

**BUILDING FAMILY RESILIENCE: A STRATEGY FOR CAMBRIDGESHIRE'S  
CHILDREN, FAMILIES AND ADULTS SERVICES**

*To:* **Children and Young People Committee**

*Meeting Date:* **8<sup>th</sup> December 2015**

*From:* **Adrian Loades, Executive Director: Children, Families and  
Adults Services**

*Electoral division(s):* **All**

*Forward Plan ref:* **2015/060** *Key decision:* **Yes**

*Purpose:* **To inform the Committee of the initial draft of the Building  
Family Resilience Strategy and Action Plan, to seek  
comment and agreement on the direction and content of  
the strategy and plan.**

*Recommendation:* **The Committee is asked to review and comment on the  
draft Strategy (Appendix 1), the commissioning intentions  
and the areas of priority within the Action Plan (Appendix  
2).**

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## **1.0 BACKGROUND**

- 1.1 The Looked After Children (LAC) Placement Strategy 2011-2015 provided an effective framework for the delivery of care placements and services aimed at preventing children from becoming looked after and reducing the cost of care, whilst ensuring that children and young people remained safe. The Strategy drew together a range of services including those delivered by schools, children's centres, health services, voluntary organisations and partners.
- 1.2 The previous strategy was initially successful in its aim to tackle the rising numbers of looked after children seen during 2010, ensuring the LAC population subsequently stabilised and between 2011 and 2013 it remained relatively static. In light of savings targets, total LAC spend decreased in 2011/12 and remained within budget until 2012/13. However, during 2014, the LAC population began to steadily increase once again.
- 1.3 There has subsequently been a rising trend in LAC numbers and in 2014/15 total spend was £33,245,750 which was £2,363,327 over budget. This necessitated a fundamental review of current arrangements and the development of a new strategy, particularly in the context of ongoing pressure on County Council budgets. The new Strategy sets a pathway for meeting significant savings targets over the next five years. The Strategy sets out a more flexible approach to supporting families to remain together and only in exceptional circumstances should children need to come in to care. Where they do, the decision making and services will seek to ensure that needs are met and children leave care on a timely basis, whether it be to return to their family or other permanence options.
- 1.4 The 2015-2021 LAC Commissioning Strategy is being led by the LAC Commissioning Board, which is made up of cross Directorate representatives. An action plan runs in parallel with the strategy breaking down key savings targets against identified areas of work. The Strategy develops new and innovative ideas aimed at preventing children becoming looked after; such as the new 'Alternatives to Care' service, recently established and aimed primarily at preventing children in the 11-18 age group from entering care, by brokering family solutions through intensive and time limited support.

## **2.0 THE INCREASING LAC POPULATION**

- 2.1 Since the end of 2013, numbers of children in care have steadily risen, and in the last year the rate of children in care has increased significantly to an all time high of 577 in November 2015. The current rate of LAC stands at 40 per 10,000 – based on comparable national statistical data. This is in line with our statistical neighbours at 40.3 per 10,000 and reflects a national trend in growth.
- 2.2 A recent rise in the number of unaccompanied asylum seekers (40 since April 2015) has also been a significant factor. Asylum seekers under the age of 18 have to be accommodated by the local authority area in which they first come to the attention of public services.

- 2.3 This strategy establishes a plan to change these trends and aims to reduce the number of children in care to 453 over the next 5 years. This would reduce the rate of LAC per 10,000 to 29.3 by 2020/2021. The budget reduction over 5 years would be £6.3m with a total budget of £13,071,809 by 2020/2021.
- 2.4 The rising number of children in care is driven by both numbers becoming looked after and the rate at which children leave care, primarily either returning home, being adopted or reaching the age of 18.
- 2.5 Across the cohort of children and young people becoming looked after during 2015 our analysis suggests that the most prevalent reasons for children coming into care are;
- Mental Health Needs amongst parents/carers
  - Neglect
  - Domestic Abuse in household
  - Emotional Abuse
  - Drug Misuse by Parents
  - Alcohol Misuse by parents

These factors are not new and parental mental health; domestic abuse and substance misuse are known to represent some of the most challenging issues to address in family life. The Strategy therefore prioritises these issues for our workforce at all levels of intervention and we are continuing to review our offer and how we work with partners to more effectively tackle these concerns. Addressing these fundamental drivers of family crisis must be at the heart of our work to reduce numbers of children in care.

