



**Royal College of
Paediatrics and Child Health
Cymru**

Leading the way in Children's Health

Corporate parenting: part 6 code of practice on looked after and accommodated children

October 2025

Summary

RCPCH Wales welcomes the opportunity to respond to the Welsh Government's consultation on proposed changes to the Part 6 Code of Practice under the *Social Services and Well-being (Wales) Act 2014*. Our response focuses on the health and wellbeing elements associated with the proposals.

Looked after children are among the most vulnerable members of our society. They experience disproportionately poorer health outcomes, increased mental health problems, lower educational attainment, and higher risks of exploitation and homelessness. These outcomes are often compounded by frequent placement moves, disrupted relationships, and exposure to adverse childhood experiences (ACEs), which can have lifelong impacts on physical and mental health¹.

As paediatricians and other child health professionals, RCPCH members see first-hand the unmet health needs of looked after children and the consequences of fragmented care. We believe this consultation presents a vital opportunity to strengthen the support and systems around these children and young people. In 2020, RCPCH published *State of Child Health*, which included specific findings on health outcomes for looked after children in Wales and policy recommendations for the Welsh Government².

We welcome much of the policy intent behind this consultation and the Welsh Government's commitment to improving outcomes for looked after and accommodated children. We support the inclusion of a new chapter on corporate parenting, building on the Corporate Parenting Charter³ developed in collaboration with care-experienced children and young people. We are particularly supportive of the intention to set out

¹ <https://stateofchildhealth.rcpch.ac.uk/evidence/family-and-social-environment/looked-after-children/>

² <https://stateofchildhealth.rcpch.ac.uk/evidence/family-and-social-environment/looked-after-children/#page-section-10>

³ [Corporate parenting charter | GOV.WALES](#)

what good looks like for local authorities and believe robust monitoring and publication of evaluations of local authority performance in this area could be an effective tool to encourage continual improvement. RCPCH Wales also fully supports proposals to strengthen the voice of looked after children in the code of practice. Their experiences of care must be the bedrock from which future services for care-experienced children and care-leavers are built on.

Strengthening corporate parenting and increasing awareness of support services is, of course, welcome but it is important to consider the potential impact on allied services. Child health services in Wales are already under significant pressure, and any service redesign or increased signposting to secondary services must be matched with investment and workforce support to avoid worsening inequalities and delays in care.

Section 1: preamble and chapters 1 and 2

RCPCH Wales supports the proposed changes to Chapter 1 of the Code of Practice, particularly the emphasis on multi-agency working, strengthening the voice of the child, and improvements around family time, education, and placement transitions.

We welcome the inclusion of multi-agency working in the ‘purpose’ section of this chapter, aligned with the *National Multi-Agency Practice Framework for Children’s Services*⁴. Effective multi-agency engagement is essential to delivering high-quality, coordinated care for looked after children. As the Framework itself states, when agencies work well together - sharing information, aligning services, and co-producing solutions - children, families, and professionals all benefit. Conversely, when multi-agency working breaks down, it can lead to increased risk, delays, missed opportunities, and greater frustration for both families and professionals.

This is particularly relevant to paediatricians and other child health professionals, who are often involved in the care and support planning process. Community paediatricians, in particular, play a key role in identifying health needs, contributing to care plans, and ensuring continuity of care. Their involvement in multi-agency forums and planning meetings is vital to ensuring that health considerations are fully integrated into care and support plans for looked after children.

It is not clear how public bodies subject to the code of practice - primarily local authorities - are expected to interact with those that are not, particularly in the context of shared responsibilities. This raises potential accountability and coordination challenges, and risks creating a fragmented picture of who is responsible for delivering outcomes for looked after children. RCPCH Wales believes this issue needs further

⁴ <https://www.gov.wales/national-multi-agency-practice-framework-childrens-services-html>

consideration to ensure that all relevant partners, including health boards, education providers and third sector organisations, are engaged meaningfully and consistently in care planning and delivery.

