

Cabinet

Dorset County Council



Date of Meeting	4 April 2018
<p><u>Cabinet Member(s)</u> Steve Butler – Cabinet Member for Safeguarding</p> <p><u>Lead Director(s)</u> Nick Jarman – Interim Director for Children Services</p>	
Subject of Report	Residential Homes Options Consultation and the Future Use of Maumbury House Dorchester
Executive Summary	<p>The Cabinet is asked to consider the options for the future of Residential Care for Children in Dorset and as part of this wider whole future use of Maumbury House Children’s Home (Dorchester).</p> <p>Following poor Inspection reports at both Maumbury House and West End House (Cattistock), Cabinet decided at the meeting of the 27th September to close West End House Children’s Home Cattistock.</p> <p>On the 6th of December Cabinet agreed that a period of consultation be undertaken to a) inform the development of a strategy for meeting the need for Residential Care in Dorset b) the future use of Maumbury House Dorchester.</p> <p>It is important to stress that this report is not mainly or exclusively about Maumbury House.</p> <p>This report is submitted to inform Cabinet of a) the current position regarding the progress of the consultation and options evaluation regarding the need for Residential Care b) The current position regarding the use of Maumbury House.</p> <p>The Cherries Children’s Home Weymouth (Specialist provision for disabled children) is not within scope for this report.</p>
<p>Impact Assessment:</p> <p><i>Please refer to the protocol for writing reports.</i></p>	<p>Equalities Impact Assessment:</p> <p>Children & Young People who are the service group for whom residential care is provided have been consulted regarding the context of this report. The outcomes from this will be considered in the EQIA. The outcomes from the Young Peoples survey and stakeholder survey are appended to this report.</p> <p>The current staff team at Maumbury house would be affected and there would need to be consideration given to specific needs and to the skills, needs, age, gender and other factors which could impact on any redeployment opportunities.</p>

	<p>A fuller Equality Impact Assessment is set out in Appendix 5.</p>																														
	<p>Use of Evidence:</p> <p>This is contained within the body of the report and referenced links.</p>																														
	<p>Budget: Maumbury House 2018-19 Budget and Occupancy Cost</p> <p>As previous reports have indicated the cost of Residential provision is primarily fixed and the unit cost e.g. cost per child place or (bed night) is dependent on occupancy. Low occupancy for whatever reason pushed up significantly the costs per child/young person. For costs to be sustainable against the external market occupancy needs to be at least 80%. The overall cost of running the home does not reduce given the bulk of the costs are staffing, premises and management costs.</p> <table border="1" data-bbox="467 790 920 1256"> <tr> <td>At 100% Occupancy</td> <td>648,300</td> <td>5 young People</td> </tr> <tr> <td>Weekly cost</td> <td></td> <td>12,434</td> </tr> <tr> <td>Cost per Young Person</td> <td></td> <td>2,487</td> </tr> <tr> <td>At 80% Occupancy</td> <td></td> <td>648,300</td> </tr> <tr> <td>Weekly Cost</td> <td></td> <td>12,434*</td> </tr> <tr> <td>Cost per Young Person</td> <td></td> <td>3,108</td> </tr> <tr> <td colspan="3">Last 5 months to February 2018:</td> </tr> <tr> <td>32% Occupancy</td> <td></td> <td>648,300</td> </tr> <tr> <td>Weekly cost</td> <td></td> <td>12,434*</td> </tr> <tr> <td>Cost per Young Person</td> <td></td> <td>7,771</td> </tr> </table> <p>* There are some slight savings made against non-occupancy within the young person’s allowances but this is < £74 per week per YP not resident.</p> <p>It can be seen from the formulation of the financial profile above that the current situation is not sustainable as this places Maumbury at the high end of regional and national market cost.</p> <p>The current average unit/weekly cost of non-disabled children’s residential external provision:</p> <p>£4250 (Excluding the 3 exceptional, specialist and secure placements)</p> <p>A breakdown of the current placement costs can be seen in the body of the report.</p> <p>Should there be a decision to close Maumbury House, Children’s Services will, in the first instance, make every effort to redeploy all staff affected by the closure. This will follow a period of consultation and change management in line with council policy and procedure.</p> <p>Where staff are at risk of redundancy the potential financial impact would be as follows: There are 12 (10.5 FTE) staff at Maumbury. The estimated cost of severance were all staff not to be redeployed would be circa £116k.</p>	At 100% Occupancy	648,300	5 young People	Weekly cost		12,434	Cost per Young Person		2,487	At 80% Occupancy		648,300	Weekly Cost		12,434*	Cost per Young Person		3,108	Last 5 months to February 2018:			32% Occupancy		648,300	Weekly cost		12,434*	Cost per Young Person		7,771
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	<p>The average cost of severance is £9.6k. So for example, if five staff could not be redeployed, the severance costs would be £48k in total.</p> <p>Risk Assessment:</p> <p>Overall Placement Sufficiency:</p> <p>Medium/Low</p> <p>Maumbury House has been running with low occupancy for some time. At the present time there is one child resident at the home. There are plans to find a longer-term placement for this child.</p> <p>DCC operates within an external provider framework which means the commissioning and placements team have access to residential providers within an agreed quality and cost framework. The framework can be expanded and the options for block contacting are being considered.</p> <p>The modernising Fostering Programme and recruitment initiatives within this are expected to increase significantly the pool of Dorset Foster Carers specifically those who can care for children with more complex needs.</p> <p>There will be small numbers of children who because of their experiences and trauma will need more specialist care and therapy. This group of children will be considered within the wider review of placement sufficiency and residential care provision.</p> <p>Staffing:</p> <p>Medium:</p> <p>Should the Maumbury home close staff consultation will be undertaken. This will no doubt cause some higher levels of anxiety and sickness levels are likely to increase. They are already at a high level.</p> <p>Some staffing redeployment may be possible This would be in line with council policy and with full consultation for staff.</p> <p>However, the wider consideration of the overall Residential needs of children’s services will be a factor.</p> <p>(Note: Where HIGH risks have been identified, these should be briefly summarised here, identifying the appropriate risk category, i.e. financial / strategic priorities / health and safety / reputation / criticality of service.)</p> <p>Other Implications:</p> <p>N/A</p>
<p>Recommendation</p>	<p>Cabinet is asked:</p> <ul style="list-style-type: none"> (i) Agree to the closure of Maumbury House (ii) Declare Maumbury House surplus to requirements (iii) Instruct officers to take all steps necessary including staff-related, to complete (i) and (ii)

