## **APPENDIX 2**

## DRAFT LAC ACTION PLAN

## **NOVEMBER 2015-MARCH 2017**

Target LAC Number April 2016: 535

Target LAC Number April 2017: 497

Action Plan contains workstreams that will begin in this period - some may span more than one period and are priority rated accordingly

#### Impact Key

Cost = reduction in placement cost

Time = reduction in length of placement

Number = reduction in the number being accommodated

Priority Rating:

Urgent Priority (work to embed activities to be complete by April 2016)

Development of activities will continue in to next period (Apr 16-Mar 17)

NO	WORKSTREAM	DETAILS/ ACTIVITIES	Link to	LEAD	START/E	IMPACT	WHAT WILL THE	TARGET REDUCTION	TARGET REDUCTION	PROGRESS TO DATE	Priority
			strategy page		ND DATE	OBJECTIVE	IMPACT BE?	IN CHILDREN IN CARE	OF 52-WEEK PLACEMENTS		Rating
OUTCOM	IE 1: FAMILIES ARE SUPPORTED TO STAY TOGET	THER	1. 0	•							
1.1	A higher proportion of children who are referred to CSC to have a Family CAF in place so that no child comes through without one.	All children, excluding emergency safeguarding issues and UASC, will have a Family CAF.  Review access to services where children do not have a Family CAF and ensure continuous refusal of a CAF by a family is referred to CSC.	Page 11	L. Lofting	Dec-15	Number	More children with Family CAFs will result in more early support, and therefore fewer reaching the edge of care and potentially becoming looked after.		IMPACT ON DEMOGRAPHY: 30.5		R
1.2	Support for parents/carers with mental health difficulties	We will prioritise and follow up the referral of adults with mental health difficulties to Adult Mental Health Services through an agreed pathway with CPFT when we think that adults are going to meet the threshold for services.  We will consider the development and commissioning of direct services for adults whose mental health issues are impairing their parental capacity. These adults may be unlikely to meet the threshold for Adult mental health services although their mental health issues are likely to be enduring and significantly and adversely affecting their children's lives.  Working with a better understanding of parental mental health and having a clear service response will enable us to reduce the likelihood of care entry. This service is likely to be home based, short term and targeted with the use of evidence based interventions overseen and supervised by a Clinical Psychologist.  A service specification will be delivered by end of January 2016 for CFA MT to consider.		T. Jefford/ B. Squire	Dec-15	Number	Early identification and signposting for parents with mental health difficulties will result in and increase in Family CAF's with services being accessed in a timely manner, and children will be supported to remain within their family unit.	IMPACT ON DEMOGRAPHY: 2015/16: 3 2016/17: 12	Impact linked to 1.1		В
1.3	Domestic Abuse	We will implement the domestic violence offer. We will align the CFA workforce according to the training levels of the offer and incorporate the LCSB training too.  We will review the numbers of have been trained and at what level and agree to train 95% of the CFA workforce according to the training offer and level required for this role by December 2016.  We will use case audits as a performance tool to evaluate consistency and the assessment of risk. The audit findings will be taken to a wider audience than before so that the practice lessons can be learned by front line practitioners who should be competent and confident in dealing with domestic violence cases.  The service offer for perpetrators and those at highest risk will continue to be reviewed. The governance board will have oversight of this work		T. Jefford / V. Crompton	Dec-15	Number	Increased workforce knowledge leads to earlier identification and intervention, including Family CAF's and children will be supported to remain within their family unit.	IMPACT ON DEMOGRAPHY: 2015/16: 3 2016/17: 12			В

