

Wiltshire Children & Young People's Trust

*To improve outcomes for children & young people in Wiltshire
and to promote and support resilient individuals, families and communities.*



WILTSHIRE CHILDREN AND YOUNG PEOPLE'S TRUST

CHILDREN IN CARE COMMISSIONING STRATEGY

2012 to 2015

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PART 1 - BACKGROUND

1. SUMMARY

This is the Wiltshire Children and Young People's Trust commissioning strategy for children and young people in care. The strategy has been produced in line with the Wiltshire Children and Young People's Trust commissioning framework.

The overall purpose of this strategy is to ensure that services for looked after children, young people and care leavers are good.

This strategy is holistic and covers all assessment and case management and services for looked after children including health and education. This is consistent with guidance produced by the Department for Education (DfE) on commissioning of support for children in care (Sufficiency Duty Guidance). Work on the strategy is being co-ordinated by the Children in Care Commissioning Group. Terms of reference for this group including membership can be found at Appendix 1.

The Strategy is divided into two parts.

Part 1 covers the introduction to the strategy which includes the purpose, links with existing strategies and information on development of the strategy.

Part 1 also covers the context (both national and local), the needs assessment, financial information, where children in care are placed and performance information.

Part 2 covers the commissioning priorities which are listed below:

- INVOLVING CHILDREN AND YOUNG PEOPLE
- GOOD OUTCOMES FOR CHILDREN IN CARE
Including safeguarding
- ACCESSING and MANAGING RESOURCES
- EDGE OF CARE
- PLACEMENTS
- LEAVING CARE

For each priority, we have set out what we want to achieve, messages from the consultation, priorities for action and key performance indicators which will be monitored by the Children in Care Commissioning Group. The priorities will be developed into an implementation plan which will include timescales and success criteria. The performance indicators for each priority will be combined into a performance report which will be used to monitor the progress of the strategy. Appendix 2 outlines the current position and achievements to date for each commissioning priority.

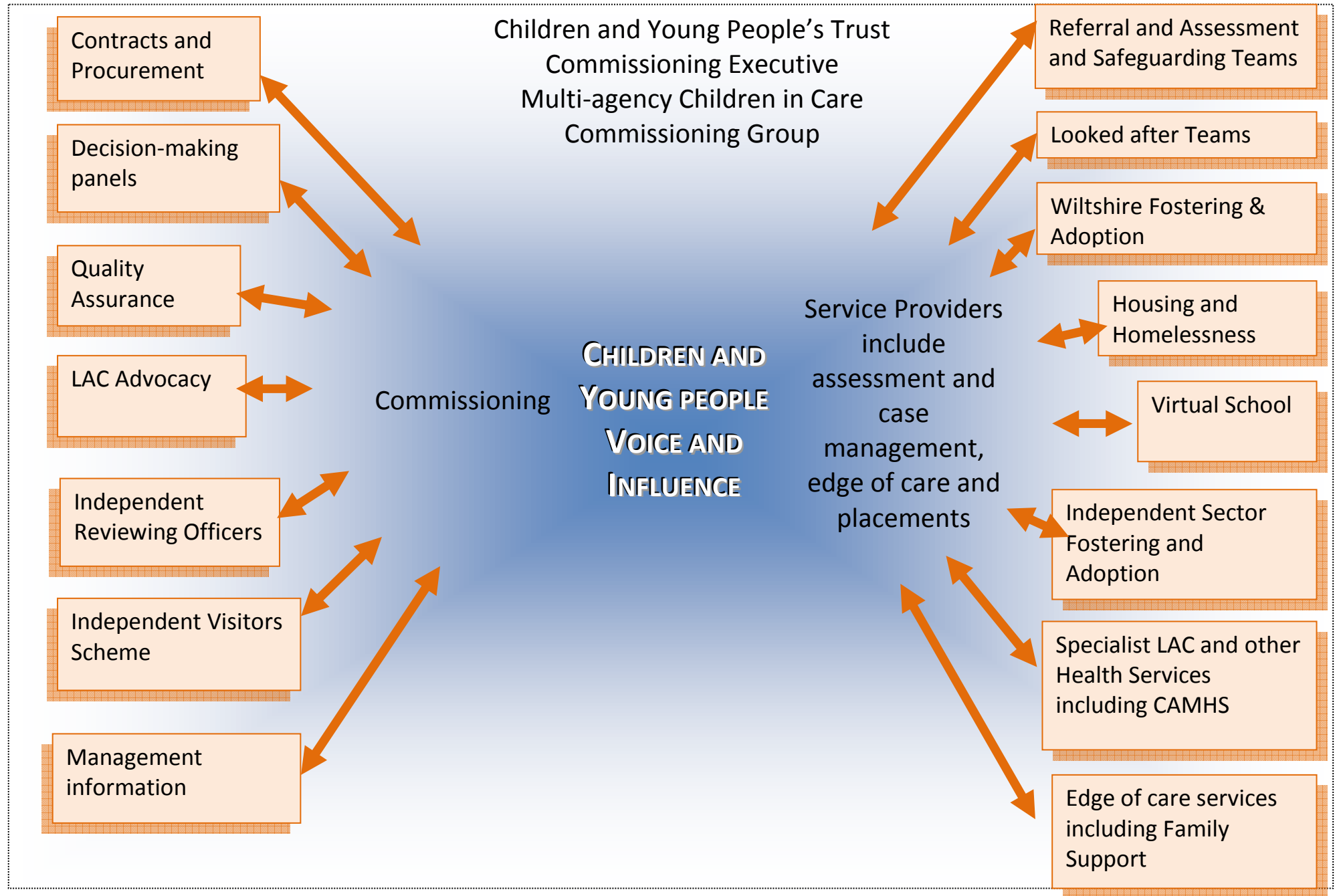
The 2012 Ofsted inspection of safeguarding and looked after children noted that the overall effectiveness for looked after children, young people and care leavers was adequate and capacity to

improve was good. Four aspects of the inspection of looked after children were graded by Ofsted as “good”: capacity for improvement, enjoying and achieving, economic wellbeing, and ambition and prioritisation. One aspect was graded as “outstanding”: making a positive contribution, including user engagement. The recommendations made by Ofsted have been included in the commissioning priorities.

The Ofsted report noted that the draft Children in Care Commissioning Strategy was clear in its priorities for ongoing service development and was underpinned by a specific needs assessment as part of Wiltshire’s overall strategic needs assessment.

The diagram on the following page outlines the looked after children system. To achieve good outcomes for looked after children and young people, the whole system needs to work well together.

The Looked After System



2. INTRODUCTION

2.1 Purpose of the commissioning strategy

The purpose of the Children in Care Commissioning Strategy 2012-2015 is to achieve better outcomes for children and young people by making sure there are sufficient good quality services available locally. This will involve ensuring:

- There are services available which, where appropriate, prevent children and young people from coming into care ('edge of care') and assist with a return home.
- Effective assessment and case management and a good range of high quality services for children in care, including placements (our aim is 'local placements for local children').
- All services are cost effective.

The strategy has been produced in line with the Wiltshire Children and Young People's Trust Commissioning Framework. The diagram below produced by the Commissioning Support Programme summarises the elements of strategic commissioning. The Commissioning Support Programme was funded by the Department for Education to improve commissioning across children's services.



2.2 Links with existing strategies

There are a number of other strategies which relate to the Children in Care Commissioning Strategy. These are:

- The Wiltshire Children and Young People's Plan 2012-2015. This is the Children and Young People's Trust Partnership's overarching plan for children and young people in Wiltshire.
- Employment and Skills Strategy for Wiltshire.
- Young People's Substance Misuse Treatment Plan.
- Teenage Pregnancy Strategy.
- Wiltshire Youth Offending Service – Youth Justice Plan 2010/2012.
- Reducing Child Poverty Strategy.
- Hidden Harm Strategy.
- Family and Parenting Support Commissioning Strategy.
- Emotional Wellbeing and Mental Health Commissioning Strategy.
- 11-19 Commissioning Strategy.
- Apprenticeship Action Plan.

2.3 Developing and implementing the children in care commissioning strategy

The Children in Care Commissioning Group is co-ordinating the development and implementation of the Children in Care Commissioning Strategy. This is a multi-agency group which reports to the Wiltshire Children and Young People's Trust Commissioning Executive. The terms of reference including membership are included at Appendix 1. The membership of this group is continually reviewed. For example, an action for 2012 is for a foster carer representative to join this group.

The initial consultation period on the draft took place for 12 weeks from 28th July to 20th October 2011. This was then extended to the 20th of January 2012 to allow more time for consultation with children in care and to link the development of the strategy with the review of the social care Family Support Service. Consultation included the following:

- A review of progress in implementing the previous placements strategy.
- Obtaining views of children and young people in care through the Children in Care Council and a specific focus group on the commissioning strategy.
- Paper based surveys were sent to every looked after young person over the age of 7 in Wiltshire's care. All paper survey results were imported to the electronic system. The electronic SNAP survey and a copy of the full consultation document were promoted on Sparksite, the young people's website (<http://www.sparksite.co.uk>).
- Feedback given at a workshop for independent sector providers of residential and foster care held on 20 July 2011.
- 2 focus groups for foster carers.
- 2 workshops for social care staff.
- Discussion at various groups and fora.
- Analysis and work undertaken by the Sufficiency Duty Task Group (focused on securing sufficient accommodation for children in care in line with statutory guidance).

The table below gives further information on the consultation responses from children and young people:

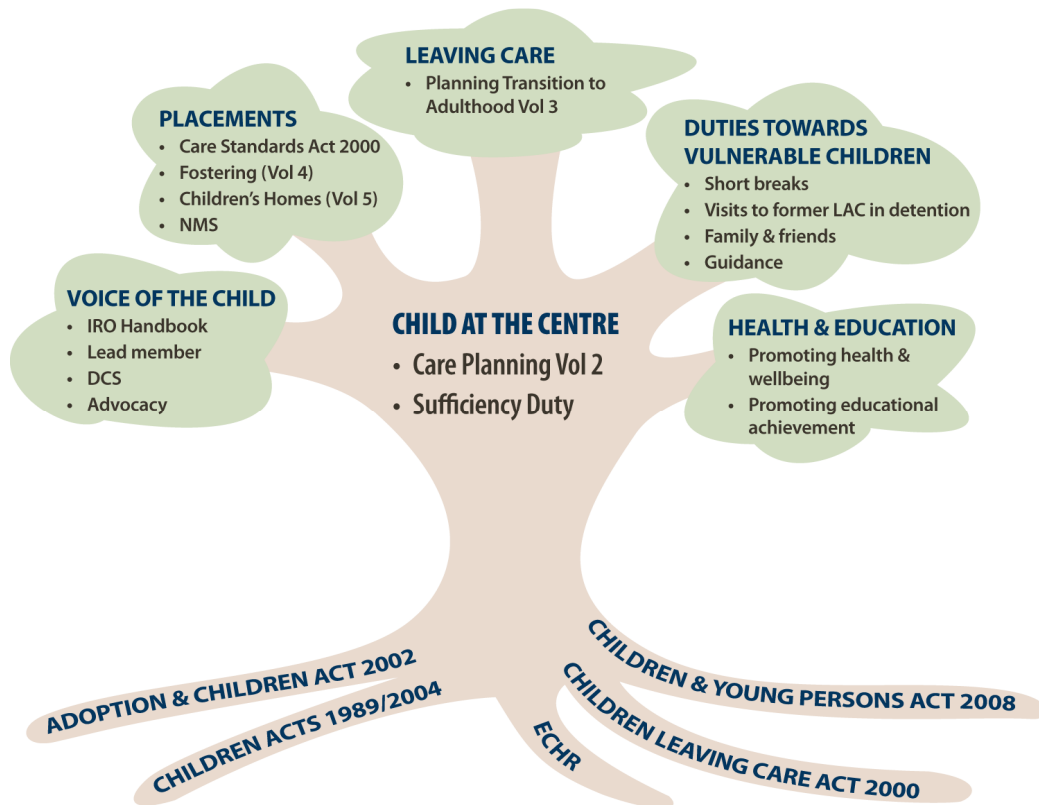
Participants	Total number	Male	Female	Young people with disabilities	BAME young people	Age range
Focus groups	8	1	7	1	0	8-12
SNAP survey	56	25	31	8	5	7-19
Total	64	26	38	9	5	

3. CONTEXT including overall needs analysis and financial information

3.1 National Context

3.1.1 Statutory Framework

The Government has revised the legal framework for children in care. The revised framework covers all aspects of the care system. This is summarised in the diagram below which has been produced by the Department for Education.