Residential Homes – Children’s Services

Reason for Recommendation	<p>Maumbury House is no longer viable operationally or financially. The Ofsted judgement has exacerbated this position; and key difficulties with recruitment have compounded it.</p> <p>This also means that the Council cannot meet the training and development needs of staff to provide an appropriate level of care which fulfils the regulatory requirements.</p> <p>Occupancy at the home has reduced steeply since April 2017. For some time it has never exceeded 50% and most recently one person only lives at the home.</p> <p>Nationally the use of Residential care is significantly lower than other care options such as fostering 74% of looked after children placed with foster carers while 11% of children are placed in residential settings (DfE 2016).</p> <p>A period of consultation has been undertaken which is contributing to the overall needs assessment regarding Residential Options and the sufficiency of placement need. The Council is able to use a variety of more flexible, appropriate provision via the regional commissioning framework. In addition, other options are being explored to develop more suitable localised provision.</p> <p>The outcome from the consultation should be read in conjunction with this report and informs not only the recommendations contained in this report but additionally the future commissioning needs of the council and the work of the sufficiency strategy group.</p> <p>The consultation outcomes can be seen in the appendices to this report.</p>
Appendices	<p>(Note: Provide <u>public</u> web links where possible.)</p> <p>Residential Care in Dorset Consultation 2018</p>
Background Papers	<p>Recent Ofsted inspection reports are available on line at https://reports.ofsted.gov.uk/</p> <p>Comparing Placement Options www.rip.org.uk</p> <p>Local Authorities of the Southern Region:</p> <p>Specification for residential services for looked after children. December 2017</p>
Officer Contact	<p>Name: Tim Wells Tel: 01305 225738 Email: t.wells@dorsetcc.gov.uk</p>

BACKGROUND

1. Residential Establishments

- 1.1 Children’s Residential establishments are inspected by Ofsted against the relevant regulations and minimum standards within the Care Standards Act 2000.
- 1.2 An Inspection outcome judged against the standards are as follows: Outstanding, Good, Requires Improvement and Inadequate.
- 1.3 To be judged Inadequate an Inspector will have found serious failings within the Home and /or several standards that are not met. There may also be failings within the overall care planning for children.
- 1.4 Between July and August 2017, Full Inspections were undertaken by Ofsted at both West End House and Maumbury. In each case the outcome from the Inspection was that both Homes were judged as Inadequate.
- 1.5 The primary reasons for such judgments are that both homes have not in the past 3-6 months had strong and stable management arrangements in place. As an authority, we have been unsuccessful in our ability to recruit registered managers which creates an ongoing vulnerability in the face of any inspection. In addition, we have been unable to maintain a stable workforce resulting in residential care staff vacancies, which have also been difficult to fill, high staff sickness absence has exacerbated this.
- 1.6 Maumbury House was inspected again during October and there was evidence of progress in meeting the requirements contained within the previous Inspection. This resulted in a raised Judgement from Inadequate to Requires Improvement. This Judgement is limited because of the impact of the reasons outlined in 1.5 above.
- 1.7 Currently only one child is cared for at Maumbury House. This has significantly reduced the occupancy level and increased the cost per child.
- 1.8 Occupancy within the internal (DCC) residential provision has been steadily reducing over the last two years and is now less than 32%. Many factors contribute to the low occupancy but high staffing sickness and placement sustainability are the major issues.
- 1.9 The balance between planned and unplanned admissions has been difficult to maintain at Maumbury house. This is mainly categorised by the high percentage of children and young people having to move on in an unplanned manner. E.g. of the 19 care episodes for young people ending in the last 15 months – 16 ended in an unplanned way.

2. Impact Factors:

- 2.1 Maumbury House is neither a Good provision nor is it financially viable. Recruitment difficulties compound this and there is little or no prospect of sustainable improvement.
- 2.2 The nature and characteristics of the cohort of children requiring residential care is changing. More specifically the groups we are seeing are categorised by younger children who have been subject to emotional neglect and or child sexual abuse and older teenagers with high levels of emotional and behavioural difficulties. Therefore, we can expect that there are likely to be higher levels of emotional and behavioural difficulties including violence and aggression among children living in children’s homes (Berridge et al 2012).

- 2.3 Although low in numbers these groups of children often need high levels of support potentially with a more specialised care delivery model than would be managed in a local community home.
- 2.4 Maumbury House is clearly a building of its time and in the past provided good placements for many children when fewer children were fostered. However, the building in the current time does not meet the needs of children who have more complex needs, which is where our requirement for residential care is primarily. (See 1.9 above).
- 2.5 The large areas of the house, corridors and stairways make it difficult for staff to track the whereabouts of children making levels of supervision and engagement difficult and potentially unsafe.
- 2.5 Recent events e.g. the Ofsted Inspections, current need, have brought into question the sustainability of the current model of residential child care in Dorset (West End House and Maumbury House) and has resulted already in the closure of West End House in October.