1.4	Improve pathway for Substance Misuse Support (by parents/carers)	Embed the Recovery Policy and carry out a self-assessment against the implementation of this across CFA, addressing actions needed by Directorate.  Use the screening tool as part of assessment processes as appropriate, to ensure effective identification of substance misuse issues.  Workforce development plans will highlight levels of training required across the workforce, to ensure core competency and levels of awareness in relation to substance misuse, and greater specialism where needed.  Pilot joint visits between Inclusion and CFA staff in Wisbech, with a view to ensuring that wider family issues are identified for parents open to Inlcusion, and families are supported effectively at the earliest opportunities. Pilot to be reviewed within 6 months, and extended as appropriate.  Develop effective auditing processes to provide assurances that CFA staff are effectively identifiying and supporting need, and that access to Inclusion is timely	page 12	T. Jefford / V. Crompton	Dec-15	Number	Early identification and signposting for parents with substance misuse issues will result in an increase in Family CAF's with services being accessed in a timely manner, and children will be supported to remain within their family unit.			В
1.5	Review the impact of parenting support courses on LAC and ensure consistency of use and capacity	These courses form part of our preventative approach and we need to ensure that their use is promoted and their effectiveness and impact is monitored.  -Children's Proactscip Instructors will run 1 more Proactscip training course for parents before April 2016 and schedule and promote 3 more for 2016/17. This provides training on proactive strategies for use with children whose behaviour may be challenging. Instructors will prepare evaluation report of the 3 courses run to date for joint Children and Adults Proactscip Board In April 2016.	page 12	J. Sollars / S. MacBean	Dec-15	Number	Accessible parenting courses and earlier support for parents will prevent escalation of issues, building family resilience and confidence, enabling children to remain in or return to their family unit. There wil be an increasing number of Family CAF's targeting early help to keep family's together.	Impact linked to 1.1		R
1.6	Support parents with Learning Disabilities and parenting capacity issues	Training for workforce to understand adult learning difficulties and the implications for expectations of parenting capacity.  Where parents have been identified as having a learning disability consideration will be given to the best way to communicate with them to ensure children remain at home.  Ensure that plans address learning capacity of parents and are written and communicated to ensure parents understand the changes that need to be made to ensure the family stays together.  This will be monitored through case audits and through the child in need planning process.		T. Gurney	Dec-15	Number	Workforce has a greater understanding and therefore can produce information and communication more effectively, enabling parents to understand what is required and children to remain at home. Increase in effective Family CAF's for this group.			R
1.7	Parenting support website	parent's questions and helps them pro-actively manage their children's needs. The site will include information regarding setting boundaries and managing difficult behaviour. This will be a useful tool in enabling practitioners to signpost parents to further comprehensive sources of support.	page 12	M. Whitehand	Jan-16	Number	Support for parents, available 24/7, will prevent escalation of issues direct to social care, building family resilience and confidence, enabling children to remain in their family unit and local community and re-dierct through a Family CAF.			В
1.8	Adult sexual health and contraception	Lead officers in Public Health and safeguarding services will work together to develop a pathway and guidance for practitioners for adults we would want to prioritise for support.  We will also continue to support adults and young people with a learning disability to access sex and relationship training, education and support.	page 13	K. Watson/ S. MacBean	Jan-16	Number		See Target Reduction in Children in Care	Val Thomas/ Tony Lacey to be invited to November LAC Commissioning Board to discuss.	В