Note – ‘NMS’ stands for National Minimum Standards, DCS stands for Director of Children’s Services and ECHR stands for European Court of Human Rights.

The framework covers all aspects of a child’s journey through care, including health, education and ensuring the child’s voice is heard in the care process. The framework also includes regulations and guidance relevant to children’s homes and fostering services providers. These regulations and guidance are designed to work together as a coherent whole, helping give local authorities the tools to ensure high quality care for all their looked after children and young people. The revised legal framework can be found at

<http://www.education.gov.uk/childrenandyoungpeople/families/childrenincare/regs>.

The revised legal framework includes statutory guidance on securing sufficient accommodation for children in care. This is referred to as the sufficiency duty. The sufficiency duty requires local authorities to take steps to secure local accommodation which meets the needs of children in care. The duty includes securing services for children and young people on the edge of care.

This commissioning strategy for children in care sets out plans for ensuring a sufficient supply of placements and demonstrates a whole system approach to early intervention and prevention.

3.1.2 Sufficiency duty commissioning standards

The Department for Education has produced guidance and information to assist Councils with ensuring they have sufficient placements. This includes guidance on commissioning standards which will raise the quality of commissioning practice. The 6 standards focus on:

- Individual assessment and care planning.
- Commissioning decisions.
- Strategic needs assessment.
- Market management.
- Collaboration.
- Securing services.

The 6 standards have informed the commissioning priorities and were used as a focus for discussions during the consultation process.

The Department for Education has also recently published a residential data pack to give commissioners and providers a better picture of how children's homes are being used and to promote debate about increasing the quality of residential provision.

3.1.3 Open Public Services White Paper

The Open Public Services White Paper sets out proposals for extending opportunities for a range of providers to deliver services. The White Paper highlights some local government services where options for delivery *"will switch the default from one where the state provides the service itself to one where the state commissions the service from a range of diverse providers"* (section 5.2). Support for looked after children is included in the list of services the Government is consulting on about *"how to go further in opening up locally commissioned services."* (Section 5.8).

3.1.4 Promoting the Quality of Life of Looked After Children and Young People

In October 2010 the National Institute of Clinical Excellence (NICE) produced guidance on promoting the quality of life of looked after children and young people. The guidance includes 52 recommendations with suggestions on actions which should be taken.

The guidance is for all those who have a role in promoting the quality of life (physical health and social, educational and emotional wellbeing) of looked-after children and young people.

The recommendations cover local strategy and commissioning, multi-agency working, care planning and placements, and timely access to appropriate health and mental health services. In particular, the recommendations aim to:

- promote stable placements and nurturing relationships
- support the full range of placements, including with family and friends
- encourage educational achievement
- support the transition to independent living
- meet the particular needs of looked-after children and young people, including those from black and minority ethnic backgrounds, unaccompanied asylum seekers, and those who have disabilities
- place looked-after children and young people at the heart of decision making

3.1.5 Munro Review of Child Protection

The Munro Review of Child Protection: Final Report (2011) makes recommendations about the child protection system. This includes stressing the importance of early help and support reinforcing the findings of the national reviews conducted by:

- Graham Allen on Early Intervention.
- Frank Field on Poverty and Life Chances.
- Dame Clare Tickell on the Early Years Foundation Stage.

Munro states that:

The case for preventative services is clear, both in the sense of offering help to children and families before any problems are apparent and in providing help when low level problems emerge. From the perspective of a child or young person, it is clearly best if they receive help before they have any, or have only minor, adverse experiences.

Evaluative research provides the same message, showing that there are a number of helping methods that have a good record of reducing the later incidence of adverse outcomes for children and young people but that, in comparison, services offered once problems become severe have a much lower effectiveness rate. The reviews conducted by Graham Allen MP, Rt Hon Frank Field MP and Dame Clare Tickell share this review's belief in the importance of providing help early.

From this review's point of view the three key messages are that:

- *preventative services will do more to reduce abuse and neglect than reactive services;*
- *coordination of services is important to maximise efficiency; and*
- *within preventative services, there need to be good mechanisms for helping people identify those children and young people who are suffering or likely to suffer harm from abuse or neglect and who need referral to children's social care.*

(Professor Eileen Munro (2011) Chapter 5: Sharing responsibility for the provision of early help in *The Munro Review of Child Protection: Final Report, A child-centred system.*)

3.1.6 Public Health Outcomes Framework

The Public Health Outcomes Framework was published in January 2012 and sets out the desired outcomes for public health and how these will be measured.

The framework concentrates on 2 high-level outcomes to be achieved:

- Increased life expectancy.
- Reduced differences in life expectancy and healthy life expectancy between communities.

A set of support public health indicators will help focus understanding of progress year by year nationally and locally. The indicators are grouped into 4 'domains':

- Improving the wider determinants of health.
- Health improvement.
- Health protection.
- Healthcare public health and preventing premature mortality.

Emotional wellbeing of looked after children is included as an indicator in Domain 2 (Health Improvement). This has been taken into account in the commissioning priority "good outcomes for children in care".

3.1.7 Research on what works

The Centre for Excellence and Outcomes for Children's Services has produced 3 Knowledge Reviews including up to date evidence on what works for children and young people in care. The Knowledge Reviews include evidence from research, validated practice and views of professionals.

3.2 Local context

3.2.1 Values

A set of values underpins the Children in Care Commissioning Strategy. These values will inform the work of all agencies that support children in care.

The values have been amended to reflect how they were written for consultation with children and young people. Young people were asked what key values they thought were most important. The values are set out below and are ranked in order of priority:

Statement
Make sure children and young people have a say in decisions that affect their lives and with the planning of services.
Help children, young people and their families to think about what might happen in the future, and to cope and feel ok if things don't always go how we want them to.
Help children in care get on better at school and support their learning.
Make sure that children and young people feel happy and healthy.
All agencies working with children and young people in care should be working together so you do not have to keep telling people the same things.
Provide services for children in care that are understanding and children and young people can get in touch with easily.
Understand everyone is different and has different needs and make sure adults working with children in care think about this.

3.2.2 Wiltshire Children and Young People's Plan 2012-2015

The Wiltshire Children and Young people's Plan 2012-2015 is a high-level 3 year plan which outlines the vision and high level outcomes for children and young people in Wiltshire.

Our vision is:

"To improve outcomes for children and young people in Wiltshire; ensure good safeguarding practice; reduce, prevent and mitigate the effects of child poverty; and enable resilient individuals, families and communities."

The detail of actions we will take to improve outcomes for children and young people and how we will measure our progress are included in the range of commissioning strategies and strategic plans. These documents can be found on the Children and Young People's Trust website at <http://www.wiltshirepathways.org>.

3.2.3 Complex Families Project

In December 2011 the government announced additional funding for local authorities to work with partners to radically transform the lives of the country's most troubled families. In Wiltshire we are referring to this as the Complex Families Project.

The project aims to do the following:

- To ensure improved life chances and outcomes for children and young people who live in families with complex problems.
- To use resources in the most cost effective way by maximising opportunities for earlier intervention.

This is a “whole system” project which will improve access arrangements, pathways to services and ensure that services make a difference to the lives of children, young people and their families. There will be a particular focus on families where parents have substance misuse problems, mental health difficulties and where there is domestic violence or offending behaviour.

The project will focus on earlier intervention and on the interface between targeted and specialist services i.e. it will include a focus on those families who fall just below the social care threshold but where there are still significant concerns about parenting and children’s welfare. Lessons from some high profile Serious Case Reviews have stressed the importance of getting this interface right. By getting this right children will be safer and more children will be able to stay at home living with their families and have better life chances as intensive support will be offered earlier.

The project will be multi-agency. We will be learning the lessons from our own Family Intervention Project (FIP) and other FIPs across the country on the importance of multi-agency working.

The project is about efficiency and effectiveness. Processes will be leaner and it is anticipated that expenditure by the local authority and other agencies on complex families will reduce and outcomes will improve. Over time there will be a shift in use of resources away from specialist services (levels 3 and 4) to targeted services (level 2).

The work will be evidence based. It will be informed by an analysis of what is happening in Wiltshire across different agencies, and also by research and good practice examples from elsewhere.

3.3 Needs assessment

3.3.1 The Joint Strategic Needs Analysis

The Joint Strategic Assessment for Wiltshire (JSA) provides a strategic analysis of need.

The Wiltshire JSA, and a JSA for each of Wiltshire’s 20 community areas, are available on the Intelligence Network at www.intelligencenetwork.org.uk.

A specific needs analysis relating to children and young people is produced annually. The latest needs analysis can be found at www.wiltshirepathways.org/UploadedFiles/Needs_Assessment.doc.

3.3.2 Key features of Wiltshire

Wiltshire is a large, predominantly rural and generally prosperous county located in the south-west of England. The total population in Wiltshire is estimated to be 461,480 (mid year estimate 2011) and rising. Nearly half of the population live in towns or villages with fewer than 5,000 people. A quarter of the county’s inhabitants live in settlements of fewer than 1,000 people.

Bigger concentrations of population can be found in the cathedral city of Salisbury, the county town of Trowbridge, and Wiltshire’s many market towns, including Chippenham, Devizes, Marlborough, and Wootton Bassett.

Wiltshire is characterised by the scale of its military presence which is one of the largest in the country. Wiltshire therefore has a significant proportion of children and young people with parents employed in the armed forces. This brings with it the challenges of turbulence and disruption to family life and learning due to children moving schools as their parents are posted to different locations and the anxiety felt whilst parents are away on active duty. This presents challenges both to statutory services and also to military welfare services. In January 2011, 4,893 (7.6%) of children and young people in Wiltshire schools had a parent in the armed forces.

3.3.3 0 to 19 years population

Of the total population (mid year estimate 2011), the number of children and young people aged 0-19 is 114,390 (24.8%) which is more than the national average of 23.8%.

The table below shows the numbers and percentages of children by age band based on the 2011 mid year estimates:

Wiltshire Population	Number	% of population
0-4	26,310	5.7
5-9	26,220	5.7
10-14	29,990	6.5
15-19	31,870	6.9
0-19	114,400	24.8

Children and young people from minority ethnic groups account for 8.3% of pupils in primary schools and 6.7% of pupils in secondary schools. This is significantly below the national average of 24.5% and 20.6% respectively. The largest group is made up of children and young people from White and Black Caribbean and White and Asian communities. There has been a more recent increase of children and young people from Western and Eastern European countries. In 2011, 3.4% of pupils speak English as an additional language.