- 2.6 Ensuring we achieve a balanced placement mix is also an important element of successfully managing our budget. Family based and adoption placements are lowest cost. In house fostering services are 55% cheaper than Independent Fostering Agency (IFA) placements (based on CIPFA benchmarking data). Our most expensive placements are those in residential care and residential schools but they make up the lowest levels of activity. Regular analysis of high cost placements takes place to ensure that the placement is still appropriate for the young person and attaining best value for money.
- 2.7 Continuing increases in the numbers of children becoming LAC place further additional pressure upon the placements budget. Recent increasing numbers exceed those anticipated by our demographic forecasting and are therefore, in the long term, unsustainable. The challenges set are difficult and review of progress will be required on a monthly basis at the LAC Commissioning Board but also on a 6 monthly basis. The 6 month review will focus on the impact of activity in the action plan and whether it is providing the results required to reduce costs and keep children with their families for longer.

### **3.0 THE VISION OF THE STRATEGY**

- 3.1 **The vision is that:**

Families receive support to help them stay together wherever possible. Our support builds on the strengths of families and clearly addresses the risks to children so that plans succeed and children do not need to come into care.

Where children and young people do come into care they have good educational and care placements, primarily in a family setting and that their care pathway ensures that they are looked after for the shortest period of time.

#### **4.0 OUTCOMES AND COMMISSIONING INTENTIONS**

4.1 The Strategy ([Appendix 1](#)) and action plan ([Appendix 2](#)) are based around five outcomes, each with their own set of commissioning intentions and areas of work. The strategy sets out “what will be different” and details what “we will commission”. Some of these areas of work and activities are already taking place. It therefore reflects both new and existing activity. Activities that are already taking place are listed under “what will be different” because greater emphasis is being placed on them and their focus or the way they interact with other activities will change. Details of how we will deliver the changes set out in the strategy are described in the action plan at [Appendix 2](#). The numbers listed under the “we will commission” section correspond with those in the action plan. Listed below are the key activities set out in the strategy and action plan that are different to what we are currently doing and will enable us to reduce spend:

4.2 **Outcome 1: Families are supported to stay together** reducing the need for children to be looked after by ensuring a focus on early intervention and preventative action across children’s services.

Key activities that will be different and enable us to reduce our numbers will be:

- Increase the number of children who have a Family Common Assessment Framework (CAF), ensuring all children who are referred to social care and are previously known to our early help services have one in place. A Family CAF ensures coordination across all services, with a lead professional, delivering timely early intervention. Effective use of the CAF will reduce the number of families requiring an escalation in services. In the case of emergencies, where a CAF has not been used, we will review the reasons and implement our learning around this. We will support public and voluntary sector organisations to work with families where children are at risk, ensuring that risk is safely managed in the community and the number of children becoming looked after is reduced.
- Coordinated services for responding to substance misuse, mental health issues and domestic violence that will consider the impact on children within families where this is occurring, in order to reduce the number of children and young people entering the care system. Specific actions for each of these

areas are set out in the action plan.

- Develop an accessible website that answers 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.

4.3 **Outcome 2: Risk is managed confidently and intensive support is provided for families at the edge of care** to make sure that the right children come in to care at the right time.

Key activities that will be different and enable us to reduce our numbers will be:

- A framework of services to those children who are on the edge of care. We have recently reviewed our specialist services provision and will implement changes to the pathway and access to the services that fall within the scope of the review including Family Intervention Partnership (FIP), Multi-Systemic Therapy (MST), Alternatives to Care (AtC) and Specialist Family Support Services (SFSS). This will ensure that the appropriate services are available to families at the appropriate time. The aim of the review will be to deliver a more streamlined approach to these services with fewer referral routes for children and families.
- Brokering family solutions wherever possible – ensuring that we have always fully explored the potential for children to remain at home or to be placed with kinship carers before considering permanency within care. We will respond quickly and effectively to crises - undertaking intensive work with families to identify alternatives to care. In order to achieve this we will consider widening the scope of our family meetings to ensure that all families engage in these discussions at the earliest opportunity.
- By using data to ensure that our commissioning is timely and reflects a strong understanding of needs and trends. For example, there will be greater clarity about reasons for the rise in 16+ young people. We will use data regarding the amount of time that 16+ young people are LAC to clarify the protocol around coming into care post 16. The focus will be on keeping 16 year olds in their home. But where this is not possible, to find solutions using alternative family, friends or community options.

