

Annex 1

OCC PLACEMENT STRATEGY FOR CHILDREN IN AND ON THE EDGE OF CARE

Updated April 2011.

1. INTRODUCTION

This document amends the 2007 Placement Strategy in order to respond to subsequent developments, in particular the requirement to deliver a local Sufficiency Strategy plan as contained in the Children Act, 2008 (CA2008).

CA2008 defines Sufficiency as “a whole system approach which delivers early intervention and preventative work to help support children in their families where possible, as well as providing better services for children if they do become looked after. For those who are looked after, local authorities and their Children’s Trust partners should seek to secure a number of providers and a range of services, with the aim of meeting the wide-ranging needs of looked after children and young people within their local area.”

Since Oxfordshire’s 2007 Strategy to a large extent anticipated this approach, focusing on earlier intervention, strengthened support services and closer partnership working, the proposals in this document are designed to build on rather than replace it.

The emphasis on local provision has also been addressed to a large extent by Oxfordshire’s giving priority to supporting CYP in their own home; using Family Group Conferencing and Kinship placements where possible; increasing the numbers of local authority foster carers, and developing local support services so that fewer CYP need to be placed out of County.

Like its predecessor, this Strategy is therefore designed to

- Prevent entry to the looked after system where possible (recognising that this is a much more wide-ranging task now – entailing not only family-based interventions, but also the provision of local accommodation);
- Where this is not possible, place children and young people (CYP) ideally in family and friends based care or other foster care
- minimise time in care based on evidence-based practice so as to return Children Looked After (CLA) home or move them on to permanent placements as soon as is practicable, in order to increase stability
- manage the market to provide the variety of placements required to the best possible price, and locally where possible/appropriate

This document also addresses other issues that have risen subsequent to the 2007 Strategy.

2. CONTEXT

2.1 PRINCIPLES

Three overriding principles, set down in Oxfordshire’s CYP Plan and Corporate Parenting Strategy, underpin this document: keeping all CYP safe;

raising achievement, and narrowing the gap for our most disadvantaged and vulnerable groups.

2.2 SERVICE AREA

The scope of this strategy is:

- Support for children and families on the edge of care, including community based intensive assessment and intervention packages, and those exiting care
- Care placements, along with the support needs for all of Oxfordshire's children in care, including Unaccompanied Asylum Seeking Children (UASCs)
- Disabled children in care and those requiring short break foster care (but excluding those requiring residential care placements and residential short breaks).
- Care Leavers over 18 and/or those requiring semi-independent accommodation provided by Independent Agencies or other forms of independent accommodation.
- CLA exiting the care system on SGOs, ROs and adoptions, or cared for in Kinship placements, including post placement support
- Specialist placements for parents and babies (including assessment placements)

2.3 CONSULTATION

Oxfordshire is committed to consulting its CLA, and their parents and carers, concerning the design and monitoring of services we provide for them. A Children in Care Council (CICC) was established in November 2007 and has worked extensively with members, officers, carers and other agencies locally and nationally to ensure that appropriate services and support are provided to CLA. The Council's Pledge was launched by the young people themselves in November 2008 and is reviewed on a regular basis by the CICC and Corporate Parenting Panel at their regular meetings.

OCC takes partnership work very seriously and can evidence the involvement of all relevant services and users. Recent examples are the cross regional residential project, the recommissioning of housing, the new build of Thornbury, the new financial policy for care leavers and the new arrivals programme for UASCs, all of which were co-developed with users. CLA can also express their views through sounding boards and/or a revamped advocacy service. There are also sounding boards for families and carers.

3. SERVICE MAPPING

3.1 CYP SUPPORTED IN THEIR OWN HOME

Supporting CYP with their parent(s) enables Oxfordshire to have lower numbers of CLA than their statistical neighbours (SNs), which provides better outcomes at a lower cost than taking them into care. The full range of prevention and support services is described in Section 4.

3.2 KINSHIP CARE

Where CYP cannot be supported with their own parent(s), Kinship Care (care by members of their wider family and friends network) provides the best outcomes and allows CYP continuity of relationships. It is also relatively cost effective but comes with a significant responsibility to ensure Kinship Carers are appropriately supported and those registered as foster carers meet the same standards as approved foster carers.

Challenges

Under the 2011 amendment to the CA2008, this attentiveness to the needs of Kinship Carers needs to be adopted across the Children's Trust and include more resources to support early intervention within families and to empower them to make their own decisions through Family Group Conferences (FGCs). Both courses of action are being promoted.

In addition, various court rulings have blurred the distinction between Kinship and Foster Care, reinforcing the right of kinship carers to similar remuneration as foster carers and increasing the requirement for Councils to publicise their support, including financial, to a broader group of carers, e.g. some private fostering arrangements, with the county financially supporting an additional 5,000 days in 2010-11 .