3.3.4 Deprivation

Although Wiltshire ranks amongst the least deprived areas of England (245th out of 326), it contains significant pockets of deprivation.

The average Indices of Multiple Deprivation rank for Wiltshire's Lower Super Output Areas (LSOAs) compares favourably against the England benchmark in terms of overall deprivation. However, the county has seen an increase in relative deprivation since the 2007 Indices. This is shown by the average IMD ranking falling from 23,814 to 22,229.

The areas of greatest deprivation in Wiltshire, as determined by the Indices of Multiple Deprivation, are located in parts of Trowbridge, Salisbury, Chippenham, Westbury, Calne and Melksham.

10 most deprived LSOAs in Wiltshire:

Local Name	National Rank of IMD 2010	Rank in Wiltshire
Salisbury St Martin – central	2,732	1
Trowbridge Adcroft – Seymour	3,837	2
Trowbridge John of Gaunt – Studley Green	3,886	3
Salisbury Bemerton – west	4,450	4
Salisbury Bemerton – south	5,046	5

Calne Abberd – south	6,881	6
Melksham North – north east	6,903	7
Chippenham Queens – east	7,144	8
Trowbridge Drynham – Lower Studley	7,337	9
Westbury Ham – west	7,616	10

Using the combined IMD for the first time, Wiltshire now has one LSOA in the 10% most severely deprived in England: Salisbury St Martin – central. This area is also now in the 10% most deprived in England with regards to Health Deprivation and Disability; again, this is the first time that Wiltshire has had an LSOA in this category.

In Wiltshire 12% of children live in poverty of which 72% live in lone parent families. The figure for children living in poverty in our statistical neighbours is 14% and the figure nationally is 22%.

The proportion of children and young people in Wiltshire in primary schools who are entitled to free school meals is 9.9%. This is below the statistical neighbour's average of 11.7% and significantly below the national average of 17.1%.

The proportion of children and young people in Wiltshire in secondary schools who are entitled to free school meals is 6.1%. This is below the statistical neighbour's average of 8.6% and significantly below the national average of 14.6%.

Wiltshire has generally been below statistical neighbours and the national average in terms of proportions of pupils entitled to free schools meals due to the scale of military families in Wiltshire who do not usually qualify for free school meals, although they share many of the same needs.

3.3.5 Number of children in care

On 31 March 2012 there were 408 children in care. The number of children in care has increased by 25 or 6.1% in comparison to March 2011 (383). The March 2012 data has been used to enable comparison with other local authorities of the rate per 10,000 populations of children in care.

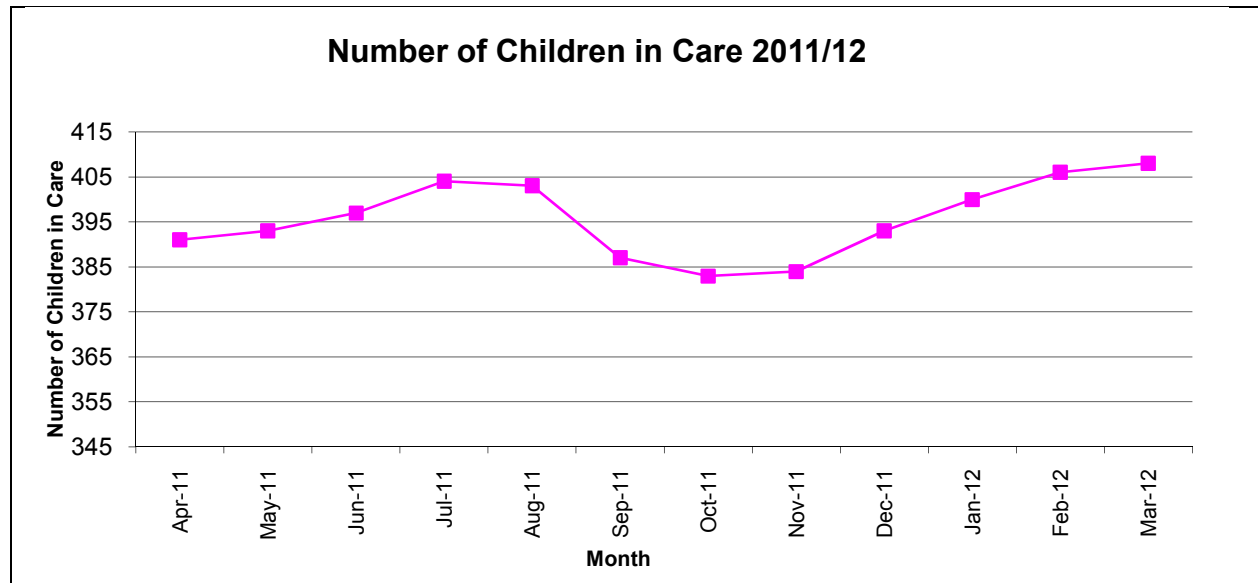
On 31 March 2012 88% of children in care were white British in comparison to 90.5% of the total white British 0 to 18 population. 4.4% of children in care were of mixed heritage, 0.9% Asian or Asian British and 6.65% from other ethnic groups. This is summarised in the table below:

	White British	Mixed heritage	Asian or Asian British	% black or black British	Other ethnic groups	Total
Number of children in care	408	18	4	1	26	408
% children in care	88%	4.4%	0.9%	0.25%	6.4%	100%
% overall 0 to 18 population	90.5%	2.5%	1.1%	0.5%	5%	100%

The rate per 10,000 for children in care at 31 March 2012 was 40.2. The latest comparative data available shows that on 31 March 2011 the statistical neighbour rate was 39.5 and the national average rate was 59.

The table and graph below outline the increase in children in care during 2011/12:

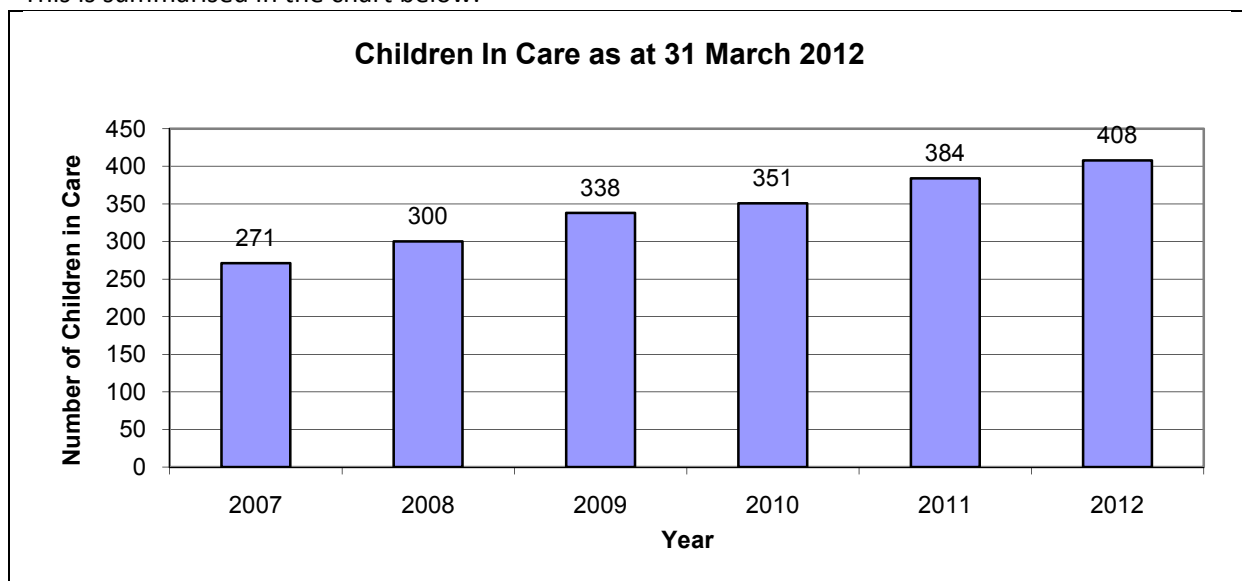
Month	Apr-11	May-11	Jun-11	Jul-11	Aug-11	Sep-11	Oct-11	Nov-11	Dec-11	Jan-12	Feb-12	Mar-12
No. Children in Care	391	393	397	404	403	387	383	384	393	400	406	408



The number of children in care has increased from 271 in 2007 to 408 at the end of March 2012. The year on year increase (April to March) was as follows:

- From 2007 to 2008 increase of 29.
- From 2008 to 2009 increase of 38.
- From 2009 to 2010 increase of 13.
- From 2010 to 2011 increase of 33.
- From 2011 to 2012 increase of 24.

This is summarised in the chart below:



Of the 408, 170 or 41.7% were looked after under voluntary agreements under Section 20 of the Children Act 1989. This compares to the latest comparative data for 2011 which shows an English average of 31%.

An audit of a sample of Section 20 cases has recently taken place. A detailed analysis is also taking place on the reasons for the increase in the children in care population.

3.4 Financial issues

3.4.1 Local financial context

The Council's intentions regarding savings and investments are set out in the Council's financial plan for 2011-15. The Council has prioritised services for vulnerable children and young people within its business plan and has invested in supporting services for children and young people in care, and children and young people on the edge of care. Savings have also been achieved through more effective procurement of placements for looked after children and young people.

The implementation of the commissioning strategy will support continued improvement in value for money for services for children and young people in care and will inform the financial planning process for 2013/14 and beyond.

Savings and investments identified for services for children in care are as follows:

- Savings of £750,000 were achieved in 2011/12 through a renegotiated block contract and negotiations with service providers on placement costs.
- The Council's financial plan for 2011 – 2015 also identifies areas for investment in protecting and safeguarding vulnerable children. Details are set out in the extract from the financial plan below.

"The number of looked after children has continued to increase..... This is due to a multiplicity of factors and is echoed across the country as all local authorities respond to pressures and demands of homelessness, the increase in vulnerable adolescents and the increase in child protection referrals.

We have responded to these pressures by developing in-house fostering provision, recruiting local carers and expanding schemes such as supported lodgings and semi-independent accommodation for vulnerable teenagers. Our service continues to need to expand to meet the increase in numbers; dedicated foster carers are needed for unaccompanied asylum seekers, disabled children, those requiring respite and vulnerable teenagers. In 2010/11 there was a significant increase in the levels of service needed and this led to a shortfall in the budget – this deficit needs addressing to respond to these needs. Our family placement service also needs to strengthen its post adoption support to meet the needs of those young people who have been adopted with complex health needs due to maternal drug and alcohol and parental health issues. A range of strategies are being put in place to both reduce the need for high cost external placements and take preventative action."

Health costs for looked after children are met by the Primary Care Trust when a child is placed out of area. The Department of Health is likely to introduce a tariff to cover the costs of health assessments and reviews in the future.

This could significantly increase the budget required to undertake health assessments and reviews for children placed with foster carers or residential providers outside Wiltshire.

Under the Department of Health's Responsible Commissioner Guidance, there is a cost to the PCT budget for any secondary health care provided to looked after children who are placed outside Wiltshire's borders.

3.4.2 2012/13 budget for children in care

The 2012/13 net Local Authority budget for children in care services is £24,498,149. Details are noted in the table below. Further work will take place on apportioning expenditure on children in care from these budgets. Work is also taking place on calculating expenditure from health budgets.

