PERFORMANCE SCRUTINY COMMITTEE - 25 SEPTEMBER 2014

Pressures and demands in children's social care

Report by Deputy Director Children's Social Care & YOS

Introduction

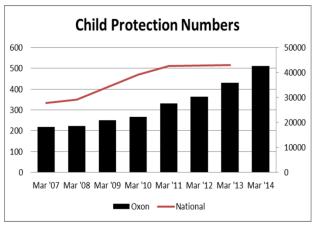
- 1. In May this year Ofsted inspected services for children in need of help and protection, children looked after and care leavers in Oxfordshire and found that services were good across the board. They concluded that thresholds were clear and understood; when children are referred to social care they receive a prompt response and the right help; social work action to protect children when they need it is decisive and proportionate. Councils Ofsted have judged to be failing often have high caseloads, a significant number of agency workers, and a high turnover of staff. Our stable workforce is part of our strength.
- 2. Following a member briefing about Children's Social Care on 14th July 2014, the Performance Scrutiny Committee wished to explore the pressures and demands facing the service in more detail. This paper provides background data and further information on
 - a. the current levels of demand and caseloads
 - b. the causes of the current level of demand and options to reduce this
 - c. impact of the increased demand and what can be done to reduce the impact or mitigate the effects of the impact on service delivery

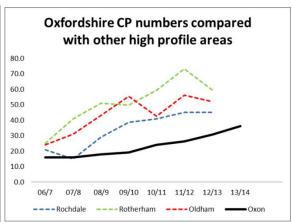
Current levels of demand and caseloads

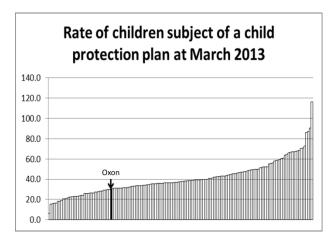
- 3. Oxfordshire is an affluent county. 12.2% of children live in deprivation compared with 22.1% nationally. Of the 152 authorities with responsibility for children's social care, Oxfordshire is the 15th least deprived. There are a number of deprived wards in Oxfordshire but only 8 are in the 20% most deprived nationally and the most deprived district council area, Oxford City, has the same level of children living in deprivation (22.2%) as the national average.
- 4. The latest comparative data on caseloads in different local authorities is for March 2013. At this time in Oxfordshire there were:
 - a. 3,471 open cases or a rate of 249 per 10,000 children. This was the 29th lowest rate in the country and was the equivalent of 1 in 4.9 children in deprivation. The national rate was 332 per 10,000 children or 1 in 6.7 children in deprivation.
 - b. 430 children on child protection plans or a rate of 30.9 per 10,000 children. This was the 39th lowest rate in the country and was the equivalent of 1 in 40 children in deprivation. The national rate was 37.9 per 10,000 children or 1 in 60 children in deprivation. On 1st September 2014 there were 451 children on plans or 32.4 per 10,000 children.

¹ Based on the Income Deprivation Affecting Children Index (IDACI) measure

- c. 416 looked after children, a rate of 30.0 per 10,000 children. This was the 6th lowest rate in the country and was the equivalent of 1 in 41 children in deprivation. The national rate was 59.0 per 10,000 children or 1 in 37 children in deprivation. On 1st September 2014 there were 519 children looked after children or 37.4 per 10,000 children.
- 5. In the 5 years between 2008/9 and 2013/14 the number of children on child protection plans doubled in Oxfordshire. Nationally there was an increase in the number on plans till March 2011, but this subsequently stabilised. In Oxfordshire however the number has continued to rise. Whilst this is different to the national pattern it is a similar pattern to other authorities who have had high profile child protection issues.







Reasons behind the increase in child protection numbers

- 6. In the last year we have tested out 4 hypotheses about the growth in numbers on a child protection plan. These were:
 - a. Have thresholds for coming on to a Child Protection plan dropped?
 - b. Have thresholds for coming off a Child Protection plan increased?
 - c. Have the levels of need in the population increased?
 - d. Is there greater sensitivity to and better identification of child protection issues?

- 7. There was no evidence that the threshold for coming on to a plan had changed. Senior managers audited all children becoming subject of a plan over a 4 month period and found ALL of them met the thresholds. The profile of people coming onto a plan was the same as previously, i.e. high levels of risk linked to domestic abuse, drugs and alcohols abuse and mental health issues for the parents.
- 8. There was some evidence that thresholds for coming off a plan had increased. In Oxfordshire children stay on plans for slightly longer than the national average. In 2012-13 the proportion of children ceasing a plan after two years was 6.3% slightly higher than the national average (5.2%) but not excessively high. In 2013-14 the figure rose to 9.7%. Last year 1 in 5 children becoming subject to a plan had previously been on a plan: 1 in 10 of them for within 2 years of the previous plan ending. In December 2013 all children subject to a repeat plan were reviewed. This analysis showed that a significant number of children came onto a plan due to a high risk incident of domestic abuse, no incidents then occurred within 3 months, the child came off the plan, but a further incident occurred in the next 2 years leading to a repeat plan. This indicated that the impact of interventions had not been sustained. Due to the rise in repeat plans practice has been changed to ensure that the reduction in risk is sustainable and wellevidenced: 'these children should never be the subject of a CP plan again'. The mantra 'never give up on a child' is leading to a culture of perseverance with resistant and difficult young people and their families and is well understood across children's services and partners.
- 9. There was no real evidence that the levels of need in the population have increased. Although the areas with highest levels of need in the county have had the highest level of population growth, these have not been the areas with the biggest increase in numbers subject to a plan
- 10. There was significant evidence of greater awareness and identification of child protection issues. In the last 2 years the number of referrals has reduced, but referrals are identifying higher levels of risk. There is a much greater level of awareness across agencies, examples include:
 - a. An increase in Local Authority Designated Officer (LADO) referrals of 26% last year, with a broader range of agencies making such referrals²
 - b. Levels of attendance at case conference and core groups are increasing.
 - Growth of single agency audits undertaken by eight member agencies in 2013/2014 and reported to the safeguarding board looking at over 200 case files
 - d. All relevant local agencies completing Section 11 audits³.
 - e. 3,500 frontline professionals across all settings have been engaged in renewed safeguarding training
 - f. Better engagement with schools