3.3 IN-HOUSE FOSTER CARERS

Oxfordshire's own foster carers are the next level in the care trajectory in terms of outcomes and cost effectiveness. A more pro-active recruiting policy was introduced in February 2009 and approvals have increased by over 20% during both subsequent years. Year end figures for 2011 show a significant increase in in-house foster care days with a growth of 7308 days, an 8% rise for the second year running along with a 25% decrease in the use of IFAs. This has been sufficient to ensure the Department's budgets for CLA have been met. A revised structure to further sharpen the focus on recruitment has been agreed to take advantage of the impending jobless situation and develop more local resource. As is true nationally, recruitment of BaME carers remains disappointing.

Feedback exercises and exit interviews have repeatedly indicated that the Family and Placement Support Service (F&PSS), ATTACH and KEEP (see Section 4) all play a vital role in retaining in-house foster-carers.

Challenges

- The increasing age profile of OCC's foster carers and increasing needs of the young people placed, mean carers choose to provide fewer placements. In stark contrast to previous years, in 2010/11 no carers had an exemption required for carers seeking to care for more than 3 CYP.
- CYP being encouraged to stay on beyond 18 in line with the 1989 CA (revised 2008/11) are acting as "blockers". The local authority has devised a required "Staying Put" policy which gives those CYP who are in education and those vulnerable CYP 18+ who do not meet adult services' thresholds the right to continue in care.
- Carers' allowances have been held at the same level for the second year running and they are requesting a review to relook at rates given the rise in inflation and more generally to look at a payment for skills model.

3.4 MTFC (MULTIDIMENSIONAL TREATMENT FOSTER CARE) PILOTS

Since 2008, Oxfordshire has been piloting MTFC programmes for 3-12 year olds, an evidence-based intensive approach using specially trained foster carers, which has been shown to be effective in treating CYP who would otherwise end up in expensive specialist residential or IFA placements. MTFC involves support from multi-disciplinary teams comprising specialist carers, social workers, psychologists, family therapists, skills educators, teachers and specialist administrators, along with a 24 hour on call system.

It works with all aspects of a CYP's life, targeting behaviours systematically and providing support to professionals, carers and birth parents. CYP spend between 6 months to, in rarer cases, 18 months in the MTFC programme with additional assessment placements for adolescents, lasting a maximum of three months.

Related Behaviour Management projects that have also been introduced are a Specialist Group for carers of under 5s and adolescents, based on attachment-related intervention to help deal with behavioural problems, and The Keep Project for 5-12s

There is considerable evidence to support both the care and financial benefits of the programme and it has further "below the line" benefits. The DfE are also convinced of the effectiveness of the programme and are now encouraging the roll out of MTFC & KEEP programmes nationally. (See appendix 2 for details of benefits in Oxfordshire)

Challenges

Building on the early success of MTFC for 3-12 year olds, this Strategy includes mainstreaming the service and extending it to adolescents.

3.5 IN-HOUSE RESIDENTIAL

Oxfordshire has two children's homes, one offering 6 beds for girls and the other 5 to boys. A pilot project to intensify the management of in-house children's homes has resulted in significant reductions of sickness levels. The unit costs of in-house residential care have reduced as part of this work to £2,927/week. The new home commissioned at Thornbury, completed in April 2011, gives us an extra bed at no extra cost and hence brings the cost down to £2,724/ week. The imminent move to the new home is also anticipated to return the inspection outcome to "Good".

3.6 INDEPENDENT PROVISION - Fostering Agencies (IFAs)

The number using IFAs has reduced. The table below illustrates the reduced dependence on independent foster care.

IFAS	NO PLACED WITH IFAS	NO OF FTE PLACEMENTS	UNIT COST /WEEK
2006	57	30	772
2007	54	43	809
2008	70	51	853
2009	111	67	843
2010	123	82	816
2011	110	61	829

In addition, more robust commissioning and monitoring processes have been introduced to ensure greater compliance with Oxfordshire's requirements and a Joint Commissioning programme with eleven other LAs is in progress.

Challenges

As can be seen from the table, average unit costs are rising. This is largely because the lower numbers of CYP using IFAs are by definition those with the most intractable problems. The roll out of Joint Commissioning should give Oxfordshire more leverage to reduce costs and opportunities to increase local provision.

3.7 INDEPENDENT PROVISION – Residential

RESIDENTIAL	Children placed	FTE	Unit cost/week
2006	40	21	2,825
2007	45	22	2,900
2008	45	21	3,169
2009	47	27	2,889
2010	48	50	3,168
2011	51	40.6	3,438

Although the number of CYP placed in Independent Residential has increased, the FTE number has been reduced, following a substantial increase in 2009/10.

Challenges

- CYP with complex needs are currently often placed a long way from their communities because of unavailability in health, education and/or placements – this has large implications in outcomes, cost, and their capacity to access services at all stages. The requirement of the Sufficiency Strategy is to further increase interagency partnerships to deliver services locally in a more integrated way to meet their needs.