Expenditure on Children in Care 2012/13:

Item	Gross budgets	Recharges	Income	Net budget	Notes
External placements	£9,027,500			£9,027,500	Independent Fostering Agency Allowances & Residential. Placements including Disability. This figure does include some externally purchased respite.
Towpath Rd (preparation for independent living for 16+)	£288,600		£10,000	£278,600	Contract for Services – 7 bedded unit.
Permanency placements	£90,000			£90,000	Special Guardianship arrangements to allow adoptions/long term arrangements to take place.
UASC /Asylum seekers	£583,300		£430,000	£183,300	Home Office grant available for the first 25 UASCs.
Placements Services in-house	£3,439,500			£3,439,500	Internal Foster Carers Allowances.
LAC & 16+ teams	£2,492,900			£2,492,900	Staffing Costs £1,366k + Independent Living Payments £1127k incl. transport.
Fostering team	£1,211,800			£1,211,800	Staffing Costs £1,151k + £112k Foster carer recruitment & training plus client costs.
Adoption services	£1,218,900			£1,218,900	Staffing costs £431k + adoption allowances £788k + virement in transition £12k.
Host family scheme (Prevention of homelessness of young people)	£35,500			£35,500	Independent Living Payments.
Education services LAC	£356,729	£13,860	£150,000	£221,100	Staffing Costs £168k + Educational fees & ICT support for LAC £203k.
The Aspire Centre (new for 2012/13)	£150,000			£150,000	Staffing and running costs.
Totals	£18,952,960	£13,860	£590,000	£18,349,100	

The Net LA budget has increased by £1,616,938 from 2011/12 to 2012/13 comprising:

Inflation	£584,132
Demand/growth	£987,611

Aspire Centre	£150,000
Savings Respite	-£150,000
Pay growth	£45,195
Total	£1,616,938

Further direct and indirect costs relating to LAC include the following:

Safeguarding teams – who hold approximately 50% of LAC cases	£2,681,800
LAC participation and involvement e.g. Children’s Rights Services and specialist LAC in Voice and Influence and proportion of cost of Voluntary Sector Youth Development Coordinator	£148,011
Lead Commissioner for LAC	£45,138
New social care family support intervention service – half	£350,000
Family Group Conferencing service – half – focusing on Child Protection issues	£37,500
Management costs – per CIPFA benchmarking	£160,502
Internal and External legal services	£1,194,483
Client transport	£950,067
Virtual Head teacher for LAC	£221,183
Personal Advisers for LAC within teams	£257,990
Children’s Services buyers service – per CIPFA benchmarking	£102,375
Total	£6,149,049

3.5 Where children in care are placed

3.5.1 Type of placements

As at 31 March 2012 there were 408 children in care in Wiltshire. Since 2007/8 there has been a downward trend in the numbers placed in residential provision from 62 young people on 31st March 2008 to 41 young people on 31st March 2012. This is a reduction from 18.5% of the total population of those in care to 10%. This is outlined in the table below. Please note 2011/12 figures for other authorities are not currently available.

Indicator	Wiltshire NB. For all years, numbers as at 31 st March					English average 2010/11	South West average 2010/11	Statistical neighbour Average 2010/11
	2007/8	2008/9	2009/10	2010/11	2011/12 provisional			
% in residential including residential schools	18.5% (62)	16.5% (56)	13.8% (48)	10% (38)	10% (41/408)	12%	11%	
% in foster care	69% (231)	73% (246)	75% (264)		64.2% (262/408)	74%	75%	73%
% fostered by family or friends	8.7%	9.7%	10.6%	14%	14% (57/408)			

There has been a significant increase over the last couple of years in the number of children and young people fostered by friends and family.

3.5.2 Independent sector provision

As at 27 April 2012 29 young people were placed in residential care homes at a weekly cost of between £2,200 and £5,800 per week. The average weekly cost of a residential care home placement was £3,392 per week. The residential placements included 1 mother and baby placement and 3 solo placements.

The total number of independent fostering placements on 27 April 2012 was 87 which included 3 mother and baby placements and 2 placements for unaccompanied asylum seeking children. The weekly cost of placements varied from £585 to £1,519 per week. Average weekly costs varied according to the age of the child and complexity of needs.

3.6 Children in care performance information

As at 27 April 2012 29 young people were placed in residential care homes at a weekly cost of between £2,200 and £5,800 per week.

The average weekly cost of a residential care home placement was £3,392 per week. The residential placements included 1 mother and baby placement and 3 solo placements.

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3.6.1 Stability of placements

The table below shows that since 2007/8 there has not been consistent or continuous improvement of placement stability in Wiltshire. The figures for 2010/11, where comparative data is available, shows that our placement stability is worse than that of our statistical neighbours, the southwest average and the English average - we have more looked after children with 3+ placements during the year and lower numbers of looked after children who have had at least 2.5 years in the same placement for at least 2 years. Provisional data for 2011/12 is showing a slight improvement in terms of placement stability in Wiltshire. Comparative data for 2011/12 is not yet available.

Indicator	Wiltshire					English average 2010/11	South West average 2010/11	Statistical neighbour average 2010/11
	2007/8	2008/9	2009/10	2010/11	2011/12 provisional			
LAC with 3+ placements during the year	11.3%	8.6%	12.9%	14%	13.5% 55/408	11%	13%	10%
Looked after for at least 2.5 years in same placement for at least 2 years	70.3%	63.3%	69.1%	71%	65.6% 82/125	69%	69%	70%

3.6.2 Quality of services

The table below shows that our performance in terms of quality of services in 2010/11 was better than our statistical neighbours, southwest and English averages – a higher percentage of LAC received health and dental checks, a higher percentage of LAC achieved 5 or more GCSEs grades A*-C

and a lower percentage of LAC aged 10+ were given a final warning or reprimand or convicted during the year. Comparative data for 2011/12 is not yet available.

Provisional data for 2011/12 shows that the percentage of LAC with 5 or more GCSEs grades A*-C including English and Maths has dipped dramatically since 2010/11; however there is good evidence for this dip. Of the cohort of LAC expected to achieve 5 GCSEs grades A*-C, 1 young person was moved back a school year due to a change in school (this was a positive move for this young person); and 3 of the young people had personal circumstances/challenges which meant that at the last minute they didn't achieve as expected – these circumstances and challenges could not have been anticipated.

	Wiltshire					English average 2010/11	South West average 2010/11	Statistical neighbour average 2010/11
	2007/8	2008/9	2009/10	2010/11	2011/12 provisional			
% adopted during the year	7% (10)	17% (25)	10% (15)	11% (15)	12% (19/154)	11%	12%	10%
% health and dental checks	87.9%	85.3%	80.0%	93.1% (240/260)	89% (234/295)	83%		83%
% LAC with 5 or more GCSEs grades A*-C including English & Maths	6.9%	10.3%	14%	16%	4% 1/5	13%	12%	11%
% sessions at school missed due to overall absence	Awaiting data							
% LAC persistent absence from school(academic Year)	Awaiting data							
% 10+ LAC for at least 12 months given a final warning/reprimand or convicted during the year	11%	10%	12%	4.8%	Collected at end of year	7%	9%	7%
%Final warnings/reprimands and convictions of LAC			7.2%		Collected at end of year			

3.6.3 Leaving care

The table below shows our performance around leaving care. The 2010/11 figures shows that we have a higher percentage of care leavers in suitable accommodation aged 19 when compared against the statistical neighbour, southwest and English average. 2011/12 comparative data is not yet available. Provisional 2011/12 data shows a decrease on 2010/11 although still close to achieving against our target.

2010/11 data shows that the percentage of care leavers who were in education, employment or training aged 19 was slightly less than the statistical neighbour, southwest and English average. Provisional 2011/12 data shows that there is more work to do in this area.

Indicator	Wiltshire						English average 2010/11	South West average 2010/11	Statistical neighbour Average 2010/11
	2007/8	2008/9	2009/10	2010/11	2011/12 provisional	Target (added if appropriate)			
Number eligible LAC 16-18 with pathway plans				96% 54/56	96.3% (80/83)	-			
% care leavers in suitable accommodation aged 19	100%	81.8%	76.5% (26/34)	97.1% (34/35)	94.7% (36/38)	95%	90%	91%	91%
% care leavers who were in ETE aged 19	84.4%	54.5%	41.2% (14/34)	60% (21/35)	39.5% (15/38)	68%	61%	64%	61%
Percentage LAC over 18 in higher education				7% (2yr avg) (12)			6%		

PART 2 - COMMISSIONING PRIORITIES

Part 2 of the Children in Care Commissioning Strategy outlines the commissioning priorities:

- INVOLVING CHILDREN AND YOUNG PEOPLE
- GOOD OUTCOMES FOR CHILDREN IN CARE
Including safeguarding
- ACCESSING and MANAGING RESOURCES
- EDGE OF CARE
- PLACEMENTS
- LEAVING CARE

For each priority, we have set out what we want to achieve, messages from the consultation, priorities for action and key performance indicators which will be monitored by the Children in Care Commissioning Group. The priorities will be developed into an implementation plan which will include timescales and success criteria. The performance indicators for each priority will be combined into a performance report which will be used to monitor the progress of the strategy.

Please note that appendix 2 outlines the current position and achievements to date for each commissioning priority.

4. INVOLVING CHILDREN AND YOUNG PEOPLE

4.1 What we want to achieve

We want to maximise opportunities for children and young people in care to:

- Take part in shaping and developing services.
- Give feedback on existing services they are receiving.
- Have a say in their care plans ensuring that children and young people in care are and feel listened to, for example in reviews, and that their views are acted upon and help to shape their care plans.

4.2 Key messages from the consultation

During consultation on the draft strategy children and young people stressed the following:

- It is important for children in care to “make decisions about their own lives”.
- Young people want to be listened to: “If they don’t listen to you, they don’t understand.”
- Children and young people in care need to know what their rights are.

In focus group work with social care staff, the following were stressed as important:

- Valuing the life experiences of children and young people and ensuring their contribution to service development and delivery.
- Developing more creative ways of getting the views of all looked after children and young people.

4.3 Priorities for action

- 1 Increase the number of children and young people who participate in the Children in Care Council. A Voice and Influence worker will be focusing on working with children in care to develop new ways to ensure that their voice is heard.
- 2 Undertake an annual survey of children in care which focuses on the Children in Care Promise and on whether children in care are being listened to.
- 3 Produce an annual report on the participation and involvement of children in care which includes examples of how service managers have responded to feedback and ideas and a summary of feedback from the survey.
- 4 Involve young people in an annual evaluation of the IRO service.
- 5 Review the Children’s Rights service model, including looking at whether this service should be provided externally to the local authority in line with other advocacy services e.g. child protection advocacy and advocacy for children with disabilities. A new advocacy service will include the Independent Visitor scheme.
- 6 Launch the “young person’s guide to living in care”.
- 7 Review the use of viewpoint.
- 8 Following each Shared Guardianship session, a report on follow up areas is to be taken to the Children in Care Commissioning Group.

