



Date of Meeting: 30 July 2019

Lead Member: Andrew Parry

Lead Officer: Sarah Parker

Executive Summary: This paper reviews current research on the rise in numbers of looked after children in England and Wales. It notes differential rates of increase between local authorities within the two countries and looks at the possible reasons for this. It also reviews emerging evidence about strategies to reduce the number of looked after children and indicates some potential components of such a strategy in Dorset.

Equalities Impact Assessment: NA

Budget: NA

Risk Assessment:

Having considered the risks associated with this decision, the level of risk has been identified as:

Current Risk: LOW

Residual Risk: LOW

Other Implications:

Recommendation: That the Executive Director of People – Children should develop a strategy and detailed roadmap to reduce the number of children in care, taking a rights-

based approach, which develops services which support children to be able to grow up in a family setting and bring back to Cabinet in September 2019.

Reason for Recommendation: The reduction of the number of children in care in Dorset would:

1. Promote the rights of children
2. Improve the outcomes for children
3. Enable services to be sustainable

Appendices: NA

Background Papers: Links are contained within the report

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## **1. The case for reducing the number of children in care**

There are several reasons why it is important to have a strategy which focuses explicitly on the need to reduce the size of the population of children in care in Dorset. The [What Works Centre for Children's Social Care](#) summarises these as:

- Human rights - the principles of the United Nations Convention on the Rights of the Child (UNCRC) 1989 and the Children's Act (UK, 1989), both of which emphasise the importance of a child being cared for by their parents
- Outcomes - Care-experienced individuals experience a range of adverse outcomes across the life-course compared to the general population, including higher rates of psychological disorders, poorer educational attainment and lower rates of employment (Ford et al., 2007, Evans et al., 2017, Trout et al., 2008).
- Use of public resources to best effect - Out-of-home placements incur significant costs, with an average annual spend per head of £29,000-£33,000 for foster care and £131,000 -£135,000 for residential care in England (National Audit Office, 2014). Demand for external placements for looked after children remains high and the forecast overspend in this area for Dorset council has increased to £5.5m.

In general, the continued focus on service improvement in corporate parenting in the first decades of the 21<sup>st</sup> century (Children (Leaving Care) Act, Quality Protects, Care Matters etc) has led to local authorities foregrounding positive news and success stories, while forgetting the lessons of the research conducted in the last two decades of the twentieth century:

- Outcomes and life chances for children in care are worse than for their peers

- Drift sets in quickly when children are placed in care – after six months, episodes are likely to be prolonged
- Most children in care return to live with their families in adulthood

## 2. Local background and context

The number of children in care has risen [nationally](#) by 17% in the years 2010 to 2018. In [Dorset](#) the number of children in care has risen from 344 in 2013 to 445 in July 2019, peaking at over 500 in early 2017. Meanwhile the number of children per 10,000 who are in care has risen to 64 from 60 nationally between 2013 and 2019. The rate of increase in Dorset has outstripped the national rise – rising from 44.4 per 10,000 in 2013 to 62.7 in April 2019. In addition, Dorset's rate per 10,000 has gone from being lower than south west authorities and statistical neighbours to exceeding both.

In Dorset in 2018, a total of 650 children were looked after during the year, with 170 starting to be looked after during the year, and 202 ceasing to be looked after. Although this is superficially encouraging, many of the young people who ceased to be looked after were transitioning to being care leavers at 18. 38.7% moved into independent living or adult settings, were determined to be over 18 following an age assessment, or ceased to be looked after “by any other means”. In April 2019, 63 young people were aged 17.

The only age bands where the percentage of leavers exceeded starters were 1-4 year olds and 16+. In terms of active effort to help children leave the care system, 34.8% of children who ceased to be looked after were adopted or became subject to a special guardianship order or a residence order. The adoption rate has finally matched the national figure, while the special guardianship rate exceeds the national rate. A lower percentage of children return to live with their parents (24.3%) than the national rate (32.7%).