- Despite an overall reduction in the use of residential days throughout the year, there is a worrying trend developing over the last four months which if continued would result in an extra 2,892 days required next year. This is caused by the numbers of CYP with significantly challenging behaviour and again reinforces the need to develop support strategies to secure CYPs stability at earlier point in their care career.

- In addition to CYP choosing to remain in in-house foster care, there is a small group exercising their right to remain in IFAs and Residential, which has an enormous impact on costs. Thus, the extension of rights to care into 16+ and 18+ make it even more essential that cost effective solutions and investment in placement stability are implemented at an earlier stage in the trajectory of care.

3.8 INDEPENDENT PROVISION – Joint Commissioning

The CA2008 suggests LAs should look at the feasibility of joint commissioning, particularly when addressing those with the most complex needs. Again, Oxfordshire has anticipated this approach. OCC is party to the Pan London arrangements which achieve economy of scale in relation to quality assuring places, negotiating prices and agreeing reasonable inflationary rises. In addition, since 2006, OCC has developed the use of

block contracting arrangements to improve best value and develop local services.

More recently, OCC has led a cross-regional commissioning project of six authorities to jointly commission services for CLA with the most complex needs, starting from January 2011. A contract for 20 beds and 4 day places rising to 30 local units has been awarded, providing up to 30 residential places and around 10 day places with the help of Improvement and Efficiency South East (IESE) and the National Centre for Excellence in Residential Care (NCERC). Potential savings are estimated at £500 -1000/bed p.w.

This model is designed to be Stage 2 of a series of joint-commissioning projects for other relevant services, starting with the cross regional project above and now progressed to IFAs. The six Berkshire unitaries have also now joined the Consortium, making 11 authorities in all.

3.9 DISABILITY/COMPLEX NEEDS

The % of CLA with disabilities/complex needs such as ADHD, autism and language/ speech difficulties rises with age. CLA are also more likely to have mental health problems as measured by SDQs (Strengths & Difficulties Questionnaires, internationally accredited measures of emotional and behavioural difficulties) and SEN.

The Aiming High programme has significantly increased the amount of relief care on offer to families with children with disabilities, offering access to relief and leisure for families.

Local projects, e.g. with McIntyre, have been very successful in helping us to develop local services and a new autism strategy has, amongst other developments, highlighted the need to develop a specialist unit for CYP with autism.

In addition to this there are 5 homes (4 run by Barnado's), one offering full time care.

There are currently 42 families receiving respite and 7 non-disabled children receive regular respite.

Challenges

- There are five disabled CYP and another five with complex needs who are unnecessarily in residential care due to lack of intensive fostering provision. The IFA (see above) and Recruitment Strategy are designed to address this. In addition, there are 21 families with children with disabilities who are waiting for one weekend's respite per month.

- Over 75% admitted to residential care have serious school issues, regarding attendance, part time programmes or fixed term exclusion or no provision. These remain significant issues which impact on life chances for CYP and all placement provision, since very few of our carers do not work. Finding effective ways of engaging and supporting CYP's education is fundamental to the success of any strategy.

3.10 PERMANENCY – Recruitment and Assessment

The Department has a responsibility to recruit or commission placements for CYP requiring permanent placements. Searches for permanency again start from within the CYP's family and friends' network, usually through Special

Guardianship and Residence Orders (SGOs and ROs) and include responsibility to assess all interested parties, which means that, even with the use of FGCs, there need to be multiple assessments. Where no suitable placements can be found, other placements have to be recruited and/or commissioned, then supported.

Through membership of consortia, the Department is now able to balance the buying in with the selling of placements but, as with foster-carers, there is a particular problem with BaME and disabled children. Oxfordshire also has a contract with Parents and Children Together (PACT), a registered voluntary agency, to train, assess and prepare those people who are seeking to adopt overseas.

Birth parents and relatives have access to independent support and counselling with encouragement to use this service as soon as a plan for adoption becomes a possibility.

Oxfordshire also provides an advisory service which oversees the training, recruitment and management of 3 adoption panels which each meet once a month.

Adoption placements offer the best chance of stability for CYP but without appropriate support, their breakdown often leads rapidly to the most drastic and expensive consequences. To ensure the best start, all prospective adopters meet with one of the medical advisers to ensure they understand the implications of caring for the children.

Challenges

- The exponential growth of SGOs (Special Guardianship Orders) from 14 in 2008 to 63 in 2011, means a significant growth in work assessing multiple possible placements within extended families. It is not unusual to undertake 3-4 assessments to find a suitable carer.
- SGOs are a growing area of financial responsibility because of a recent court ruling linking rates of remuneration to foster allowances with all special guardians qualifying for some allowance if they are taking responsibility for a child who has been in care.
- Sudden increases in care proceedings, as has happened recently, puts a great strain on the assessment process, particularly when multiple assessments are required.