4.4 Key performance indicators which will be monitored by the Children in Care Commissioning Group:

<p>Activity</p> <ul style="list-style-type: none"> • Number of children and young people who are involved in the Children in Care Council. • Number of children and young people involved in consultation events. • Increase in numbers accessing advocacy. • Number of children and young people who are involved in the commissioning process. 	<p>Quality</p> <ul style="list-style-type: none"> • Percentage of children and young people contributing to their reviews. • Children and young people in care state that they have been given an opportunity to give feedback on the support and services provided to them (annual survey). • Children and young people say that they have been listened to (annual survey).
<p style="text-align: center;">Outcomes</p> <ul style="list-style-type: none"> • Managers can evidence where services have changed as a result of feedback from children and young people (annual report). • Children and young people can identify positive outcomes related to their involvement (annual survey). 	

5. GOOD OUTCOMES FOR CHILDREN IN CARE including safeguarding

5.1 What we want to achieve

We want to achieve the best possible outcomes for children and young people by providing high quality services which focus on children's and young people's needs so that:

- Children and young people in care, on the edge of care and leaving care are safeguarded.
- Assessments and care plans are comprehensive and focus on outcomes.
- Reviews continue to happen on time.
- All looked after children and young people receive a consistently high quality service from all social care teams. This includes ensuring quality and robust assessment and planning ensured by challenge, managerial oversight and good decision-making.
- Criminal records for looked after young people continue to decrease in number.
- All looked after children and young people are supported towards a healthy future lifestyle.
- Looked after children and young people are supported to give them the best chance of achieving good educational attainment outcomes and leading successful and fulfilling lives.

5.2 Key message from the consultation

Young people were asked what they think the top things are that make a good social worker. In order of importance the responses were:

- Show they care and are willing to do all they can for you.
- Turns up to things when they are supposed to and don't cancel.
- They are understanding.
- They do the jobs and things they say they are going to do.
- You can contact them when you need to.
- Trustworthy.
- You feel you could go to them about anything.
- They are polite.
- Reliable.
- Dedicated to their job.

There were conflicting opinions on social workers, with some young people commenting that they felt theirs was really good:

"He is just really good at his job"

And others were less satisfied:

"My social worker doesn't do things when he says he will – he always says sorry I forgot!"

When this was discussed in the focus group a key issue that came up was trust and respect - not just with social workers, but all workers the young people engaged with. A very succinct response from one young person which was echoed by the group was:

*"If they trust and respect you, you trust and respect them. If I am treated like s**t, I will act like s**t."*

Children and young people also emphasised that social workers should:

- Stick to appointments and where necessary go the extra mile to support them.
- Get to know the young person first before making judgements, not be too quick to make decisions and allow for the fact that young people change, mature and change their minds.

This was summed up by one member who said:

“They should get to know me first and then read my notes. I should be able to say things in my words.”

Most had stories of being treated ‘as a generic looked after young person’ and when asked how this felt they stated:

“When you aren’t treated as an individual it makes you feel like you are someone else – not you.”

Young people were asked to think how the lives of children and young people in care could be improved. The following are some of the responses in priority order:

- Have less staff changes i.e. try to make sure you have the same social worker or care worker for longer.
- More support for those who are not coping with school.
- Make sure that if children in care are being bullied it is dealt with quickly.
- Better training for staff on how to work with children and young people.

The discussion with the young people acknowledged the fact that some young people will not have any option other than to go into care, but the young people were very positive about the looked after children prevention services and felt that if a young person did need to leave their family, they should be in as stable a placement as possible, as quickly as possible.

5.3 Priorities for action

- 1 To ensure that children in care receive consistent high quality social work services.
 - Ensure that initial and core assessments take sufficient account of the impact of children’s earlier life experiences (chronologies), family history (genogram) and of children’s identity in terms of culture and race.
 - Review allocations of looked after children and young people across teams and consider whether it is appropriate for some to move sooner to the through care teams.
 - Develop staff training which involves children and young people in care and addresses approaches and techniques for working with young people.
 - Ensure access to managerial supervision for all staff across health and social care ensuring that workers receive regular supervision, challenge and reflection.
 - Ensure systems in place for promoting good practice such as opportunities for case work discussions and peer audits.
 - Follow up on taking part in a benchmarking exercise with South West Audit Partnership to gauge average workloads for Social Workers across the South West.
- 2 To improve health outcomes.
 - The Public Health Team to appoint a designated doctor and designated nurse for looked after children to ensure effective strategic clinical leadership in line with statutory national guidance as set out in *Working Together to Safeguard Children, 2010*.

- Improve LAC health service delivery and consider how to use the NICE public health guidance “Promoting the quality of life for looked-after children and young people”.
- Ensure that the looked after children’s health team receive prompt notification of a child or young person’s admission to care or change of placement.
- Improve the quality, timeliness and take-up of initial health assessments and review health assessments including for children and young people placed outside Wiltshire.
- Collect data on the numbers of looked after young women who are pregnant, or who are teenage mothers and looked after young men who are, or who are about to become, fathers.
- Ensure that the needs of young mothers and fathers within the looked after children service, including those who are placed outside the area, are identified and addressed.
- Ensure that health support to looked after children and care leavers is fully developed in partnership with the Children in Care Council.
- Monitor the sharing of SDQs with looked after children nurses as part of the ability of the looked after children health team to fully quality assure health service delivery.
- Work with health colleagues to ensure that health plans for looked after children and young people are outcome focused.
- Improve leaving care transitions so that young people can continue to obtain health advice and services (physical and mental health) and so that pathway planning includes health and access to positive activities. This includes ensuring that care leavers receive copies of their health histories.
- Monitor the impact of the Specialist CAMHS service on achieving quality outcomes for children in care.
- From April 2012, strengths and difficulties questionnaires (SDQs) will be routinely shared with the looked after children nurses to fully quality assure health service delivery and assist with tracking a young person’s emotional growth and development at the time of their annual health review.

3 To improve educational attainment.

- Improve the monitoring of looked after young people aged 16+ and moving into education, employment and training.
- Provide more support with schooling for those who struggle with this.
- Monitor development of the Aspire Centre which will provide a dedicated resource and activities centre for looked after children including monitoring associated costs.
- Improve attendance.

4 To quality assure practice.

- Ensure regular reports from the IRO service to the Children in Care Commissioning group to identify key themes and improve practice. This includes ensuring that IROs systematically gather and analyse information.
- Work with the Public Health Team to ensure that looked after children’s health service delivery is subject to a work plan with measurable objectives and a rigorous performance management framework.
- Develop a process for coordination between looked after children and young people’s statutory reviews and annual health reviews to identify themes or trends and inform future service provision.
- Put in place an effective quality assurance framework of assessment and case management practice for children in care.

5.4 Key performance indicators which will be monitored by the Children in Care Commissioning Group

<p>Activity</p> <ul style="list-style-type: none"> • Number and % of LAC receiving health and dental checks. • Number and % of eligible LAC with pathway plans. 	<p>Quality</p> <ul style="list-style-type: none"> • Number and % of LAC placed close to home. • LAC self-reporting quality of life. • LAC self-reporting high level of wellbeing. • LAC Reviews happen on time. • Number and % of LAC allocated to qualified social workers. • % statutory visits to children in care within the timescale. • Number and % of sessions at school missed due to overall absence. • Number and % of LAC persistent absence from school.
<p>Outcomes</p> <ul style="list-style-type: none"> • Immunisation rates for children in care compared with the Wiltshire population. • % LAC with KS2 L4+ English. • % LAC with KS2 L4+ Maths. • % LAC with 5 or more GCSEs grades A*-C including English and Maths. • Number LAC teenage pregnancies. • % 10+ LAC for at least 12 months given a final warning/reprimand or convicted during the year. 	<p>Cost effectiveness</p> <ul style="list-style-type: none"> • Costs associated with the Aspire Centre.

6. ACCESSING and MANAGING RESOURCES

6.1 What we want to achieve

We want to develop efficient and responsive processes which:

- Enable children and young people to quickly access the services required.
- Monitor the quality and effectiveness of these services in achieving change and positive outcomes.
- Are multi-agency to ensure a team around the child approach.

6.2 Key message from the consultation

Comments on access to resources made during the consultation included the following:

- It is important to undertake more analysis and to be able to predict future demand for services and placements.
- There is scope to involve other agencies in the Placement Panel.
- Benefits could be gained by extending the remit of the children's services buyers.

6.3 Priorities for action

- 1 Extend the role of the Buyers service to cover referrals to the in-house foster care service. This was recommended in the initial placements strategy and is a model which is successful in other local authorities. Potential benefits include the following:
 - Consistent high quality management information about supply and demand for the whole foster care market. This information is essential to the Sufficiency Duty.
 - More efficient business processes, such as consistent administrative processes for managing referrals, contracting and payments.
 - Creates a level playing field between in-house and external providers.
 - A higher quality in-house service with more foster carers. This will enable the in-house fostering service to focus on recruitment and support to foster carers.
 - Making sure the right people are doing the right things with role clarity e.g. buyers commission, monitor and report, whilst social workers undertake assessments and care planning, and the family placement (fostering) team recruit and support foster carers and match the skills of foster carers with the needs of the child and young person.It is important to note that care professionals will retain decisions on the selection of placements.
- 2 Improve access to resources:
 - Create a new Access to Resources process. This process has been referred to in section 3.2.3 on the Complex Families Project.
 - Consider extending the role of the Placements Panel. This will include considering whether the panel will become multi-agency with a focus on placements and permanency. In the future no cases will go to the Placements Panel unless they have gone through the Gateway Panel to explore options for supporting the child or young person remaining at home.
- 3 Carry out further work on identifying expenditure and full costs. This includes having a better understanding about full costs including the costs of specialist LAC nurses, medical assessment costs, health costs of children placed out of area, CAMHS LAC costs.
- 4 Complete a case file analysis of the 20 most expensive placements and the 20 looked after children and young people who have had the most moves.

- | | |
|----|---|
| 5 | Produce an in-depth needs assessment which estimates short term and long term demand for services and improved forward planning on placements. This will include the estimated number of new LAC placements which will start in the next 3 years i.e. the number, types and costs of placement we might expect. |
| 6 | Set up systems for ensuring individual needs and care plans are informing the strategic commissioning process. |
| 7 | Produce in year and longer term budgets which reflect placement plans and anticipated demand for placements. |
| 8 | Ensure value for money from expenditure on transport for looked after children. |
| 9 | Further explore opportunities for joint commissioning with partners, particularly health. |
| 10 | Review the need for, access to, and use of emergency foster care placements. |

6.4 Key performance indicators which will be monitored by the Children in Care Commissioning Group

<p>Activity</p> <ul style="list-style-type: none"> • Number of children and young people referred to the Access to Resources process each month. • Number of children referred to the Placement and Permanency Panel each month. • Number and % of LAC in in-house foster placements. • % worked with by LAC prevention services who do not enter the care system. • % worked with by LAC prevention services who return home. 	<p>Quality</p> <ul style="list-style-type: none"> • Number and percentage of children and young people who have received a service via the Access to Resources process who are then referred to the Placement and Permanency Panel. • Feedback from children and young people and parents on services received (feedback surveys).
<p>Outcomes</p> <ul style="list-style-type: none"> • Reduced number of looked after children starting to be looked after in the year (i.e. more children and young people supported to live at home with their families). • Increase in children and young people who return home in 6 weeks or less. 	<p>Cost effectiveness</p> <ul style="list-style-type: none"> • Average gross weekly cost per LAC in residential care. • Average weekly unit cost of independent fostering agency. • Average weekly unit cost of in-house foster placements. • Reduction in expenditure on LAC placements, internal and external) from 2013/14.