44 children became subject to a care order, and applications were made in respect of 107 children. 70% of children who had been looked after for at least 2.5 years had been in the same placement for 2 years. 7% of children had had 3 placements or more. It would be important to match the destination data to the age profile to get a better understanding of typical care pathways. In April 2019, roughly half of all children in care had entered the system in the last three years, and half had entered in 2016 or earlier. The proportion of children subject to a care order has increased from 37% in 2014 to 65% in 2018. The population of children in care has both increased, and has become more static.

The percentage of children who returned to live with parents and relatives in an unplanned way was 6.4%, and the number who ceased for any other reason was 21.8%. The latter number should be investigated as, although it is in line with national and regional figures, it represents a significant cohort whose exit from the system is not accurately explained. The two figures combined hint at the existence of a cohort of children whose care episode was avoidable.

In order to reduce the number of looked after children in a sustainable measure, it is important that the number of leavers exceeds the number of starters. In order to get an accurate view of sustainable reduction the number of leavers should be adjusted to remove those who leave by virtue of reaching the age of 18. Overstating reductions created by transitions are misleading for two reasons

- The reduction in numbers may not reflect the underlying rate of growth of the population

- Care leavers remain the responsibility of the local authority until the age of 25 – they continue to receive a statutory service, and this requires budget.

In summary, one can suggest

- The care population of Dorset is increasingly long term and static – there will be a basic cost and commitment of staff which will not change markedly in year. This could be modelled to predict future service need and spending patterns
- Permanence planning appears to ensure that leavers exceed starters in the 0-9 age bands, however there needs to be some reflection on the Trowler report and whether the pursuit of permanency at all costs brings children into the system who could be supported to live with their parents.
- Increasing the number and percentage of planned returns to parents and relatives could be a productive strategy
- Nearly a third of all starters are aged 10-15 and this rises to 44% when over 16s are added. This is an age group where early help, edge of care, and diversionary services could have an effect in avoiding care

### 3. How can we understand the rise in numbers?

The rise in the number of looked after children is often attributed to a rise in “need” or “demand”. These categories are treated as objective and material, and linked causally to:

- Partner agency behaviour change – a rise in referrals - after the Baby P case
- Austerity – a rise in poverty and a reduction in services available to the public
- Complexity – the idea that more people have more complex problems

Where a subjective element is acknowledged, it is usually attributed to increased professional knowledge and awareness of issues such as sexual exploitation, trafficking, brain science or neuropsychology.

In [Care Proceedings in England: The Case for Clear Blue Water \(2018\)](#) Isabelle Trowler concluded:

“The study found that the difficulties facing families in court proceedings today were very similar to 5 years ago. There was little evidence in the records of greater *complexity* of need. Indeed, members of the review team who had been in practice for many years recognised the continuum of needs as the same as 20 years ago. Certainly all the families whose records we reviewed were in need of help from the State.”

Further, she wrote:

“In the last few years there has been a much greater and deliberate national focus on: - the early protection of the child, a stronger focus on lower level parenting concerns as signs of cumulative neglect with a risk of future harm, a greater sense of urgency to act and secure permanence without delay, and the need to act on the side of safety. .... In line with these expectations, the study found an increasing emphasis on predicting what *might* happen, rather than what *has* happened, and a *lower* (but inconsistent) tolerance of diverse standards of parenting.”

In other words, the rise in court applications in the authorities in the study related to a change in policy and culture, rather than a rise in complexity or need.

In 2018, the All Party Parliamentary Group for Children published [Storing up trouble - a postcode lottery of children's social care](#). This report identified significant differences in the thresholds and offers between different local authorities.

The issue has been studied in more depth by the [Child Welfare Inequalities Project](#) at Coventry University. The research is ongoing but has identified significant differences in intervention rates between local authorities. The report acknowledged a strong link between deprivation and adverse life chances (based on a 2015 [rapid evidence review](#) commissioned from them by the Joseph Rowntree Foundation), but showed a complex and non linear relationship between rates of intervention and deprivation.