3.11 PERMANENCY - CYP Supported In Adoption, SGOs, ROs And Real Costs

CYP not in the care system but for whom OCC still have financial responsibility increased from 192 in 2008/09 to 234 in Feb 2010/11 (n.b. only about 1 in 20 adopters receive an allowance). It is vital to build robust support systems around these groups and avoid placement breakdowns and the consequent rapid spiral towards more expensive options.

In 2010/2011, 48 CYP left care for permanent placements, 23 subject to SGOs, 22 for adoption and 3 on Residence Orders (ROs). A further 3 SGOs were made as an alternative to care and 16 more were supported to live within their extended family and friends network.

Of the 48 children who may need adopting, the needs of 8 are unlikely to be met from within our own resources and from an early stage. Family Finding has been conducted on as broad a stage as possible, with very close working with the Adoption Register and voluntary agencies. Oxfordshire is currently involved in a pilot with the Register to increase placement choice. As soon as adoption is identified as a possibility, independent counselling is offered to birth parents and this year 47 parents have used these services.

Of the approximately 685 adopted children in Oxfordshire, there are an estimated 232 adoptive families going through mild to severe difficulties. Based on research, an estimated one in five of these (or 47 families) are likely to have severe difficulties and represent a high risk of disruption. To date in 2010-11, there have only been six disruptions; of these six, three had prior contact with the service and two have returned back to the adoptive home after a short stay in care with support.

A range of specialist services are commissioned to permanent carers and their children to give the best support possible to adopters and children. 197 adoptive families accessed help from the post-adoption service help desk.

The letter box service provided 838 contacts for 287 children, an increase of 13%. Through a service level agreement with NORCAP, 92 relatives were able to seek advice and counselling to contact relatives made subject to adoption.

3.12 RESIDENTIAL PARENTING ASSESSMENTS

These take place in either in-house fostering placements or independent residential units. The amount being spent on these latter because of Court Orders (and usually against Social Care recommendations) increased by 300% in 09-10, despite a very poor success rate, and Social Care now has to pick up the entire cost. Significant successful work over the last year has been undertaken to reduce the demand from the courts for these ineffective assessments, including meetings/seminars with judges to encourage them to consider the financial implications and research findings, and use more effective community-based alternatives. Based on research, we have developed A Community Parenting Project, including Parents Under Pressure (PUP) an intensive community-based assessment and intervention service, in partnership with a local lottery funded adult mental health scheme. Because of these initiatives, residential parenting assessments have reduced by 2,225 days over the year, and so far no new residential placements have been made in 2011.

3.13 SUPPORTED INDEPENDENT ACCOMMODATION

Care leavers and UASCs, along with other vulnerable homeless young people, are housed in one of nine placement types, varying in terms of the type of housing and the level and focus of the support available to young people while they are there.

The Southwark Judgement in 2010 shifted responsibility for homeless 16 and 17 year olds from District Councils to Social Care. In financial year 2010-11, 24 young people were accommodated plus 16 under Section 17. However, the guidance now also deters the use of Section 17 and an estimated 36 will have to be accommodated in 2010/11, possibly more in 2011-12. In total there

were 201 CYP seen, 131 were in need of a Young Person's Housing Assessment, 53 returned home within two weeks and 32 were accommodated. Whilst this is fewer than anticipated, the needs of those coming into the system are much higher, as are the support requirements to maintain them in the community. This again reinforces the need for strengthened preventative/support services (since the majority of CYP who become homeless are known to services by mid-adolescence).

Until the Southwark Judgement, despite a rise in numbers, the need for independent accommodation at 16 and 17 was reducing, thanks largely to the inception of the Joint Housing Team (JHT), as a result of which in 2009/10 only 8 care leavers were statutory homeless. Having conducted a needs analysis, the service re-commissioned homeless services from April 2010 for young people aged between 16 and 25, to deliver better quality for 15% less cost, since needed to cover a 20% reduction in the Supporting People grant.

As part of the new services, 178 beds were recommissioned to supplement children's services, comprising 66 beds in Key 2, 46 for UASCs and 22 for CYP with high needs, all in the City from Key 2 with 2 in Bicester from Stonham, and we are currently in the process of commissioning 4 in Banbury (see Housing Strategy). This excludes the newly commissioned service in West. In November 2010, there were 43 16 & 17 year olds in the projects, an overall increase of 79%.

Children Services commissions 22 supported lodgings placements from Stonham, in conjunction with Supporting People. Supporting People have increased their funding to further test the efficacy of this placement type.