3. Residential Options:

- 3.1 As the Cabinet paper of 6th December 2017 stated, there is an extensive provider market for children’s residential care and as part of a regional commissioning framework DCC commissioning and care planning services have some significant success at forging good relationships with external children’s home providers many of whom deliver good outcomes for the children we place.
- 3.2 Within a mixed economy of providing placements for children in care many local authorities have reached decisions to close their residential provision and use the relationship with the external market to meet their specialist and more complex need.
- 3.3 From the Residential Options consultation and survey there was a view from many respondents that there would remain a need for residential care provision in the county to:
 - Reduce costs
 - Improve outcomes
 - Ensure better relationships between social workers and children
 - Use the skills of the existing workforce

Demand for other types of provision identified:

- Singleton placements
- Emergency, short term crisis placements enabling assessments to be completed
- Specialist provision for 16 to 18-year olds with mental health issues
- Step down provision from Tier 4 mental health provision
- SEND residential provision, including respite care

The Survey outcomes are appended to this report and can be seen to indicate that a range of options, mainly smaller and targeted at specific need, would be required. It would be difficult to provide such a range from within the existing council provision.

- 3.4 Children’s Services commissioners work with the consortium in the southern region who have identified the following placement types needed by members of this group.
- **Planned and Same Day Residential Care**
 - Children and young people requiring planned and / or same day residential care and accommodation only, who are normally resident within the Local Authorities as included in the Local Authorities Southern Region. (LASR).
 - **Crisis Care**
 - Children and young people requiring Crisis placements consisting of residential care at short notice for a relatively short duration, who are normally resident within the Local Authorities as included in the LASR.
 - **Residential Care with DFE Regulated Education**
 - Children and young people who require a placement with DFE regulated education, who are normally resident with the Local Authorities as included in the LASR.
 - **Residential Parenting Assessments**
 - Parents and their children requiring a placement for the purposes of conducting an assessment of parenting capacity, who are normally resident within the local authorities as included in the LASR.
 - **Therapeutic Residential Care**
 - Children and young people requiring a therapeutic residential placement, who are normally resident within the local authorities as included in the LASR (see page.16 for full definition of Therapeutic Care)
 - **Children with Disabilities**
 - Children and young people with disabilities requiring planned and/or same day residential care and accommodation only, who are normally resident within the Local Authorities as included in the LASR.
- 3.5 These types of placement better reflect the Council's needs; and as such are more cost efficient.
- 3.6 Currently Maumbury House does not readily fit within these identified placement types and for the Home to do this, some extensive remodelling of the environment and training and development in respect of the skill base of the staff would be required. In its present form the home does not appear to meet the current profile of young people for residential care; nor does the Council have the funds to invest in such changes, even if it wished to.
- 3.7 Officers are exploring a tendering process for mini block contracts allowable within the LASR Framework for Residential care. This would offer the opportunity to expand the range of placements available for Dorset children, within the Dorset area and within the identified scope of need.
- 3.8 These explorations do not mean that Maumbury must be kept open, pending outcomes of these explorations.

4. Budget

- 4.1 The current budget and occupancy costs for Maumbury are detailed above in part 1 of this report. To recap. The current weekly running cost of the home is £12,434.
- 4.2 With the occupancy remaining low the cost per child is above £8,000 per week and increasing because of the low number (currently one child) and matching difficulties.
- 4.3 The table below offers the external market profile of Dorset Children placed in external placements.
- 4.4 Independent Children’s Home Profile - Number of Placements at February 2018:

Dorset has 41 children and young people placed in Independent Children’s Homes. These placement requirements fall into the following needs and are in the following location.

Need	In Dorset	Outside Dorset	Average Cost by need
Standard behavioural home	5 young people	5 young people	£3150 no education £4551 with education
Sexually Harmful Behaviour		3 young people	£4500 with education
Trauma (aged 8 – 12)		3 young people	£4950 with education
Therapeutic model		9 young people	£5282 with education
Mental health		2 young people	£3950 with education £12600 with education (secure)
Autistic Spectrum with additional behaviour issues	3 young people	8 young people CWAD Team	£2319 no education £3636 with education
Disability specialist	2 young people CWAD Team		£4000 no education
Autistic Spectrum SHB		1 young person CWAD Team	£3589 with education

Non-disabled children are placed within the Independent sector providers from the following independent providers. It can be anticipated that should the council engage a provider to provide a block contract, the costs per placement illustrated below would reduce.

For reference placements where education is provided are funded under joint arrangement between the social care budgets and the education budgets (HNB)

Provider	Number and Need	Average Cost by Provider
Beaufort Care	2 standard placements	£3100 no education
Cambian	6 (trauma, therapeutic and standard)	£3300 standard no education £4800 therapeutic with education £4950 trauma with education
Care Today	1 standard	£3895 with education
Esland	1 Therapeutic (high staffing level)	£7250 with education
Five Rivers	3 (standard/mental health)	£3950 standard with education. £6800 solo standard with education

		£3950 mental health with education
Hexagon	1 therapeutic (high staffing need)	£7650 with education
Hillcrest	2 standard	£3713 with education
My choice	1 therapeutic	£3948 with education
New Forest Care	1 therapeutic	£5125 with education
SWAAY	3 Sexually Harmful Behaviour	£4624 with education
Wessex College	3 (therapeutic/standard)	£4400 standard with education £4800 therapeutic with education

4.5 From the profile above it can be seen that the council is already using the external market to support children who have specific and more complex needs. Many of these children would not have been considered a suitable match for Maumbury house either due to their overall needs or the continued staffing and management pressures at the home

5. Options

5.1 As noted in section 2, above Maumbury House historically provided residential care for many children in Dorset. However, the needs of young people have changed significantly over time and changing demand has necessitated more specialist and individualised care. See table at section 4.4 above.

5.2 The low occupancy experienced by Maumbury House raises the question of the ongoing suitability of the Home for the current cohort of children the council needs to place within the residential sector.