1.9	Support to children in their early years	We will commission Health Visiting to build in opportunities to identify families at risk of LAC through the standard suite of visits undertaken.  We will ensure that eligible families take up the offer of free education for 2 year olds, and that wider support and intervention with families is planned in an integrated way across services in the early childhood sector to ensure clear pathways and decision making.		J. Sollars	Jan-16	Number	reduce pressure on families	IMPACT ON DEMOGRAPHY: 2015/16: 2 2016/17: 6	Impact linked to 1.1	В
	Develop a clear framework of Specialist and Edge of	ISIVE SUPPORT IS PROVIDED FOR FAMILIES AT TI		R. Wilshire	Dog 15	Number	Torgeting recourses in a	IMDACTON	Impact detailed in 2.5 and	
2.1	Care services  Edge of care is defined where children have been exposed to a range of issues that could result in the need to become Looked After. Early Help Services are pivotal in preventing this escalation (Note1)	Each Specialist Service needs to be within framework that ensures that they contribute a range of options – clearly stating WHAT they deliver and HOW. Services must be focused on clear models or programmes with each action having a goal.  Align to Think Family principles and effective interface with Early Help and CSE. All cases need contingency planning to have an 'at hand' plan if risk escalates.  Service specifications for AtC and SFSS will be refined to ensure they are complimentary and not duplicating work.  Intervention points for each service will need to be revised.  Develop clearer guidance around how to refer to each service and what to refer, based on S.Magilton's proposals.  Ensure staff receive training on making referrals to specialist services.  Develop a database to feed in outcomes of each specialist service to aid monitoring and evidence base.  Agree who will monitor specialist services (team or board).  Monitoring of the newly formed Alternatives to Care Service.	page 14	R. Wilsnire	Dec-15	Number	Targeting resources in a timely way will allow more efficient work with children, reducing the timescales of referrals between services. This will ensure appropriate services are alerted in a timely manner and children will be supported to stay at home and return home.		Impact detailed in 2.5 and 5.1	R
2.2	Focus of family services on preventing children entering the care system to enable us to offer appropriate services at the appropriate time	We will target resources, such as young people's workers, towards families particularly where there are young people aged 13-16+ who may be on the trajectory towards care.  This includes the implementation of the new role of S.20 panel to ensure strengthened thresholds of accommodation.  We will explore invest to save options to increase the impact of work on savings by reducing the number of 13-16+ coming into care.	page 15	J Gregg	Dec-15	Number	Improved identification and intervention will reduce the number of children who enter care.	Impact linked to 1.1	Impact linked to 1.1	R
2.3	Work to broker family solutions	For all cases on the edge of care we will use family group approaches to explore wider family solutions to ensure a child can remain in their family or extended family.	page 15	F.Van Den Hout	Dec-15	Number		IMPACT ON DEMOGRAPHY: 2015/16: 4 2016/17: 12		R
2.4	Reduce the number of 16+ Looked after children	Ensure consistent approach to Southwark judgement; Use of family and friends for cooling off period  Work with District councils to promote keeping 16+ with their families review fast track to AtC to ensure used where appropriate  Review the alternatives for young people coming in to care such as short term respite, family & friends and community.  Work with voluntary housing agencies to provide accommodation to young people	page 15	F. Van Den Hout/ R.Wilshire	Nov-15	Number	those aged 16 and over will reduce the number of 16+		Reducing 16+ 52-week placements to 6.41, and supported accommodation 52-week placements to 19.24	R

