poses or are posed, their behaviours and needs, and placement availability on the day the child/ren is referred. This data is frequently cross checked with social workers and the placement team for accuracy. The average annual placement cost avoided is £84k.

- 6.5 For other programmes such as FGC, these approaches are encouraged by the Department for Education, with the national consensus that programmes such as these reduce the number of children who come into care.
- 6.6 The below represents year on care diversion against target goals and associated savings.

Year	Success to date	Gross Savings from success
2020/21	67%	£3,380k
2020/22	76%	£2,071k
2020/23	80%	£4,642k
2020/24	90%	£7,515k



6.7 The graph detailed shows ongoing and consistent savings. While there is a drop in 2020/22, savings were still made above our investment. This period was impacted by the prevalence of Covid-19. While the service continued, government enforced restrictions meant that critical pieces of work such as family meetings, one to one trauma work and aspects of drug treatment such as urine testing/employment goals were either reduced or not carried out in line with clinical processes. The impact of this simply serves to show that adherence to the models is a significant contributor to its success.

## 7 Impact

- 7.1 In the past financial year (2023/4), 393 families or 734 children were served with an overall success rate of 90% meaning children were able to stay safely at home.
- 7.2 Since the start of the financial year 2024, the number of children diverted from care is 199 which is 106% of the annual target. This represents annualised gross savings (from new families opened in the year) of £7.5m, 245% of the full year saving target of £3.1m.

#### **Stability**

- 7.3 Across the full year (2023/4) teams have worked with 393 families and 734 children within these families. Of all 136 families starting in the year, 90% are still together.
- 7.4 Each child is allocated a projected placement cost avoided figure based on several factors: the risks the child/ren poses or are posed, their behaviours and needs, and placement availability on the day the child/ren is referred. This data is frequently cross checked with social workers and the placement team for accuracy. The average annual placement cost avoided is £84k.
- 7.5 The average time between referral and treatment starting for quarter 4 2024, as an example, was 14 days, which is above target of <10. The 14 days average between referral and start includes a 'sign up and consent' visit before treatment start, so families are contacted and meet the team at least once between referral and start.
- 7.6 In respect of auditing and quality assurance (QA) activity, over the most recent quarter 4, as an example, 613 file audits took place. There were 34 direct

observations of practice. In addition, 85 cases had additional 'deep dive' analysis exploring practice successes and difficulties, these have taken place outside of the usual QA activity. Finally, the teams completed 4 audits against the Ofsted framework, with 1 scoring outstanding and 3 scoring good. This is a tested and robust process, with every case file being independently moderated by a different manager before concluding on a grade. All QAs are graded before and after the 'loop is closed' with actions for completion checked and signed off as achieved before the QA is completed.

#### 8. Growth and plans for reunification

- 8.1 The decisions to place any children in care are made following significant assessments or events so worrying that there will have been no other choice. For many children in these circumstances, care is the safest place for them to grow up and achieve their life goals. For others however, whilst this may have been the right decision at that time, it needs to be acknowledged that people and their circumstances can change. For these cases it is appropriate to consider reunifying children into the care of their family. In addition to improving outcomes for children and families, the process of reunification would free up desperately needed care placements.
- 8.2 Based on analysis of cases to identify potential for reunification, a proposal was made to utilise FFT as a Reunification Programme named **Safe Steps Home**, working with an initial cohort of eight children.
- 8.3 The FFT reunification pilot has now formally concluded. The programme has entered its next phase, progressing with reunification work beyond the pilot period. This approach continues to support children aged 9–15 in complex and high-cost placements, with the aim of safely returning them to family care, where appropriate.
- 8.4 Reunification, when safe and supported, improves life chances and alleviates pressure on the care system. The early results of the pilot were positive. However, the transition into delivery at scale brings challenges. These include increased assessment demands, new decision-making processes, and the continued need for close collaboration across care homes, education, and Independent Reviewing Officers.

8.5 Despite the current staffing pressures particularly the absence of two key posts that are now in recruitment the FFT team is effectively managing the increased workload. This commitment and adaptability are ensuring that reunification work remains safely on track.

Key recommendations from the pilot have and are continuing to be implemented, including:

- Targeting high-cost, complex placements
- Strengthening early identification of reunification opportunities;
- Enhancing multi-agency coordination; expanding therapeutic capacity in a phased manner
- Recruitment of 2 new posts to meet demand

"I don't know what happened that meant we ended up working together, she was my guardian angel'I



- 8.1 Family therapies have clear protocols which underpin strong working relationships with identified partners. This ensures that the therapeutic offer can be met without compromise or difficulty.
- 8.2 Good practice expects that multi agency decision making provides best outcomes for children and families and as such, it is expected that therapeutic staff are involved in all relevant decision making that could have impact on the long-term outcomes. It means ensuring that the various stakeholders involved with any given family are coordinating care, as needed.
- 8.3 Most, if not all referral families to MST, MST BSF and FFT are open to children's social care. While social care has statutory responsibility for visits, family therapies lead delivery for intervention and should have clinical leadership. This leadership role is not intended to replace or remove the responsibilities of statutory social work. It does however provide the framework for the inclusion of therapists in all relevant decision making that could have impact on the long-term client outcomes. It means ensuring that the various stakeholders involved with any given open family are coordinating care, as needed.

#### Substance misuse

8.4 Where substance misuse is identified, it is expected that the MST/FFT-CW teams should have clinical leadership. This leadership role is not intended to replace or remove the responsibilities of statutory agencies or other key workers, in particular

criminal justice work and managing prescribing. It does however provide the framework for the inclusion of MST/FFT-CW in all relevant decision making that could have impact on the long-term client outcomes. It means ensuring that the various stakeholders involved with any given family open to one of the teams are coordinating care, as needed. MST/FFT-CW are governed internally by the Local Authority and externally by MST and FFT Services and the DfE on a weekly, monthly and biannual basis following evidence-based scrutiny processes.

#### Children and Young People's Justice Service (CYPJS)

8.5 Where young people referred are open to Children and Young People Justice Service (CYJPS) MST BSF take referrals where they meet the eligibility criteria. There is no referral form to complete but the team require a rationale for referral and the most recent assessment and report. Once the referral is received, the team will contact the referrer within 48 hours, to advise on eligibility, space and allocation timeframes. If a case is not accepted for treatment, a rationale will be provided, and alternative suggested interventions will be made.

#### **Education welfare**

- 8.6 In cases where families where school attendance is a concern, there will be an introductory meeting with the therapist, Education Welfare Officer and key school staff involved with the child/young person (Special Education Needs Co-Ordinator, staff from alternative provider, learning mentor etc). All relevant professionals will be asked for their desired goals for treatment to ensure the programme is working towards all key agency remits. Regular reviews to take place 4-6 weekly with all professionals and the family, monitoring progress towards goals.
- 8.7 Any safeguarding concerns will be discussed with the Social Worker, the Education Welfare Officer, and the school, or Duty and Advice Service immediately and records of discussions will be logged onto Liquid Logic within 24 hours.

#### **Police**

- 8.8 The MST Supervisor will inform the Safeguarding Partnership Manager of cases open to the MST programme when consent is given by the family to share. The Safeguarding Partnership Manager will also be informed when each family is closed to MST. There will be up to 40 families with specialist markers, highlighting MST involvement on the police system at any given time.
- 8.9MST operates a 24/7 on-call system to provide support to families when crisis occurs. When a family open to MST calls the police, the call taker will be made aware from the specialist marker that the family are open to MST.
- 8.10 Prior to dispatch, police will inform the on-call therapist of the nature of the incident, where a joint decision will be made on the need for immediate police attendance depending on the nature of the incident. The on-call therapist will contact the family and review the incident resulting in the police callout with an attempt to de-escalate with the family over the phone. At each stage, the on-call

therapist will remain in contact with the police officer allocated to the call and will make a joint decision on whether police attendance with or without on-call therapist is still required.

8.10 Family Therapy services will be available to the community and will be available for discussion, support and referral in community centres in line with Family Help.

I was not ready to stop heroin, and I wasn't ready for therapy. I was so scared about what was going to happen, and then all that stuff happened when my son was born and I thought I was going to lose him. Jacquie pushed me, but not forced, and in the right direction. She was absolutely amazing, and didn't feel like therapy. She worked me hard I know, but I trusted her and I'll never forget what she did for me.. She is amazing.



- 9.10 Leicester has an excellent edge of care offer available to support children and young people. Since 2012 the service has been extended to include a comprehensive offer meeting the many and varied needs of children who are at risk of coming into care. The robust nature of our local legal planning and edge of care panels has enabled interventions to be utilised at an earlier point for some children and young people where there is a clear pathway of escalation.
- 9.11 Following referral to any of our services, managers conduct detailed ecological assessments under a well-managed using a robust assessment framework. All teams are well integrated into social care and early help teams; visible and ready to provide support and guidance, even if a referral is not being considered allowing skills and knowledge to be shared across services.
- 9.12 Teams are respected by professionals, the courts, and families alike with teams and therapists receiving excellent feedback as well as praise and recognition in a national scale for their efforts and tenacity.
- 9.13 Outcomes are monitored not just at the end of treatment, but on-going at both 6, 12 and 18 months to ensure that our interventions 'hold'. We are proud of these results, with our sustainability holding at a 90% longitudinal success rate post treatment.
- 9.14 We will expand our edge of care offer with the development of innovations and ensure children and their families are appropriately supported in their communities. There remains volatility in relation to admissions into care and our edge of care offer needs to be flexible and responsive to achieve good outcomes for children and young people, there is some recent evidence to suggest increasing minimisation of this volatility.
- 9.15 Our investments in a good edge of care offer is a moral and financial imperative and current edge of care services are demonstrating value for money and supporting the achievement of safe, happy, healthy and successful outcomes.

# Edge of Care Strategy 2025-2027

Family Therapy Service
Karen Manville and Tiernan Welch

## Introduction

This strategy sets out our understanding of current needs, the availability of provision and our plans for the development of our Edge of Care offer over the next three years. The strategy provides information on the range of approaches and the impact achieved from the services and interventions provided. It outlines how new innovations being developed in Leicester will support a cohort of children and young people as well as covering and addressing the challenges, evidence of impact and value for money.



# Rationale and context

As well as impacting on children's outcomes, looked after children placements put huge financial pressure on local authorities. The cost of these placements can reach £2,125 per day, with an average cost of £230.07 per day, per child. 19% of children in care in Leicester are in the highest cost placements (based on cost >=£1,000 per day).

Leicester City Council is fully committed to supporting a child's right to family life and to support children and young on the edge of care and protect them from harm, a range of services and interventions are provided in Leicester. This reduces the likelihood of someone becoming looked after.



## The strategy covers:

Where children are living in an environment where their safety is compromised to an extent that the child protection plan is no longer sufficient, it is incumbent upon the social worker and team manager to request a legal planning meeting. At this meeting there are various options, including referrals to the following edge of care services:

- Family Group Conferencing
- Multi-Systemic Therapy (MST)
- Multi Systemic Therapy for Building Stronger Families (BSF)
- Functional Family Therapy (including reunification)
- Other prevention services within the Youth Support Offer Partnership

- The edge of care services specifically referenced within this strategy are:
- a) Multi Systemic Therapy (MST), a 3 5-month programme targeting children aged 11 -17 at risk of custody or care due to behavioural issues.
- b) MST: Building Stronger Families (BSF) a 6 9-month programme targeting families with at least one child aged 6 17at risk of care following one or more episodes of physical abuse and/or neglect.
- c) Functional Family Therapy for Child Welfare (FFT-CW), a programme of approximately six months duration for any child aged 0 7 where there is a risk of care due to ongoing child welfare needs (except active sexual abuse) where the family isn't eligible for an MST intervention.
- ) Family Decision Making (FDC) specialist independent service coordinating a personalised community response to prevent family breakdown.

## Governance

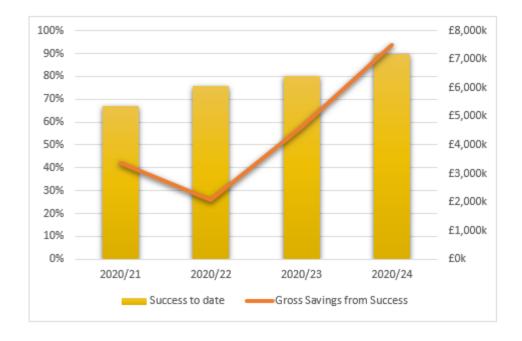
All family therapy interventions are governed by the Family Therapies Board. The key aims of the board are to ensure the programmes operate within the purpose and structure for which they were designed and to ensure a collaborative approach towards reducing the number of children who are looked after. The Board, which is independently chaired and made up of senior members of key stakeholders, serves to hold all interventions and their management to account. It meets four times annually, with briefing papers presented quarterly. The board is chaired by the Head of Service for the Prevention Service and is well represented by a range of partners including Social Care, Health, Police and Education.



## Value for money

- Evidence increasingly demonstrates that interventions at an early stage are more likely to lead to improved outcomes for children and their families and reduce demand across the whole "children's system". This is essential for cost effectiveness but also recognises the inherent difficulties in repairing trauma in later years.
- The cost of Edge of Care interventions varies significantly and should not be compared to one another as they are different approaches for children at different stages. If MST-FFT-FGC is identified as needed, due to the evidence base and ecology of the model, this becomes priority and all other edge of care interventions supporting the family cease. Family Decision making used at any stage when risk of family network is identified as breaking down. It can be used at any stage as an alternative to MST, MST BSF. FFT and MST BSF should only take cases where a decision has been made that they meet the threshold for removal into care.

Year	Success to date	Gross Savings from success
2020/21	67%	£3,380k
2020/22	76%	£2,071k
2020/23	80%	£4,642k
2020/24	90%	£7,515k





### **Impact**

- Each child is allocated a projected placement cost avoided figure based on several factors: the risks the child/ren poses or are posed, their behaviours and needs, and placement availability on the day the child/ren is referred. This data is frequently cross checked with social workers and the placement team for accuracy. The average annual placement cost avoided is £84k
- In the past financial year (2023/4), 393 families or 734 children were served with an overall success rate of 90% meaning children were able to stay safely at home.
- Since the start of the financial year 2024, the number of children diverted from care is 199 which is 106% of the annual target. This represents annualised gross savings (from new families opened in the year) of £7.5m, 245% of the full year saving target of £3.1m.

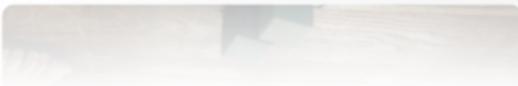
## Joint working

Family therapies have clear protocols which underpin strong working relationships with identified partners. This ensures that the therapeutic offer can be met without compromise or difficulty.

Good practice expects that multi agency decision making provides best outcomes for children and families and as such, it is expected that therapeutic staff are involved in all relevant decision making that could have impact on the long-term outcomes. It means ensuring that the various stakeholders involved with any given family are coordinating care, as needed.

Polices are in place with: Social care, police, education, education welfare, Turning Point, CYPJS





# Growth and reunification

- The decisions to place any children in care are made following significant assessments or events so worrying that there will have been no other choice. For many children in these circumstances, care is the safest place for them to grow up and achieve their life goals. For others however, whilst this may have been the right decision at that time, it needs to be acknowledged that people and their circumstances can change. For these cases it is appropriate to consider reunifying children into the care of their family. In addition to improving outcomes for children and families, the process of reunification would free up desperately needed care placements.
- Based on analysis of cases to identify potential for reunification, a proposal has been made to utilise FFT as a Reunification Programme, working with an initial cohort of eight children. Based on analysis of cases to identify potential for reunification, a proposal was made to utilise FFT as a Reunification Programme named Safe Steps Home, working with an initial cohort of eight children. The pilot concluded successfully with recruitment in place for further staff to accommodate demand.