5.3 The layout of the home is problematic with areas of the environment difficult to supervise and if necessary separate and divert young people successfully.

5.4 For the home to operate successfully within the regulatory framework a significant degree of investment would be needed a) to upgrade and modernise areas of the living areas and office spaces b) implement an intensive and current training and development programme for the staff team, specifically regarding the management of children with more complex and challenging needs. The Council does not have such funds.

5.5 For the foreseeable future it is likely that the Council will continue to need to place children in residential care within in the independent sector as demand for this type of provision is still needed. Potential savings can be developed by exploring new commissioning relationships, as referred to in paragraph 3.8 above.

6. Summary and Conclusions

6.1 Although Maumbury House met need successfully in the past, it no longer meets today’s patterns of need. In this context it is obsolete.

6.2 The quality of provision at Maumbury House is not good enough and difficulties with key recruitments mean that quality and safety of provision cannot be guaranteed.

6.3 Which means that the provision is neither viable operationally or financially.

6.4 Despite consultation, no option has been advanced which would overcome either of these realities. Moreover, the Council does not have the funds to make upgrades to the premises, even if it wished to.

Appendix 1. Placement Move Destinations

Appendix 2. Stakeholder Consultation Presentation

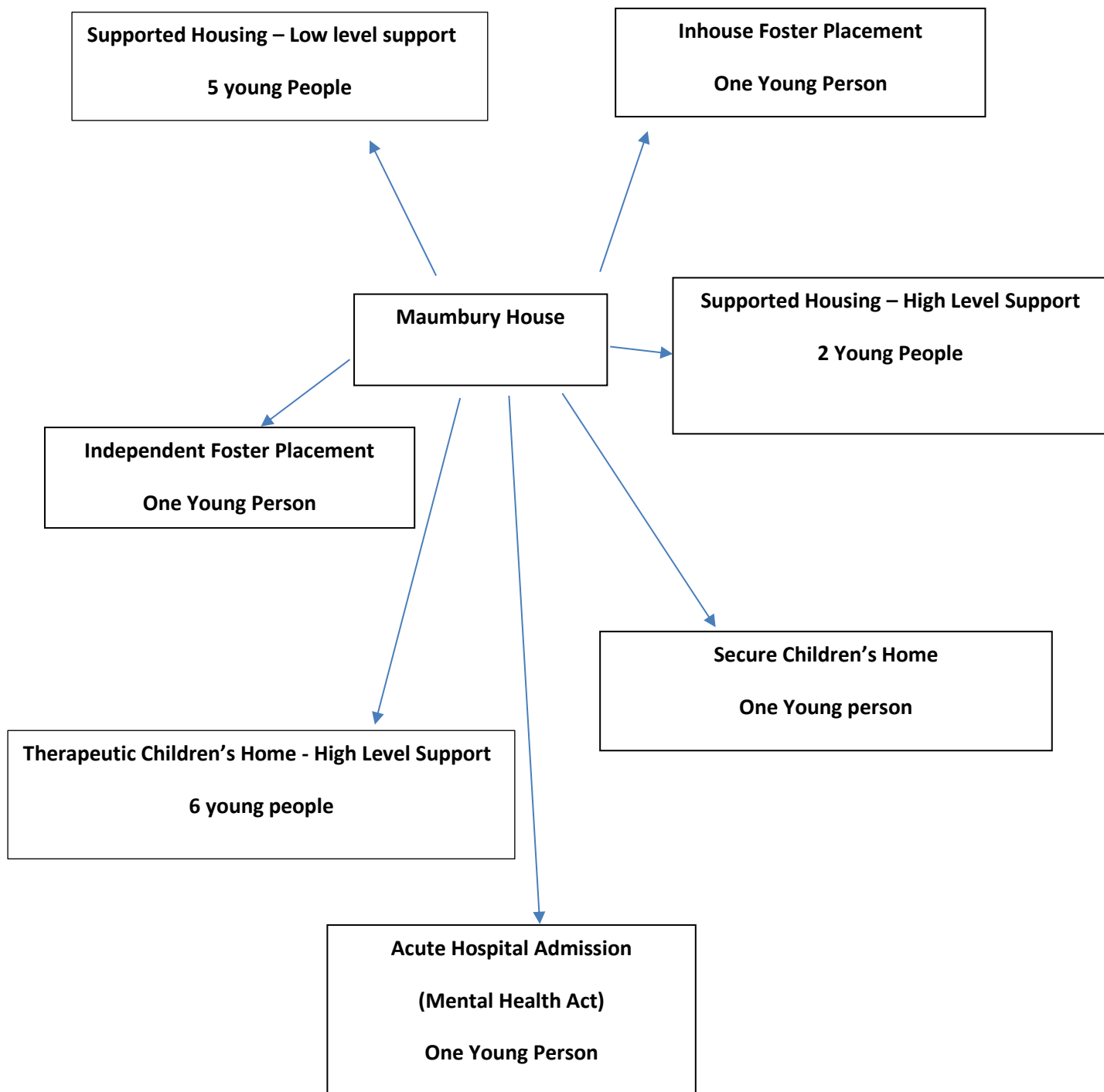
Appendix 3. Stakeholder Profile

Appendix 4. Young People’s Views

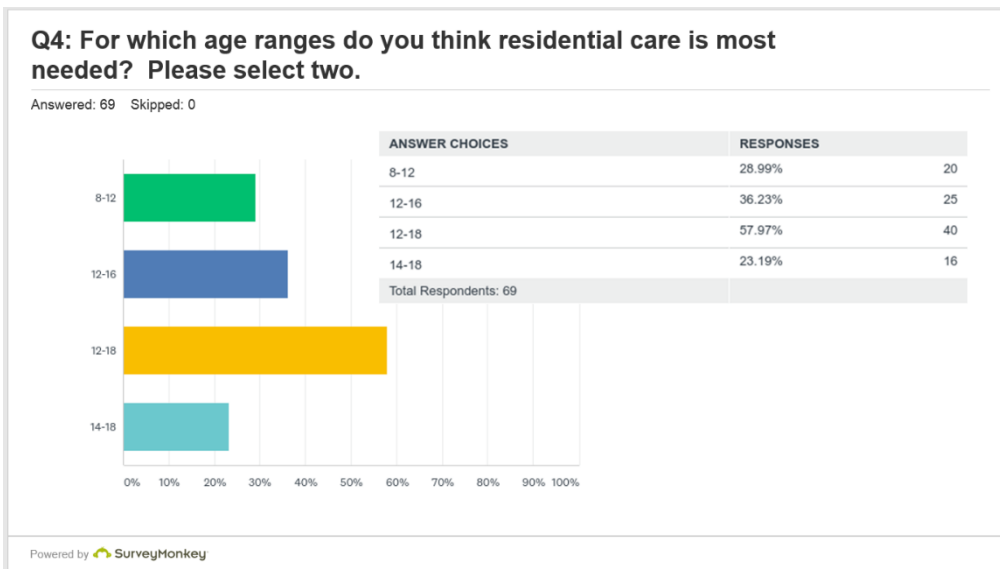
Appendix 5. Equality Impact Assessment

Appendix 1

Placement Move Destinations from Dorset CC Residential Care



Appendix 2



Family Focus NHS Maumbury House School
 DCC Residential Children's Services
 Dorset Healthcare Dorset County Council Childcare
 Early Years

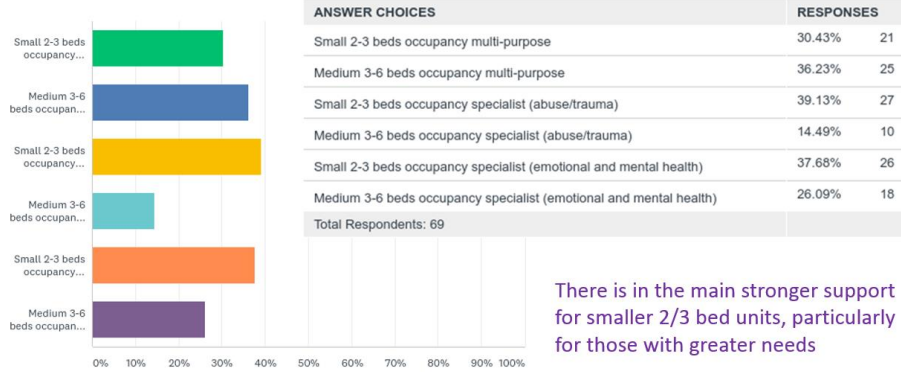