2.5		AtC service has now had an opportunity to embed - we will now need to review its effectiveness.  We will launch Space - targeted support for women who have have babies removed previously.	page 16	A. Jack (AtC); T. Jefford / V. Crompton/A. Warburton (Space)	Jan-16	Number	AtC - working with those at crisis point to enable children to remain in their family unit  Space - working with mothers who have previously had babies removed to break the cycle and reduce the number of babies in care.	IMPACT ON DEMOGRAPHY: 2015/16: 6 2016/17: 26	AtC: reduce LAC by 26 50- week placements [25 52- week placements] (working with 60, 43% success)		В
	E 3: CHILDREN REMAIN IN EDUCATION	Establish additional support for sales to manife at the	2022 47	I Dollott	lan 40	Coot	LAC - stable education will	16/17: 2	Reduce residential schools		
3.1	Analysis of patterns of attendance, exclusions and absence to ensure young people who are LAC do not miss out on education	Establish additional support for schools to monitor the attendance of LAC, CiN and CP.  Commission provider to undertake this work who will work closely with the EWO to analyse this data.  Analysis of the data will indicate where intervention needs to be targeted.  Formal tender for attendance monitoring provider underway.  Review data to look for patterns/ discrepancies. schools to be challenged where appropriate.	page 17	J.Pallett	Jan-16	Cost	LAC - stable education will reduce the occurrence of placement breakdown and therefore fewer escalations to expensive provision.  CiN & CP - stable education reduces the pressure in families due to exclusion or non-attendance, therefore reducing the likelihood of children coming into care.	16/17: 3	to 8.24 52-week placements		R
3.2	Support within Localities for the early identification of risk	Establish local point of access for schools, securing links between Locality Teams and newly established SEND Specialist Teams to ensure early signs of SEMH are identified and effectively responded to by the schools and targeted/ specialist support services when needed.  Establish process within Transfer meetings between Locality Teams and Childrens Social Care by which adolescents who are at risk of needs escalating are identified and prioritised, with appropriate additional support provided for the family as required	page 17	H Phelan	Nov-15	Number	Stable educationis supported by the effective use of family CAF to reduce the pressure in families due to exclusion or non-attendance relating to challenging behaviour, therefore reducing the likelihood of children coming into care.				R
3.3	Services that support the stability of educational placements	Provide appropriate support to schools to enable them to effectively manage the additional needs of LAC, to prevent escalation to crisis management, whenever possible.  At times of crisis, to co-ordinate support across teams so that the school placement is maintained.	page 17	M Cullen / J Pallett	Jan-16	Number	Stable educationis supported by the effective use of family CAF to reduce the pressure in families due to exclusion or non-attendance relating to challenging behaviour, therefore reducing the likelihood of children coming into care.	Impact lir		Regular meetings between Marian Cullen and Xenia Dixon (ESLAC teacher) to share cross service developments, offers and thresholds. SEND Specialist Services Teachers and ESLAC teachers working together to discuss cases. Dedicated EP resource provided to ESLAC for consultation/advice. SENID Specialist Services joining ESLAC/START Tuitiion Framework.	В
3.4	Support for care leavers	ESLAC to provide support and guidance to young people who are progressing from Y11 to post 16.	page 17	J. Pallet	Nov-15	Cost	Smooth transitions between Year 11 and Post 16 education will support young people moving to supported accommodation or successfully exiting the care system. This will also help with reducing the number of LAC who are NEET.	therefore reduces the cost.	ber who return to care and . This links with the saving in 2.4		В
	E 4. PLACEMENTS FOR CHILDREN IN CARE ARE I		noge 40	I Desdey/T	Da- 45	Coot	Croative calutions will	15/16: 2	Dodugo ordannal maridanti i		
4.1		Review placements and look at creative options to reunify child with family and reduce cost. This is being undertaken	page 18	J. Davies/ T. Collins	Dec-15	CUSI	Creative solutions will reduce the use of high cost	15/16: 2 16/17: 12	Reduce external residential homes to 23.91 52-week		R
4.2	Reduce the number of external placements/ increase in-house fostering placements	through creative care work and S20 panel.  External residential and IFA use will be reduced. In-house fostering placements will be increased. [Additional action plan attached].  Wherever an external placement disrupts, the young person will be brought back in-county.  Developing partnerships with external providers in-county to provide cost effectice long term residential placements.	page 18	T.Collins	ongoing	Cost	external placements.  Expanding the size and skill set of in-house fostering provision will reduce the use of agency foster placements and residential placements, therefore reducing the average weekly cost.	Numbers of children will be measured through Key Activity Data	placements. Increase in-house fostering to 186.72 52-week placements; reduce IFAs to 153.86 52-week placements & kinship 52-week placements to 35.29 Change internal-external % to 47.08% external	strategies and required	R