The research project is informed by the discourse around rights and is agnostic about whether high or low rates of intervention are good outcomes in themselves. Two complex patterns of difference which were identified were:

- There is a steep gradient in the level of intervention with the most deprived families - 60% of CPP and LAC live in the most deprived 20% of neighbourhoods, while 40% live in more affluent 80% of neighbourhoods.
- The gradient of intervention is not uniform across local authorities. The project has called this the "[inverse intervention law](#)" - for equivalent levels of deprivation a child in a more affluent local authority overall is more likely to be on a CPP or to be a looked after child. There are also differentials in how likely BME groups are to be LAC or CPP.

The most credible explanation of the inverse intervention law is the culture and norms within those more affluent local authority areas. Dorset certainly fits the model of an affluent area with pockets of deprivation, and this is even more the case when life chances measures are applied to an area like Weymouth rather than static deprivation indices.

#### **4. What works, and what doesn't work?**

The What Works Centre for Children's Social Care is conducting ongoing research into how [numbers of children in care can be safely reduced](#). The focus is on three outcomes:

- reduction of initial entry to care
- reduction of re-entry to care
- increase in post-care reunification.

[Telephone interviews](#) with a range of local authority leaders established some consensus about factors associated with reducing the need for care:

- early help
- financial investment
- supportive leadership
- constructive scrutiny
- organisational culture

- good partnerships

A [survey](#) of all local authorities indicated that behind the consensus lies some muddled thinking with little agreed definition of terms. One important finding was:

“Local authorities that had seen a reduction in care were more likely to report having instigated their approaches 5 to 10 years previously.”

This indicates what may be a realistic timescale for sustained improvement.

“Respondents were asked to select the top three approaches that they thought were most effective in preventing the need for children to come into care in their local authority. The most popular was a whole system approach, selected by 81.7 per cent, followed by edge of care services (61.7 per cent), early help (56.7 per cent), family group conferences (43.3 per cent), parenting programmes (18.3 per cent), short break services (15 per cent) and ‘other’ services which did not fit the categories offered (20 per cent).”

There was little commonality in some of the terms used, and little evidence base for some of the approaches, including self-evaluation. The next stage for the What Works Centre programme will be the systematic review of particular interventions, starting with Signs of Safety and Family Group Conferences. Although this will be valuable, there is a danger that it feeds into a magic bullet mentality about intervention models – these are seductive, and the roll out of training for such approaches may be lucrative for providers, provide an impression of activity for leaders, and some respite from the day job for practitioners, without any major impact on the lives of citizens. The important learning may be from the Coventry study giving authorities some insight about how they should position themselves to influence local systemic issues.

Studies have considered the interaction between deprivation and service quality and the possible effect on LAC numbers. While the total number of children in care increased between 2012 and 2017, the What Works Centre for Children’s Social Care [Exploratory Analysis of the rates of children looked after in English local authorities](#) analysed publicly available data to try and understand why the number and rate of children in care remained stable or declined in 40% of local authorities.

“Poverty in the local area was an important factor. .... Whilst studies to date have established a correlation at one point in time (e.g. Bywaters et al., 2018) this is the first UK study to identify that average changes in poverty over time are associated with average changes in numbers entering care. .... Equally, our findings indicate that numbers of children in care are not solely a function of wider economic factors. Better Ofsted ratings and participation in the Innovation programme, for example, were both associated with reducing numbers of children in care. Put simply, good services help local authorities reduce the number of children in care.”

[Bywaters et al](#) looked at the relationship between deprivation, expenditure on children in need, and OFSTED judgements. The evidence was that good or outstanding judgements were more likely for LAs in low deprivation areas, but that in high deprivation areas, there was a significant correlation between the judgement and the level of expenditure per child.

## **5. What has been tried in Dorset?**

Between 2017 and 2019 our looked after population reduced by around 50 children, however much of this reduction was driven by care leaver transitions rather than active management.