69
 Total Responses

Date Created: Thursday, January 11 2018
 Complete Responses: 69

Family Worker Support Social Worker Assistant
 Manager Deputy Head Residential Lead
 Advanced Practitioner

What type of residential care do you think is needed in Dorset?

Answered: 69 Skipped: 0



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Other themes emerging

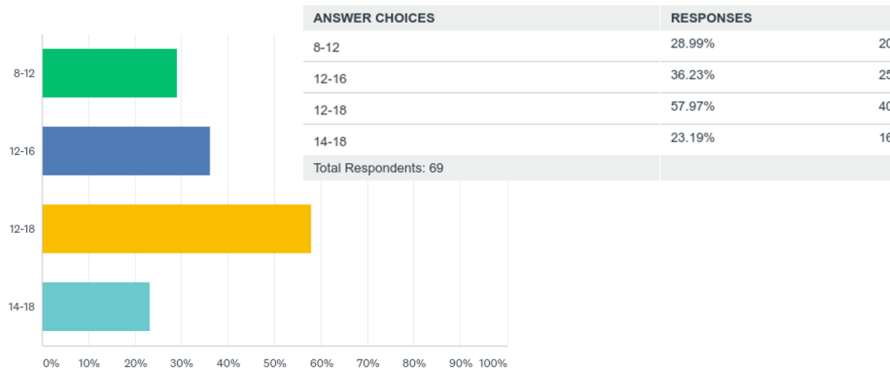
Click to add text

- Concerns over perceived ‘privatisation’ of care
- Concerns over the funding available to DCC for the provision of care from central government
- Desire from some for DCC to have its own in-house provision
- Clear support from participants that high quality residential care (offering therapeutic parenting) is essential in addition to fostering
- Urgency over need for more provision with the Dorset county borders
- Seek opportunities for joint funding, particularly with health partners

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Q4: For which age ranges do you think residential care is most needed? Please select two.

Answered: 69 Skipped: 0



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Reducing the need for residential care

Which agencies can play a key role in reducing the need for residential care?

- A range of agencies were identified including:
 - Fostering service
 - Social workers in children’s services (area teams and care and support)
 - Family Focus,
 - CAMHS
 - Early help provision – both DCC provided and voluntary and community sector
 - Police (community support officers) and youth justice
 - Substance misuse services
 - Housing providers
- Some specific interventions were mentioned:
 - Family Group Conferences
 - Parenting support
 - Therapeutic parenting for carers
 - Family support/therapy
 - Mental health services

“Residential care should also be considered as a positive approach when it is appropriate”

“Residential homes should not be the choice of the last resort – they should be considered for some young people as the preferred option... to avoid numerous fostering breakdowns...”