## **Outcomes**

Outcomes are monitored not just at the end of treatment, but ongoing at both 6, 12 and 18 months to ensure that our interventions 'hold'. We are proud of these results, with our sustainability holding at a 90% longitudinal success rate post treatment.

We will expand our edge of care offer with the development of innovations and ensure children and their families are appropriately supported in their communities. There remains volatility in relation to admissions into care and our edge of care offer needs to be flexible and responsive to achieve good outcomes for children and young people, there is some recent evidence to suggest increasing minimisation of this volatility.

Our investments in a good edge of care offer is a moral and financial imperative and current edge of care services are demonstrating value for money and supporting the achievement of safe, happy, healthy and successful outcomes.



## Thank you



## **Youth Justice Plan**

**CYPE Scrutiny Commission** 

Date of meeting: 23rd September 2025

Lead director/officer: Damian Elcock

Karen Manville

#### **Useful information**

■ Ward(s) affected: all

■ Report author: Karen Manville, Head of Service

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■ Report version number: V3

#### 1. Summary

- To provide a summary of the five-year Youth Justice Plan 2025-30 (refreshed annually) highlighting strategic and operational priorities. This will be received at Board level and across the partnership and proceed through due diligence processes onto Full Council.
- This executive summary/briefing addresses the statutory Youth Justice Plan for 2025-2030 and provides an opportunity to direct any comments to the Head of Service for Prevention Services.
- This is the first year of the five-year plan which will help shape the direction of the service over the coming years.

#### 2. Recommendation(s) to scrutiny:

CYPE Scrutiny Commission are invited to:

- To consider, and note, the achievements from 2024/5
- To consider, and agree, the strategic priorities for 2025-30 and tactical priorities that will be reviewed annually.

#### 3. Detailed report

#### 1. Summary

- 3.1 It is the duty of each local authority after consultation with partners to formulate and implement an annual youth justice plan setting out:
- o how youth justice services in their area are to be provided and funded; and
- o how the Children and Young Peoples Justice Service will be composed and funded; how it will operate, and what functions it will carry out.
- 3.2 The purpose of this executive summary report is to present the plan for consideration and to seek agreement that it should proceed to Full Council for formal adoption. (the full plan has been provided)

- 3.3 The statutory youth justice plan is approved by the Leicester Youth Justice Management Board and must then be submitted to the national Youth Justice Board (YJB) by 30 June 2025. It must then be annually reviewed once formal approval has been granted from Full Council. As the Youth Justice Board require a draft plan by the 30<sup>th of</sup> June there is agreement that a draft is submitted prior to being formally ratified through political processes. This has always been the case and is due to the YJ grant procedures. The Youth Justice Board will ordinarily provide feedback by the end of July as part of the process. This year, the YJB have not provided amended guidance or a new template.
- 3.4 The document is the youth justice partnership's main statement of purpose and sets out its proposals to prevent offending by children and young people. The plan shows not only what the Children and Young People's Justice Service (CYPJS) will deliver as a service, but how strategic links with other supporting initiatives will be developed and maintained.
- 3.5 This plan supports a range of associated partnership strategies including the Leicester Early Help Strategy, Police and Crime Plan, Violence Reduction Strategy and strategic needs assessment, the Community Safety Partnership Plan and delivery plans within the Social Care, Early Help and Education department. The Youth Justice Plan is supported by a detailed Partnership Plan and Operational Delivery Plan overseen by the Head of Service for Prevention Services, who reports progress to the Leicester Youth Justice Management Board
- 3.6 As a statutory regulated service, youth offending services are normally inspected every three years by Her Majesty's Inspectorate of Probation (HMIP). However, over the past two years the inspectorate has been in consultation with stakeholders and Youth Justice Services to redesign their HMIP Youth Justice Inspection Framework. The new inspection framework went live in the "spring" 2025 and Leicester was the third Youth Justice service to be inspected under the new framework and received the alert late February 2025 with the pre field work starting immediately and throughout March 2025. The report was published in June 2025 and all recommendations embedded in the YJ Plan ad partnership planning.
- 3.7 The service is also monitored by The Youth Justice Board which introduced a new monitoring framework in 2023. It provides judgments against a range of criteria with 4 quadrants applied for each YOT across the country. Leicester is currently placed in quadrant 3 due to challenges around its First Time Entrants performance but the HOS has established a working group and working hard to ensure consistent improvements are made in this area. The Youth Justice Board and the framework is currently being reviewed. There has been significant progress on this performance indicator.
- 3.8 The Youth Justice Plan is required to address the areas of performance, structure and governance, resources, value for money, partnership arrangements and risks to future delivery. The plan considers local performance issues, lessons from inspections, together with learning from any serious incidents, Joint Area Inspections and other inspections that cover elements of youth justice.
- 3.9 The Youth Justice Management Board met in March 2025 to plan and consider strategic priorities for the coming five years and tactical priorities that will be

refreshed on an annual basis. This approach is tried and tested and a positive way to help shape the report and ensure the voice of the partnership is embedded within the plan.

- 3.10 Key priorities for the Leicester Youth Justice Management Board for 2025-30 include the following:
- To develop a comprehensive improvement plan in response to HMIP findings in March/April 2025 and ensure we deliver on all 8 recommendations cited above.
- Having a sophisticated data picture enabling us to predict those children most likely to be frequent / serious offenders so we can engage at the earliest opportunity.
- Partnership making sure we utilise the right people in the right way to enhance our data sets across the partnership to build a picture of the city to target resources. To challenge ourselves as to whether we have always linked the right people into these discussions
- Having a clear way of approaching families who are reluctant to engage in early intervention even when we can identify significant risk. We have developed an opt out approach which is increasing engagement.
- Having a much better understanding of perpetrator, victim and group/"organisation" of exploitation in the local context so we can better plan services
- o Increasing routes to employment for young people approaching adulthood
- To design a smaller executive board with a wider partnership delivery group and key working groups with the right membership at the right level. To ensure partners actively bring and take away from the board
- Redesigning the board to ensure voice is the golden thread within the board's priorities to shape delivery models.
- To design a methodology for approaching learning and decision making such as Human Learning Systems.
- To ensure the board has core principles or "provocations" to challenge our performance and decisions.
- To develop a sophisticated approach to taking learning from comparable areas to continue to strive for excellence.
- o To enhance resources where needed with a commitment to exploring SALT, Victim and Probation resources as a minimum.

We are committed to delivering the very best services to our children, families, networks, victims of Youth Crime and to our partners and communities.

3.11 The plan covers our key tactical priorities using our detailed performance report to align our priorities and next steps for ongoing improvement. We have a wide range of key performance indicators which we report through to the Youth Justice Management Board on a quarterly basis. We provide spotlight session at the board where we do deep dives into a selection of KPI's where there is evidence of excellent practice or areas of concern that require a more detailed examination. Our core KPI's and summary of actions:

#### 4 First Time Entrants (FTE)

- 4.1 The plan identifies this as a key priority for this cohort of children including the ongoing development of the Early Intervention Team as well as the Youth Support Offer. (Detailed information and performance can be found in section 9 of the Youth Justice Plan and appendix 4).
- 4.2 Due to challenges with this KPI over the past 12 months we have established a working group, chaired by the HOS with a clear action plan to address our performance. Its pleasing to see improvements are being made but this will continue to remain in place until we see sustained improvements.

- 4.3 The city has separated from the county to develop its own joint decision-making panel to concentrate on city children and diverting them from formal justice routes where possible. The Head of Service has recently observed the panel identifying excellent practice as has the YJB and other partners.
- 4.4 The service has a well-established Early Intervention Team with outstanding successes impacting on FTE rates. We have an "opt out" approach to our diversionary wok and take up rates for our children is excellent. We are currently working on ensuring a more targeted approach and advertising the pathway across the partnership specifically police and schools. The service is proud of the work undertaken in this space and used it as a spotlight session with the inspectorate in March 2025.

#### 5 Re-offending

- 5.1 The plan identifies the key performance indicators for this priority. It evidences impact to date and work that needs to be undertaken to continue to strive to reduce the frequency and seriousness of reoffending at all tiers within the youth justice system. (Detailed information and data can be found in section 9 of the Youth Justice Plan and appendix 4).
- 5.2 The service has developed a range of programmes to meet the trends within reoffending data such as an increase in Motor offences. A new group work programme has been developed to work specifically with young people in this offence category called the brake project and will assist with diverting children from formal youth justice routes.
- 5.3 We use a trauma informed approach with all our children to explore behaviours and experiences that impact a child's life, the risks to themselves, others and increase potential to offend.
- 5.4 We recognise our performance is slightly higher than regional and national figures and a working group will be established to work specifically on a clear action plan to reduce reoffending rates and ensure the right packages of intervention are put in place for our children to keep them form harm and our communities and victims safe.

#### 6 Custody and constructive resettlement

6.1 The plan identifies the key successes and challenges with this key performance indicator. Over the years the service has successfully reduced the number of remands and custodial sentences. However, the past 12 months the service has seen a spike on custodial sentences due to some high-profile serious offending often by children not known to any statutory services. The plan identifies key actions that are required to continue to ensure custody is only used where appropriate and all other options have been fully explored. The right packages are provided to children to reduce remand and custodial sentences as appropriate. (Section 9 of the plan provides a detailed reflection of work to date on this priority and what is required looking forward over the next year in appendix 4 performance report).

- 6.2 Close partnership working has enabled the service to fully support children who receive custodial sentences or held on remand. Our resettlement offer has been strengthened to ensure we work on key priorities with our children from the moment they enter a custodial establishment to have a robust plan in place for their release. All necessary referrals such as accommodation referrals are made at least three months prior to a child's release. Officers work on a resettlement plan as soon as a child enters custody.
- 6.3 We recognise that we can increase our contact with our children on remand and serving custodial sentences and we will review this to ensure we maximise contact and use a range of communication channels to further strengthen our relationship with children in custody.
- 7 Other identified tactical priorities (Section 9 onwards in full plan)
  - **7.1** The plan addresses other key priorities as part of the additional KPIs for the service and partnership highlighting why they have been selected and what the hopes are by identifying and delivering upon them.
  - o suitable accommodation
  - education, training, and employment (ETE)
  - o special educational needs and disabilities/additional learning needs
  - o mental health care and emotional wellbeing
  - substance misuse
  - o out-of-court disposals
  - o links to wider services
  - o management board attendance
  - o serious violence
  - o victims
    - 7.2 A full breakdown of actions can be found in section 9 of the Youth Justice plan including additional priorities that don't form part of the suite of KPI's including
  - How we hear the voice of our stakeholders
  - Understanding and responding to serious youth violence and the exploitation of our children
  - o Continuing to strengthen culturally responsive services which promote equality, reduce discrimination, and enable our children, caregivers, victims, and staff to thrive
  - Workforce development

#### 8 Risks (section 13)

**8.1** This is undoubtedly a challenging but exciting time for us in Leicester and this plan has set out our ambitions and priorities for 2025-30. We know that the scale of change within Children's Services over the coming year will be

- unprecedented with the development of the Family Help approach, and whilst this brings with it significant opportunities, it also presents us with challenges.
- **8.2** CYPJS was inspected by HMIP (under the new inspection framework) in March 2025 and the report was published on 24<sup>th</sup> June 2025 with an overall judgment of requiring improvement and identifying 8 recommendations. The HOS has scoped out the mandatory improvement plan which was submitted to HMIP on the 11<sup>th</sup> July 2025 and positively responded to by HMIP the following day. The improvement plan will be embedded into the partnership and service delivery plans to ensure the improvements are driven forward and scrutinised regularly at partnership board level. HMIP and the YJB may request regular updates on our progress and will revisit the 8 recommendations when they next inspect the service.
- **8.3** We also continue to operate and deliver within a challenging financial climate in Leicester, a climate which may in time have an impact on our ability to realise some of our ambitious plans.
- 8.4 The commissioning of a new Case Management system and its implementation during the HMIP inspection has caused significant challenges to the workforce. However, it is hoped that the new system will be a better system once embedded and operating effectively. It is not yet clear how effective the reporting functions are. The transformation project team that supported the implementation of the new system required substantial resources, both in terms of financial investment and staff time at a time that the service was preparing for HMIP to arrive. The system was not fully operational upon their arrival which caused a risk to the successful outcome of the inspection and raising anxieties across the workforce. HMIP had bene made aware of this prior to their arrival.
- 8.5 Estates is also a key area of focus for us as we plan of the implementation of the Family Help model. A project board has been established which will map out neighbourhood resources, based on robust data sets, in anticipation of the development of the Family Help vision.
- 8.6 Leicester has had a challenging 12/18 months with an increase in Serious Youth Violence and subsequent increase in both remands and custodial sentencing, with a significant number of children not known to statutory services. The challenges around serious youth violence crosscuts with concerns regarding exploitation which often has its root causes in exclusion, poverty, abuse, and neglect amongst other things. This plan has clearly set out that we cannot tackle offending in isolation and has articulated our intention to work differently, creatively and with relationships at the heart of what we do. However, managing and containing risk through external controls is also a critical element to our ability to safeguard victims and protect the public and one that as a partnership we remain committed to.
- 9 Innovation and evidenced based practice (Section 12 of the full plan.)
  - 9.1 Child first and the voice of the child. Ongoing work to capture the voice of children: Children wrote the first child plan in 2023/4, and we are committed to our children writing their yearly plan to help us ensure they are central to

the development of the service. We have ensured a qualitative approach to capturing verbatim thoughts, feelings and experiences of children. We have ensured we are engaging, interactive and finding modern ways of capturing children's voices, for example through Podcasts. We have strengthened our child first approach across the partnership and HMIP were highly complementary of our child first approach and embedded participation principles. They saw that children co-produce their plans consistently and children were clear that they felt heard and listened to.