Several measures were undertaken wholly or in part to address the situation. These were mostly top down approaches and had little or limited success.

- Restructure – specialist services for children 0-12 and 13 to 25 were created in order to progress good quality care and permanency planning. A specialist assessment service (FAST) was established to improve the quality of parenting assessment within the PLO and legal proceedings. The Family Focus service was also established with families and prevent children coming into care however this was later reassigned to support the newly established MASH service.
- Reinvigorating Social Work – the programme was brought in to improve relationship/strength based assessment, planning and outcomes. The 10 week programme has been made available to all social workers and Team Managers
- Decision to Issue Panel – the process of decision making in relation to family proceedings varied between districts and teams and some applications were being made without sufficient pre proceedings work being undertaken. The panel is chaired by the Service Manager for Support and Protection and meets weekly to consider any new applications to court, scrutinise the standard of work completed, clarify the care plan to be submitted and either authorise the application or establish what alternative planning and action is needed
- Care Plans – In Spring 2018 it was established that a substantial number of children did not have an up to date care plan (74%). A recovery programme was implemented to correct this and within 3 months over 90% of children had a plan. Alongside this the care plan was revised to improve content and briefing delivered to reinforce the principles of good care planning.
- Enhanced Monitoring Panel – this is a monthly meeting which examines care planning for children under 16 subject to Sec 20 for 3 months plus to ensure that plans are being progressed to achieve return home or into proceedings; children who have been subject to Placement Orders for 1 year plus and not placed for adoption; and children placed with parents to establish whether revocation of the care order is appropriate
- Collaboration with Shropshire and Essex confirmed the need for a support service to prevent family/placement breakdown. The Meaningful Day provision was not found to be efficient or effective.
- Safe Families for Children – this is a charity we have commissioned to provide a support service to families including offering hosting to children to avoid the need for children to become looked after. The service commenced on 01/04/2019.
- Management Instruction Notes – a number of MIN's were written in support of TriX procedures, covering a number of areas of practice
- Performance reports – managers now receive weekly performance reports on key issues including completion of care plans, statutory visits to looked after children and supervision

These measures may have contributed to the maintenance of a slightly lower number of looked after children, but there is little evidence to support this.

It is evident from service development in other authorities that in order to achieve more, and in particular to realign us with regional and neighbour comparators (a looked after children rate of 51-55 per 10,000 would result in LAC population of 350 to 380), a fundamental change of approach will be required.

## 6. Where has it worked?

Some of the DfE Innovation Programme schemes have particular relevance for Dorset:

- [Project Crewe](#) - Project Crewe demonstrated that a staffing model not wholly reliant on social work qualified staff could achieve positive outcomes for CIN. Cheshire East has some similarities with Dorset – mainly affluent with pockets of deprivation, and a silted up CIN system with poor outcomes and high re-referral rates.
- [No Wrong Door](#) - The North Yorkshire County Council (NYCC) No Wrong Door (NWD) innovation provides an integrated service for young people, aged 12 to 25, who either are in care, edging to or on the edge of care, or have recently moved to supported or independent accommodation whilst being supported under NWD.
- [Family Safeguarding Hertfordshire](#) – This is badged as whole system reform but can be more accurately described as a reform of late intervention. The project established multi-disciplinary safeguarding teams, some reformed practice measures, and a suite of interagency KPIs which show how families interact with all partners in the system.

The first two projects might be described as preventive, but this does not adequately capture the stratification of the response. Project Crewe intervenes upstream and effectively collapses a distinction between early help and CIN work. NWD is a crisis intervention model which links up with a reconfigured model of residential and fostering provision.

What both have in common is a dedicated team of non social work staff who have

- low caseloads
- good interpersonal skills
- a defined set of intervention skills
- avoidance of bureaucracy and appointment culture
- stickability
- access to specialist input and coaching

The What Works Centre For Children’s Social Care recently published [Intensive family preservation services to prevent out of home placement for children](#) , a systematic review of the existing research evidence for the effectiveness of such approaches. The report stated

“The available evidence, at child level, suggests that IFPS were effective in preventing children from entering care at 3, 6, 12 and 24 months after the intervention.”