We also strongly support the proposed changes to strengthen the voice of the child throughout the chapter. Person-centred planning must be more than a principle - it must be practiced. Children and young people should be actively involved in shaping their care, with their wishes and feelings gathered using developmentally appropriate tools and revisited regularly.

The proposed addition to the ‘permanence’ section, recognising that children’s views on contact may change over time and should be regularly reviewed with support from trusted adults or advocates, is particularly welcome. This reflects the complexity of family relationships and the evolving nature of children’s needs and preferences.

In relation to updating the part of the code of practice dealing with Personalised Education Plans (PEPs) for children looked after, we are pleased to see reference to the new good practice guidance⁵ developed by Welsh Government. We particularly welcome the recommendation that PEP or care review meetings should be held outside of lesson times so as not to disrupt lessons.

RCPCH Wales recommends:

- **Ensure meaningful multi-agency collaboration:** Embed the principles of the National Multi-Agency Practice Framework in practice, with clear expectations for how agencies (including health, education, and third sector) work together to deliver coordinated care for looked after children.
- **Clarify roles and responsibilities:** Address the ambiguity around how public bodies subject to the Code (e.g. local authorities) should interact with those that are not (e.g. health boards, education providers). This is essential to avoid fragmentation and ensure accountability in delivering outcomes.
- **Recognise the role of paediatricians:** Acknowledge the vital contribution of community paediatricians in care planning, health assessments, and continuity of care. Their participation in multi-agency forums should be standard practice.
- **Strengthen child voice in care planning** by ensuring children’s views are gathered using developmentally appropriate tools, revisited regularly, and meaningfully influence decisions.

⁵ [Personal education plans for children looked after: draft guidance for practitioners \[HTML\] | GOV.WALES](#)

Corporate Parenting chapter

We welcome the inclusion of a dedicated chapter on corporate parenting to the part 6 code of practice. We are particularly supportive of the intention to set out what good looks like for local authorities and believe robust monitoring and publication of evaluations of local authority performance in this area could be an effective tool to encourage continual improvement.

RCPCH Wales supports the proposed use of the term “community parenting” to describe the role of organisations and individuals who support looked after children but do not hold statutory responsibilities. We believe this terminology reflects a more child-centred, inclusive, and holistic approach to care - one that recognises the collective responsibility of society to nurture and protect children and young people in care. It may also help improve public understanding of corporate parenting by framing it within a broader community context. However, whether described as corporate or community parenting, the approach must always be child-centred, with the needs and voices of babies, children and young people in care at its heart.

We are also clear that the proposal must not dilute the primary responsibility of local authorities and other public bodies as corporate parents. These organisations have statutory duties, and they must remain primarily accountable for the wellbeing and outcomes of looked after children. Local authorities are under severe financial pressures so without a strong public message and oversight from Welsh Government, there is a risk that amplifying the role of non-statutory partners could lead to an overreliance on the support they provide.

We support the proposed structure for the new chapter. This rightfully focuses on delivery, voice of the child, support during transitions out of care, and reporting. These areas are critical to ensuring that corporate parenting is not only well-defined but also measurable and responsive to the lived experiences of children and young people.

We urge recognition of health professionals, especially community paediatricians, as key partners in corporate parenting. Community paediatricians play a vital role in planning and implementing local strategies to improve child health and fulfil statutory responsibilities in child protection and looked after children services.

RCPCH Wales recommends:

- **Monitor and publish local authority performance:** Introduce robust evaluation and public reporting mechanisms to assess how well local authorities are fulfilling their corporate parenting duties. This transparency can drive improvement and accountability.

- **Reinforce statutory accountability on corporate parents:** RCPCH Wales welcomes the recognition of the role of non-statutory community parenting partners in supporting looked after children. However, care must be taken to ensure that this must not dilute the statutory responsibilities of local authorities, who will remain primarily accountable for the wellbeing and outcomes of looked after children. Shifting responsibilities to voluntary or third-sector organisations without adequate support or oversight must be avoided.
- **Recognise health professionals as key partners:** Explicitly acknowledge the role of community paediatricians and other child health professionals in corporate parenting. Their contributions to local strategies, child protection, and wider services are vital to improving outcomes for looked after children.