4.3	Lowering the cost of the most expensive placements	Continue to review the top 50 placements weekly	page 19	T.Collins/ J	Nov 15	Cost	Reducing the unit cost	No number as this relates	90% occupancy of in-house		
		Budget information available to units and Sec 20 panels; reduce costs through procurement of places	10	Davies/ S.J. Smedmor	7.57 10			to maximising usage.	residential (including London Road, Hawthorns and Victoria Road) = 13.5 52-week placements		
		Develop written process for escalation/ challenge by ART when matched place in county/ in house is refused					sourcing alternatives.		32-week placements		
		Commission improved provision for children and young people with mental health issues									R
		Introduce financial contributions from parents where appropriate when child brought into care									
		Creation of emergency solo placements at Hawthorn's Children's Home.									
4.4	Reducing the cost of external placements	Continue to commission IFAs through the Eastern Region Fostering Contact .	page 19	J. Davies	Ongoing	Cost	Reducing the unit cost by better procurement through regional collaboration.	N/A - unit cost	£450k		
		Savings made as a result of negotiating discounts.					regional collaboration.				R
		We will also revisit the external residential framework contract.									
4.5	Develop Assisted Boarding Placements	Establish process to procure places where appropriate to avoid children coming in to care. This is being taken forward through the RNCF and Assisted Boarding Schools Network. It is recognised that this will be suitable for only a few children.		J. Davies	Apr-16	Number	Supporting family resilience by reducing the pressure within families, enabling the child to remain part of the family unit.	DEMOGRAPHY: 2015/16: 0	IMPACT ON DEMOGRAPHY: 2015/16: 0 2016/17: 2		R
4.6	Cambs policy on UASC Placements	Development of dedicated pathway for UASC to ensure assessments are made quickly and children placed in the most appropriate and cost effective accommodation	page 20	T.Collins/ J. Davies/ C.Smith	Nov-15	Cost	Through offering emergency solutions as a more cost effective response prevents blocking	N/A	Link to 4.3		
		Review potential for crash pad to reduce call on in-house fostering while long term solutions found. Develop emergency pool of foster carers to support UASC.					of longer term placements for other children in the care system, and therefore prevents the escalation of cost for permanence.				R
4.7	Develop in county provision for disabled young	Work with providers already operating in Cambridgeshire	page 20	R. Holland/ J./	Apr-16	Cost	Offering in-house provision reduces the use of	N/A - not reducing number,	Reduce residential		
	people	to discuss the Council's needs and work with them to establish in-county.  Revise first steps and implement to prevent escalation.		Davies			expensive external alternatives, therefore reducing the average	moving in-county	disability to 2.73 52-week placements		R
		Consult on 52-week education provision in-county.					weekly cost.				
4.9	Parental financial contributions	We will consult on parental contributions		T. Collins	Apr-16	Cost	Generating income, reducing the net average weekly cost.	N/A	£50k		
							May also result in fewer children entering the care system.				В
	E 5: CHILDREN ARE MOVED THROUGH THE CARE										
5.1	Reunification	Well-resourced and coherent reunification services can lead to better and speedier permanence outcomes through a stable return home to parents. This work will ensure that reunification is considered as soon as the child becomes Looked After.	page 20	T.Collins/ S.J. Smedmor	Ongoing	Time	Speeding up identification of reunification cases and the process of reunification will result in a reduced amount of time children spend in care.	IMPACT ON EXISTING LAC NUMBERS: 15/16: 36 16/17: 16	See Target Reduction in Children in Care		
		The 2nd LAC review should be used to consider reunification. This links to the work around all services focussed on preventing children from entering and moving children out of the care system.									R
		S20 panel will track children through the reunification process to prevent drfit.									
5.2	Ensuring adoption is quick where appropriate	Track cases where adoption plan resulted in alternative care	page 21	T.Collins	Nov-15	Time	Children spend less time in care.	IMPACT ON DEMOGRAPHY: 16/17: 40	Reduce concurrent adoption to 5.50 52-week placements		
		Monitor allowance level of adoption allowance to support permanency									R
		Monitor prevalence of children being in care for 3 months or less and identify reasons and solutions.									10
					_	_					

5.3	Ensuring cost effectiveness of adoption and special guardianship order arrangements	We will review the SGO payments to ensure cost effectiveness.	page 22	T. Collins	Jan-16	Cost	Shorter period for receipt of N/A payment, resulting in reduced overall cost of post-adoption services.	£350k saving	R
5.4	Participate in the cost calculator for adoption activity	Cambridgeshire will participate in research being carried out by Loughborough University to identify costs associated with adoption activity		T. Collins	Dec-15	Cost	Gathering of benchmarking data will allow the identification of cost efficiencies.	Saving linked to 5.3	В
5.5	Transition to Adulthood	Develop a policy to ensure effective pathways for those who are leaving the care system are established in a timely manner prior to the young person becoming 16. Improve the availability of community support and resources to prevent reaccommodation.	page 22	T. Collins	Dec-15	Time	Earlier planning will result in a smooth transition and successful exit of care, in a timely manner.	nked to 2.4	В