- 9.2 The development of a dedicated SEND Panel which has been highly regarded by HMIP. This work has supported the CYPJS being awarded the SEND Youth Justice Charter Mark, as well as the aim to receive the SEND leaders award by the end of 2025.
- 9.3 Investing to save, as part of supporting the preventative agenda, has been a priority for CYPJS over the past year and will continue to do so throughout 2025/6. Examples to date:
- 9.4 The Early Interventions Team was independently evaluated, and the independent evaluation report of the Early Intervention Team was published. The findings demonstrate the significant impact the team are having on children and families across Leicester City. It highlights the importance of the relationship between staff and children as a key element in reducing further offending.
- 9.5 The Phoenix Programme, formally Focused Deterrence, launched in July 2023, CYPJS has been a significant partner in the design and delivery of the programme and will provide intensive support to children identified through the programme from Early Intervention and statutory areas of the service. This has now been extended until December 2025 with slight variations on the criteria being considered.
- 9.6 Dynamic management of all Habitual Knife Crime Carriers including all children not just those open to CYPJS. Each child is reviewed monthly, packages of prevention, partnership involvement and sustainability planning are reviewed, all recommendations made are shared with partners and professional support is provided by CYPJS if requested. The data is tracked on a quarterly basis and updated through the performance report to the board.
- 9.7 The REACH Team: Following a successful bid in partnership with the Violence Reduction Network and Leicestershire County Council, we developed a programme that reaches out to children who are at risk of exclusion or who have been excluded from education. The intervention adopts an innovative contextual prevention approach, spanning schools and the immediate community vicinity to proactively identify and engage children at 'teachable' moments in 'reachable' spaces thus recognising that schoolbased behavioural events are precursors to exclusion and criminal activity. Working alongside schools identified for high exclusion rates, children are identified for intervention using clear eligibility criteria. The overall aim of the intervention is to help children gain the skills and knowledge to improve their life chances and avoid further exclusion from school and becoming engaged in serious youth violence. The delivery was independently evaluated by Sheffield Hallam University, whereby it was highly regarded with strong evidence of impact. Although the funding from YEF has now ceased the partnership agreed that due to its success it would be funded for a further year through a prevention grant. Work is now required to consider how to sustain the model and ensure it Is still targeting the right schools as well as

- any growth in mentors to support children within the school to reduce the potential of.
- 9.8 The service has embedded a robust offer to children who have experienced Adverse Childhood Trauma (ACE) in their lives and how to support children with a history of trauma. Staff have been fully trained, and regular case formulations take place to enhance the direct work with our children. This was highly commended by HMIP
- 9.9 Focussed deep dives through task and finish groups, exploring disproportionality and unconscious bias within the CYPJS cohort in relation to ethnicity and children who are looked after. All staff have received training, and the recommendations are routinely revisited and presented to the management board for ongoing development and sharing of best practice. The service has embedded the identification and support in regard to diversity needs into all areas of practice and this was highly commended by HMIP.
- 9.10 Leicester City Violent Crime Joint Action Group (JAG) and youth JAGs. Working in partnership the JAGs have been redesigned across the city to provide greater collaboration and integrated working and ensure Youth JAGs are seen as a key to this. There are two Youth JAGs that have now been established and the service is encouraging children to particate and have a say in what Is needed to keep their them and their communities safe.
- 9.11 Working alongside the Community Cohesion Policing Team in the East at the beginning of 2024 due to ASB near Spinney Hill Park to help support community engagement and reduce anti-social behaviour within the area.
- 9.12 Attending community events at the Mosque, local BEAT surgeries, patch walks and undertaken consultation with young people in Evington, new parks and Beaumont leys in partnership with police, to gain children and young people's voice on development of a new youth centre in the area
- 9.13 Working closely with grassroots organisations throughout Leicester, i.e Team Hub community centre in New Parks, to build relationships with estates on the West
- 9.14 Placing ourselves in community venues, support alongside Youth Service colleagues to engage children at risk of offending, ASB and CCE

#### 4. Financial, legal, equalities, climate emergency and other implications

#### 4.1 Financial Implications

The 25/26 Gross budget is £2.5m, this includes funding of £0.9m of Youth Justice grant.

Signed: Paresh Radia 13.06.2025.

Dated:13.06.2025

#### 4.2 Legal Implications

no implications from an employment and education law perspective.

Hayley McDade Senior Solicitor

For City Barrister and Head of Standards

Local authority partnerships have a statutory duty to submit a youth justice plan relating to their provision of youth justice services; Section 40 of the Crime and Disorder Act 1998 sets out the youth justice partnership's responsibilities in producing a plan. It states that it is the duty of each local authority, in consultation with the partner agencies, to formulate and implement an annual youth justice plan, setting out how YJSs in their area are to be provided and funded, how they will operate, and what functions will be carried out.

There are no direct legal implications from a Social Care and Safeguarding perspective as a result of this report.

Amy Owen-Davis, Principal Solicitor, Childcare, Social Care and Safeguarding.

**Signed**: Amy Owen-Davis, Principal Solicitor, Childcare, Social Care and Safeguarding.

Dated: 13.06.2025

#### 4.3 Equalities Implications

Equality implications:

Under the Equality Act 2010, public authorities have a Public Sector Equality Duty (PSED) which means that, in carrying out their functions, they have a statutory duty to pay due regard to the need to eliminate unlawful discrimination, harassment and victimisation, to advance equality of opportunity between people who share a protected characteristic and those who don't and to foster good relations between people who share a protected characteristic and those who don't.

Protected Characteristics under the Equality Act 2010 are age, disability, gender reassignment, marriage and civil partnership, pregnancy and maternity, race, religion or belief, sex, sexual orientation.

The report sets out a summary of the five-year statutory Leicester City Youth Justice Plan 2025-30 which is refreshed annually, highlighting strategic and operational priorities. From the perspective of meeting our Public Sector Equality Duty aims, the Youth Justice Plan sets

out priority activities that seek to promote equality of opportunity for children and young people by reducing the adverse impacts they are likely to experience through involvement with the criminal justice system; and by achieving these outcomes and enabling children and young people to take part in city and community life and contribute to improved good relations between different groups of people.

In terms of the protected characteristic of race, the Leicester Youth Justice Management Board will continue to implement the recommendations from the task and finish group findings, by carrying out focussed deep dives exploring disproportionality of ethnicity and children looked after. In terms of the protected characteristic of disability, the service will continue to respond to the needs of children and young people with EHCPs, those who have identified learning and/or disabilities and neuro diversity needs as well as strengthening its approach to children presenting with Speech Language and Communication Needs and development of the SEND panel will help to ensure this takes place.

Disproportionality within CYPJS processes and practice affecting young people's experience and outcomes will remain a priority and key to partnership working and monitoring of these will include at least include sex, race, disability, religion and belief. Diversity needs identification and support has been embedded across the service and staff have received training. The Early Intervention offer is ensuring that we are reaching more girls and this work should continue. Overall, the service is continuing to encourage a partnership wide child first approach to strategy, planning and delivery, which should continue to improve outcomes for children and young people.

The proposed Youth Justice Plan 2025-30 offers a high-level overview of the planned work for 2025-30 along with annual reviews of agree priorities. However, there are a number of strands of work where equalities, and particularly the PSED, will need to be an on-going consideration, such as HMIP Inspection findings from March/April 2025 and delivery of all 8 recommendations, the work of the Case Management and Diversity Panel, work of the SEND Panel and partnership working. It may be the case that an Equality Impact Assessment is required for some strands of work such as reviewing policies and services, where changes will directly impact on young people in the service, and advice can be sought from the Equalities Team on this as required.

Signed:Sukhi Dated:14.06.2025

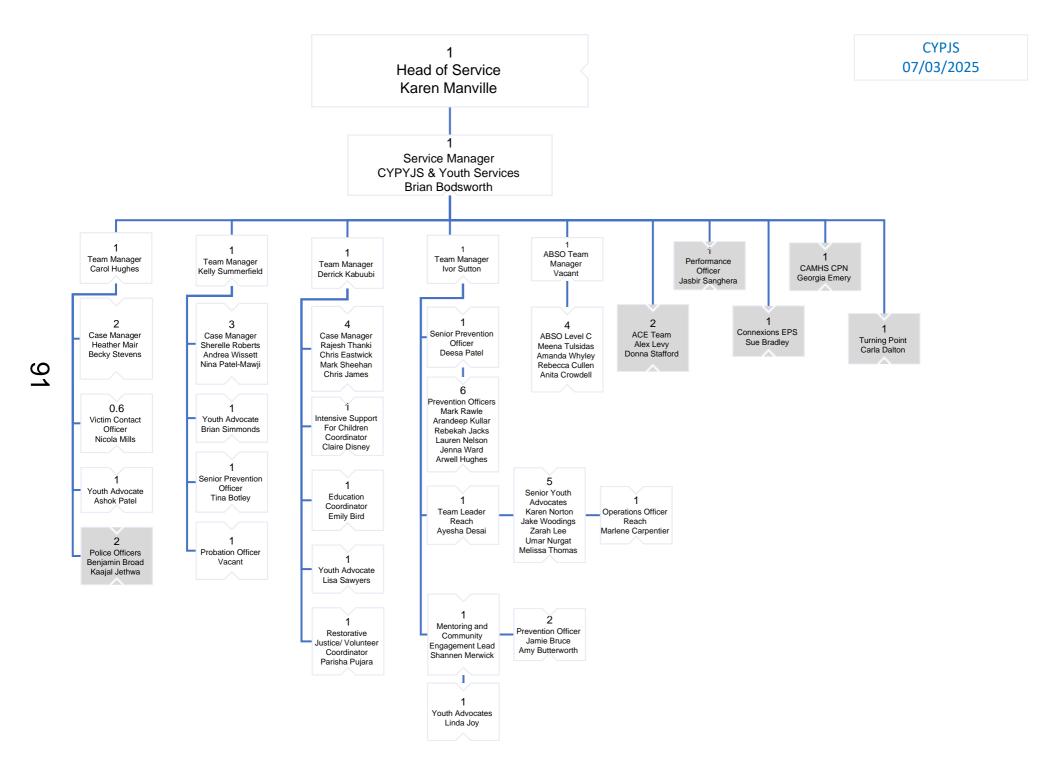
#### 4.4 Climate Emergency Implications

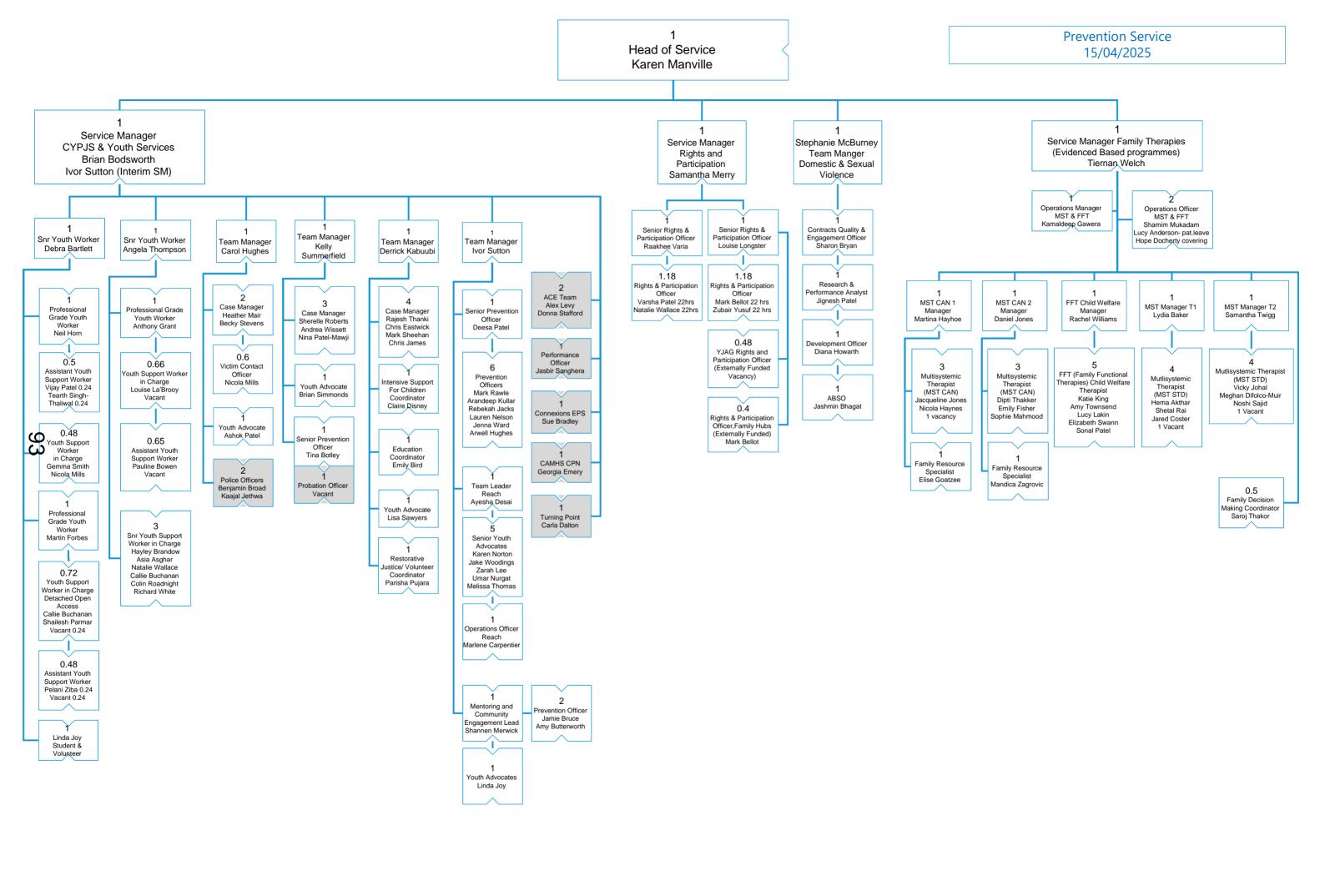
There are no significant climate emergency implications arising from this report.

Signed: Duncan Bell MIEMA, CEnv | Change Manager (Climate Emergency)

Dated:13.06.2025

## 4.5 Other Implications Signed: Dated:







#### Terms of Reference 2024-25

#### 1. Background

- 1.1 Youth Offending Services (YOS's) were established nationally in 2000. Performance and standards of YOS's nationally are overseen by the Youth Justice Board (YJB). The YJB stipulates that each YOS must be overseen by a management/partnership board. The YJB provide guidance in relation to effective governance by Boards, and the key points can be summarised as follows:
  - a) the management board should provide strategic direction with the aim of preventing offending by children and young people.
  - b) all statutory funding partners, the local authority, police, national probation service, and health, must be represented on the board.
  - c) members of the management board should be empowered with the capacity to make strategic decisions.
  - d) the Board should determine how appropriate youth justice services are provided and funded.
  - e) the Board should oversee the formulation of a draft youth justice plan.
- 1.2 The guidance also suggests that in discharging functions relating to youth offending, the board may benefit from considering broader membership. The guidance suggests additional optional partners which could be on an ad hoc basis when required as follows;
  - a) youth courts
  - b) court legal advisors
  - c) community safety managers
  - d) housing providers
  - e) voluntary sector representatives
  - f) local secure establishment
  - g) elected members

#### 2. Purpose of the board

2.1 To provide an inter-agency management forum to oversee and monitor the work of the Leicester Children and Young People's Justice Service to meet the statutory principal aim of preventing offending and reoffending by children and young people.

#### 3. The objectives and responsibilities of the Board

- 3.1 The objectives of the board are as follows:
- a) to take overall management responsibility for the establishment and development of the Leicester Children and Young People's Justice Service (CYPJS)
- b) to provide the formal reporting line and receive regular reports on the progress and work of the CYPJS
- c) to take all delegated management decisions not within the authority of the Head of Service for The Prevention Service.
- d) to provide the necessary budget overview, including the review of agency contributions.
- e) to provide a forum for resolution of inter-agency issues.
- f) to receive and approve the draft Youth Justice Plan prior to final approval by elected members and

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#### Terms of Reference 2024-25

- members of the partnership authorities. To help shape this plan in partnership.
- g) to monitor and review the progress made in achieving the objectives and performance targets set out in the annual Youth Justice Plan. To provide high support and high challenge.
- through the Head of Service for The Prevention Service and the Service Manager for CYPJS, that the service is prepared for inspection by the HMIP (HM Inspectorate of Probation) and that all required information by the Board are met promptly.
- to ensure that the work of the CYPJS makes the necessary links with the Leicester, Leicestershire and Rutland Criminal Justice Board, as well as the key strategic links required by the Crime and Disorder Act 1998, particularly those in relation to the wider crime and disorder reduction strategies and specific youth crime reduction strategies.