7. EDGE OF CARE

NB. A detailed report was produced in February 2012 on Edge of Care: summary of services. This has informed this section of the commissioning strategy. The full Edge of Care report is available from lucy.kitchener@wiltshire.gov.uk

7.1 What we want to achieve

We want to achieve a good range of cost effective 'edge of care' services which promote good outcomes by enabling children and young people to remain living safely with their families, where appropriate. These services:

- Assist families and extended families to better care for and support children and young people.
- Provide direct support to children and young people increasing self esteem and promoting resilience.

Where children do return home after a period of care, the risks will be assessed and support provided if required.

In 2011 Ofsted produced the "Edging Away from Care" report which outlines how services in 11 local authorities helped change the lives of children and young people at risk of entering care for the better. Services and approaches highlighted by Ofsted included the following:

- Good range of intervention services. It is helpful if services are following a clearly defined and understood intervention model. No one model is 'best'. The clarity is important. Models and approaches mentioned included solution based or cognitive behavioural approaches, multi-systemic therapy, motivational interviewing and family group conferencing.
- Clear referral and access to services pathways including edge of care panels or similar.
- Holistic assessments which identify and manage risk and set clear goals for what needs to change. Positive strengths based approaches which involve the children, young people and families in identifying solutions are successful.
- Good multi-agency working.
- Robust strategic analysis and understanding of the needs of this cohort of children, young people and families.

7.2 Key message from the consultation

Young people highlighted the following:

- When abuse is occurring social workers should intervene early.
- The importance of more methods and services which provide support for families to prevent young people coming into care.
- Young people know that it is not always possible to prevent a young person entering care but where possible families should be given support before things start to go wrong.

Other points noted on edge of care included:

- Services being available outside normal working hours.
- Taking a multi-agency team around the child approach.
- Short breaks available for families with children and young people with disabilities.
- Some good work taking place on supporting children to remain with families for example work undertaken by the Crisis Intervention Service and Family Support Team.
- A need for robust transitions and support programmes for children and young people moving home between placements.

Wiltshire has recently prioritised this area with the development of resource centres, implementation of the Family and Parenting Support Commissioning Strategy and the Social Care Family Support review.

7.3 Priorities for action

- | | |
|---|---|
| 1 | Close monitoring of the impact of “edge of care” services through the access to resources process to include <ul style="list-style-type: none"> • Detailed analysis of reasons why children become looked after. • Reviewing what is offered to support reunification. • Ensuring a comprehensive package of support and ongoing monitoring to sustain quality of care is offered. |
| 2 | Develop a business case for developing Support Foster Care or a similar model. This is a purposeful model where short breaks are part of a programme over a limited period of time as an intervention to effect change including planned time out. |
| 3 | Review the family and friend’s policy/procedure. |
| 4 | Complete an analysis of the need for out of hours support including a detailed analysis of all children and young people who come into care out of hours. |
| 5 | Monitor the impact of the Specialist CAMHS service on preventing children and young people becoming looked after and enabling a return home. |
| 6 | Establish a referral mechanism between social care staff and Project Inspire to intervene early with young people who drop out of post-16 learning and quickly move them back to EET. |
| 7 | Close monitoring of the impact of the Wiltshire Risk Management Panel. |

7.4 Key performance indicators which will be monitored by the Children in Care Commissioning Group

<p>Activity</p> <ul style="list-style-type: none"> • Number and percentage of children and young people in kinship placements – not looked after. • Number of private fostering arrangements notified. • Number of children and young people who cease to be looked after. • Number of Special Guardianship Orders. 	<p>Quality</p> <ul style="list-style-type: none"> • Positive feedback from children and young people and parents on services received. • Reduction in use of emergency placements.
<p>Outcomes</p> <ul style="list-style-type: none"> • Increase in children and young people who return home in 6 weeks or less. • Increase in children and young people worked with by ‘edge of care’ services who remain living at home 6 months after receiving a service. 	<p>Cost effectiveness</p> <ul style="list-style-type: none"> • Shift in expenditure from placements budget to prevention/family support budget.

8. PLACEMENTS

8.1 What we want to achieve

We want to achieve a good range of placements within a purchasing framework focusing on:

- Choice.
- Quality (both of placement and of relationship with carer).
- Cost effectiveness.
- Meeting an individual's needs, as close to home as possible (providing that is compatible with the care plan) and close to the education setting.
- Flexibility.
- Short-term crisis provision when needed.

We also want to achieve the following:

- More timely adoptions.
- A decrease in the number of moves a looked after young person has to make.
- Improved longer-term stability of placements.
- Young people who are happy in their placements.
- To find young people a permanent family where possible.
- Foster carers have all relevant, up to date information to assist them with providing good quality safe care personal to the child or young person's needs.

8.2 Key message from the consultation

The key issues for children and young people in priority order were:

- Stop children and young people needing to move from place to place – find a place where they feel comfortable and can stay.
- Allow children and young people to be involved in their choice of placements, have a say in their care plans etc.
- Place brothers and sisters together, or where this is not possible making sure they are able to have contact.
- Provide support before placements start going wrong.
- Have less staff changes i.e. try to make sure you have the same social worker or care worker for longer.
- More adoptions and make adoptions faster.
- More mother and baby placements.

During consultation, social care staff and foster carers stressed the importance of the following:

- Increasing demand for highly skilled short break carers for children and young people with disabilities.
- Concerns around transitions to independence.
- The need for a specific assessment process in place for children and young people with complex disabilities and the need to place for permanence.
- Need for well resourced family-based short breaks for children and young people with disabilities.
- Use of a person centred approach for individual outcomes.

Consultation with foster carers identified a number of positives:

- The support foster carers get is good and includes refreshments and crèche facilities at meetings.

- Training is helpful.
- Foster Carer meetings are very helpful.
- Emergency Duty Service is a good, responsive service and has sorted problems quickly.

8.3 Priorities for action

- 1 Foster placements
 - Develop a specification for the in-house foster care service. The specification will cover the following:
 - Training.
 - Role of foster carers including expectation regarding promoting good health.
 - The number and type of foster carers required to meet the anticipated ages and needs of children and young people.
 - Standards and targets expected. For example in terms of placement stability, promoting health and wellbeing of looked after children and achieving best possible education attainment; risk assessment undertaken by the child's social worker; and support to carers regarding statutory visits.
 - Review of skills fees criteria.
 - Quality assurance.
 - Compliance against regulatory requirements to safeguard children and young people.
 - Update the recruitment strategy which will outline how targets for in-house capacity will be delivered once the specification has been agreed for the fostering service.
 - Develop a Foster Care review form.
- 2 Adoption
 - Achieve better timeliness in days between the date a child becomes LAC and the decision that a child should be placed for adoption by:
 - Signing off and implementing the Permanency Policy.
 - Rolling out training to all social care staff including IROs on planning for permanency.
 - Appointing a dedicated "home finder" within the adoption service who will attend at 2nd LAC review.
 - IROs taking ownership of tracking children and questioning Permanence planning at 2nd LAC review.
 - Developing an Adopter's Reference Group.
 - Develop a specification for the Adoption Service. The specification will address central Government changes to the adoption assessment process and include arrangements for close monitoring of adoption timescales.
 - Develop an Adoption Service Plan. An Adoption Improvement Plan has been developed following the publication of the Adoption Scorecard and the Adoption Diagnostic Assessment pilot in May 2012. A set of Performance Indicators will be developed to show progress against the plan and progress will be monitored by the Children in Care Commissioning group.
 - Review services available to assist when problems with adoptive placements first arise including the availability of therapeutic support. This will include reviewing the small adoption support contract with PACT.

- 3 Looked after children and young people with disabilities
- Ensure every child and young person with disabilities has a person-centred plan against which outcomes can be measured.
 - Establish how vulnerable looked after children and young people with disabilities are supported to ensure a single plan and assessment works for them as part of the DCA Pathfinder.
 - Better support parents and carers early on to prevent children and young people with complex needs from becoming looked after, where there are no safeguarding or child protection concerns.
 - Develop appropriate specialist short break provision for children and young people with autism and complex needs to reduce reliance on independent special schools.
 - Ensure sufficient carers who are confident to care for children and young people with a wide range of disabilities, both in planned and emergency situations.
 - Improve outcomes and value for money for those with greatest needs associated with autism.
- 4 Placement stability
- Improve support, advice and services for families, carers and young people around managing difficult behaviour to prevent placement breakdown, particularly with reference to adolescent challenging behaviour.
 - Ensure there are in-house foster carers who can meet a range of needs so that better 'matching' can take place.
- 5 Quality Assurance of placements
- Develop a systematic approach to ensure placement quality against outcomes and use to inform future placements.
 - Monitor implementation of the permanency policy.

8.4 Key performance indicators which will be monitored by the Children in Care Commissioning Group

<p>Activity</p> <ul style="list-style-type: none"> • Number of LAC and LAC rate per 10,000. • Number who started to be LAC and rate per 10,000. • Number who ceased to be LAC and rate per 10,000. • Number and % placed for adoption. • Number and % of Section 20 placements. • Number and % of foster placements. • Number and % of residential placements. • Number and % who access short breaks. • Number and % with family and friends. • Number and % of person centred reviews that take place in Wiltshire. • Number and % who receive advocacy. • Number of Emergency Protection Orders. • Number of Police Protection Orders. 	<p>Quality</p> <ul style="list-style-type: none"> • Average time between a child entering care and moving in with its adoptive family, for children who have been adopted (days) (Indicator A1). • Average time between a local authority receiving court authority to place a child and the local authority deciding on a match to an adoptive family (days) (Indicator A2) • Number and % adopted within 12 months. • Parents/carers continue to rate the Wiltshire Short Breaks programme as excellent. • Number of LAC with 3+ placements during the year. • Long term stability. • % LAC placed for at least 2.5 years in the same placement for at least 2 years. • % LAC placed over 20 miles from where they used to live.
<p>Outcomes</p> <ul style="list-style-type: none"> • Emotional wellbeing of looked after children. • Reduction in number of children and young people with disabilities placed out of county pre- and post-16 	<p>Cost effectiveness</p> <ul style="list-style-type: none"> • Post-16 placements.

9. LEAVING CARE

9.1 What we want to achieve

To support good outcomes by focusing on:

- Effective preparation for independent living.
- Preventing homelessness.
- Ensuring a good range of accommodation for 16 to 24 years olds who are vulnerable and have specific housing needs.

9.2 Key message from the consultation

30% of young people who attended the focus group discussion thought that better support and advice for children and young people when moving school, placements, into after care, employment etc., would improve their lives.

Smoother transition to after-care/through-care was also identified as something that was missing from the strategy during the focus group session.

9.3 Priorities for action

- 1 Further work on securing a good range of accommodation options through the development of a 16+ Accommodation Strategy. This includes mapping the leaving care market.
- 2 Improve attainment and reduce the number of children in care and care leavers who are NEET. This includes continuing the development of apprenticeship opportunities for care leavers.
- 3 Routinely report details of pathways plans as part of a systematic review process ensuring information is recorded; SMART objectives are set, the young person's voice is recorded and multi-agency participation is encouraged.
- 4 Develop Leaving Care procedures, linked to the Fostering Development Plan.
- 5 Continue the development of a mentoring programme for care leavers who are in education, employment or training.