#### TARGET REDUCTION IN LAC POPULATION (See Note 2)

	TARGET REDUCTION	TARGET REDUCTION								
	IN CHILDREN IN CARE	OF 52-WEEK								
		PLACEMENTS								
TOTAL DEMOGRAPHY REDUCTION:	16/17: 148	32.5								
TOTAL REDUCTION IN	15/16: 42	15/16: 42								
EXISTING LAC:	16/17: 38	16/17: 38								

Business Planning

						reference	•
Objective	2016/17	2017/18	2018/19	2019/20	2020/21		
Reduce the number of children who are looked after	-2,100	-1,615	-1,680	-1,744	-1,841	A/R.3.012	
Reduce the unit cost of placements for children in care	-922	-958	-714	-427	-312	A/R.6.406	
Reduce the length of time children are in care	-507	-853	-809	-485	-340	A/N.0.400	
Adoption*	-350					A/R.6.305	
Share Care provision (4.7)	-500	-174					
Alternatives to Care (2.5)	-217						
In-house fostering	0						
Carried forward pressure	0						
	-4,596	-3,600	-3,203	-2,656	-2,493		

<sup>\*</sup> saving included for completeness and to ensure savings are not double counted.

#### **SAVINGS:**

Placement type	2016/17 saving	Unit cost saving	Time saving
Residential - disability	-75	0	-75
Residential schools	16	0	16
Residential homes	1,211	1,211	0
Independent fostering	-3,536	-3,158	-378
Supported Accommodation	-35	0	-35
16+	-85	0	-85
In house fostering	1,011	1,011	0
Kinship	14	14	0
In house residential	0	0	0
Concurrent adoption	50	0	50
TOTAL	-1,429	-922	-507

#### Note 1: Edge of Care Definition

The following criteria may be used to define a child on the 'Edge of Care'

Have or in need of a Family CAF

Open to Children's Social Care

Have a Child In Need or a Child Protection Plan

Considered likely to become accommodated should the current intervention not succeed

Recently left care to return to live with their parents and are still in need of specialist support

#### Issues' may include:

### Parents' capacity to cope due to:

Their own mental health or substance misuse

Poor parenting skills

Experience of domestic violence

Their own learning difficulty

Limited or no wider family or community networks

#### Note 2: Target LAC Reduction

There are two columns for target numbers – the first is the target number of **children** diverted, and the second is the 52-week placements diverted.

The target demographic reduction in children in care is an educated estimate of the number of children teams will need to work with in order to meet the target reduction in 52-week placements and therefore the savings. It is unknown how many of these children would enter funded placements, the types of placements they may require and the length of time they may remain in care. This target therefore will be reviewed after 6 months.

The target reductions in 52-week placements, separated out for demography and current numbers have been calculated from the demography calculations and the BP model respectively. Please note, these reductions are in 52week placements so, in reality, the number of children diverted or reunified will need to be greater than this. Where possible the target reductions have been assigned as per the BP model, and others have been assigned as agreed with project leads.

Emotional and anger management issues
Mental health issues
Family discord
Young person homeless, abandoned or subject to neglect or abuse
Missing from home
Child Sexual Exploitation and risk taking behavious
School break-down, exclusions and non-attendance

**APRIL 2017 - MARCH 2018** 

Target LAC Number April 2018:

478

Action Plan contains workstreams that will begin in this period - some may span more than one period and are priority rated accordingly

# Priority Rating: Urgent Priority Development of activities will continue in to next period

**APRIL 2018 - MARCH 2019** 

Target LAC Number April 2019:

469

Action Plan contains workstreams that will begin in this period - some may span more than one period and are priority rated accordingly

# Priority Rating: Urgent Priority Development of activities will continue in to next period

**APRIL 2019 - MARCH 2020** 

Target LAC Number April 2020:

457

Action Plan contains workstreams that will begin in this period - some may span more than one period and are priority rated accordingly

# Priority Rating: Urgent Priority Development of activities will continue in to next period

# **APRIL 2020 - MARCH 2021**

**Target LAC Number April 2021:** 

450

Action Plan contains workstreams that will begin in this period - some may span more than one period and are priority rated accordingly

# Priority Rating: Urgent Priority Development of activities will continue in to next period