#### 4. The Method of Operation

- 4.1 The board will meet on a quarterly basis, holding four meetings a year. The agenda will consist of the following regular items:
  - a) Performance (quantitative and qualitative)
  - b) Finance
  - c) Partnership updates
  - d) Exception reporting for Critical Learning Reviews.
  - e) Thematic deep dives spot lights
- 4.2 One week prior to each Management Board , the relevant documents will be circulated to all members. The reporting schedules are attached as appendix A. As appropriate, reports will progress through other relevant governance arrangements.
- 4.3 Meetings are scheduled to last up to 3 hours with minutes taken. Minutes will be circulated to members within 10 working days of the meeting. Administration support will be provided by the Head of Service.
- 4.4 Management board members are responsible for attending the meeting or sending a nominated representative on their behalf.
- 4.5 Management Board members are responsible for ensuring key information is shared with their agencies.

#### The Membership of the Board

Group Members	Role	Contact
Laurence Jones (Chair)	Strategic Director: Social Care and Education Leicester City Council	laurence.jones@leicester.gov.uk
Damian Elcock	Divisional Director: Social Care and Early Help Leicester City Council	damian.elcock@leicester.gov.uk
Karen Manville	Head of Service: Prevention Service Leicester City Council	Karen.manville@leicester.gov.uk



#### Terms of Reference 2024-25

Brian Bodsworth	Service Manager – Youth and Youth Justice Service Leicester City Council	Brian.bodsworth@leicester.gov.uk	
Jessica Nichols	Head of Service SEND support Education Leicester City Council	jessica.nichols@leicester.gov.uk	
Sophie Maltby	Director of Education	Sophie.maltby@leicester.gov.uk	
Grace Strong	Strategic Director	grace.strong@leics.pcc.police.uk	
	Violence Reduction Network		
Wendy Hope	Head of Quality & Safety	wendy.hope@nhs.net	
	LLR Integrated Care Board		
Andrea Knowles	Senior Operations Manager Turning Point, Leicester	andrea.knowles@turning-point.co.uk	
Henry Henderson	Detective Chief Inspector Leicestershire Police	henry.henderson@leicestershire.pnn.police.uk	
Bob Bearne	Head of Leicester, Leicestershire & Rutland Probation Service  Deputy chair of the board	Bob.bearne1@justice.gov.uk	
Kayleigh Lord	Clinical Team Leader, Young Peoples Team , Child and Adolescent Mental Health Service	Kayleigh.lord@nhs.net	
Mamps Gill Tracy Green	Head of I & E Midlands Youth Justice Board	gill.mamps@yjb.gsi.gov.uk tracy.green@yjb.gsi.gov.uk	
Laura French	Public Health Engagement, Partnerships, Inequities & Communities (EPIC) Team Leicester City Council	Laura.french@leicester.gov.uk	
Jon Rosenthal	(Representing Courts)	jon.rosenthal.jp@ejudiciary.net	

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#### Terms of Reference 2024-25

	Business Support Officer, LCC	
Team Managers On rota basis for performance and QA	Carol.hughes  Derrick Kabuubi	Carol.hughes@leicester.gov.uk  Derrick.kabuubi@leicester.gov.uk
section and Participation/coproduction	Ivor Sutton	Ivor.sutton@leicester.gov.uk Kelly.summerfield@leicester.gov.uk
agenda items.	Kelly Summerfield	
	Trong Gammenta	

These Terms of Reference will be reviewed annually, next review date September 2025.

#### Appendix A: Regular Reporting schedules

Board meeting	Report	Author	Period covered
End of Jan 2025	CYPJS Performance & Quality Assurance Report	CYPJS: Service Manager	
	Finance Report	Accountant	
	Strategic Partnership Delivery Plan	Head of Service & LYJMB leads	
	Developing the Youth Justice 5-year Plan	Heads of Service and partnership	
March 2025	Workshop on the youth justice plan and management board reflection time	Head of Service and partners	
End of April 2025	CYPJS Performance & Quality Assurance Report	CYPJS: Service Manager	
	Finance Report	Accountant	
	Strategic Partnership Delivery Plan and Youth Justice Plan	Head of Service & LYJMB leads	
End of September 2025	CYPJS Performance & Quality Assurance Report	CYPJS: Service Manager	
	Finance Report	Accountant	
	Strategic Partnership Delivery Plan	Head of Service & LYJMB leads	

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### Leicester Youth Justice Management Board

#### Terms of Reference 2024-25

Late	CYPJS Performance & Quality	CYPJS: Service Manager	
December	Assurance Report		
2025 - Start	Finance Report	Accountant	
of Jan 2026	Strategic Partnership Delivery Plan	Head of Service & LYJMB leads	

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# <u>Leicester Youth Justice Management Board</u> <u>Membership May 2025 –</u>

## <u>Chair of the Board –Laurence Jones Strategic Director, Social Care & Education, Leicester City Council</u>



Laurence has responsibility for the full range of adult social care, children's social care and education services. He re-joined Leicester City Council in February 2024 having worked in Nottinghamshire for the last 15 years as a director of children's social care leading on residential care, strategic safeguarding, early years and commissions amongst other areas. He was formerly Head of Youth Justice in Nottinghamshire and chaired the Nottinghamshire Youth Justice Partnership Board and Safeguarding Assurance and Improvement Group in recent years.

#### <u>Damian Elcock - Director of Children's Social Care and Community Safety</u>



- Damian has worked in Childrens Services across the East Midlands and East England for the last 25 years starting as a Children's Home Manager and then front-line social worker.
- Damian has recently joined Leicester after 4 years as Service Director for Children Social Care and Improvement, and was also the lead director for Youth Justice and Contextual Safeguarding.
- He also has extensive experience as an Improvement Lead supporting inadequate Children's Services departments through the Sector Led Improvement programme.

#### **Karen Manville Head of Service Prevention and Safer Communities**



Karen was appointed as Head of Service for Early Help and Prevention in April 2021, which was further expanded to incorporate Community safety in October 2022 and renamed as Head of Service for Prevention and Safer Communities. Prior to that she was the Service Manager for the City Youth Offending Service from 2009. She has worked in youth justice since 2001 when she left teaching, after 7 years, to work with young people that are at risk or entrenched in offending. She led on developing one of the first alternative to custody programmes, the Intensive Supervision and Surveillance Programme, in the country and sat on the Youth Justice Board working group for this flagship programme and helped support the roll out nationally.

Karen oversees all services within Prevention and Safer Communities with a key aim to prevent escalation of behaviours that can lead children, young people and vulnerable adults to become more entrenched in services and provide holistic support to the whole family utilising the range of offers available both within our range of services and externally across the partnership.

She has been a member of the board for many years since taking up the service manager position in 2009.

#### **Henry Henderson - Detective Chief Inspector**



Henry is currently a Detective Chief Inspector, working in the Prevention Directorate for Leicestershire Police. Henry has been in role since September 2023. Henry has been in Leicestershire Police since 2005 working across a number of areas of policing, including domestic abuse and child abuse investigation.

Henry is currently the Police lead for the Phoenix Programme, a multi-agency team responsible for delivering focused deterrence within a cohort of violent offenders in LLR. Henry will soon be taking responsibility for IOM and diversion and youth justice.

#### **Grace Strong - Director of the Violence Reduction Network**



Grace has worked in Probation Services for over 20 years in a wide range of settings as a practitioner, team manager and senior leader. This includes leading a range of multi-agency projects including the Prolific and Priority Offender Management Scheme, Integrated Offender Management, a non-statutory Resettlement Team, the Young Adult Project (YAP!) and an Accommodation partnership. Grace is currently seconded into the Office for the Police and Crime Commissioner (OPCC) as the Director for the local Violence Reduction Network (VRN) which is one of 18 Home Office funded Units across England and Wales. Grace has a particular interest in developmental maturity and the transition into adulthood and trauma-informed practice. Grace is working closely with Youth Justice services in relation to prevention and early intervention and in preparing for the new Serious Violence legal duty.

### <u>Siobhan Peters - Director of Strategy, Partnerships & Commissioning – OPCC</u> <u>LLR</u>



Siobhan has worked in the public and voluntary sector for over 25 years. Originally in Early Years, managing a team in one of the original Sure Start pilot centres in Fleetwood which led into working in substance misuse and criminal justice.

Siobhan has managed and commissioned across all elements of substance misuse including CYP and Youth Justice services across the northwest, managed the Pan-Cheshire Children Missing From Home Service, and multiple integrated clinical treatment services as a Director of Services for the North West and West including Greater Manchester, Liverpool, Sefton, Lancashire, Stoke, Halton, Shropshire and Herefordshire. She has worked as a National Director for Armed Forces Services and for Women in Treatment. Her work in criminal justice includes working with IOM, Youth Justice, Prolific Offending Teams, Custody Suite Services and leading a multi-disciplinary, health, police and criminal justice team for Liverpool City Council in planning, implementing and delivering the Home Offices Project ADDER before moving to Leicester in 2023 to work as Director of Strategy, Commissioning and Partnerships for Leicester, Leicestershire and Rutland OPCC.

### <u>Sarah Hancock-Smith, Senior Operations Manager for Turning Point Substance</u> <u>Misuse Services</u>



Sarah is responsible for the substance misuse services across LLR which includes the substance misuse services for Young People including linked to CYPJS. She has managed substance misuse services in LLR for the last 13 years and prior to that was a Probation Officer. The deputy who will attend in her absence is Andrea Knowles, Operations Manager

#### **Andrea Knowles. Turning Point Operations Manager**



Andrea Has worked in Drug and alcohol treatment services in Leicester since 2001. During this time Andrea has had a number of roles including Drug Practitioner, Women's lead, and Manager. Andrea has worked as an Operations Manager for Turning Point since 2016 and is the Registered CQC manager and Designated safeguarding officer.

As Operations Manager Andrea manages all of the operational teams in Leicester City, including City Drugs, City Alcohol, YP/YA team, and Rough Sleepers team. As CQC Registered Manager Andrea is also responsible for ensuring the quality of the operational and clinical service provided and safeguarding all of the staff and service users attached to the team. Andrea works with partners across statutory and voluntary sectors to promote the importance of drug and alcohol treatment interventions and to support best outcomes for all.

#### **Sophie Maltby. Principle Education Officer**



Sophie has been a teacher for 25 years. In schools She worked as Senior Leader, Behaviour Lead and SENCo. Worked for SEND Support since 2006, initially in Social Emotional and Mental Health (SEMH) Team, supporting CYP at risk of exclusion from schools as well as whole school development work and training around SEMH needs. Additionally, worked as SENCO and Teacher in Charge of the Primary PRU. For the last 10 years Sophie has undertaken several leadership roles within SEND Support. Currently Head of SEND Support with responsibility for all of the specialist teaching teams and specialist nursery, alongside strategic SEND responsibilities.

Head of SEND Support Service, managing 6 specialist teaching teams and a specialist nursery, working from 0-25 in schools, colleges, early years settings and homes. She is also responsible for the development of Designated Specialist Provisions (DSPs) the SEND Capital programme and reviewing SEND funding in both mainstream and special schools. Sophie works very closely with the Principal Education Officer to support schools and various strategic projects such as inclusion, SEND, mental health work and trauma Informed practice.

<u>Kayleigh Lord - the Clinical Team Leader for the Child and Adolescent Mental</u>
<u>Health Service (CAMHS) Young Peoples Team</u>



Kayleigh Lord is the Clinical Team Leader for the Child and Adolescent Mental Health Service (CAMHS) Young Peoples Team, we are a team who specialise in working with young people aged 0-18 years who are looked after, adopted, youth offending, homeless or unaccompanied asylum seeking young people in LLR.

By profession she is a mental health nurse and have worked within LPT for the past 10 years. She is passionate about young people's mental health and improving services and access to services.

Within YPT they have the Adverse Childhood Experiences Project and a specialist CAMHS nurse embedded within our team who work closely with Youth Justice.





Laura French is a Consultant in Public Health at Leicester City Council where her portfolio includes Children and Young People's Public Health, Sexual Health, NHS Health Checks and Health in All Policies/Wider Determinants. She also has an interest in communicable disease control and outbreak management. She has previously worked with children and young people as a peer educator and later team leader for a sexual health charity, before qualifying as a doctor in 2009. After a period working abroad in emergency medicine and trauma, she trained in obstetrics and gynaecology for some years before changing to train in public health medicine in the East Midlands. She is passionate about tackling health inequalities and working to improve the health and wellbeing of the people of Leicester.

### <u>Bob Bearne - Head of Leicester, Leicestershire & Rutland Probation Delivery Unit</u> (deputy Chair of the Board)



Worked in the Probation Service since 1985, initially as a residential worker. Qualified as a Probation Officer in 1988 and have worked across most Probation settings as a practitioner and manager

The Probation Service is a statutory partner of the Board, a financial contributor and has staff seconded into the Youth Service. As well as general oversight and governance of the Youth Service, Bob has a particular role to play around Transition to adult criminal justice services. He also Chair the LLR Strategic Offender Management and MAPPA Board which has many priorities closely aligned to that of the Youth Justice Services and the HOS of EH and P sits on this board.

Sam Merry – Rights and Participation Service Manager, Leicester City Council



Sam manages the Rights and Participation Service for Leicester City Council. She is a proud, professionally qualified youth worker with 25 years experience in Local Authority Children and Young Peoples services. Twenty three years with Leicester City and two at Leicestershire County Council. Previously she managed the open access and street based youth service offer in the City and then moved into the County as a team manager in the Youth and Justice service before returning to the City in 2022.

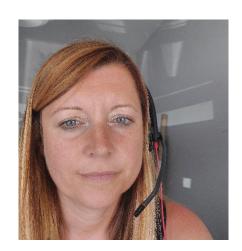
Her current role sits within the children's social care and education division, under the Prevention Service. She has a strategic responsibility for ensuring the workforce are skilled up to embed meaningful participation and that children, young people and families are not just given a voice, but also have an influence over decisions that are made about them, their lives, the services they receive and the City they live in.

### <u>Brian Bodsworth – Service Manager for Youth and Children and Young Peoples</u> Justice Service



Brian qualified as a Youth and Community worker in the mid 1990's and for the remainder of the decade worked in a secure homes and custodial establishments for young people. In 1998 He joined the newly launched Youth Offending Service in Northamptonshire as a seconded Youth and Community worker and was responsible for establishing group and community programmes to prevent offending. For ten years from 2002 to 2012, Brian was the prevention manager for the Northamptonshire Youth Offending service, working with various teams to develop and deliver a range of preventative initiatives. In 2012 He took up a leadership role to steer the roll out of the Troubled Families and Early Help agenda. Whilst this was not a total departure from working with adolescents, He became involved in the leadership of Children Centres and early years development. He became the Early Help Service Manager in Leicester City in 2016, since then He has had various responsibilities including the delivery of the Troubled Families programme, Children Centres, Family Support and the Youth Service. In March 2021 He was given the opportunity to become the service manager for the Children and Young People Justice Service and joined the Board.

#### Jessica Nicholls. Head of Service- SEND Support



Jessica has been a teacher for 20 years. During this time, she has worked and a teacher and assistant educational psychologist. Jessica began working for SEND Support in 2007, initially in Social Emotional and Mental Health (SEMH) Team, supporting CYP at risk of exclusion from schools as well as whole school development work and training around SEMH needs. Additionally, she taught at the Primary PRU. For the last 7 years Jessica has undertaken several leadership roles within SEND Support. Currently Head of SEND Support with responsibility for all of the specialist teaching teams and specialist nursery, alongside strategic SEND responsibilities.

Head of SEND Support Service, managing 6 specialist teaching teams and a specialist nursery, working from 0-25 in schools, colleges, early years settings and homes. She is also responsible for the development of Designated Specialist Provisions (DSPs) reviewing SEND funding in both mainstream and special schools. Jessica works very closely with the Principal Education Officer to support schools and various strategic projects such as inclusion, SEND, mental health work and trauma Informed practice.

