

## **Appendix 4**

### **Central Bedfordshire Council Sufficiency Plan**

**2014-15**

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# **1. EXECUTIVE SUMMARY**

## **Background**

Each Local Authority providing children's services must take steps that secure, so far as reasonably practicable, sufficient accommodation within its area to meet the needs of children that it is looking after and children whose circumstances are such that it would be consistent with their welfare for them to be provided with accommodation in the local authority area.

The sufficiency plan forms part of our evidence to demonstrate our commitment to meet our statutory obligation as set out in the Children's Act 2008 to deliver better outcomes for looked after children by having the right placement in the right place and at the right time for children in care, and to address the needs of those at risk of coming into care.

The purpose of the plan is to set out how Central Bedfordshire Council will meet the placement needs of current and future children in care and care leavers by detailing our understanding of current needs and current provision and explains what the Council will do to meet future demand.

This document is a statement of our intention for our children and families but also provides the framework to guide the Council to commission different or additional services to meet the changing placement needs of our LAC population.

## **Outline**

This plan details our understanding of current needs and current provision and explains what the Council will do to meet future demand in a cost effective manner.

The sufficiency plan is structured in three distinct parts:

- What we know about our current children in care
- What we currently provide
- What we will do in the future to meet changing demands.

### **What we know about our current children in care**

As of March 2014, the Council had 273 children in care (CIC). Since 2010 we have seen a 39% increase in our CIC population, with an approximate growth of 13.5% per annum. The increase in growth may be explained by national 'spike' events such as the Baby P case which saw a significant increase in cases of children being taken into care nationally. However with changes in benchmarking and a marked investment in early help and family support services, we anticipate over the coming months for the numbers entering care to not necessarily decrease but to begin to plateau.

Approximately 75% of the children in care population reside within a foster care placement. There is a fairly even proportion of children residing in both placements that are commissioned through the Independent Fostering Agency (IFA) framework (108) and in house provision (100).

5% of the children and young people in care were adopted in 2014. Since 2010 there has been a 150% increase in the number children for whom adoption is the permanency plan. In line with this growth, for the year 2014 – 2015 we expect that we will need to find families for about 20 further children to meet the needs of those where adoption has been assessed as an appropriate course.

Approximately 10% of the CIC population are in residential or secure placements (30). The number of young people in residential provision has grown by approximately 50% since 2010. Qualitative accounts indicate that 100% children feel safe and 75% to 88% feel happy with their current arrangement. Processes are currently been developed to conduct an in depth review of these placements.

5% of the cohort secured semi independent accommodation in the year 2013. The demand for these placements recently outweighed availability but we have addressed this through a framework agreement with local independent providers.

### **What we currently provide**

The Council directly delivers and commissions a variety of services that aims to minimise children coming into the care system and to address the needs of those in care.

There are a variety of services which manage and mitigate against risks posed to children and families including the Locality Based teams. Services also work closely with those in care to improve outcomes such as the Looked After Children's Team, Fostering and Adoption Team, the Leaving and After Care Team and the Children with Disabilities Team. Outcomes achieved directly by these teams and their partners are highlighted within the sufficiency document.

A range of commissioned services also work closely with young people and families at risk and provide services to those with emerging and complex needs. This includes accommodation provision and a range of early intervention, social and health care services.

There are also a number of ways in which the Council works to ensure that all services provided are focussed on the individual needs of the child by streamlining care planning processes and regularly reviewing this process with use of IRO's and by utilising expertise at panels to ensure that care thresholds are met and that the right resources are allocated at the right time. A robust quality assurance framework is in place to assure the quality of work undertaken and lastly by ensuring the experiences of the young person are taken into account throughout their time in care.

The need to minimise children coming into care is also strongly recognised. The Councils' Early Help offer takes account of best practice nationally (Allen, 2011;

Munro, 2011) by identifying children and families who would benefit from early help and by having collaborative arrangements in place to provide a co-ordinated assessment and response to prevent abuse and neglect, improve outcomes for children and young people, avoid repeat entries into care or to support young people to return safely to their families in a timely manner. Local evidence indicates positive outcomes. For example, local data highlights that approximately 68% of children and families receiving support through the Early Help Offer achieved their intended outcome and therefore did not require high expense specialist resources.

### **What we will do in the future to meet changing demands**

The plan provides detail of how we will meet our sufficiency duty. It is recognised within it that the approach to meeting demand needs to be flexible and allow the opportunity to respond to changes in demand.