Children and Young People's voice

It is critical that children in care are listened to and that their health needs are met. We strongly support proposals to embed children's voices in planning and review processes. In line with Welsh Government policy, we believe that the 'voice of the child' must be understood in its broadest sense and therefore be inclusive of babies, younger children and young adults. Child-centred planning must be a core principle, and children's views should be regularly revisited, especially around sensitive issues like family contact.

Plans should reflect the Welsh Government's commitment to the UN Convention on the Rights of the Child⁶, ensuring every child can live a safe, happy, and healthy life. That is why we support specific actions such as encouraging local authorities setting up corporate parenting panels or groups as a forum to ensure local authorities are actively listening to looked after children and care leavers which will help to inform the design and delivery of local authority corporate parenting responsibilities. We stress that such panels must include direct representation from children and young people, not just adult proxies.

RCPCH Wales recommends:

- **Align care planning with the UNCRC:** All planning and review processes should reflect the Welsh Government's commitment to the UN Convention on the Rights of the Child, ensuring every child can live a safe, happy, and healthy life. This should include the use of developmentally appropriate tools to gather views of care-experienced children and care leavers.
- **Representation on corporate parenting panels:** Ensure that the voice of looked after children and care leavers are actively informing the design and delivery of

⁶ [UN Convention on Rights of a Child \(UNCRC\)](#)

services through guaranteed representation for those with lived experience, as well as guaranteed access to independent advocacy.

- **Ensure health-related wishes and needs are fully reflected in care plans:** Care plans for looked after children must go beyond clinical assessments to include the child's own views and preferences about their health and wellbeing. This includes physical, mental, and emotional health needs, and should be informed by input from paediatricians and other health professionals. Plans should be regularly reviewed to reflect changes in the child's health status or preferences, and should ensure continuity of care across placements and transitions.

Placement moves

Poorer outcomes are associated with frequent changes of placement, particularly in case where children are placed very far from their home. Indeed, evidence suggests that children and young people living in out-of-local-authority placements are at increased risk of mental health issues, sexual exploitation⁷ and even recruitment into gang activity⁸.

We endorse the proposal to ensure respectful handling of belongings. Bin bags or plastic shopping bags are never appropriate and should not be used under any circumstances. RCPCH Wales believes this must be a clear and non-negotiable standard, not subject to exceptions. Placement moves must also be planned and supported to minimise disruption and trauma.

RCPCH Wales believes health assessments for looked after children should be carried out pre- and post-move. Continuity of care and medical records transfer protocols need to be improved and aligned with NHS digitalisation initiatives.

RCPCH Wales recommends:

- **Minimise placement disruption and distance:** Recognise the link between frequent or out-of-area placements and poorer outcomes, including increased risk of mental health issues. Prioritise placement stability and proximity to home wherever possible.
- **Ensure respectful handling of children's belongings:** Guarantee that every looked after child is provided with suitable bags for their belongings during moves, to preserve dignity and reduce trauma.

⁷ HM Government. (2006) Care Matters: Transforming the lives of children and young people in care. Creating Opportunity, Releasing Potential, Achieving Excellence.

⁸ <https://researchbriefings.files.parliament.uk/documents/CDP-2019-0226/CDP-2019-0226.pdf>

- **Conduct health assessments before and after placement moves:** Introduce a requirement for pre- and post-move health assessments to identify any emerging needs and ensure continuity of care. Strengthen protocols for transferring medical records between placements and align these with NHS digitalisation initiatives to ensure seamless access to health information.

Health and Wellbeing of Looked After Children

It is hoped that the proposed changes, particularly around strengthening corporate parenting reporting, strengthening the voice of the child and increasing awareness of support and information amongst care leavers through accessible online resources will lead to improved outcomes. However, proposals to enhance services and to increase awareness of support available often increases demand on wider services, including health services. It is therefore important to consider the potential impact on existing services and ensure they are fit for purpose.