Paul Kiggell

Justice Solutions Director – Catch22



As Justice Solutions Director for Catch22, Paul's role is to maximise the quality and depth of delivery for the charity's portfolio of Justice services, whilst also providing a strong link to Business Development strategies and pipeline.

Paul draws on over twenty years' experience within Criminal Justice. Prior to joining Catch22, Paul worked as an Operational Manager at Leicester City Youth Offending Service, having started out as a volunteer then a frontline practitioner.

Paul first joined Catch22 in 2015 to head up their flagship Victim Service in Leicester, Leicestershire and Rutland, before going on to lead Catch22's Victim Service portfolio as this successfully expanded.

Following this, Paul helped lead on the roll out of Catch22's Commissioned Rehabilitative Services. He was then responsible for leading 8 of our Personal Wellbeing Contracts across the South West, South Central and West Mercia, providing rehabilitative wellbeing support to adult males on Probation and in Prison.

Catch22 now delivers Victim Services in multiple regions including Leicester, Leicestershire & Rutland, Greater Manchester and London. As part of Catch22's Justice Senior Leadership Team, Paul brings insight from this experience to provide a victim's perspective to the Youth Justice Management Board.

Mamps Gill YJB Head of Innovation and Engagement (Midlands)



Mamps is the Head of Region in the Midlands region for the Youth Justice Board. Her role involves oversight of the youth justice system in the Midlands region, this includes performance improvement and sharing effective and innovative practice in youth justice delivery, and contributes to improved outcomes for children, families and communities. As a Board Member, She not only represents the YJB but also shares feedback from other local and regional meetings She attends, which include the East Midlands Local Criminal Justice Board.

Tracy Green

Invited - YJB representative on the board



I am the East Midlands oversight manager for the YJB, I provide advice, support and challenge to the 8 youth justice services across the East Midlands area. I am also currently leading on the development of the new Prevention and Diversion assessment tool, and the associated guidance and training that will accompany the tool.

Previously I have been an HMIP assistant inspector and lead inspector, completing inspections on youth justice services as part of the HMIP and JTAI inspection programmes.

I was a Probation officer and a team manager at Leicestershire youth justice service, where I led on restorative justice, out-of-court disposals, training, volunteers, as well as line and case management.

I have also been a probation officer in court teams, custodial estate and community teams

#### **Derrick Kabuubi – Team Manager**



Derrick has been a Team Manager since 2010. Derrick is responsible for day-to-day operational leadership for his team which includes supervision of case managers as well as holding the portfolio areas for Education and Intensive Support For Children Programme. Derrick's key responsibility is to ensure that our services are delivered in line with effective practice and youth justice standards for children, young people, and families. Prior to this role, he worked as a Court officer at the service for 4 years.

Derrick has also worked in several capacities with children and families as a qualified professional grade youth worker. This has included detached youth work, community cohesion, open access, targeted youth support, as well as Education welfare officer in Peterborough and London over the last 25 years.





Carol is a qualified Social Worker and has been with Children and Young People's Justice Service since 2000 when she became one of the fist volunteers supporting children subject to Police Final Warnings. She commenced her Social Work studies in 2002, whilst completing sessional work for CYPJS, and became a qualified Youth Justice Officer towards the end of 2005. Carol has been a Team Manager for approximately 8 yearsnd has had the opportunity to join the HM Inspectorate of Probation (HMIP) team as a Local Assessor inspecting other Youth Justice Services on two

occasions. Carol currently leads on the Out of Court Disposal Panel alongside County Youth Justice and Police colleagues. This is an area in which she thoroughly enjoys and remains passionate about embedding a 'child first approach' whilst balancing public protection.

#### **Kelly Summerfield - Team Manager**



Kelly has been a Team manager since 2013 and is responsible for daily operational leadership. This involves the line management of case managers, youth advocates and Groupwork co-ordinator. Kelly joined CYPJS on secondment as a newly qualified Probation Officer in 2004. Prior to joining the leadership team, Kelly worked as a Court Officer, Deter Young offenders (DYO) co-ordinator and case manager.

**CASE MANAGERS** 

#### **Chris James- Youth Justice Case Manager**



Chris started off as a youth worker before qualifying as a secondary PE teacher. He taught in the secure sector for 5 years progressing to the assistant headteacher, before managing the education in a cluster of children's homes. This led him to his current role, which involves assessing, planning and adopting a coordinating approach, to delivering the intervention to children and young people and families involved in the criminal justice system

#### **Chris Eastwick - Youth Justice Case Manager**



Chris Eastwick is a Case Manager working within the Children and Young Peoples Justice service and has worked there for the past 13 years. I work directly with children and young people who are subject to Court orders and Out of Court disposals both in the community and in custody, looking to reduce their reoffending and support them to make positive changes. Chris's background is within criminal law having served as a police officer and a legal representative. He is passionate about supporting young people and families. Chris is currently undertaking an Apprenticeship Social work Degree within his current role as a Case Manager.

#### **Rajesh Thanki - Youth Justice Case Manager**



I have been working for Leicester City Children's and Young People's Justice Service (CYPJS) as an assistant Youth Offending Service officer with responsibility for low-level case management. In 2004 I took up the additional responsibility of being a Reparation coordinator which included setting up Reparation Placement and recruiting volunteers. In 2007, I was selected and sponsored by Leicester City Council to undertake the 3 years Social Work Degree. Since 2010 I have been a case manager with key responsibilities in include Case Management, Court Officer Role including Duty support which entails bail and remand.

Prior to myself working for YOS in 2002, my career began as an apprentice Painter and decorator with Leicester City and then becoming a qualified playworker for 10 years. I have also worked as an NVQ level 3 youth worker and coached football for the local community running 3 teams at UEFA level B stage. I have also worked as a community worker within Leicester City.

**Andrea Wissett – Youth Justice Case Manager** 



Hello, my name is Andrea Wissett, I started out in my career in criminal justice when I worked for Leicestershire and Rutland Probation Service in October 2002. I qualified as a Probation Officer in July 2006 and worked with people whose offending was linked to their problematic alcohol and illicit drug use, for a period of 5 and a half years. I was always interested in working with young people and was successful in gaining a secondment with Leicester City Youth Offending Service (as it was called then) in May 2012. Fortunately, I was able to continue in my role working with young people when I was successful in gaining full-time employment with the YOS in August 2016. I continue to feel very passionate about the work I do in supporting children and young people to make positive changes to their lives and to reach their full potential.

#### **Sherelle Roberts - Youth Justice Case Manager**



Sherelle has been with our service for just over 12 years, 5 years and currently a case manager and previous to that she was a youth advocate. Sherelle is from a performing arts background having graduated with a BA(hons) in Performance at the University of East London in 2008. Whilst

in London Sherelle did various work placements in secondary schools delivering acting and dance workshops for young people. She then continued with further education once the opportunity for a position as case manager was available, at De Montfort University for a post graduate qualification in Youth and Community Development. Previous to this Sherelle worked for the secondary behaviour support service supporting young people with a range of SEN and behaviour difficulties, who had been excluded from mainstream education.





Nina has been a Case Manager since 2021 and is responsible for managing Young People on Statutory and Non-Statutory Orders. This involves completing assessments, writing court reports and overseeing young people on Orders through the delivery of interventions. Nina qualified as a social worker in 2017 with experience of Child Protection for Leicester City Council. Prior to joining CYPJS, Nina's experience includes working within areas of substance misuse, mental health and careers advice. Outside of work, Nina enjoys baking and cooking.

**Becky Stevens - Youth Justice Case Manager** 



I began my career working with young people with social, emotional and behavioural difficulties who had been excluded from mainstream school, both as a teaching assistant and key worker in alternative provisions. In 2015 I graduated from De Montfort University with a BA (hons) in Youth and Community Work. Due to my interest working with young people I further volunteered overseas and as a youth mentor for Leicestershire Youth Justice Service. I have been working within the Criminal Justice System since 2018 as a Liaison & Diversion Youth Worker across Leicester Police Custody Suites. This experience included supporting young people with mental health difficulties and those at risk of further offending. I further continued my education in 2021 and completed the Effective Practice Certificate in Youth Justice. This knowledge allowed me to progress within my career and in November 2022 I was successful in being appointed as a case manager within Leicester Children and Young People's Justice Service. I thoroughly enjoy this role and I am committed to working together to achieve better outcomes for young people.

**Heather Mair - Youth Justice Case Manager** 



Heather completed the Youth and Community HND in June 1998 and subsequently has had various roles including a Homelessness Officer, Probation Relief Duty Officer, Independent Monitor for Leicestershire County Councils Childrens Homes, Independent Monitoring Board Member at the former HMYOI Glen Parva Support and as a Project Worker within Women's Aid. Heather joined Children and Young People's Justice Service in 2004 as a Parenting Co-ordinator before going over to the Education Dept as an Education Welfare Officer in 2019. She was so passionate about her time with CYJPS that she returned in September 2021 to start her role as a Case Manager role. Heather has great energy and drive who brings a wealth of experience and knowledge, always going that extra mile to support children and their family with on-going multi-agency working.

#### **Mark Sheehan - Youth Justice Case Manager**

Mark has worked for the service since 2004. Mark joined the team as the group coordinator but later moved on to working as a parent support worker prior to becoming a case manager. Mark is a qualified youth Worker having gained experience in the following fields: Sports Coach, Youth work, Play (adventure playgrounds), drug counselling and drug rehabilitation.

#### <u>Claire Disney – Intensive Support For Children coordinator</u>

I have been working as Intensive Support For Children (ISFC) for the last 14 years. The position facilitates multi-agency management and supervision of young people who enter the Criminal Justice System, assessed as high risk of harm or offending. This involves building trusting relationships as well as delivering intervention for those children who are more likely to re-offend as well as cause harm to the community. I also sit on a range of forums including the Exploitation and Missing Hub, JAG which provides an opportunity to share concerns about associations with children at risk of serious youth violence, and other safeguarding issues with other partners as well as with the wider service. As part of my role, I work alongside other statutory and voluntary services under the Phoenix Programme and Integrated Offender Management Programme. Prior to my current role, I worked as a Prison officer within a juvenile establishment and then went on to manage the Drugs Intervention Programme.

#### **PC Ben Broad- Police Officer**



I have been with the service since January 2022. My role as a police officer is to exchange information and intelligence with the children and young people's service and Leicestershire police. I also sit on the Out of Court Disposal Panel meeting as well as have direct involvement with delivering Out of Court Disposals. I am also responsible for delivering interventions to children as part of the Intensive Support for Children programme. I joined Leicestershire Police in 2006 and have predominantly throughout my career focused on serving local communities around East Leicester with the last two and half years focusing specifically on knife crime and young people's awareness around this area. I am looking forward to working within the service and the positive impact this will have on children and families.

#### **PC Kaajal Jethwa -Police Officer**

I joined Leicestershire Police in 2014. I have extensive experience as a frontline Response Officer and as a Dedicated Neighbourhood Officer. I joined the service in April 2022. In my current role as a Police Officer, I share vital intelligence with the Children and Young People Justice Service and Leicestershire Police. Within my role I take ownership for preparing and delivering the Out of Court panel. In addition to this, I am also responsible for updating weekly intelligent logs. I also deliver interventions to children, as part of the Intensive Support for Children programme.



Lisa joined the Department back in 1989 as a Residential Social worker. Then in 2006 became an Assistant YOS officer for the Youth Offending Service and then as an Advocate for the CYPJS.



**Brian Simmonds- Advocate** 

"I have been working within Youth and community development for over 30 years. I have been working at Children and young people justice service as a youth advocate for over 20 years."

#### **Ashok Patel- Advocate**



After taking a break after leaving formal school and trying to find work I eventually decided to go back to college attain my 'A 'levels and take up a Degree in 'Sport Science' at Liverpool Polytechnic now fondly know as Liverpool Sir John Moors University. I left the institute with a BCS Degree 2:2 qualification and eventually found myself gaining employment with Leicester City Council as a Youth and play coordinator in 1993. Since then I have had varying roles as a after school sessional worker, a detached street based worker and worked on and coordinated a number of Playschemes for 8 – 14 year olds. I became deputy and then Manager of West End Neighbourhood centre from 1998 until I ended up at the Leicester city Youth offending service in 2004. I have been here ever since having worked in a number of roles namely Assistant YOS officer, Reparation Coordinator and finally what I am currently employed as is an 'Youth Advocate'

#### Parisha Pujara- Referral Order Co-ordinator



Parisha is a qualified Social Worker. She joined Children and Young People's Justice Service and has had various roles. Parisha is currently the Restorative Justice and Volunteer Coordinator. She loves the variety of her role as also gets the opportunity to work with loads of different people all with the same aim to support young people in making a positive change in their life and refrain from crime. She has led on the Summer Arts Project for the past three years, which is art-based programme for young people with the aim of them accessing education, training and employment (ETE) opportunities. The programme has been successful each year with all young people successfully completing the programme, achieving Awards and either being in ETE or taking those next

steps. Parisha is passionate, energetic and a committed individual who is always seeking a challenge.



#### Nicola/ Nikki Mills - Victim Officer

Nicola is new to the role of Victim Contact Officer having previously worked with the Community Resolution and Prevention team as a Prevention Officer since January 2020. Prior to this Nicola worked with the National Citizen Service (NCS) as an Area Coordinator, leading the summer 2019 programme for Barrow in Furness, Cumbria, engaging, uniting, and empowering young people. Designed specifically for 16 and 17-year olds, the NCS experience gives young people a clearer idea of what they want for their future, whilst building confidence to go out and achieve their dreams. Before this Nicola worked with the Youth Offending Service in Barrow in Furness as a Case Manager and prior to this Nicola was a Police Officer, with 10 years' experience working with Leicestershire Constabulary and the Metropolitan Police in London. Nicola completed an initial training programme in Youth Work studies in 2006 when working as a volunteer Youth Worker and has also worked abroad on volunteer projects with young people.

Nicola's primary role as Victim contact officer is to

- Support victims of youth crime
- Complete victim impact statements
- Work with the Restorative Justice and Volunteer Coordinator to ensure victims' needs and reparation are a key part of intervention work
- Support Case Managers with victim awareness interventions through direct delivery and supporting with resources/session plans
- Plan and deliver victim awareness and RJ group sessions with the RJ and Volunteer Coordinator
- Plan and facilitate Restorative Justice, including conferencing

**Emily Bird / Education Coordinator** 

I am currently the Education Co-ordinator at Leicester City Children and Young People's Justice Service, working with both a targeted and multiagency approach, to enable the children of statutory school age to reach their full potential and meet their educational aspirations.

I am a qualified Youth Work and Community Development worker, having previously been a youth worker within a Local authority and a Charitable organisation, before moving into education and working within the Virtual School Team and Special Educational Services within the Leicester City Council.

#### **EARLY INTERVENTION TEAM**





Ivor has 20 years' experience working with young people within youth justice and children's social care. He established the Early Intervention team in 2019, to identify and divert young people away from the criminal justice system. Prior to this he was Team Manager of the Multisystemic Therapy team within children's social care, working with families, and young people at risk of care or custody. Ivor qualified in Youth and Community Development in 2012 and prior to this worked at Leicester City Youth Offending Service as a Senior Advocate for the Intensive Supervision and Surveillance Team, working with young people at risk of custody.

Deesa has 15 years' experience people and adults within SEN/behaviour schools) and the Early Intervention Team as 2020 and became a Senior to this she was working as an Facilitator for the Reducing Within that role, Deesa



working with children, young nurseries, schools (including probation service. She joined a Prevention Officer in January Prevention Officer in 2024. Prior Accredited Programmes Reoffending Partnership Ltd. delivered accredited

programmes to service users to support lifestyle changes and rehabilitate individuals. Deesa's qualifications vary from a BSc (Hons) in Psychology, BTEC in Children's Care, Learning and Development and a Certificate in supporting learning who are Deaf/Blind (Multi-sensory impaired (MSI).