But cautioned

“It is evident that IFPS vary in effectiveness, suggesting that how IFPS are implemented is important. It is likely that key elements of the model such as working with children who are at imminent risk of entering care and offering support with 24 hours of a referral are important in ensuring that the service is effective.”



## **7. What do we need to do about it?**

### **7.1 Prevention**

The conversation about reducing numbers of looked after children is often reduced to an issue of thresholds. Thresholds can be problematic for several reasons:

- Help is given at the point of crisis – not at the point when future outcomes can be influenced in a positive direction.
- Consideration of risk, harm and options to help are seen purely through a social care lens, and partners are able to hand off responsibility as result.
- The culture of escalation removes the ability to apply influence to the system upstream to avoid care as an option.

Early Help approaches can be key to intervening with children who may be at risk of entering care, particularly those who are being escalated through parallel systems to social care, where local authority care can be seen as the ultimate resolution for system failure, such as

- School exclusion and alternative provision
- SEN
- CAMHS

More work needs to be undertaken to increase multi-agency ownership and a whole public sector system approach to avoiding late intervention and cost shunting where possible.

The preventive strategy in Dorset will need to be nuanced and include both early help and crisis intervention.

#### **Options:**

- Multi-agency ownership – LSCB, Strategic Alliance, Community Safety Partnership, Corporate Parenting Board should commit to a late intervention reduction strategy
- A place based model of service delivery should be adopted to enable Dorset Council to take a whole system approach to prevention
- A blended early help/CIN approach drawing on the Project Crewe model should be developed. This should shift a substantial amount of social work resource to early help teams.
- Focus social care activity on child protection and looked after children
- Develop an edge of care service which can respond to crisis, and support reunification.

### **7.2 Business intelligence**

Dorset Council currently has the indicators of a DRIP culture – Data Rich, Insight Poor – and more work (some of which is planned) needs to take place to unlock the power of the data which we routinely collect.

Further investment in business intelligence solutions will improve the ability of services to act constructively where there is a risk that children may become looked after by the local authority. This can be combined with a multi agency early help strategy to ensure that help is given without creating a situation where too many children are drawn into the scope of specialist services.

The demographic predictors of a care career are well understood, but real time data and the use of visualisation tools such as theographs greatly increase the ability of services to identify cohorts at risk. For those children who do require a care intervention, we know enough from research to offer a response differentiated according to age, presenting factors and risk – rather than a permanency for all approach.

**Options:**

- Further investment in BI required to develop our ability to identify children at risk of care, track children through the system, and develop multi-agency KPIs

### **7.3 Culture and decision making**

The reduction of the number of children in care will require a change of culture around decision making. Decisions will need to be made earlier which can impact positively on families and reduce the need for care. – in a situation where many practitioners and managers feel overwhelmed by demand, there is comfort to be had in only providing a reactive service that is referral driven. Likewise, for many managers, resource management is part of their traditional approach, and waiting for a crisis to emerge and then providing the minimal response required seems like common sense and good stewardship. The [Forward Together for Children Stage 1](#) report noted:

“There does seem to be a culture in Children's Services of spending time talking about whether to spend money or not. This is understandable given the budgetary pressures, but focussing on costs is likely to cost more than not focussing on costs. Learning organisations are organisations that understand that concentrating on meeting needs and designing the flow of work from the customers point of view, rather than concentrating on cost, will actually reduce costs. This can sound counter intuitive and it can be hard to let go of managing costs but there are many case studies that back up this point of view.”

Combined with a risk averse approach, it produces a world view where rising LAC numbers are a part of the natural order of things, and where overspends are produced by inadequate budget allocation.