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Residential Workforce specific issues

- Concerns about workload and process
- Ensuring statement of purpose is adhered to is essential
- Joint training between residential staff and social workers to improve relationships
- Introduce opportunities for child’s social workers to shadow the work in residential settings
- Good matching is essential:
 - Placing young people in emergency/crisis can really impact on a stable children’s home and affect quality

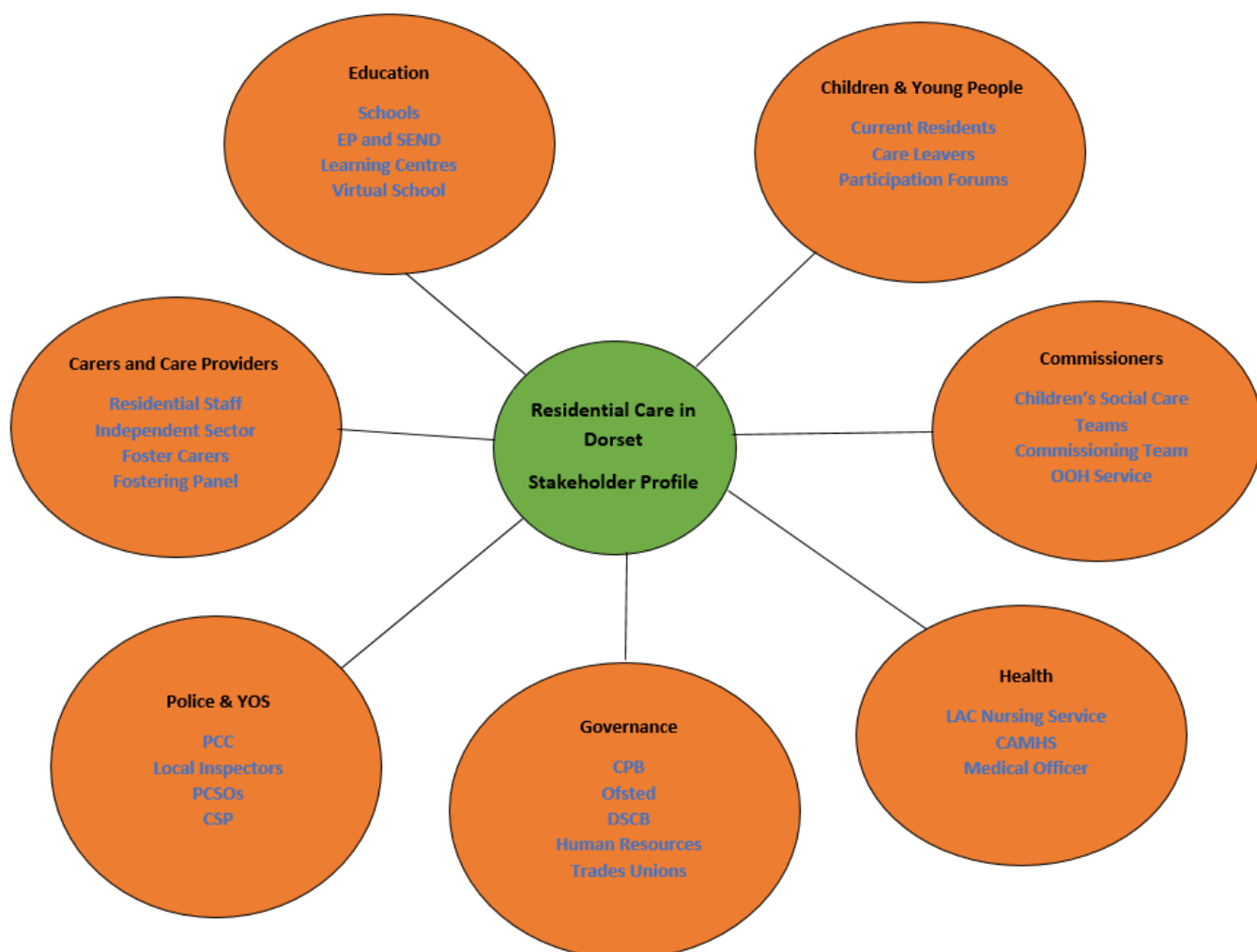
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Demand for residential provision

- There was a clear view from many respondents that there is a definite need for residential care provision in the county in order to:
 - Reduce costs
 - Improve outcomes
 - Ensure better relationships between social workers and children
 - Use the skills of the existing workforce
- Demand for other types of provision identified:
 - Singleton placements
 - Emergency, short term crisis placements enabling assessments to be completed
 - Specialist provision for 16 to 18 year olds with mental health issues
 - Step down provision from Tier 4 mental health provision
 - SEND residential provision, including respite care

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Appendix 3



Key

- EP - Education Psychologists
- SEND - Special Educational Needs & Disabilities
- PCC - Police Crime Commissioner
- PCSO - Police Community Support Officers
- CSP - Community Safety Partnership
- CPB - Corporate Parenting Board
- DSCB - Dorset Safeguarding Children Board
- LAC - Looked after Children
- CAMHS - Children and Adult Mental Health Service
- OOH - Out of Hours

Appendix 4 Children and young people’s consultation

We asked young people the following questions:

Q1. What sort of homes do we need to have?

Young People chose from the following Graded 1 (agree) to Graded 5 (disagree)	Grade
There should be children's homes for those who have experienced trauma	2
There should be children's homes for any young person	2
Young people aged 8-12 should be able to access them	3
Young people aged 12-16 should be able to access them	1
Young people aged 12-18 should be able to access them	2
Young people aged 14-18 should be able to access them	No data
They should be small e.g. 2-3 beds	4
They should be medium e.g. 3-6 beds	1
They should be big e.g. 6+ beds	5

Q2. What kind of people do you think should run these homes?

Young People Said
Trusted people, Professionals please
Patient people
Social workers
Young people who know what they are going through
Homeless people
Happy
People who was in foster care once
No idea
Qualified and trained people. Able to look after children who have been in bad situations.
Patient, kind & lenient
I don't know

Q3. Do you think Dorset needs more?