Supported housing days and costs for YP Children's Social Care have responsibility for, including care leavers. The information in the table excludes UASCs information

Legal status	Support days 09-10	Budget 09-10	Support days 10-11	Budget 10-11
Relevant	8,922	1,101,372	11,827	766,386
- Former Relevant	9,725	23,695	7,576	194,863
Southwark S17	335	300,000	385	40,000
- Southwark S20	5,908	0	7,694	300,000
-Total	24,891	1,425,067	27,482.00	1,301,249

* This is not the actual number of young people placed, but the average full-time occupancy for the year

Challenges

- OCC has also had to use B&B placements pending the full implementation of the new commissioning strategy and this bad practice may have to continue in the short term.

- However, it should be noted that there were only 622 bed nights used, a drop from 3,325 in 2008 for U18 yr olds. Looking at those who did use them, five have had repeated evictions from supported housing projects.

- In relation to those aged 19+, there are about 20 CYP at any one time whose needs are such that the supported housing commissioned does not appear to meet their needs, as judged by their repeated evictions from projects.

- The priority since Southwark is to commission more supported housing, in particular some that are staffed 24/7, and emergency accommodation (plus

necessary staffing) to allow family re-unification work to take place. We must also ensure that the provision we have is subject to close scrutiny with projects given additional help to enable young people to access the right level of supported housing so as to minimise the time they have to stay in it. In order to do this, a joint appointment with Supporting People and CYPF has been made to facilitate closer working with the Districts.

3.14 UNACCOMPANIED ASYLUM SEEKING CHILDREN (UASCs)

Oxfordshire currently has 155 UASCs, a reducing number, and has a duty to assess and accommodate anyone entering the County as an UASC. These children need specialist services: separated from their families, often traumatised by their experiences, unable to speak English, they often find it difficult to adjust to cultural differences. They need the full services of a placement, support to catch up educationally and close monitoring to ensure they have not been trafficked. Care is also needed about placing them where there is a dispute about their ages.

Specialist educational and housing services are commissioned from the local college and a supported housing company. In addition, specialist services are contracted to support them as part of the Connexions contract. The PCT also commissions specialist counselling services and the school with the most UASCs ensures they have a learning mentor to support their education.

Challenges

Recent case law has meant that Local Authorities have now had to re-introduce services for UASCs with all rights exhausted. However, maintaining the mental health of these CYP can be a problem, since they are not allowed to work or attend college. Our strategy makes provision for them to work voluntarily.

3.15 CARE LEAVERS

There are just over 400 young people eligible for care leaving services: 108 eligible; 48 relevant (i.e. having left care under 18 and living independently in supported accommodation); 257 former relevant, of which 100 are UASCs and 10 Section 24 young people

“Relevant” care leavers

These are 16 and 17 year olds who have left care and are entitled to care leaving services under the Leaving Care Act, 2000, and CA2008. They are totally financially dependent on OCC. As part of the R2beCared4 pilot, we have managed to reduce this group by delaying their exit from care. This increases their participation in EET but is extremely expensive, especially for those wanting to remain in residential until 18.

Care leavers 19+ in full-time FE and not entitled to benefits

Numbers of care leavers already aged 19 beginning full-time FE courses (i.e. not eligible for benefits) have risen steeply over the last 3 academic years. Numbers in both the UASC and the indigenous mainstream (i.e. not learning disability) population are rising.

Additionally, there are increasing numbers in Higher Education: 15 YP embarked on Higher Education courses in September 2010, up from 7 in

2009. The total engaging in higher education programmes is 27, including one on a post graduate course.

In June 2010, five YP graduated with 2:1 classifications and one a 2:2. There are 13 YP potentially beginning HE programmes in September 2011, bringing the total to 36 (excluding 2011's graduates) with another 13 expected to start in 2011. The average age of entering university is 21. YP are given bursaries and money for holiday accommodation and a number return to their carers.

4. SUPPORT TO CARERS

The development of prevention and support services has been at the heart of Oxfordshire's strategy to reduce numbers in the care system. These services include the **Placement Duty** service; the **Health** service for CLA and care leavers; the **Family Group Conference service, Family and Placement Support Service**, including **Attach**, who work very closely with the **post adoption service** and **YOS Prevention service; Tier 4** (an intensive education support provision), **Family Intervention project** and the closely linked **Oxford Youth Arts** partnerships.

In addition, further support is provided by the **Virtual School** (supporting statutory school age CYP), the **Raise service** (supporting EET provision for post year 11 students), **Designated Nurses** for CLA and care leavers and, most recently, **Parents Under Pressure (PUP)**, a joint venture between OCC and Elmore Community Services, providing evidence-based assessment and intensive intervention to children from pre-birth to 3 years and their families. All of these services work closely with each other and with all mainstream services within the county.