Efforts to control the numbers of children in care in Dorset have largely been focussed on escalating and centralising all aspects of decision making about children in care – exaggerating the inbuilt bias of the organisation towards a command and control model. Alongside this, expensive panel structures have proliferated and claimed a significant proportion of the working week for senior managers. Natural wastage in the system – the fact that children leave care on their 18<sup>th</sup> birthday – has been claimed as a reduction in numbers, when the underlying rate of increase has not changed.

The main drawback of the approach is that senior managers are drawn into the decision making process too far downstream, where the ability to influence events is limited. There is also some anecdotal evidence that the process can be “gamed”. Needless to say, the approach has been ineffectual, and has contributed to a sense of disempowerment and disengagement in the wider workforce.

The [Forward Together for Children Stage 1](#) report identified the costs of the command and control approach within Children's Services, and the case is more compelling than ever. Moving towards a devolved decision making culture would mean:

- An increase in accountability
- Decisions being taken more quickly and closer to the citizen
- A decrease in cost and transaction cost

Work needs to be carried out with the IRO service to inject more challenge into the review process. Is the possibility of a return home routinely considered seriously in reviews? Is the first six months of placement seen a crucial time period in which reunification could take place, or is all effort marshalled to delivering permanency? Could the outsourcing of the service deliver this better, by making it a key performance criteria for the new provider?

#### **Options:**

- Embed an understanding of LAC reduction strategy within workforce, focussing on the reduction of harm and a rights based approach rather than the management of risk
- Replace existing decision making panels with an accountability and quality assurance function
- Robust consideration of the prospect for reunification should be a component of all LAC reviews.

### **7.4 Sufficiency**

Dorset is currently in the bottom ten local authorities in England for the number of children placed more than twenty miles from home. While it is sometimes necessary to place children some distance from their home, either for their own protection or to access specialist services, in most cases, placement closer to home will enable a child to maintain contact with family and friends, continue at their existing school, and continue access any specialist support services.

At time of writing, 178 children are placed in external placements. Of these, 20% (35) are placed with providers in Dorset. Of the external placements which are out of county, 60% (101) are placed in authorities which border Dorset. This pattern suggests that some determined engagement with the market might be able to either bring providers into Dorset or unlock existing provision in Dorset so that the number of children placed within the local authority can increase.

Approaches to sufficiency include:

- Frameworks – Dorset Council is a member of a number of framework arrangements for residential and fostering provision. This approach uses the bargaining power of a consortium of local authorities to set a pricing framework with providers, but it does not guarantee access to placements as such. There is a view that we have reached the limit of the benefits which can be delivered by a framework approach.
- Block contracting – Dorset Council's predecessors were wary of entering into block contract arrangements with providers, however in retrospect, given the continuous rise in numbers of looked after children, this approach would have carried very little risk of over provision, and would have potentially locked in local or sub-regional providers in a relationship which would have guaranteed access to local placements. The price lever in this instance is the guarantee of continuous business from a single local authority rather than access to a preferred provider list of a consortium.

- SIBs – There has also been little appetite for Social Impact Bonds in predecessor councils although they would be worth exploring to either fund additional preventive capacity or provide the capital for new residential provision.
- In house fostering – Dorset Council has issues around recruitment of and support to in house foster carers. The current cohort has not grown in line with the rising numbers of looked after children, and there is a perceived lack of resilience in the system which leads to placement instability and rising costs as placements escalate. While there is work to be done to improve the service, or put it at arms length, it will also be important to avoid an in house first policy for placements – making the best match on the basis of identified need is likely to result in more stable placements, improved outcomes, and reduced cost over time.
- External fostering - a substantial number of children looked after by other local authorities live in Dorset with external providers – could these placements be rededicated to Dorset children?
- Market shaping – there has been a lack of market engagement and dialogue with providers. Such an approach could either guarantee access to provision in Dorset, stimulate inward investment by providers, or lead to innovation.

**Options:**

- Transfer all commissioning spending and staff to commissioning team
- Bring directly provided services (fostering, residential homes, CRWs etc) into an internal commissioning framework
- Strengthen brokerage team