Answer choices	Responses	
Foster Carers	19	Top response
Children's homes / residential homes	9	Split response
Access to Independent living when you are over 16	9	Split response
Supported lodgings	9	Split response

Q4. Please tell us a bit more about why we need residential or other types of care?

Responses from young people	I don't think staying in homes is at all "wanted" over having an actual Foster Carer that you feel safe with. Homes are good; in the meanwhile, for finding the right carer for that specific child
	Just because we are young it doesn't mean we can't cope living on our own. Most of us to grow up fast anyway so we can cope.
	So, you can feel safe
	But I see it on the news
	So, people who need help and needs to get out of home it is there
	No placements available
	I think there needs to be more foster carers so more children get help. If they need more help then residential homes might be needed.
	To many homeless people, don't want them on the streets so foster parents would be ideal as they may not know how to do daily activities, so need help from "parents"
	I don't know
	I'm in Somerset as Dorset had shortage of carers
Children aged 16 to 20 need to know how to live and pay bills like an adult sooner than later in their life so they feel safe going alone in the world	

Equality Data:

Q5. How old are you?

Answer Choices	Responses	
5-7	3.13%	1
8-10	21.88%	7
11-13	28.13%	9
14-16	18.75%	6
17+	28.13%	9

Q6. Are you...?

Answer Choices	Responses	
Male	28.13%	9
Female	65.63%	21
Other	6.25%	2
Prefer not to say	0.00%	0

Appendix 5

Equality Impact Assessment			
Title	Residential Options – The future need for Children’s Residential Care		
Release	Date:	Version No.	1.0
Revision History	1.0		
Type of strategy, policy, project or service			
Existing	New or Proposed		
New or proposed			
Changing, update or revision			
Other			
Is this an internal or external Equality Impact Assessment (EqIA)		Internal	
Officers involved in the screening		Tim Wells – Senior Manager Placements and Resources. Julie Oliver – Contracts and Placements Claire Shiels – Communications and Business Intelligence	

This report was created by	
Name	Tim Wells
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Directorate or Service	Children’s Services
Version No	0.1

Aims
What are the aims of your strategy, policy, project or service?
<p>Improving outcomes for children are core business of children’s services. It is widely recognised and evidenced that children who come into care are disadvantaged in almost if not all aspects of their life. Therefore, there is specific importance in understanding their needs and ensuring the highest quality of care provision and delivery to minimise the impact of coming into care.</p> <p>For children who find themselves needing residential care there is the added impact of living in a group care setting and the personal relationship management issues they face with having multiple care-givers.</p>

Therefore, there is a greater challenge in ensuring resources are of the highest quality, meet and exceed the regulatory standards and are managed and staffed by teams who are well trained, knowledgeable, resilient and insightful.

Residential care can be a very positive option for a small group of young people by comparison to the wider cohort of children who are looked after (in care).

The proposals intend that the best possible outcomes for children are afforded through the most effective and cost-efficient way of providing residential care for vulnerable children in Dorset

What is the background or context to the proposal?

The local council has a duty to provide accommodation for a child or young person who for whatever reason is not able to live at home. The council in exercising the duty to protect and promote children in such circumstances may following an assessment place a child in alternative provision such as foster care or where indicated Residential care. (Statutory duties under the Children Act 1989 apply).

The council has a sufficiency duty in so much that the council should (with regard to section 22G of the Children Act 1989) take steps that secure, where reasonably practicable, sufficient accommodation within the local authority area to meet the needs of children and young people they are looking after (who are in care) and whose circumstances are such that it would be consistent with their welfare to be placed within the local authority area.

The sufficiency duty includes local authorities working with partners and the use of commissioning models to secure the most appropriate range of care provision for the children and young people for whom care provision is required.

Dorset County Council is considering the most effective models of residential care to provide for the needs of the current groups of young people identified as needing a more specialist intervention.

The council are being asked to consider whether the most effective way of meeting our duty to care for children who need residential care is by way of DCC internally managed resources or by using a commissioning framework model to work in partnership with an external provider. The council has two residential homes for children Maumbury House Dorchester and The Cherries (a specialist resource for children who are disabled and who have the most complex needs) in Weymouth. The Cherries is not within scope of this EqlA or the proposals.

At the Cabinet Meeting of December, the 6th 2017 council members agreed that a period of consultation be undertaken with key partners, staff and services, the local community and young people to fully understand the future need for Residential Care in Dorset and the efficacy of any operational model.

The DCC internal provision, Maumbury House has faced significant challenges in meeting the regulatory and Inspection standards. This has been characterised

over the last 6 months by a series of poor inspection judgements at both Maumbury House and West End House (now closed).

Whilst improvements at Maumbury have been I acknowledged by Ofsted Inspector, the pace of change needed may not be sustainable. Contributory factors being unable to recruit registered manager, staff vacancies a higher than expected level of staff sickness and staff development, to meet the complex needs of the children in need of care.

It is acknowledged that there will be impacts upon the existing staff establishment at Maumbury House both in the sense of the future use of the resource and training and development needs.

Staffing Establishment:

There are currently 12 staff permanently contracted to Maumbury House

This equates to 10.2 full time equivalent.

6 staff are female

6 staff are male

Should any change management process be initiated a specific EqlA will be undertaken within the prescribed parameters.

Intelligence and Communications

What data, information, evidence and research was used in this EqlA and how has it been used to inform the decision-making process?

Data has been collected and collated from the following sources:

- Looked after children numbers and trends
- Residential Staffing Establishment
- Available care placements (internal to the council and external)
- Placement request data children requiring alternative care
- Care placement type
- Stakeholder Consultation
- Distant and specialist placement analysis
- Commissioning Framework

The data has been used to inform the context of the recommendation and the future placement needs of children and young people needing substitute care in Dorset. The data and trends over time have indicated a diverse range of placements are required and specifically for young people in urgent need.