9.4 Key performance indicators which will be monitored by the Children in Care Commissioning Group

<p>Activity</p> <ul style="list-style-type: none"> • Reduction in 16 - 24 year olds presenting as homeless. • Reduction in homeless acceptances of 16-24 year olds. • Reduction in number of young people aged 16+ becoming looked after. • Reduction of babies becoming looked after through use of mother and baby placements where appropriate. • Number of LAC 16+ with pathway plans. • Number and % of LAC over 16 NEET. • % of young people looked after in 17th year who were in ETE aged 19. • % of care leavers in suitable accommodation. • Number LAC in higher education. • % ALC aged 19 in higher education. 	<p>Quality</p> <ul style="list-style-type: none"> • Reduction in out of authority placements. • Maintenance of tenancies. • Satisfaction of service users including those living in supported accommodation (qualitative indicator). • Young people agree accommodation is suitable and meets needs. • Young people are satisfied with the accommodation process and outcome of intervention. • Children in Care and Care Leaver's success in EET in line with their peers.
<p>Outcomes</p> <ul style="list-style-type: none"> • Number of young people re-presenting as homeless. • Number of young people remaining at home or returning home following intervention and prevention. • Number of children in care/care leavers who are EET. • Reduction in accommodation breakdowns. • Number of successful move-ons. • Number of care leavers in suitable accommodation. 	<p>Cost effectiveness</p> <ul style="list-style-type: none"> • Reduce in spend on LAC 16+. • Average cost per 16+. • Time in service.

Appendix 1 Terms of Reference of Children in Care Commissioning Group

NB. It has been agreed that the terms of reference will be kept under review.

Purpose of the Children in Care Commissioning Group

To improve outcomes for children and young people in care by ensuring there are robust commissioning arrangements.

The Children in Care Commissioning Group will take an overview on the commissioning and planning of all aspects of services for children in care. This will include social care, education, health and services which prevent children and young people from entering the care system and assist with a return home.

Objectives

1. To co-ordinate and monitor the work of key children in care commissioning, planning and development groups. This will include making sure governance arrangements are clear, there is no overlap between the roles and responsibilities of different groups and that children and young people participate in the commissioning process.
2. To develop and co-ordinate implementation of the Children in Care Commissioning Strategy. The Children in Care Commissioning Strategy will be reviewed and updated annually.
3. To ensure project plans are in place for key developments and to monitor implementation of project plans.
4. To take a strategic overview of children in care commissioning budgets including monitoring planned shifts in expenditure.
5. To ensure an appropriate supply of high quality placements and ensure statutory requirements and the needs of young people are met. This includes addressing equality and diversity issues.
6. To ensure services procured through the commissioning strategy are improving outcomes for children and young people in care.
7. To ensure children and young people are involved in developing, monitoring and updating the Children in Care Commissioning Strategy.

Membership

Julia Cramp	Chair, Service Director Commissioning and Performance
Tbc	Service Director Children's Social Care
Lin Hitchman	Head of Children in Care
Terence Herbert	Head of Service – Community Safeguarding
Karen Reid	Virtual Headteacher
Yvonne Taylor	Divisional Director Children and Families Services Oxford Health Foundation Trust
Alison Bell	Consultant in Public Health
Blair Keltie	YOS Operations Manager
Karina Kulawick	Central SEN Services Manager
Tom Smith	Head Procurement and Contracts Unit
Angie Rawlins	Head of Housing Options
Marie Taylor	Finance
Tbc	Voluntary sector representative
Lucy Kitchener	Lead Commissioner (responsible for managing work programme of the group)

Appendix 2 Commissioning priorities: current position and achievements to date

1. Involving children and young people: Current position and achievements to date

The Children in Care Council have developed a Children in Care Promise. This is outlined below:

CHILDREN IN CARE COUNCIL PROMISE

Being in Care

- A choice of when to move on from care.
- To try not to separate brothers and sisters (however, if this is not possible, try to ensure brother's and sister's placements are close together and allow contact).
- To allow looked after children and young people to be involved in the choice of their placement from the start.
- To find a place where you feel comfortable and 'at home' and can stay until the end of your time in care.

Listening to Looked After Children and Young People

- To listen to your views and act on them.
- To provide a social worker you can rely on who keeps to meetings, gives clear information, is honest and responds when needed.
- Make looked after children and young people aware of their rights and to train others in the rights of looked after children and young people.
- To ensure that young people are involved in the creation and regular review of all care plans.

Support

- Better help getting into school whatever has happened.
- To provide support so looked after children and young people can see their family (i.e. transport).
- To use reliable transport for young people.
- To organise group activities for young people in care and those leaving care.
- That if bullying arises for any looked after child or young person it will be dealt with quickly and efficiently.
- To support young people in care to find training, education or a job that suits them when they leave school.

Other achievements on participation and involvement of children and young people in care include:

- The 2012 Ofsted inspection of safeguarding and looked after children noted that the **overall effectiveness for looked after children, young people and care leavers was adequate and capacity to improve was good**. One aspect was graded as "outstanding": making a positive contribution, including user engagement. The recommendations made by Ofsted have been included in the Commissioning Priorities.
- There is an active **Children in Care Council (CiCC)** which meets monthly. Subgroups also meet around specific events or pieces of work. There is a membership of around 20 young people for the CiCC, with regular attendance at each meeting of between 7-12 people. The CiCC have fed their views into a broad number of consultations and strategies including the Children in Care Commissioning Strategy, the 16-24 Accommodation Strategy, the 11-19 Commissioning Strategy and the Wiltshire Participation and Involvement Strategy.

- The **Wiltshire Corporate Parenting Panel (CPP)** has worked hard with young people to develop a format that is accessible for young people to share topics and issues that are important to them. This has led to the development of the **Shared Guardians Session** which takes place after each CPP meeting and is co-ordinated by the Virtual Head Teacher. The agenda for the Shared Guardians Session comes from the young people and the session is led by the young people. Following each session an action plan and a task and finish group is developed to take forward issues from the session. So far topics have included looked after young people's relationship with the police, sibling contact, leaving care and a review of the Children in Care Pledge. Feedback from these sessions has been very positive from both young people and elected members.
- The **Children's Rights Service** provides advocacy and participation activities for looked after children and young people, those leaving care and young people wishing to make a complaint under the Children Act 1989 section 24D and 26. On average the Children's Rights Officer has 15 individual contacts with young people per month. The majority of advocacy issues are resolved locally with a social worker. A leaflet for children and young people - "Have your say" - for complaints that fall under statutory Children Act procedures and relate to children's social care has been produced and distributed.
- **Independent Visitor Scheme.** Being an independent visitor is an unpaid voluntary role which involves visiting a young person on a regular basis and building a long-term relationship with them throughout the time they are in care. The Children Act 1989 requires that all looked after young people who have minimal contact with their families, should be offered the support of an independent visitor. There has been a continuing upward trend in referrals to the scheme. As at May 2011 the independent visitor's scheme had 27 actively matched young people. This is the largest number since the scheme began in 2000. The referral rate currently exceeds the rate of independent visitor match closures, with a result that the numbers of matches increase year on year.
- The 2012 Ofsted inspection of safeguarding and looked after children noted that most looked after children and young people had **confidence in their Independent Reviewing Officers** and understood their role.
- The Independent Reviewing Officers use **Viewpoint**, an online software package, to gather young people's views for reviews. This is currently being reviewed with the Voice and Influence team and young people.
- 70 young people were involved in the **consultation on the Children in Care Commissioning Strategy** through focus group work, one to one interviews and a paper based snap survey that was sent to every looked after young person in Wiltshire over 7 years old. The findings of this work have informed the CIC commissioning strategy. Key messages about the role of the social worker are also being distributed directly to every social work team in the county to help to improve practice.
- Young people were involved in **developing the Towpath House provision**. This included involvement in the design of the premises and the service specification.
- Wiltshire is currently developing a **foster care review form** and has been consulting with young people to ensure the form is 'fit for use'.
- The Children in Care Council and a number of other looked after young people have been involved in producing an **'Introduction to care DVD'**, talking about their experiences of living in foster care and residential care. Professionals also appear on the DVD describing their role with young people in care. There is a file of facts diary with written information and contact details and an interactive website which have also been designed with young people.
- There are two annual **'STAR' (Successful Talented Achiever Recognition) achievement award events** for looked after children each year: one for children and one for young

people. At these events Wiltshire celebrate the achievements of their looked after young people.

- Improved **Shared Guardianship** which includes looked after children and young people attending all corporate parenting board meetings.

2. **Good outcomes for children in care including safeguarding:**

Current position and achievements to date

- Improvements have been made in the completion of **Personal Education Plans and of Pathway Plans** for care leavers.
- The new **Specialist CAMHS** service started on 1st April 2011. The service includes an **Outreach Service for Children and Adolescents (OSCA)**. The primary role of OSCA is to work intensively with children in care and with children and young people experiencing a complex range of behavioural, emotional and mental health needs to prevent escalation of at risk behaviours, and to work towards recovery. OSCA also provides support to the LAC teams for 2 ½ hours per month to help LAC teams think through how they are effectively supporting children and young people. Foster carers can attend these consultations with their Social Workers.
- The CAMHS services also includes a new **Family Assessment and Safeguarding Service (FASS)**. The overall aim is to reduce the consequences of child maltreatment and neglect through providing specialist mental health assessment and treatment, contributing to the safeguarding of children and young people. FASS works with families with children of all ages, 0-18. This service will also assist with enabling children to remain at home working with their families. FASS accepts referrals from social care and health services.
- There has been a slight improvement in the timeliness of uptake of the **Review Health Assessments** (88.34% in 2011/12 compared to 87% in 2010/11).
- The 2009 quality assurance report from the IRO service identified poor performance in relation to **statutory visits** with 42% compliance. New practice guidance and procedures have been produced and compliance monitored via the IRO QA and reported to SMT each quarter. **Compliance is now 96% in the Children in Care teams.** This remains variable in the Community Safeguarding Teams who hold responsibility for some children in care. Reflective audits notes good practice in recording of statutory visits.
- There have been no permanent exclusions of looked after children and young people for the last 3 years. **Virtual Schools Officers** work closely with schools on bespoke packages and alternative programmes tailor-made to suit individual children and young people. Virtual Schools Officers carry out integrated working with SEN and Behaviour Support as well as other agencies. **Personal Education Plans (PEPs)** have recently been revised and young people consulted with about a possible post-16 PEP. PEPs reflect the individual needs of a child.
- The **Aspire Centre** to deliver a range of accredited formal educational programmes has now been approved by Full Council and is due to open in September 2012.

3 **Accessing and managing resources:**

Current position and achievements to date

- **2 Placement Panels** are in place. Panels are chaired by the Head of Children in Care in order to ensure consistent decision making.
- Two **'buyers' posts** are based in the Children's Services Procurement and Contracts Team. These posts were initially funded through the Wiltshire Council 'spend to save' scheme. If a placement is required from an external provider the buyers will source this

placement and manage the contractual process. The decision on the suitability of the placement remains with social work teams. Achievements to date include:

- Savings of £184,707 achieved in 2011/12.
- Contracts are in place for all placements with external providers.
- Positive feedback has been received from providers on the value of having a single point of contact.
- The buyers are developing good market knowledge.
- The buyers take into account cultural and diversity needs in their search for placements.
- A **Market Position Statement (MPS)** for children in care has been produced. The intention is to share this with partners and keep it updated. The MPS is aimed at existing and potential providers of services to Wiltshire's children in care and children on the edge of care. The document compliments this Commissioning Strategy showing how the Council directly and through independent providers seeks to meet the needs of these children and young people and to ensure the Council is able to access sufficient accommodation for looked after children.
- The **Complex Families Project** has been established. The project includes identifying more effective ways of accessing targeted resources and tracking the impact of services.