The current pressures on community child health services in Wales is significant. As highlighted in our recent report *Collaborative Healthcare for Children and Young People in Wales (2025)*⁹, these services are underfunded, overstretched, and face significant workforce challenges. Our report calls on the Welsh Government to:

- Direct health boards and local authorities to prioritise early years intervention and needs-led services.
- Recognise the vital role of community paediatricians in supporting looked after children.
- Improve data collection and transparency around community child health services.
- Invest in a sustainable child health workforce to reduce delays and improve outcomes.

Service redesign of health services for looked after children - while welcome and necessary - must be accompanied by investment and capacity-building. Failure to do so only risks exacerbating existing inequalities and delays in care.

We emphasise the importance of physical and mental health in care planning. Health needs must be identified early and met consistently throughout a child's time in care to ensure they receive timely support and treatment. This could help to reduce number of referrals to secondary services. Addressing the social determinants of health which predispose children and young people to become looked after will also help to reduce the numbers of children in care in the future.

RCPCH Wales recommends:

⁹ <https://www.rcpch.ac.uk/sites/default/files/2025-06/collaborative-healthcare-wales-2025.pdf>

- **Assess and plan for increased service demand:** Recognise that proposals to enhance services for looked after children and raise awareness among care leavers will likely increase demand on health and other public services. Ensure these services are adequately resourced and fit for purpose.
- **Address pressures on community child health services:** Acknowledge the findings of *Collaborative Healthcare for Children and Young People in Wales (2025)*, which highlights underfunding, workforce shortages, and service strain.
- **Embed physical and mental health in care planning:** Ensure health needs are identified early and met consistently throughout a child's time in care, helping to reduce unnecessary referrals to secondary services.
- **Address social determinants of health:** Tackle the root causes that predispose children and young people to enter care, as part of a long-term prevention strategy.

Data and monitoring

RCPCH Wales supports the development of robust arrangements to track progress and outcomes for looked after children. These arrangements should include meaningful health, wellbeing and education indicators that reflect the lived experiences and wellbeing of children and young people.

We recommend that outcome measures consider:

- Annual health assessments for looked after children, and additional health assessments for those children transferring between placements.
- Interactions with health services, including Emergency Department admissions and referrals to secondary health services (such as mental health, specialist paediatric services and speech and language therapy). In addition to tracking interactions, outcome measures should reflect timely access to therapies and support where identified and required, particularly in relation to psychological services, where provision can be patchy.
- School attendance, attainment, and engagement.

To ensure consistency and comparability, we advocate for alignment with national child health datasets, such as the Child Measurement Programme¹⁰ and the Healthy Child Wales Programme¹¹, and the Welsh Government's digital transformation goals.

¹⁰ <https://phw.nhs.wales/services-and-teams/child-measurement-programme/child-measurement-programme-dashboard/>

¹¹ <https://www.gov.wales/healthy-child-wales-programme-2024-html>

This will support better data sharing, reduce duplication, and enable more effective service planning and evaluation.

Monitoring must also be transparent and used to drive improvement. We support the publication of local authority performance data and recommend that health professionals, including child health professionals, are involved in the development and review of monitoring frameworks.

RCPCH Wales recommends:

- **Align monitoring with national child health datasets:** Ensure consistency and comparability by aligning with established programmes such as the *Child Measurement Programme* and the *Healthy Child Wales Programme*.
- **Support digital transformation and data sharing:** Integrate monitoring frameworks with the Welsh Government's digital transformation goals to improve interoperability, reduce duplication, and enable more effective planning and evaluation.
- **Ensure transparency in monitoring:** Publish local authority performance data to drive accountability and continuous improvement in corporate parenting. Engage child health professionals, including paediatricians, in the development and review of monitoring frameworks to ensure health needs are accurately captured and addressed.

About RCPCH Wales

The RCPCH works to transform child health through knowledge, innovation and expertise. We have over 600 members in Wales, 14,000 across the UK and an additional 17,000 worldwide. The RCPCH is responsible for training and examining paediatricians. We also advocate on behalf of members, represent their views and draw upon their expertise to inform policy development and the maintenance of professional standards.

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