#### **Mark Rawle – Prevention Officer**



Mark is an ex professional footballer that joined the youth service originally back in 2010 after retiring from the game. He worked with the looked after young people as a football coach and then in youth clubs as a youth worker for a number of years, then alongside that he joined the Youth offending service and worked as a Youth advocate. Mark gained wealth of experience working with and supporting a variety of young people and their families. Joint working with a host of other agencies has been an integral part of the role in the pursuit of achieving the best possible outcomes for the young people and their families.

At the beginning of 2020, Mark joined the Community Resolution and Prevention team as a Prevention officer. "A different role to advocacy, I'm enjoying it and it's very rewarding and has given me a different angle on the cases that I work with. I consider myself very lucky to be working in such amazing and enthusiastic team."

#### **Tina Botley- Senior Prevention Officer**

C

Tina Joined Leicester City Council as a 2020 and is now a Senior Prevention Programme. Prior to this she spent Police as a Police Officer. Tina spent Prevention Officer in January
Officer within the Phoenix
nearly 30 years with Lincolnshire
the second half of her Police

Career working in Public Protection and worked initially as a Domestic Violence Officer working with High Risk DV Victims prior to being a Detective Constable within Child and Adult Protection and also specialising on the Child Sexual Exploitation Team. Tina also worked as the Police Officer on the Youth Offending Team and managed the Local Lincolnshire Police Cadets for 12 years looking after the development and welfare of young people. Additionally, Tina was a Force Trainer and advisory for Equality and Race Relations.

#### **Arandeep Kullar- Prevention Officer**



Arandeep started her position as a Youth Advocate after graduating from the University of Birmingham with a degree in Social Policy and Criminology in 2019. Arandeep has gained theoretical knowledge around Youth Justice and the Criminal Justice System but has also applied her skills whilst undertaking placements and voluntary opportunities within West Midlands Police. In December 2021, Arandeep became a Prevention Officer, undertaking new skills and opportunities, including assessment and report writing. Arandeep is also a Participation Champion, following the Lundy Model approach to transform how our service promotes young people and families' voice.

#### **Rebekah Jacks- Prevention Officer**



Rebekah joined the team in January of this year, changing career after 14 years as a police officer. On completing her Human Services degree in Criminal Justice in 2004, she worked within the hospital school at the Leicester Royal Infirmary with sick children on the wards and children and young people in the day school who had been unable to sustain mainstream education, before moving into the criminal justice sector as an Officer Support Grade at HMP Whatton. She then qualified as a police officer and after 2 years as a response officer in Nottingham moved to Essex where after a further few years 'on the beat', joined the Domestic abuse safeguarding team. She developed her passion for partnership working as a seconded officer in the Multi Agency Safeguarding Hub (MASH) with Children's Social Care. That experience and the focus on safeguarding children, led her to take up her current role of direct work with vulnerable young people.

#### **Lauren Nelson – Prevention Officer**



Lauren joined the team in March in 2023. Throughout her education, Lauren took part in many extracurricular experiences and voluntary roles that equipped her with the opportunity to interact with and support young people — whether this be their personal life, with their vulnerabilities or in their education. Therefore, after completing her degree in Criminology and Psychology in 2021, she ventured further into the world of academia and became an Academic Support Officer for university students.

After being in this role for 2 years, Lauren desired to work in a role that used her degree more directly – which is what led her to join our team earlier this year.

#### **Arwel Hughes- Prevention Officer**



Arwel Hughes has worked within the education and youth system for 4 years, since graduating in 2019. Arwel graduated with a Sport Coaching and Human Science degree from Liverpool Hope University.

Arwel started his journey after university as a teacher in an alternative provision, as well as delivering detached youth work for disadvantaged children and young people in Leicestershire. Throughout the years Arwel has always played rugby for his local team, school and university and is also a level 2 boxing coach.

His passion towards youth work and helping others has continued as he is now a youth worker for the Reach Team

#### **REACH TEAM**





Ayesha has over 20 years of experience working within the education and youth justice arenas. Graduating in 2000 and armed with a degree in Psychology and English Literature, Ayesha embarked on her journey to try and make a difference to the lives of vulnerable, disadvantaged children and young people of Leicester City.

As the years progressed so did her passion for justice, inclusion, and equality in education for all those she met. She has worked in various frontline and managerial roles within education, supporting children and young people who were at risk of school exclusion or those who had found themselves permanently excluded. For the last 16 years, Ayesha established herself as the

Pre-16 Education Coordinator for the Children and Young People's Justice Service, ensuring the rights to an appropriate, suitable and meaningful education for all the children and young people who were known to the CYPJS.

She has recently been appointed as the Team Manager for The Reach Project, a new pilot project sitting within Early Intervention & Prevention which provides intensive, responsive, and contextually tailored mentoring support to young people who are at risk of school exclusion.

#### **Karen Norton – Youth Worker**



Karen has worked as a volunteer youth group leader for 10 years since moving to the UK from the USA in 2011. Karen has directed camps for secondary school aged groups during the summer school holidays in Herefordshire, as well as leading afterschool youth groups in Leicester.

Karen worked in her previous role as a cover supervisor in Leicestershire for 4 years before accepting her new role as a Youth Worker for The Reach Team

# <u>Jake Woodings – Youth Worker</u>



Jake joined the Reach Team in February 2023. Prior to this Jake worked as a Residential Support Worker in a private-owned residential home, supporting vulnerable children and young people who came into the care of the Local Authority. He also worked for the NHS during the pandemic. Jake is an extremely talented graffiti artist and has worked alongside and collaborated with creative organizations such as Graffwerks and UK New Artists.

Jake is also an Arts Award Ambassador, supporting children and young people to enjoy the arts and develop as artists and arts leaders.

At the age of 18, Jake, alongside two other friends, was commissioned to design a 40ft mural at the Beaumont Leys Speedway Circuit – which can still be viewed there today. And if you fancy a cocktail at the end of a long day, Jake has also worked as a professional mixologist.

**Zarah Lee – Youth Worker** 



Zarah graduated in Youth and Community Development in November 2021. Zarah has worked with Children and Young people for 6 years and is now a Youth Worker for The Reach Team. Her role involves supporting young people who are at risk of school exclusion.

Prior to this, she was an Assistant Youth Support Worker for the Youth Service. Her role involved assisting in open access and detached youth work sessions to provide opportunities to young people using youth work methods and activities.

After, Zarah worked as Senior Youth Worker on the Safer Routes Project, working with young people identified through the Early Help Pathway.

Zarah then moved to join the Children and Young People's Justice Service as a Youth Advocate, working with young offenders and encouraging them to take part in constructive activities.



**Umar Nurgat – Youth Worker** 

Umar Graduated with a first-class degree in youth work and community development in 2022, with an additional achievement of coming top of the class. Umar has been working in the youth work sector for the past 5 years, having worked in different placements and settings such as; faith based youth work, summer camps, and support work for young people in semi-independent living.

Before working for the REACH team, Umar worked in an alternative education provision which provided practical skills and courses for young people.

# Leicester CYPJS

# Summary of Participation practice and children's feedback from September 2024 – February 2025.

# Introduction:

Incorporating the voice of the child into youth justice practice, policy, and processes, is essential for creating a fair and effective system that provides children with meaningful opportunities to participate in shaping pro-social futures. Our service recognises that working collaboratively with children in the development of assessments, plans and delivering interventions, is paramount to effective outcomes and ensuring the safety of children and communities. This approach also promotes 'Child First' principles, specifically the 'collaboration with children' tenet. Collating and using the child's voice further reflects the principles of the Lundy Model. Most of our staff have been trained in the in the application of the Lundy model and our policies and processes are increasingly underpinned by this model.

This summary identifies current CYPJS practice and initiatives that promote participation and meaningful engagement of children at each phase of service delivery, from assessment, through to implementation and Delivery.

This will be followed by an analysis of children's feedback collated between September 2024 and February 2025.

This report will be made available to the Youth Justice Management Board in May 2025 for comment and recommendations..

# **Promoting participation during assessment:**

Promoting meaningful participation starts at the assessment phase and from the very outset of our engagement with a child. Our Quality Assurance (QA) activity identifies the consistent use of self-assessments as part of this process to inform practitioners professional judgement. There is flexibility from practitioners in terms of where assessments are undertaken, and this is predominantly in a child's home or community venue close to their home. Audit activity similarly identifies that practitioners gather information from a wide range of sources to inform their assessment which is key in identifying children's diverse needs from the outset, allowing for maximum responsivity.

# **Promoting participation during Planning:**

The service has made considerable progress in respect of a collaborative approach to planning. 'Co-produced' plans are routinely being completed across the service and there is an expectation of staff to produce plans in this way. 'Child First' principles have been disseminated across the service and a strength – based approach to practice is being embedded. Plans are also increasingly reflecting the importance of relationship building as key to delivering effective interventions and facilitating positive outcomes for the child. A collaborative approach to planning is also visible at a

strategic level. Children attended our 'Yearly Youth Justice Plan youth summit' in 2024 and produced the following front cover and plan:



# Children & Young People's Justice Service \*Childrens Plan 2024\*

### We want safe spaces:

- Places where we live.
- Places where we can escape to when we need.
- Places where we will have someone to talk to and be listened to.
- A place where I can shout and scream if I need to.
- Spaces with activities that are different, not just sports.
  - We want creative arts and music.
  - We want to express ourselves.
    - Access to the Xbox.
  - Spaces that are just for girls.
  - · Friendly faces in the community.

### We want help with life skills:

- · How do we get a bank account?
  - · How do we buy a house?
- How do we get a driving licence?
  - How do I get a passport?
  - To prepare and cook food.
- · Where to go when we need help.
  - Registering with doctors and dentists.

### We want positive relationships:

- · Regular contact with our workers.
  - · A mutual understanding.
- To understand why we are involved with CYPJS, what will happen and what they will be doing.
  - Workers should have an excellent understanding of our lives.
- We want to communicate in the way we want to.
- Workers to listen and see things from our point of view.
- Would like to do more activities with the worker.

# We want a better understanding of our emotions:

- More support with ACES when we need them.
- Access to counselling when we need it
- We want someone who can help us to talk to our parents.
  - · Adult support when we need it.

# Help with education, training, and employment:

- We need someone to speak on our behalf at school.
- We need someone to support us to get into training or college, someone who sticks around.
  - Activities provided by CYPJS to support education.
  - Things to do that I want to do (we don't all want to do construction).
    - · Feel welcomed at school.
    - Support to follow the right path.
    - We need schools to have a better understanding of my needs.



The summit included focus-group activities to capture children's voices, opinions, and experiences of CYPJS to help shape the priorities for the forthcoming year. The feedback from our children explored later in the report suggests that our service has been responsive to what children identified in the plan and their feedback indicates strengths from staff in relation to listening to children, engaging them in positive activities and building strong and trusting relationships with them. We are making substantial progress in fostering a culture of 'You said, we did.'

# **Promoting participation in Implementation and Delivery:**

There are several examples of enabling children's participation via the implementation and delivery of intervention to children. This starts at grass roots level with policies that actively promote meaningful engagement from children.

The service has embedded the 'Enabling compliance' policy in response to non-compliance from children subject to statutory disposals. This sets out the steps for staff at each stage of the enforcement process, in effect lengthening the road to Breach. We are also in the process of firmly embedding 'Child review meetings' for children subject to Youth Rehabilitation Orders (YRO's) which allows the child and the personal and professional network for formally review progress and overcome any obstacles to facilitating positive outcomes for the child. These policies are underpinned by a flexible and responsive approach from our staff to ensure, that diversity issues are fully taken into consideration.

Dedicating time to building a trusting relationship with the child is a strong feature of practice across the service and is increasingly incorporated into intervention plans/ coproduced plans as a stand-alone target. Practitioners are adept at engaging with children in creative ways that are responsive to learning needs. Where children are assessed as suitable for Groupwork, this offer is being steadily grown with on-going delivery of the 'Which Way' Group work programme. an established driving related programme, 'BRAKE' and plans for ongoing development of a CYPJS specific Girls Group from May 2025 onwards.

We have a strong 'advocate' offer and have three youth advocates allocated across the three statutory casework teams to provide additional support to children with a high level of needs and where engagement and compliance is challenging. A mentoring model is also in place for children turning 18 and transitioning to probation. Ingeus, provide a mentor with 'lived experience' to support children with what is often a challenging time in their life and to promote their engagement with the probation service.

Our staff routinely engage in Adverse Children's Experience (ACE's) consultations with our ACE's team to ensure that a trauma informed approach is taken to working with children.

We have some strong examples of a 'You said, we did 'approach to the children we work with. In addition to the Youth Summit that informed the children's plan, we have engaged in other ways of capturing the child's voice, in 2024 we used podcasts to capture the voice of Black male children who wanted to share their experiences of arrest and custody in Leicester City. Their feedback was shared with Leicestershire

Police. Children also shared with us their want and need for positive activities, particularly with animals, sports, and arts. We now offer weekly martial arts provisions, graffiti workshops and have a working relationship with the RSPCA. Children's enjoyment of this was reflected in the feedback forms.

The Service have also facilitated the voice of the child in the recruitment and training process. In 2024, a young person receiving mentoring in the Early Intervention Team facilitated a training activity to new volunteer recruits. The child offered her perspective of what makes a good 'youth justice worker' and provide a question and answer session regarding how to best engage children from her experience and perspective.

# **Promoting participation at Court:**

The National standards self-assessment of Court practice that we completed in 2024 identified some areas of improvement. This included ensuring children's and parents/carers understanding of court outcomes and collating feedback about children and families' experience of Court. In response to this, we have had some recent and exciting developments at Court. The Service now has a Youth advocate present at LYC on Mondays to support children and families before and after hearings, confirm their understanding of Court outcomes and gather feedback about their experience of attending Court via a questionnaire. The intention is that this feedback will be analysed on a quarterly basis and shared at the CYPJS and Court user group to drive improvements in this area.

Magistrates have received training around 'Child First' principles and are open to developing this knowledge about the role of diversion with a further briefing planned for magistrates at the end of March 2025.

Our Referral order co-ordinator is in the planning stage of organising for a group of children to 're-decorate' the waiting room at LYC to make this a more 'child friendly' environment. We are also in the process of gathering the views of children on a 'congratulatory' letter devised by the magistrates which they wish to send to children who have their Order revoked at Court on the grounds of good progress.

# Children's feedback:

Children and their parents/carers are encouraged to provide feedback via a questionnaire at the end of their disposal/Order, regardless of whether their engagement is statutory or voluntary.

There are some differences between the questionnaires for children engaging on a voluntary and statutory basis, but the themes are the same; whether children feel supported, helped, were treated fairly and with respect, were listened to, found it easy to get to appointments, had greater confidence in avoiding criminal and anti-social behaviour in the future and how they felt about their overall experience of working with our service. Both end of disposal/Order evaluation forms provide the opportunity for feedback to be provided through a scaling system and through written comments, providing a combination of qualitative and quantitative data.

The Excel icon below provides a link to a summary of the numerical responses to questionnaires from September 2024 – February 2025. on a month by month basis and then six months combined. The feedback presented in table and graph format reflects responses to the scaling/numerical questions in the feedback forms across Early Intervention and statutory disposals. A summary of responses across the individual months is provided as well as a table showing all six months responses combined. Encouragingly, the feedback is positive.