The tables below compare the average gross weekly costs of the three main types of placement of looked after children. Information from other authorities to use as a comparison has been obtained from the CIPFA benchmarking group. CIPFA social care benchmarking clubs help authorities share data. Membership of this group is voluntary. 66 Councils are members of the 2010 group. For 2009/10, Wiltshire's average unit costs are in line with the average benchmarking unit costs, 1% higher on residential and 2% lower in fostering.

Indicator based on the PSS EX1 national statistical return (not collected since 2010)	Wiltshire					
	2006/7	2007/8	2008/9	2009/10	2010/11	Estimate 2011/12
Average gross weekly expenditure per LAC in residential care	£2,800	£3,080	£2,658	£2,817	no longer collected	no longer collected
Average weekly unit cost of independent fostering agency	£665	£815	£935	£869	no longer collected	no longer collected
Average weekly unit cost of in-house foster placements	£568	£495	£459	£425	no longer collected	no longer collected

Indicator based on the s.251 Government return (collected since 2010)	Wiltshire						Average Benchmarking Club members	
	2006/7	2007/8	2008/9	2009/10	2010/11	Estimate 2011/12	2010/11	Estimate 2011/12
Average gross weekly expenditure per LAC in residential care	-	-	-	-	£1,919	£2,094	£2,786	£2,832
Average weekly unit cost of independent fostering agency	-	-	-	-	£850	£804	£884	£849
Average weekly unit cost of in-house foster placements	-	-	-	-	£434	£406	£434	£424

4 Edge of care: Current position and achievements to date

- All **edge of care services have been mapped** and a summary produced of the resources we have in Wiltshire which assist with preventing children and young people from becoming looked after and also assist with preventing any returns to care after a child or young person has gone to live back at home. The summary includes information on services and current arrangements/orders. Services include:
 - The Family Link scheme.
 - “Kinship” or Family and Friends care.
 - *Motiv8* Substance misuse/harm reduction service working with tier 2 and 3 offenders.
 - *ROBLAC* (Reducing Offending Behaviour in Looked after Children).
 - Special Guardianship (SGOs).
- **Investment in edge of care services** has been increased through the Early Intervention Grant. This includes re-commissioning the following:
 - A number of family support services provided by the voluntary sector ended on 31.03.12. A new family support service which will work with families with complex needs who do not quite meet social care thresholds started on 01.04.12.
 - The social care family support service was reviewed in 2011. A specification for a new intensive family intervention service is being developed.
 - The Family Group Conferencing service purchased from the voluntary sector. This work involved a range of agencies. Parents were involved in the tendering process for the new service purchased from the voluntary sector and in the review of Wiltshire Council’s social care family support service.
- There has been an **increase in requests for carers who can provide care to babies alongside one or both parents**. These arrangements are usually short-term and could include parenting assessments for court proceedings. The placements are intensive and foster carers will need good communication skills and the confidence to assess parenting potential. Enhanced fees are payable to carers with skills to provide these placements. Where this is successful, it keeps the parent(s) together with their child and may remove any need for the child to become looked after.
- There is a **specialist private fostering Social Worker** based in the Fostering Service. Notifications and compliance with timescales for completion of private fostering

assessments and Regulation 8 monitoring visits have increased significantly since this appointment:

- 2008-2009, 3 arrangements.
- 2009-2010, 1 arrangement.
- 2010-2011, 8 arrangements.
- January 2012, 7 current arrangements.

Notifications:

- April 2010-March 2011, 8 notifications.
- April 2011-January 2012, 20 notifications.

Of the 7 current arrangements, 6 assessments have been completed and 1 assessment is in process. Regulation 8 (monitoring visits) are being undertaken within required timescales.

- **Project Inspire** provides a range of interconnected services to vulnerable young people in Wiltshire who need assistance getting back into education, employment or training (EET). The project helps to divert young people away from crime, and provides support for vulnerable groups including children in care and care leavers, helping them to achieve their full potential. To date (October 2011), the project has supported 255 young people. 78% gained accreditation. 68% moved into education, employment or training. 17 of the 255 young people were children in care/care leavers and the project provided an average of 10 days worth of support to each of these individuals. Following evaluation of the project and its outcomes, Wiltshire Council has committed a grant of £20,000 to continue the project for the next financial year 2012/2013.
- Towards the end of 2011 a **detailed audit was undertaken of a sample of cases where children and young people started to be looked after during the period 1st December 2010 to 30th June 2011**. The detailed analysis focused on 2 cohorts where the largest number of children and young people became looked after during this period: 13 to 17 year olds and under 5 year olds. The analysis noted that there were opportunities for diverting some young people from the care system. The findings from the audit informed and will continue to inform the development of the Complex Families Project. The findings also influenced the development of the new service model and service specification for the social care intensive family support service.
- In 2011 an **audit was undertaken of 40 cases where children were placed under Section 20 of the Children Act**. This audit also noted opportunities for earlier intervention. Recommendations have informed the specification for the new social care intensive intervention service.
- There has been substantial investment in **3 family Resource Centres** in Wiltshire (Devizes, Trowbridge and Salisbury). The Resource Centres provide space for:
 - All contact for looked after children and their families.
 - Community-based intensive interventions.
 - Complex community based parenting assessments/court assessments.
 - The Crisis Intervention Service.
- A **joint protocol between Social Care and Housing** has been established for assessment and appropriate placements of young people aged 16 and 17 who present as homeless and in need by the Housing Liaison Group. This is aligned to the Host Family Scheme which helps young people aged 16/17 find temporary emergency housing if they are at risk of being homeless. It is usually for a maximum of 3 weeks whilst support staff help the family to resolve issues so the young person can return home or move to a permanent address. There are 13 approved Host Family carers. From 1st January to 31st December 2011, there were 33 referrals to the Host Family Scheme. During this period 5

young people returned home. Since the implementation of the joint housing protocol, there have been no young people identified as intentionally homeless.

- **Wiltshire Risk Management Panel** now works with individual young people who are engaged in risky behaviour or otherwise vulnerable.

5 **Placements: Current position and achievements to date**

- Since 2002, every child who has been matched for **adoption** in Wiltshire has received an assessment by Adoption Support Services. The adoption support plan can include financial support, respite care, equipment for therapeutic services etc. Approximately 22 children are matched for adoption each year. This has increased over the last 5 years.
- 2 full time **Adoption Support workers** provide practical and direct support to adoptive families, undertake life story work with adopted young people and arrange family days/support events.
- **Wiltshire Adoption Service** continues to develop a range of support services to sustain adoptive placements particularly when the adopted child/ren reaches adolescence. This is when placements often become unstable.
- The **Adoption Support Service** in Wiltshire offers groups for adoptive parents on attachment to enable understanding of children's developmental/behavioural needs. These groups have been very effective and are run in partnership with a clinical psychologist. Feedback from group users suggests that the groups help parents to sustain placements. Adoption Support plays an important role in home finding for adoption, particularly for children with complex needs/disabilities. They have been able to negotiate some complex packages of support to enable and sustain placements.
- Numbers of **out of county placements** have decreased in the past year.
- All providers are signed up to the **National Framework Contract for IFA Contracts**. Tenders for IFAs/Residential Children's Homes are built around outcomes which incorporate issues of equality and diversity.
- The **Foster Care Communication Strategy and Plan** is targeting recruitment to attract a diverse range of carers.
- The Wiltshire Council **Foster Carers' Charter** has been signed with input from the Children in Care Council.
- As of March 2012, there are 40 children with complex needs who are looked after in the Child Disability Teams – there may be more who are looked after in other teams. The 40 include full-time LAC and Short Break LAC (i.e. where children and young people with disabilities receive care away from home for over 75 nights a year).
- Wiltshire has 2 **Specialist Child Disability Teams**. This specialist resource ensures the needs of looked after children and young people with disabilities are met in a timely and suitable manner. The Teams work across the full range of social care needs including safeguarding and looked after children and young people. Work is being undertaken to ensure that children and young people with disabilities who are looked after receive the same quality service as every looked after child and young person for example, receiving the same leaving care service and completion of pathway plans. Management costs have recently reduced by moving from 3 Specialist Child Disability Teams to 2.
- Wiltshire is a **Pathfinder authority** for the Green Paper on SEN and Disability. The Disabled Children and Adults (DCA) Pathfinder is currently in the process of creating a 0-25 service for children and young people with disabilities and special educational needs and their families, who require support to be included in their community.
- Aiming High for Disabled Children (2009) requires every authority to have a Short Break programme. In this context a Short Break is a child or young person with disabilities

having access to enjoyable, life-enhancing opportunities. In Wiltshire parents/carers worked in partnership to devise the **Wiltshire Short Break programme and Local Offer**. In 2011/12, 970 families took up the Short Break programme and Local Offer. Families have used the Local Offer payment in innumerable ways to provide short breaks for their children and young people. Aiming High is evidence that services have been transformed with parents as champions. This partnership working and the Short Breaks programme has received national acclaim. 95.3% of families said that the Short Breaks their child accesses were 'good' or 'excellent'; 95.4% rated the Wiltshire Local Offer as 'good' or 'excellent'. The Local Offer take up has continued to increase and will go up to over 1000 next year. Personal budgets will start to impact from April onwards.

- An **Autism Spectrum Conditions (ASC) review** is currently underway. There has been an increase in the numbers of children and young people with complex needs, many of whom have autism and the review is examining current practice in supporting children and young people with autism and complex needs locally. Recommendations for change will be made to the Children and Young People's Trust Commissioning Executive to improve outcomes for children and young people with autism.

6 Leaving care: Current position and achievements to date

- Early in 2011 a draft **16-24 accommodation** strategy was produced. The strategy has not yet been finalised. However, work has continued on developing a range of accommodation options and taking forward 16-24 accommodation work.
- Wiltshire has **partnership agreements with accommodation providers for young people aged 16-24**: a 'trainer flat' in Salisbury owned by Wiltshire Council Housing Department and a 'trainer flat' in the North of the County which is currently with the Westlea Board for approval); Shared Housing and Starter Tenancies project; and 12a Northgate Street which belongs to Ridgeway Housing Association. The 'trainer flats' have been designed with housing partners with the involvement of young people and will offer care leavers the opportunity to experience the realities of independent living before they move on to their own tenancies.
- The 2009 Viewpoint report (consultation with young people) raised the issue that most young people aged 16+ did not have a **pathway plan** (505). Through the LAC improvement group 2010 and work with the LAC practice manager this was taken forward positively. The latest figures for LAC teams (reported to Corporate Parenting in January 2012) showed 100% compliance in the Children in Care teams.
- **Over 90% of 16 year old children in care/care leaver's were in Education, Employment and Training as of December 2011** (internal data).
- A **care leavers mentoring programme** is in the early stages of development and the Director of Children's Services is leading the way by mentoring a young person.
- There is a **draft Partnership NEET Reduction Action Plan 2012-13**. The Commissioning Strategy will take forward the actions identified around LAC NEET from this plan.
- There are **Personal Advisers** tasked to work directly with care leavers to support them to move into education, employment and training. As at 19/01/2012, the Personal Advisers currently monitor 265 post-16 young people currently in care or care leavers as part of the EET monitoring group.
- Plans are in place to develop **apprenticeship opportunities** for young people.