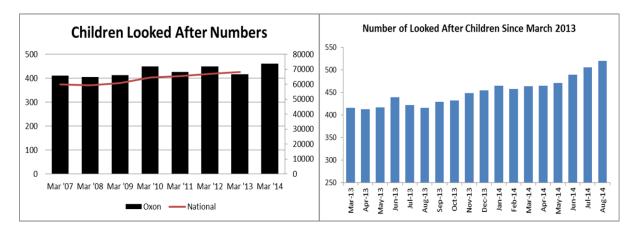
² The LADO works within Children's Services and should be alerted to all cases in which it is alleged that a person who works with children has harmed a child

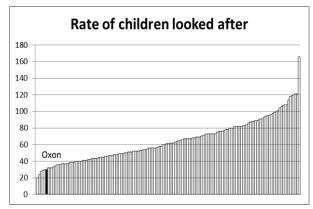
³ These are governance audits for organisations working with children required in Working Together

Changes in numbers of looked after children

11. The number of children looked after by Oxfordshire has remained relatively stable over the last 8 years, but since March 2013 has risen significantly - by over 20%. The increase has placed us more in line with expected figures.

		looked	Ranking		
	after		2013 national figures)		
March 2013	416		6 th		
March 2014	463		10 th		
September 2014	519		17 th		





- 12. The most marked rise in numbers is in the 1-4 year olds, which increased from 27 to 73 children last year. This reflects a much more rigorous approach to identifying chronic neglect in families and intervening earlier to improve outcomes for children. This change in numbers reflects a deliberate shift in practice following learning from recent serious case reviews and audits which highlighted the need for 'decisions not drift' in chronic neglect cases.
- 13. We are currently reviewing all the children who entered the looked after system in the first 3 months of this financial year to see if anything could have been done earlier in their journey that could have diverted them from care.

Previous interventions for children commencing a period of care:	2012/13	2013/14	Qtr 1 14/15
Became looked after in period:	247 ⁴	298	68
None	83	72	25
Early Help	40	65	19
Child in Need Plan	56	87	8
Child Protection Plan	123	163	33
Previously Looked After	26	42	15

Options for reducing demand

14. We are currently reviewing how social work teams work with our early intervention services and are piloting a scheme of closer work in the North of the County. The aim of this pilot is to trial different ways of working with children on child protection plans for neglect with the aim of reducing the numbers coming into care and the numbers on child protection plans. If this is successful in the medium to longer term demand on services may begin to fall.

Impact from increased demand and mitigation

- 15. The main impact in the increased demand is higher caseloads for workers. The Standards for Employers of Social Worker in England (May 2014) sets a standard that employers should ensure social workers have safe and manageable workloads. 'This Standard is about protecting employees and service users from the harm caused by excessive workloads, long waiting lists and unallocated cases. All employers should: use a workload management system which sets transparent benchmarks for safe workload levels in each service area."
- 16. In January 2014 we set an aspiration to reduce caseloads to 14 for each Social Worker. The rationale behind this being:
 - a. Feedback from Social Workers that this represents a reasonable caseload to allow time to undertake effective work and statutory recording.
 - b. Where teams have smaller caseloads it is evidenced that more effective work is undertaken.
 - c. If supervision is to be effective a manageable caseload is also an important factor, leading to effective discussion and reflection of a case rather than a tick box check of actions required.
- 17. This has subsequently been refined to caseloads of 14 for workers in looked after teams; 16 for workers in family support teams and 18 for workers in disability teams⁵. A snapshot in August this year shows that
 - a. In looked after teams the average caseload per team ranged from 10.5 to 17.8 cases per worker and across all teams was 14.5 cases

⁴ Figures may not add up as children could have had more than one previous intervention

⁵ Assessment teams have been removed from this analysis as their workload will be affected by the implementation of the Multi Agency Safeguarding Hub (MASH)

- b. In family support teams the average caseload per team ranged from 13.6 to 24.2 cases per worker and across all teams was 18.0 cases
- c. In disability teams the average caseload per team ranged from 16.2 to 26.4 cases per worker and across all teams was 21.1 cases
- 18. Children's services are working towards a one service approach across Children's Social Care and Early Intervention Services. A pilot is being launched in the north of the county which is focused on children subject to neglect. The pilot will be evaluated in the summer of 2015. This should assist in reducing and managing caseloads and activity.

Conclusions

- 19. The main conclusions are:
 - a. Services for children in need of help and protection, children looked after and care leavers are good across the board. Thresholds are clear, responses to services are prompt and appropriate and when children need to be protected action is both decisive and proportionate.
 - b. Pressures on children's social care have risen significantly in recent months. The reasons for this rise are well understood
 - c. Short term mitigation plans have been put into place, including recruitment of agency workers, to ensure children remain protected.
 - d. A sustainable long term solution to managing demand is being developed with the one service approach across early intervention and children's social care. This is currently being piloted in the North of the county and the results of this pilot will influence the longer term solution.

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September 2014