# Double click icon to open file...

There is a higher response rate of feedback from children engaged with voluntary intervention. This is to be anticipated given that these children "actively" want to work with the service from the outset and are perhaps more willing to comment on the impact at closure. Nonetheless, the numerical responses overall indicate high levels of satisfaction with service delivery for both voluntary and statutory intervention. Particularly strong themes include children feeling listened to, supported, and feeling as though they have been treated fairly and with respect.

This positive narrative continues with the qualitative (comments) feedback and there was no notable distinction between statutory and voluntary service delivery. I have analysed and presented this data as themes:

# What children enjoyed and thought helped the most:

A strong theme was the value of positive working relationships between children and their case managers, prevention officers and youth advocates. Several feedback forms named individual workers as the thing that the child had enjoyed most about working with the service. Some of the children wrote the following about their case managers/prevention officer:

'Give her a raise 'love her'....'.xxxxx changed my life. She helped me with everything, and I would not be here without her.'

Another child wrote the following about his engagement with a member of staff from the Adverse Childhood Experiences (ACE's) Team: 'The times with xxxxx helped me so much, I didn't speak about my childhood until then.

These comments really do highlight the importance of the relationship between the child and practitioner and that our staff are skilled in developing meaningful, positive relationships in the most challenging of circumstances.

Being listened to and being treated fairly and with respect was another strong theme that emerged in the children's comments: 'I was treated with respect and always listened to.' ....... 'I was listened to, and I got to share my ideas/views.'

Engaging children in positive leisure activities and practical asks was another key theme that emerged in children's comments about what they enjoyed the most from working with the service. This was evident in responses from early intervention and statutory cases. There were

multiple references to physical exercise. Children cited that they enjoyed going to the gym, playing pool, playing football and tennis. Several responses identified their experience of martial Arts/boxing as one of the most enjoyable activities. Engaging in music based activities was also popular with children and some community work placements - such as working at the farm and the goodies bags for dogs was also referenced. One child was very complimentary about his trip to the local fire station to explore the role of a fire fighter as this was his future aspiration. Several children identified the value of learning new skills and activities with the service. In reference to their community work placement, one child said the following: 'The reparation.... because I was invested in the course, and it provided me with knowledge that can help me with my future.' 'Talking,' 'eating' and 'chat' were articulated as being enjoyable and one child summed up their experience with the following comment: 'We had a good time in a serious situation.'

# • What children felt supported with:

Children identified a wide range of factors that they felt supported with. Feeling listened to and understood was a recurring theme; 'I felt extremely listened to and understood by my case worker.' Children also identified feeling supported in the following ways:

'Looking at my reasons for losing my temper and thinking why I did it what I could do differently.'

'Getting into trouble, making bad decisions and choosing who I spend my time with.'

'My mental health is good...better.'

'To not get angry easy.'

'Having someone to speak to that also spoke to my parents so that they understood what I was feeling and how they can help with things going on.'

'He gave me such good relationship advice,'

'Meeting in school made it a lot easier for me.'

'Not to associate with bad people.'

'Helped me to learn about my future and how to develop my future without problems.'

'Looking at healthy relationships – what is a red flag and what is a green flag.'

'Knife Crime and support with family'

'We looked at how a victim would feel. I think this is important so that in any similar situation I can think of how the victim would be impacted.'

# What children did not enjoy/ or felt did not help:

Encouragingly, there were very few recorded responses to questions around what children did not enjoy. The two children that did respond to this identified that 'talking about what I

did' was not an enjoyable aspect and another that their gardening activity for community work was neither enjoyable nor helpful.

# • What children would do to improve the service:

There were similarly very few responses from children about how the service could be improved or what might be done differently. Those who did identify areas for improvement, said the following: 'more activities'...'quieter environment' and 'workers who speak different languages.

It was fabulous to see that one child's response to their experience of the service was 'it was perfect.'

# Participation - Next steps:

Promoting children's participation with the service is an ongoing journey and CYPJS are part of the strategic vision for the Local Authority: 'Our vision is that every Child and Young Person is empowered to know about their right to not only be heard, but to have influence over decisions that are made about them and the services they receive in Leicester City." Strategic priorities for CYPJS moving forward are the YJMB and partnership's role in promoting participation, ongoing application of the Lundy Model, a children's CYPJS plan, development of the groupwork offer, embedding Chid First approached and child centred policing. Tactically the focus is on co-production of plans, writing to the child, embedding child first practice, child first policing and consistent analysis and use of information from feedback forms. Strategically a quarterly feedback report will be presented to the Board and consideration to reference group for children to feed into the board.



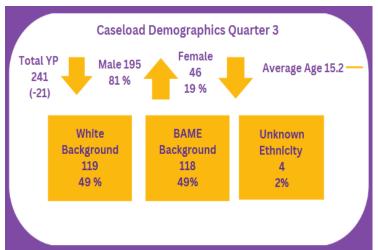
# LEIGESTER CITY CHILDREN & YOUNG PEOPLE'S JUSTICE SERVICE

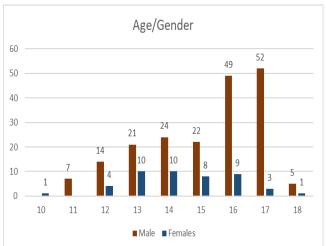
Leicester Youth Justice Management Board

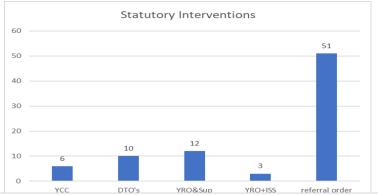
Performance May 2025 (Inc Q3 Oct-Dec 2024)

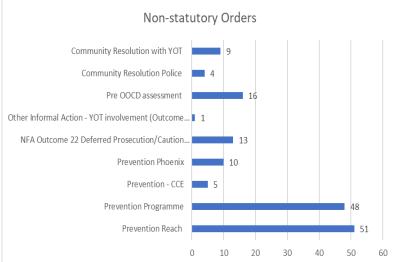
- 1. Caseload Snapshot
- 2.Youth Justice Board Data Publication covering FTE update on working group progress.
- 3.ETE Performance
- 4. Victim Spotlight
- 5. Quality Assurance
- 6. Children Looked After

# 1. Caseload Snapshot









Young People in Full Time ETE currently 65% SSA 70% & ASSA 60% (on Referral Orders, YROs and DTO Licence)

# OPEN INTERVENTIONS Total – 241

Statutory - 82 34.0%

non-statutory – 157 65.1%

White	BAME	Unknown
Background	Background	Ethnicity
117	118	4

Non-Statutory cases with CLA flag 5.73%

Statutory case with CP flag

40
Statutory Cases with EHCP/SEN

10
Statutory CYPJS Cases with CLA flag
12.1%

48.8%

# Youth Justice Board Publication

# **First Time Entrants**

Jan 24 – Dec 24: Rate of 246 per 100,000. YDS data (Actual Number of FTE= 102 young people)

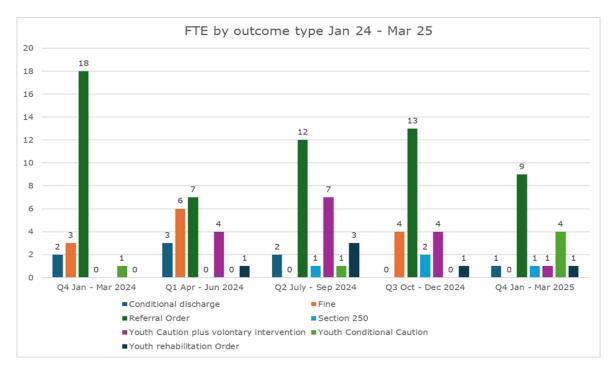
Jan 23 – Dec 23: Rate of 206 per 100,000. YDS data (Actual Number of FTE = 84 young people)

Increase of 19.7 %

Leicester's rate per 100,000 for First Time Entrants stands at 246. This is higher this quarter than our target (180) and above that of our YOT comparator family (149) and the National average (161).

First time entrants continue to be an area of focus given the increase compared to our family group and nationally. Last quarter focused on a deep dive into first-time entrants, and a full report was presented to the board alongside an action plan. Following the previous board, a working group was established consisting of Head of Service for Prevention Services, Interim Service Manager for Youth Justice, Team Manager for the Joint Decision and Resolution Panel, and Police Inspector. The working group has met three times since the previous board and is making good progress with the action plan.

The data presented below in relation to FTE is reflective of locally recorded data for Quarter 4 (Jan-March 2025).



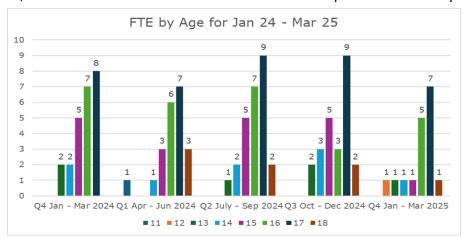
The above graph shows five consecutive quarters of FTE and outcomes. Quarter 4 2024-25 had the lowest number of FTE of any quarter. It is encouraging to see that the number of children receiving Referral

Orders continues to decline with the work that has already been undertaken to divert where possible. During quarter 4, no Referral Order was less than 6 months in duration.

Offences /Quarters	Q4 Jan -Mar 2024	Q1Apr - Jun 2024	Q2 July - Sep 2024	Q3 Oct - Dec 2024	Q4 Jan – Mar 2025
Absconding/bail	1				
Acquisitive violence	1	1	2	1	
Burglary (domestic)	1			2	2
Criminal damage	1			1	
Drug possession & small-scale supply		1			1
Fraud, forgery & misrepresentation			1		
Handling stolen goods				1	
Other motoring	7	7	2	4	1
Public order & harassment		2	3		
Sexual (not & against child)		1	2	1	2
Theft (not vehicle related)		2			
Vehicle-related theft	1				
Violence against the person	12	7	16	14	7
Non-Domestic Burglary					2
Racially aggravated assault					1
Robbery					1
Total	24	21	26	24	17

The table above shows the offences committed by children becoming FTEs.

Whilst there has been a significant drop in the number of 'violent offences against the person' (by 50% compared to the previous quarter), it is now the biggest single offence committed. Future reports will present individual offences classified within this category. There can then be some work done to consider how to reduce this offence type. Motoring offences (vehicle-related theft and other motoring offences) have also decreased, with the lowest number of cases recorded compared to the four previous quarters.



The graph above shows the ages of children that became FTEs. There has been a considerable reduction in children under the age of 16 becoming an FTE in quarter 4; 23% compared to 42% in the previous quarter.

# **Recommendations:**

The working group will continue to meet throughout quarter 1 2025-26 (Chaired by the HOS for Prevention) and progress the actions within the FTE action plan presented at the previous board.



# **Re-Offending**

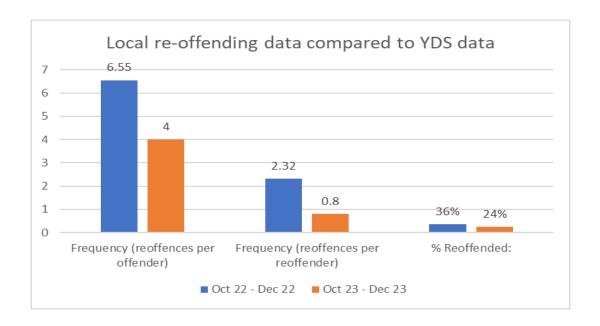
**Binary Rate -quarterly cohort:** Rate is the percentage of young people in the 3-month cohort who have reoffended within 12 months of entering the cohort.

Binary Rate Jan 23 – Mar 23 cohort (latest period) = 38.1% 21 young people, 8 of whom re-offended committing 50 offences

Binary Rate Jan 22 –Mar 22 cohort (previous year) =37.2% 43 young people, 16 of whom re-offended committing 81 offences

Leicester's latest reoffending rate stands at 38.1% (YOT family average 30.1%, National 32.8%). Due to our small cohort size, small fluctuations in the number of reoffenders can have a large effect on the overall rate. For this period although the re-offending has seen a decrease, 2 within the cohort committed a disproportionate number of offences. It is recognised that Leicester continues to have slightly higher rates than our family average and the national picture. There is a need to complete a detailed two-year deep dive reoffending performance report and action plan (as has been done for FTE). This will be the next focus at the board and potentially leading to a small working group to oversee the action plan. This work is in progress.

Locally, Leicester's live tracking tool takes a strategic overview of the whole cohort and is designed to ensure the right actions are taken for the right children at the right time. This will be closely examined to ensure it is working as designed to do so. By ensuring a local tracking system is in place for children entering the local cohort we can get a more up-to-date indication of local performance. The chart below uses locally collected data for the period (Oct 23 – Dec 23) where children have completed 12 months of their order. This is compared with the same period (Oct 22 – Dec 22) of the previous year PNC data.



This shows that binary rates (number of young people coming into the Justice system) have seen a decrease when compared with the previous year PNC data for the same period. The actual numbers for (Oct 23 – Dec 23) were 40 young people of those 8 re-offended and committed 32 offences when compared to the same period the previous year (Oct 22 – Dec 22) where 31 young people in the cohort of those 11 re-offended and committed further 72 offences.

The continual drive to reducing re-offending is the requirement to an ongoing focus to actively engage children within 30 days of receiving their order, and analysis of offending patterns and risks that inform intervention. In the last 18 months we have strengthened our responses across the partnership to child criminal exploitation and serious youth violence, but a consistent approach is needed across all staff. Analysis of children with high reoffending rates is conducted monthly and high frequency offenders are reviewed weekly. This process will also be examined as part of the deep dive to ensure maximum impact is being achieved. There has been a slight increase in numbers of girls who are offending and reoffending. The service is strengthening its universal offer to girls through targeted 1:1 work and girls groups. The service needs to revisit the use of police data and strengthen staffs analysis skills to ensure the right interventions are being put in place at the right time.

# **Recommendations:**

- To produce a two-year performance report providing a detailed analysis of local reoffending rates, trends, socioeconomic factors, health and the effectiveness of interventions- Spotlight at the next board with an action plan and potential recommendation for a small working group. September Board.
- Consider what works to support girls as well as boys, it would be beneficial to seek insights on
  reoffending for both genders. Less is known about what works to support girls although the number
  of girls overall in the system is smaller- To ensure girls are referred to the Youth Service girl's groups

and targeted 1:1 work. September board

- To revisit the skills base of staff to strengthen analysis of assessments and align the right intervention to the children at the right time. Within 2 months
- To improve the use of police data to inform reviewing assessed needs of the child at any time. Within 2 months.
- Continue partnership sharing of HKC/High-Risk CCE register- Met and presentation has been made available at the board and at the CCE and SVY group. Ensure all staff are clear on pathways and support for children at risk of CE and SYV. By September Board
- Routinely complete quarterly Referral Orders and Youth Rehabilitation Order reporting to ensure
  children are being engaged at the earliest opportunity post-sentence and that all referral order
  panels are held within time scales- Partially met and to ensure embedded for quarter 4 onwards to
  reduce the number of short referral orders being administered that could potentially be diverted to
  out of court. There were no short referral orders in Quarter 4
- Continue to monitor engagement rates post-sentence and provide an exceptions report if needed. September board to receive an update on breach rates.

# Custody

Custody figures are reported by the YJB as a rate per 1,000 young people in the 10 to 17 local general population. Leicester's custody rate stands at **0.39** (number of custodies not children), 11 children were given a custodial sentence in the last year (rolling 12 months). This rate is higher than that of our YOT family (0.13) and higher than the regional (0.10) and national rate (0.10). The custody increase was not unexpected due to a number of remands for high profile serious offending where custody could be the only option.