4.4 **Outcome 3: Children remain in education** and engaged in learning, recognising the vital importance of stable and successful education to enable the most vulnerable children to achieve their full potential.

Key activities that will be different and enable us to reduce our numbers will be:

- By including the exclusion data for LAC, Child Protection and Child In Need in the monitoring through the Looked After

Children Commissioning Board (which provides governance for the strategy and action plan) and at Section 20 panel (threshold for accommodation meeting) and review of patterns of attendance and absence. The data will be used to target services in supporting schools and carers to get LAC into school and prevent breakdowns and escalation to residential provision. The aim will be to stop children becoming LAC by reducing pressure due to exclusion or non-attendance.

- 4.5 **Outcome 4: Placements for children in care are in county and with a family** so that all Looked After Children have a positive experience of care, in sustainable placements, whatever their needs.

Key activities that will be different and enable us to reduce our numbers will be:

- To implement Creative Care approaches for all LAC in high cost placements and this will be integrated into the section 20 meetings. Creative Care refers to identifying an alternative to a high cost care placement using a range of solutions to support family and friends so the young person can remain at home, i.e. respite. This will aim to significantly reduce the highest cost care packages in order to make immediate savings.
- To review and implement new marketing approaches to increase in house care using external expertise. We will also extend the skill set of in house foster carers to meet the needs of UASC and those needing solo placements with very particular challenging needs to avoid residential provision.
- To develop solo provision for emergency placements for LAC who must be placed in a single placement..

- 4.6 **Outcome 5: Children are moved through the care system quickly** which enables them to be reunited with family and friends where possible, have stable placements and exit the care system positively.

Key activities that will be different and enable us to reduce our numbers will be:

- The Adoption Scorecard was introduced by the Department for Education in 2010, to address the delays in the adoption system. These timescales are subject to decreasing thresholds year on year. The current timescale requires that the length of time between entering care and ceasing to be looked after is equal to or less than 14 months. From 2017 onwards this will decrease to 12 months, therefore we will need to continue to improve on these timescales to reduce the care journey of those children who will be adopted.
- The concurrency protocol and processes went live in Cambridgeshire in September 2013 and will continue to be promoted where suitable as a means of moving children through the system more swiftly. Concurrent carers are approved adopters who act as foster carers whilst the adoption

process is completed. We aim to continue to exceed these targets so that more children can be moved through to adoption as quickly as possible. The revised target number of concurrent adoptions for 15/16 is 10.

- There are plans to design a new adoption agency for children in the Central Eastern Region of England. The children's charity Coram, together with six local authorities including Cambridgeshire, and two voluntary adoption agencies, have been successful in their bid to the Government to explore the creation of a regional adoption agency to serve over 230 children requiring adoption. The intention behind a regional adoption agency is to bring together adoption services in local authorities to offer more efficient, combined services. This in turn will enable resources and skills to be shared amongst the local authority and voluntary adoption agency partners on a larger scale than before. It will give children and their social workers immediate access to an increased pool of adopters who will have the capacity and skills to care for children with more complex needs.

## **5.0 ALIGNMENT WITH CORPORATE PRIORITIES**

### **5.1 Developing the local economy for the benefit of all**

5.1.1 The following bullet points set out details of implications identified by officers:

- Commissioning arrangements for voluntary sector and partner organisation, particularly within Cambridgeshire to provide support to reduce the number of children becoming LAC and support family resilience.
- The development of our In House Fostering Service offers opportunities to the people of Cambridgeshire to become employed as foster carers.
- A reduction in the use of external placements, particularly those supplied by Independent Fostering Agencies (IFA's) would have a negative impact on those organisations.
- Higher risk being managed in community.
- Need to ensure children remain in educational placements and are attending school and not excluded.

### **5.2 Helping people live healthy and independent lives**

5.2.1 The following bullet points set out details of implications identified by officers:

- With fewer children coming into the care system, their mental and physical health needs will need to be supported in their homes and community placing more pressure on early help services.
- Emotional Health and Well Being Services will need to be aligned to meet this need and discussions continue to take place through the Cambridgeshire and Peterborough Joint Commissioning unit to deliver this.
- Better identification early on and appropriate support services will

continue to be developed, including through ensuring that children have a CAF and appropriate interventions prior to becoming Looked After.