4.1 PLACEMENT DUTY SERVICE

Placement Duty was set up to:

- ensure that alternatives for CYP to becoming looked after are explored and that families are fully involved in this activity
- promote systems that will ensure appropriate placements/packages of support are found for those children and families
- identify appropriate supports for CLA to prevent placement breakdown
- assist the Fostering Recruitment Service in their function, by providing accurate information relating to the type of care required to meet children's needs.
- monitor the care plans of CYP whose need is for short term care and reunification, plus those of all CYP placed in residential and agency placements

Between April 2010 and January 2011, Placement Duty received 412 referrals for short term care: 321 were placed (i.e. 91 were avoided) and 29 were to new residential placements. 15% of placements were same day emergencies c/w 70% three years ago. However, 17% were re-referrals, so whilst significantly more successful with short term stability also improving, there are still challenges.

12.25% (50 CYP) were placed in residential care, a slight rise on 09/10

Challenges

Only 20 per cent of the CYP who needed a placement had been referred to Family and Placement Support, although 76 out of 168 were subject to a family support/ CP plan and had more than 3 significant risk factors. This suggests the need for closer working with Family and Placement Support Services.

4.2 PLACEMENT PANELS.

These support practitioners in making safe choices for their clients. The Priority Panel allocates relief care to families with disabled children, the Placement & Commissioning Panel allocates joint funding with health colleagues The Legal Panel offers countywide consistency for cases in need of pre or legal proceedings. Finally a new panel, the Complex Needs Panel offers an inter-agency response to cases of serious concern.

4.3 FAMILY AND PLACEMENT SUPPORT SERVICE (F&PSS)

This service has offered intensive support to 17 families at risk of losing their children. In addition to this, 176 cases have been worked with since April 2010. The majority of referrals (73%) are children aged 10 years and over. 42 of the cases were subject of child protection plans (23%) and in 76 (42%) of the cases, the children were subject to a family support plan.

4.4 ATTACH (Attaining Therapeutic Attachments For Children)

The ATTACH team is a nationally recognised service promoting placement stability through the facilitation of attachment relationships between CYP and their carers. It offers treatment for emotional and behavioural difficulties and promotes adoption and fostering through training as part of the preparation process. ATTACH is also active in preventing adoption breakdowns, which can be very expensive.

4.5 MTFC

As well as the main services (see above), these have, along with the ATTACH programmes, proved a more effective way of delivering training to carers

4.6 FAMILY GROUP CONFERENCES (FGCS)

Of the 39 cases designed to find alternative family based solutions rather than CYP becoming looked after, 37 CYP remained within their extended family.

4.7 TRAINING

Support Services also play a crucial part in training staff and carers and have been focused on integrating therapeutic training for carers with the need for them to complete their standards and other training qualifications.

5. KEY TRENDS (see also appendix 1)

- The number of children in care in Oxfordshire has consistently been lower than Statistical Neighbours (SNs)

- Numbers across the country and in Oxon rose in 2009-10 by 8% and have continued to fluctuate
- The number of placement days used has risen for the second year running, although there is recent evidence that they may be dropping again
- The age profile of children in Oxfordshire is slightly higher than SNs
- There have been more male entrants into the care system with the most significant numbers falling into the 10+ group. These figures are significantly impacted by asylum seekers, almost all of whom are male. These now represent a reducing proportion of our care system, reducing from 10 to 8%
- The use of IFAs has reduced, whereas the use of residential care increased towards the end of the year
- There has been a significant increase in the number of care proceedings
- There has been a significant increase in the numbers placed for adoption

. The majority of our CLA are placed in in-house foster care:

- We have 334 registered foster carers (including kinship carers). We do well at recruiting and retaining foster carers (in the last year we have had a net gain of 39)
- 55% of our CLA are placed in foster care (both agency & ours)
- 14% are placed with family and friends carers (Kinship Care)
- 12% are in residential care
- 7% are placed for adoption awaiting court orders for their adoption order
- 7% are in independent living – with the support of our SW team
- 5% are placed with parents under a placement of children with parents agreement
- There are two CYP in secure or youth offending institutions
- We have increased the number of children over the last year who have been made subject to Special Guardianship Order, Residence Order or Adoption Orders from 36 last year to 45 this year to date.

Service Costs

Traditionally, Oxfordshire's spending on children in care has been low and this remains true. In-house provision is considerably cheaper in unit costs and in-house foster care more so, even when factoring in on-costs and the high cost of programmes such as MTFC.

The latest information from the CIPFA Benchmarking Club, which includes 65 LAs, including 8/10 of our SNs shows that we provide very good value for

money in our placements with a weekly unit cost (gross) of **£ 749 compared to average of £894**. This has reduced in the last year from £837.

6. STRATEGIC NEEDS ANALYSIS – Summary of Current Challenges, Action Taken and Planned Further Action

6.1 NATIONAL CONTEXT

There are two factors that must be considered in the background to this strategy:

- The current economic climate, spending review and budget have forced Councils to find efficiency savings, whilst still delivering high quality services and improving outcomes for client groups.
- This there has been a marked rise in the number and rate of CLA in the last year, nationally and across the South East region (see appendix 1).