The below provides demographic, offending and SEN information for all children who received a custodial sentence in the last year, this information tells us that:

- A significant proportion (7 out of 11) of children in custody were aged 16 to 17, indicating a concentration of older children within the system.
- Black British Males represented a notably higher proportion of our custody population (4 out of the 11 (36 %)). National statistics indicate that Black children make up approximately 26% of the youth custody population, despite comprising only 4% of the general 10–17-year-old population.
- · Mixed Heritage, White British, and Asian British Males: Each represented a smaller proportion, with two children from each group.
- Only one child was identified of Gypsy, Roma, and Traveler background.
- Eight children in custody were identified with Special Educational Needs and Disabilities (SEND).
- Murder was the most common offence among these children. (5/11 = 45%).
- The majority of children's offences fell within the 7–8 gravity score range, indicating serious offences where custodial sentences appear proportionate to the severity of the crimes committed.
- The data above highlights the necessity for the board to investigate and understand the disparities, especially regarding the child's path into custody. This should involve an examination of the decision-making processes at each stage, from arrest to sentencing, identifying any missed opportunities for diversion, and reviewing the child's social care history, educational background and contact with other services. There will be a custody spotlight at Decembers Board.

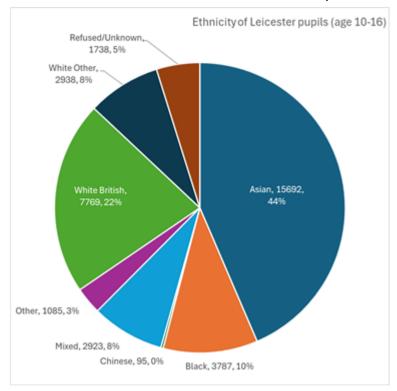
# **Use of Custodial Remand**

Nationally in the year ending March 2023, (63%) of children remanded to youth detention accommodation did not subsequently receive a custodial sentence. During the last 12-month period (Oct 23 – Sep 24) Leicester has seen an increase in remands, mirroring the national picture. 15 children have been remanded, 11 children subsequently received custodial sentences, 1 received a YRO, 1 child was transferred to probation whilst on remand and 1 child is still remanded. There were 2 Remands in Q4 Jan – Mar 2025 1 was sentenced to sec 250 on the 4/03/2025.

We have reviewed and re-established our multi-agency children in custody scrutiny panel to understand how the partnership can avoid unnecessary remands, as well as strengthening our alternative to custody offer to provide reassurance to the courts. We have recently undertaken, April 2025, a check on our frequency of visiting children on remand. The frequency of visiting was not consistent, and work is now taking place to ensure we increase the visiting of our children on remand and ensure additional ways of keeping in touch are also implemented. Social care has also undertaken the same exercise and ensuring visits are in line with minimum requirements.

Information for all children who received a custodial remand in the last year shows:

- All children are aged between 13 -17-year-old.
- White and Black Caribbean ethnicities are over-represented based on the population of the city.



- Six children were remanded for murder (using a bladed article).
- Six children were not previously known to CYPJS.
- Three children had no history of social care involvement.
- Three children did not have EHCP/special educational needs.

**SERIOUS NOTIFICATIONS** - In quarter 3 of this year there have been no serious incident notifications recorded. All notifications and reports will be shared with the board for ongoing learning. The leadership team are tracking previous notifications and report recommendations

# **Recommendations:**

- To be assured that all serious incident notifications are reviewed by the CYPJS leadership team. Practice
  to be updated immediately depending on findings. All reports must be signed off by HOS and provided
  to the board for scrutiny and oversight.
- Update CYPJS serious incident processes by end of May 2025.

# **Custody Overnight**

Police and Local Authorities have statutory responsibilities to prevent the unnecessary detention of children overnight in police cells.

Section 38(6) PACE 1984 Police and Criminal Evidence Act 1984 (legislation.gov.uk) requires the transfer of children who have been charged and denied bail to more appropriate Local Authority accommodation whilst they await their court appearances, with a related duty in the Children Act 1989 (legislation.gov.uk) for Local Authorities to accept these transfers. Section 38(6) PACE 1984 does **not** apply when the child has been arrested on a warrant or a breach of bail.

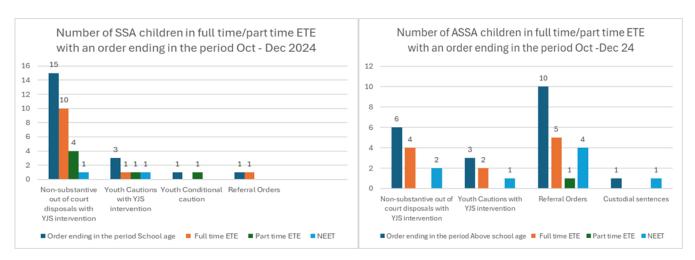
During this quarter there were six incidences in which three children were held overnight (all 3 appeared twice). Of these, three children appeared for execution of warrant. One child within this quarter met eligibility criteria regarding the need to be transferred from Police to Local Authority Accommodation under PACE Sc 38 transfers. This is in line with low total annual numbers. There were two unlawful overnight detentions, who appeared in court the following day.

It is important to note that a small cohort of children continued to appear in custody during this quarter. Notably, the two children who were unlawfully detained overnight had been arrested for assaulting an emergency worker. This suggests a recurring pattern in decision-making and indicates that alternative routes could be explored with all agencies involved. It is recommended that this is considered at the newly relaunched custody scrutiny panel.

# 3. Education, Training & Employment (ETE)

Q3	Q4	Q1	C/2	Q3
Oct-Dec 23	Jan-Mar 24	Apr-Jun 24	Jul-Sep 24	Oct-Dec 24
52%	66%	65%	58%	65%

Leicester's percentage of Young People (on Referral Orders, YROs or on DTO License) in full-time ETE stands at 65% compared to previous quarter of 58 %. It is important to note here that these figures only include statutory orders ending in the period. We have ETE as a strong focus for school-age children, 60% are in full-time education. Our ETE rate is above the Regional (34.2%) (62%), National average (38.3%) (64%) and YOT Family average (40.2%) (58.6%)



Whilst there continues to be sustained performance among children of statutory school age, there remains a high prevalence of part-time timetables, with six children on part-time schedules this quarter. For children above statutory school age, performance remains a critical issue, with eight out of 20 children not in education, training, or employment at the end of the quarter.



More than 50% of children this quarter had some form of special educational needs, either identified SEND or through a formal plan in place. There was a high number of children not assessed as being in suitable education, training, or employment (ETE) at the end of the quarter, largely due to children being on part-time timetables, as well as those not identified as being in ETE.

## **Recommendations:**

# **School Age Children:**

- The service has played a role in shaping Leicester City Council's approach to managing part-time timetables and exploring alternative provision options. It is crucial for the service to monitor staff's adherence to the policy, including the use of escalation processes, when necessary, as well as tracking outcomes for children. Partially met briefing with staff planned for May 2025 and update at next board on its impact.
- Further analysis is needed behind the reasons for part-time arrangements, the impact of part-time timetables on both children's academic and social outcomes, including offending /safety and well-being for children and others- audit activity planned for May 2025 and feedback will be provided

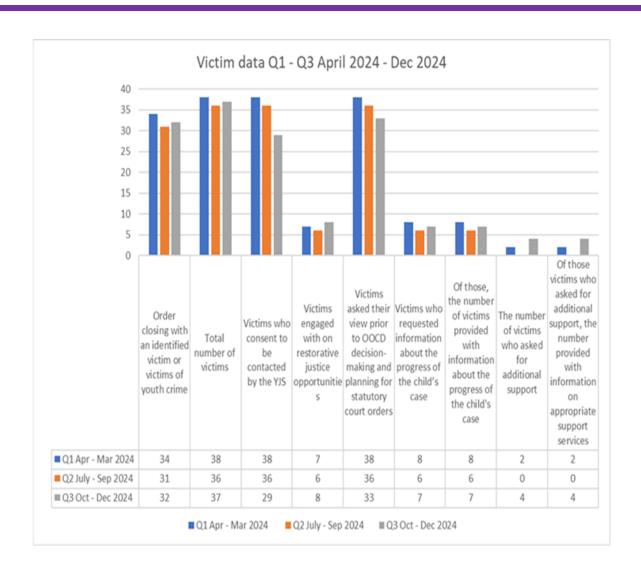
at the next board in September.

- The service has established a multi-agency SEND Panel meeting as well as reviewed pathways for children in community and custody as part of the SEND YJ Quality Leadership award. Work is to be undertaken to measure the progress and outcomes of this work. Partially met - Meeting to be planned for in June 2025 but the service has received positive feedback form HMIP on the panel process. Full update at September Board.
- There is a need to assess and support children with SLCN and ensure services are in place to meet their needs, including the use of the SEND Panel. Ongoing discussions are being held regarding a SALT team member through an LLR Bid. Update at May Board
- CYPJS Education Coordinator to initiate monthly meetings with our special schools, Millgate and
  Keyham, to monitor outcomes for children. This collaboration has led to the development of a
  targeted programme specifically designed for girls who are at risk of offending or facing safety
  issues. Partially met (with a need to strengthen the work and provide a further update at
  Septembers board)

# **Above School Age Children:**

- Work to be undertaken to review the partnership arrangements for the current CYPJS Connexions
  offer. There is a need for increased investment in post 16 opportunities across the city. Ongoing
  work on the post 16 offer
- The service needs to better engage with voluntary organizations like Leicestershire Cares, to enhance this performance and better prepare children for future education, training, and employment opportunities- ongoing development taking place

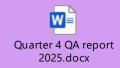
4. Victim Spotlight



The above graph highlights what is submitted to the YJB and cover the period of Q1-Q3. This will now be a key KPI that is tracked to consider trends and themes from one quarter to the next. It will also be compared with our family group, regional and national data in future reports, where the data is available. It is positive to see the proportion of victims that consent to be contacted by the service. It is imperative that we understand any barriers to seeking and agreeing to support and what opportunities there are for a greater number of victims being involved in restorative justice opportunities.

The attached report provides a spotlight on the work undertaken and recommendations for improvement.

# 5. QA findings

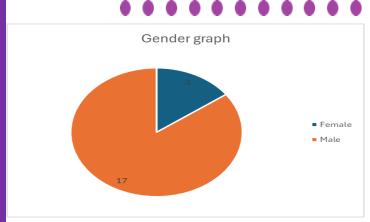


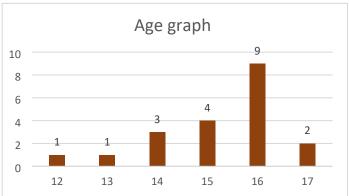
Quarter 4 included the following themes as part of quality assurance.

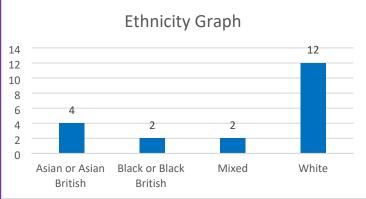
- Substance misuse intervention
- Work with victims please view separate report
- Two full case audits as part of HMIP Multi-Agency Case Discussion (MaCD)
- Child First approach in writing to the child in assessments and coproduced plans
- Peer observations of Practice

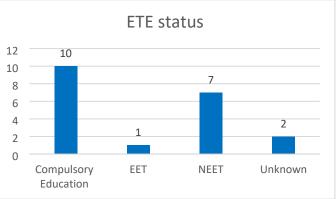
The attached report highlights area of good practice and areas to further develop over the coming months. The board is asked to accept the report and recommendations for improvement.

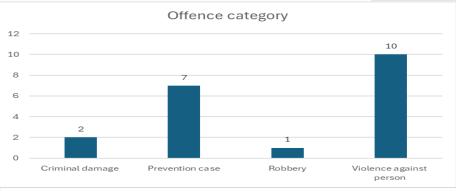
# 6. CLA Statutory & Non-Statutory orders



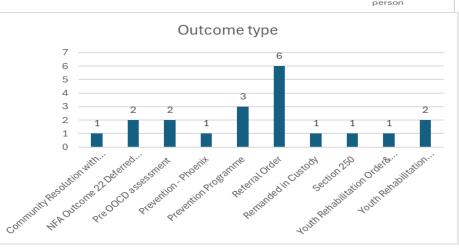




















# 7.Summary

• • • • • • • • • • • • • • • • • • • •

- 1. The Board is asked to note the contents of this report and progress made.
- 2. To note the areas for improvements and recommendations that will be aligned to the partnership and/or service delivery plan for progressing.
- 3. To agree to a working group to be established for developing an improvement plan and delivering on identified improvements for victim work.
- 4. To note that within the performance report reoffending and health will be a spotlight focus at the following Board.
- 5. To note that the HMIP improvement action plan will be monitored by the Board.
- 6. To agree to commissioning an internal review of the Quality Assurance Framework and Management Oversight of Cases as a key priority in the next quarter and receive support from our regional Lead in the YJB for external support and scrutiny of consistency of management oversight..

# Appendix E

# Children, Young People and Education Scrutiny Commission (CYPE) Work Programme 2025 – 2026

Meeting Date	Item	Recommendations / Actions	Progress
18 June 2025	Overview of CYPE Children's Social Care Reforms Introduction to the Performance Dashboard Plan for Ofsted		
23 September 2025	SEND Transport Update Children's Services Finances Children's Social Care, Early Help and Prevention Improvement Plan Edge of Care Youth Justice Plan		

Meeting Date	Item	Recommendations / Actions	Progress
28 October 2025	Sufficiency for CLA and Care Leavers  Sufficiency in Mainstream and Special Schools  Ofsted update  Children from Abroad Seeking Safety  Families First Programme?  HNB Task Group Report  Children's Centres – Verbal update  Performance Dashboard	To include impact monitoring on the Fostering Service microsite launched on the Council website which includes the fostering offer.  Add Homefield info (following Special meeting May) as an appendix with the report.	

Meeting Date	Item	Recommendations / Actions	Progress
20 January 2026	SEND Transport Update	Outcome specifics gathered on Travel Training, applications, appeals and outcomes.	
	Fostering Annual Report	To include costs relating to Customer Relationship management tool, the Ofsted thematic report, information on family finding events and more detail on advertising techniques for recruitment.	
	Corporate Parenting Annual Report		
	Performance Dashboard		
3 March 2026	Families First Programme?		
14 April 2026	Performance Dashboard		

# Forward Plan Items (suggested)

Topic	Detail	Proposed Date
Children from Abroad Seeking Safety	6-monthly report.	
Youth Services - overview		
Academies – Performance Report		
Needs Assessment in Relation to Families in the City		
Children not in state-maintained schools		
e.g.: Academies, Independent, Faith schools		
Multi-Academy Trusts - Overview		
Update from local DfE Officer		
Fostering Annual Report		
Fostering Community Champions update	Deferred from 26 March 2024	
Corporate Parenting Update	Annual report.	
Fostering Service – Marketing Strategy		
SEN support and funding		
Pupil Place Planning (Primary and Secondary)		
Early Years Childcare Sufficiency Report		
Children in Care Council/Care Leavers		
School Holiday Activity and Food Provision		
Education Govt reports e.g.: white paper / green paper		

Ofsted Inspection reports		
Children's Social Care – Recruitment Issues		
Mental Health impacts on children	Likely to be examined jointly with other commissions	
Informal Scrutiny on DSG High Needs Block	To commence following the full report to the Commission.	
Leicester Children's Services – Self Evaluation		
Covid impact and response to early childhood development		
Families First Programme	To remain on work programme.	
Children's Social Care, Early Help and Prevention Improvement Plan		