What data do you already have about your service users, or the people your proposal will have an impact on?

Primary data exists and has been interrogated regarding the number of children who require or who may require residential care. Children’s services hold case records on the care episodes and the planning for children within the care system.

Locally we hold data on numbers of children and young people:

- who are placed in house (DCC provided) residential care
- who are placed in house fostering placements
- who are placed in external / Independent residential care
- who attend external / independent specialist schools (with social care need)
- who are placed in external / independent fostering placements

These categories of placement and the children placed are regularly reviewed and monitored both from a child care (welfare and protection) context and from a commissioning and contracts (financial impact) context.

National and statistical neighbour (local authorities with deemed similar demography) comparative data is available – reference the DfE statistical first release 2017.

Placement data for the year from 1st April 2017:

The figures are taken from the data to be used for the forthcoming CLA (children looked after) Census concerning the current reporting year and were produced Thursday 8th March 2018. The figures have been amended to ignore multiple starting care episodes i.e. those who started care, left care and came back into care within the same reporting period (There were 5 matching this scenario in the reporting period).

Age:	
0 to 4	64
5 to 12	75
13 to 17	140
Male=	138
Female=	141
Placement destination:	
Foster Placements	202
Residential Placements	35
Placed with Parents or Persons with Parental Responsibility	11
Independent Living	19
Other	12

Please note this does not equate to the number of children in care rather the flow of children into the care environment. The actual number of children in care is aggregate of the entrants and those who leave the system m and an a on the day figure calculated once per week.

Placement Data for Maumbury House Children’s Home Dorchester year from April 1st, 2017:(Figures as at 8th March)

Number of Admissions	9
Number of Children	7 (2 children 2 episodes)
Average length of Stay	27 days
Shortest Stay	24 hrs
Longest Stay	87 days and continues
Occupancy last year	40%
Occupancy last 3 months	20%

What engagement or consultation has taken place as part of this EqIA?

A stakeholder consultation has been undertaken and the outcome from this is available as a presentation. Reference Survey Monkey

Interested parties have been invited to submit their views through e mail to the Forward Together for Children Programme.

The outcomes from the survey and consultation are in the appendices to the report.

Children and young people have been invited to comment through the children in care satisfaction survey run independently by Participation People (a commissioned service working in partnership with DCC).

The outcomes from the survey and consultation are in the appendices to the report.

The consultation period ended on the 23rd February 2018

Is further information needed to help inform this proposal?

N/A

How will the outcome of consultation be fed back to those who you consulted with?

A stakeholder feedback presentation has been formulated. It is proposed that this be shared with the Key Stakeholder groups who were contributors to the consultation process.

Key stakeholders are both Internal and external to the council

Any Internal staff directly or indirectly impacted by the proposals will be subject to more specific and direct feedback sessions.

Assessment

Who does the service, strategy, policy, project or change impact?

If your strategy, policy, project or service contains options you may wish to consider providing an assessment for each option. Please cut and paste the template accordingly.

For each protected characteristic please choose from the following options:

Positive Impact

Negative Impact

Neutral Impact

Unclear

Please note in some cases more than one impact may apply – in this case please state all relevant options and explain in the ‘Please provide details’ box.

Age	Positive Impact
What age bracket does this affect?	Primarily 12 to 18 years Looked After Children as a specific group
Please provide details	Increasing the range any type of placement availability for this age range of children is likely to facilitate more positive placement to needs matching
Disability	Neutral Impact
Does this affect a specific disability group?	No
Please provide details	Children and young people who have a specific or enduring disability are likely to need a more specialised placement matched against their assessed need. Dorset CC already has a council operated resource for disabled children.
Gender Identity	Positive Impact
Please provide details	A wider range and access to more specific needs matched environments would be likely to help young people who are in the journey of adolescence and exploring their emotional and physical development.
Pregnancy and maternity	Neutral Impact

Please provide details	Children and young people who become pregnant or who have become a parent will require additional care and support which extends beyond the scope of the placement types referenced or proposed. Each individual case would be assessed against the specific support needs.
Race and Ethnicity	Positive Impact
Please provide details	A wider range and access to more specific needs matched environments would be likely to offer access to culturally or ethnically appropriate placements for young people
Religion or belief	Positive Impact
Please provide details	A wider range of and access to more specific needs matched environments would be likely to offer access to appropriate opportunities to express and celebrate their beliefs in an open and inclusive way.
Sexual orientation	Positive Impact
Please provide details	A wider range of and access to more specific needs matched environments would be likely to help young people who are in the journey of adolescence and exploring their emotional and physical development.
Sex	Positive Impact
Please provide details	For some young people being cared for alongside others of the same sex is preferable to a mixed environment. A wider range of care placements can afford the opportunity for this.
Marriage or civil partnership	Neutral Impact
Please provide details	Although not to exclude the potential it is extremely unlikely that there would be any impact in this context given the age group of the young people within the scope of this assessment
Other Socially Excluded Groups For example: Carers, rurally isolated, low income, economically	Positive Impact

disadvantaged, single parents, armed forces.	
Please provide details	Looked after children are recognised as a specific group and are vulnerable because of the nature of their prior experiences and substitute care experiences. Any opportunity to improve the quality and effectiveness of placements and resources should be beneficial in improving outcomes across the life chance spectrum for looked after children.

Action Plan			
What plans do you have in place, or are developing, that will mitigate the likely identified negative impacts?			
Objective/Outcome	Action to be taken	Lead Officer	Deadline

EqlA Signatories		
EqlA role	Name	Date
Lead Manager / Project Sponsor	Tim Wells	14/03/2018
Directorate Chair on behalf of the Directorate Diversity Action Group		