### **5.3 Supporting and protecting vulnerable people**

5.3.1 The following bullet points set out details of implications identified by officers:

- Ensuring that child protection is our priority and building on our assessment of risk is key to managing the LAC population.
- There is an emphasis on support for the whole family, particularly through the 'Think Family' approach, thereby ensuring that where possible family issues that can lead to children becoming LAC are resolved early on. Where this is not possible, and children do need to become Looked After, support to the family to resolve its problems remains in place so that the child can be reunified as quickly as possible. This will mean more resources need to be focused on this targeted work.
- The expectation will be that children with disabilities remain at home and in local schools and this may result in family breakdown. We will mitigate this risk by enhancing our support offer to these families to reduce the risk of this happening.
- More 16+ young people will be expected to remain within their families. This could result in more NEET and sofa surfing. Therefore, specialist services will need to ensure that extended family and community solutions are brokered to mitigate this.

## **6.0 SIGNIFICANT IMPLICATIONS**

### **6.1 Resource and Performance Implications**

6.1.1 The following bullet points set out details of significant implications identified by officers:

- The success of the strategy in preventing the number of Looked after children from further escalation is vital if we are to meet savings targets. This is a demanding area of work and needs consistent monitoring and reviewing of actions to adapt, re-commission and revise them dependent on impact. Monitoring will be monthly through the LAC Commissioning Board with a 6 monthly review of the activities in the action plan.
- Greater reliance will be placed on early help services, to harness community and extended family resources and on specialist services offering targeted intervention in order to enable children to remain in their homes and build family resilience. This will place considerable strain on the system requiring us to offer help to the most vulnerable.
- Particular focus will be placed on our in house fostering and residential provision to deliver increased numbers of placements, placing further strain on the system.

### **6.2 Statutory, Risk and Legal Implications**

6.2.1 The following bullet points set out details of significant implications



identified by officers:

- Staff will be managing higher levels of risk with children expected to remain in dysfunctional homes for longer periods of time with exposure to greater risk than previously considered acceptable. Our workforce will need to develop to manage these risks
- There are significant implications to developing new ways of managing risk in deciding whether to take a child in to care and staff will need to develop strategies to manage real and perceived risk so that only those children who really need to become Looked After do so.
- Where creative care plans are used to enable the child to stay at home, the potential risks need to be balanced with the improved outcomes for the child and family and the best use of the available resources.

### **6.3 Equality and Diversity Implications**

6.3.1 The following bullet points set out details of significant implications identified by officers:

- Equality and diversity is considered in all service areas linked with the LAC Commissioning Strategy.

### **6.4 Engagement and Consultation Implications**

6.4.1 The following bullet points set out details of significant implications identified by officers:

- Other public services as well as voluntary services and partner organisations will be fully consulted between November 2015 and January 2016 once feedback has been received from the Committee.

### **6.5 Public Health Implications**

6.5.1 The following bullet points set out details of significant implications identified by officers:

- The strategy aims to enable more children to stay within their family homes where it is safe to do so and with the aim of ensuring improved health outcomes for families in particular relating to mental health.
- Conversely, children remaining in dysfunctional homes for longer particularly where there are mental health, substance misuse or domestic violence issues could have a negative impact on the mental and physical health of these children.
- To mitigate this, the additional support provided to children within their home will have a significant and positive impact on the lives of these children and their families.

### **6.6 Localism and Local Member Involvement**

6.6.1 The following bullet points set out details of significant implications

identified by officers:

- Members have been consulted via spokes and are now asked to provide comment on the contents of the initial draft.

Source Documents	Location
<ul style="list-style-type: none"><li>• Appendix 1 - Keeping Families Together: Commissioning Strategy for reducing Looked After Children 2015-2021 (Draft)</li><li>• Appendix 2 - Action Plan (Draft)</li></ul>	<p>Meredith Teasdale <b>Box No:</b> SH1210 <b>Room No:</b>222 Shire Hall Castle Hill Cambridge CB3 0AP</p> <p><b>email:</b> <a href="mailto:Meredith.Teasdale@cambridgeshire.gov.uk">Meredith.Teasdale@cambridgeshire.gov.uk</a></p>