6.2 INCREASED STATUTORY REQUIREMENTS

Since the inception of the 2007 Strategy, the landscape has shifted substantially with ever-increasing statutory responsibilities being placed on Local Authorities and whilst some of these undoubtedly improve outcomes for CYP, they also put pressure on the County Council' s resources. These include:

- More care proceedings due to the Baby P case.
- Court ordered residential assessments, which are now the sole responsibility of Local Authorities and significant increases in other court ordered assessments.
- Special Guardianship Orders (SGOs), which give some “kinship” carers equal status as foster-carers, with increased allowances and training requirements.
- A growing trend towards costly private law disposals.
- Human rights legislation.
- CA2008 intends that CLA remain in care until at least 18, particularly those vulnerable young people who do not meet adult services thresholds and those in the middle of their education.
- Leaving Care responsibilities extending to 25 for those in FE and HE with CYP with the eligibility gap between children and adult services widening and some young people wanting to remain in high cost placements.
- The Southwark Judgement, which means that CYP who are housed under the Homeless Act are entitled to Local Authority Care and are the financial responsibility of the Council up until aged 25, if they remain in Education.
- Responsibility to develop a Sufficiency Strategy by 2011 to address the needs of CLA locally, where appropriate.

The prevention/support strategy adopted by Oxfordshire has, compared to SNs, mitigated both the impact and costs of these challenges. However, inevitably, stronger preventative services mean that those who do still slip through the net will be fewer in number but more intractable, for which intensive regimes are necessary. This will involve some re-organisation of services in order to strengthen frontline delivery and ensure that this is underpinned by a robust assessment, planning and review framework.

6.3 COURT ISSUES

There has been a 64% rise in court proceedings which have, as well as the rise in the use of highly expensive residential parenting assessments, raised concerns about practices during proceedings. These have included an exponential rise in contact from an average of 2-3 times to 5-7 times a week (despite research demonstrating negative effects on babies from too much contact), the use of specialist assessments and the built-in delay caused by the use of pre-proceedings.

Action taken to address these concerns over the last year have included the following:

- Seminars for staff and court stakeholders, including the judges, to update them on the latest research and best practice in neglect and abuse cases.
- Staff Conference on effective interventions
- Training for managers on supervising cases where there is abuse and neglect
- Tightening gate-keeping practices on assessments presented to legal panel
- Streamlining referrals to the Family and Support Service in CAMHS to ensure better use of our resources
- Development of community based parenting assessments.
- Development of additional supported housing projects for parents and opportunities to enhance relevant staff skills

Further proposals include:

- Further training for staff on assessment regarding specialist aspects of the DoH Assessment Framework, including predicting people's capacity to change and the Home Inventory,
- Participation in Bristol University's study on the Impact of Pre-proceedings
- Participation in a sub group reporting to the Family Courts business committee to look at delays in care proceedings with a view to improving and sharing good practice across the region
- Tightening of procedures to ensure all cases presented to Legal Panel have a chronology and a core assessment signed by the Service Manager

6.4 THE NEW CARE REGULATIONS

These increase the responsibilities on the LA and partners to work in partnership with CLA and care leavers. Work is underway to use the introduction of the new legislation to address both assessment and planning issues, which accentuate the care and placement plan as key commissioning tools for ensuring that carers understand the needs of the children they look after before they take on the commitment to look after them. Significant action has been taken over the last year to address both issues of quality and quantity. Electronic forms have been designed with carers and young people to support planning processes. The performance data shows an encouraging trend with a strong and experienced IRO service to push this through (see IRO report).

There are new requirements for carers' annual reviews to be chaired independently. These and other requirements published at the end of February will be subject to a separate report.

6.5 THE RIGHT OF CYP IN CARE TO ACCESS SERVICES UNTIL 25

The current usual age for our CYP in care to start attending university is 21 and this has resource implications. We are drawing up plans to bring this age forward so they are still eligible for benefits but also attend college with their peers.

6.6 KEY STAGE 4 RESULTS

These remain an area of concern with only 6.6% getting 5A* - Cs with English and Maths. To address this, there has to be a whole system approach with stable placements and plenty of catch-up help, along with appropriate school placements and some behaviour management training for carers. A review of educational support is also being considered.

6.7 THE VOLUME OF NEED FOR PLACEMENTS

This rose during 2009-10 and during the first half of this year and continues to fluctuate markedly. There was a peak in the use of IFA placements of 75 in March 2010 despite an increase in the number of OCC carers being recruited as a result of our recruitment campaign. With a further increase in the number of carers this year significant savings are becoming evident, although there is still unpredictable demand which makes precise planning difficult (see Appendix 1).

6.8 THE PRESSURE TO DEVELOP MORE FOSTER PLACEMENTS CONTINUES

The pilot scheme for MTFC highlighted the potential in caring for very challenging CYP in foster homes with the right support around them. Building on the success of the MTFC pilots, which have delivered successful outcomes for significant savings, a decision has been made to develop and mainstream the scheme and extend it to adolescents.

7. PLACEMENT STRATEGY

7.1 MANAGING THE MARKET

Children's placements are very high cost and management of the market to commission cost effective placements and achieve best value is crucial. The

CA2008 puts placement stability, particularly the better commissioning of placement services, at the heart of the government's plans to speed up improvement in outcomes and reduce costs by halting the escalation of children towards more expensive placements.

The children's care market is a mixed economy of in-house and independent providers of foster care, residential care and independent supported accommodation for young people aged 16+. In-house foster care is the preferred placement for nearly all children, with kinship care being the first choice. Placement types vary according to the task the foster carer is expected to undertake, for example emergency reception, short term, bridging placements to adoption, regular respite care for families caring for children with disabilities.

A CIPFA benchmarking analysis of Oxfordshire's comparative costs shows that Oxfordshire's average cost per child in care is lower overall due to the a) lower unit costs of our own homes and carers and b) lower percentages in IFAs. However, this is partly offset by the higher unit costs Oxfordshire is paying for its CLA in non-LA Homes and IFAs. This is partly owing to our success, through enhanced support programmes, in keeping a greater proportion of our high maintenance CYP in our own fostering placements. However, there are still potential savings to be made with better commissioning of in-house Services.

OCC's policy for U16s is that its own in-house services receive all new referrals since they provide best value for money, tend to be local and are judged by OFSTED to be good/outstanding (apart from Thornbury). It is only when we are unable to provide a placement that independent providers are considered. The Fostering Network (FN) estimates there is a shortage of 10,000 foster carers nationally, and both in-house and independent providers struggle to recruit sufficient carers locally. Even with our new recruitment strategy, the need for some high cost IFA places will continue.

Commissioning the right in-house service with appropriate payment for skills, training and support is an integral part of achieving any reduction in the use of this expensive option. Commissioning enough local placements is also part of this challenge in order to ensure CYP are near enough for effective work to take place and so they can access their own communities and families. Travel costs and staff time are also a factor here. Part of Oxfordshire's Strategy is to extend the Cross Regional Commissioning model it has developed for Independent Residential Accommodation into this area.

7.2 OUTCOMES

- where possible, ensure CYP are prevented from coming into care (recognising that this is a much more wide-ranging task now – entailing not only family-based interventions, but also the provision of local accommodation);
- where appropriate to assessed needs, placements and post-care support, achieve outcomes for children and move them quickly to rehabilitation or permanent placements, thus breaking the cycle of deprivation;

- manage the market to provide the variety and quality of placements required to the best possible price, and locally where possible/appropriate in order to comply with the Sufficiency Strategy.

7.3 ACTIONS

The actions needed to achieve these outcomes can be categorised into the five strategic priority areas listed below:

7.3.1 Assessment & Planning

- Multi-agency holistic assessment and planning for CYP coming into/on the edge of care
- FGC service working more closely with Placement Duty and Leaving Care.
- Locality working maximising the availability of local services to support CYP and their families within their community.
- Placement referrals to receive a high level of scrutiny and QA from Team and ASMs
- Subjecting long term requests for agency budgets to scrutiny to ensure all local services have been considered. ASMs to QA core assessments.
- Streamlining the business processes

7.3.2 Prevention & Support

- Redesign Family and Placement Support Services.
- Develop Parents Under Pressure programme (PUP)
- Improve support for CYP in schools
- Continue to develop placements wherever possible with Family & Friends

7.3.3 Best Value Commissioning

- Pilot the Cost Calculator, a commissioning tool used in Adult Services to determine placement costs.
- Develop pooled budgets with Education and Health.
- Review possibilities of integrating all placement finding within OCC
- Establish enough local suppliers in the context of the Sufficiency Strategy. Continue to develop bulk-buying and framework agreements
- Utilise extra room at Thornbury
- Explore Boarding School project, building on successful pilot.
- More partnership agreements to jointly commission services e.g.
 - joint commissioning with four other LAs for IFAs
 - commission more supported housing for those with complex needs (post-Southwark) to prevent CYP becoming homeless.
- Develop existing in-house foster placements (capacity and skills) as a priority since on direct cost comparisons OCC foster care is cheaper than independent care.

- Review fostering allowances and re-examine the possibility of a payment for skills payment system
- Charging policy for all families accessing children's placements, including SGOs and ROs

7.3.4 Service Structure & Workforce Development

- Review delivery of adolescent services
- Develop commissioning skills for Placement Duty Development.
- Training for managers and staff on care planning
- Training for carers on behaviour management, attachment etc
- Training for all staff on the new care planning regulations

7.3.5 Impact Measurement

- Systems development
- Benchmarking costs.
- Benchmarking quality of service
- Monitor joint commissioning
- Feedback and appropriate challenge from stakeholders.