Fostering and adoption are the preferred placement option for children and young people coming into care. In line with the continued and anticipated demand for this placement resource, the Council introduced a fee based scheme in April 2014 to improve rewards to in-house carers. As part of this activity, the Council intend to increase the provision of in-house placements and reduce the use of IFA placements by 25 over the next two years. It is expected that this initiative will have financial implications which will be set against savings made from a dis-investment in the use of independent agencies.

To maximise our potential for recruiting in houses carers, the Council has also aligned our recruitment activity to evidence from research about effective recruitment and applied this knowledge in practice within our marketing campaigns. An initial review of the effectiveness of this activity has already indicated positive outcomes.

We will provide training and support to our foster carers so that they have the right skills, qualities and confidence to be able to meet the needs of any children or young people placed with them including managing the needs of those who

historically the Council have found hard to place, including children with disabilities and adolescents.

Taking into account the demand for residential provision we have started the process of re-commissioning residential home within Central Bedfordshire. This approach takes into account young peoples views, is likely to save at least £396 per child per week, will allow young people increased contact with their families (where assessed as appropriate), continuity of education and allow on going access to local services.

To meet the increased demand for adoption placements, we intend to identify and approve 20 additional adoption household by the year 2014 – 2015. The Council are on target to meet this and we will continue to align our recruitment strategy to the proposals with the national adoption reform.

We will secure semi independent accommodation for approximately 12 care leavers per annum. The Council has commenced activity to address the current shortage of this provision by encouraging providers to consider offering various stages of accommodation and support to care leavers. We introduced a framework agreement on the 30<sup>th</sup> June to increase capacity, improve the quality of accommodation and to improve transitions arrangements. Young people have been actively encouraged to assist in the development of the specification and their views and expectations of leaving and aftercare accommodations have been sought.

At present it is clear that we need to secure high quality places to meet the increasing demand for places within a 20 miles radius of children's homes. As part of this strategy we have commenced reviewing cases where young people (19) are placed beyond this radius and if it is assessed as appropriate to do so, the Council will commence transition planning to bring these young people back to the local area. This work will be completed in conjunction with relevant partners (i.e. social care, CCG).

The Council is committed to ensuring all young people are placed in high quality provision and in line with this, we will enhance our quality assurance processes by investing in additional resources to quality assure these placements.

## 2. INTRODUCTION

Councils are required to take steps to secure, so far as is reasonably practicable, sufficient accommodation for children in care within their local area. The statutory guidance is explicit in placing a duty on Local Authorities to act strategically to address gaps in provision by ensuring that they include, in relevant commissioning strategies, their plans for meeting the sufficiency duty.

This plan is set within the context of national policy, legislation and guidance.

The Children Act 2008 defines sufficiency as, *“a whole system approach which delivers early intervention and preventative work to help support children and 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.”*<sup>1</sup>

This plan addresses the needs of children and young people from birth to the age of 21 or to the age of 25 where children’s services continue to have statutory responsibility. This includes children and young people with disabilities who are, or who may be, accommodated by Central Bedfordshire Council. The sufficiency plan furthermore meets the requirements of the sufficiency duty by collating needs, resource information and analysing the market in conjunction with describing what needs to happen in relation to working with children in care or children at risk of coming into care.

The scope of our sufficiency duty is however, not restricted to just making good quality placements. The intention is to co-ordinate a range of activity across Children’s Services. This includes a clear focus on supporting families to stay

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<sup>1</sup> Children and Young Person’s Act 2008. Available at <http://www.educationengland.org.uk/documents/pdfs/2008-children-young-persons-act.pdf>

together, wherever it is safe to do so; thus minimising the need for children to come into care, or supporting their timely return to their families.

The ongoing pressure on Councils' and partners' resources means that the focus on efficiency and value for money will be stronger than ever. The challenge for the future is therefore to sustain or improve service quality whilst achieving good outcomes for service users.

### **3. DEMOGRAPHICS OF CENTRAL BEDFORDSHIRE**

#### **Current demographics**

Central Bedfordshire, a mainly rural location, is home to about 260,000 residents; an increase of 11% since 2001. Central Bedfordshire has a growing and ageing population which is expected to increase to 274,400 by 2016.

In 2011 census data indicated that whilst the majority of the population were aged between 16-64 years (approx. 65%), those under 19 years of age comprised of less than 25% of the population. Out of these, 6.2% were aged 0-4 years, 5.9% were aged 5-9 years, 6.1% were aged 10-14 years and 6% were aged 15 – 19 years.

In 2011 an estimated 10% of people in Central Bedfordshire were from ethnic minority communities compared to 20% in England. The largest of these groups are Asian (3.2%); White Other (2.8%); Black (1.4%); and White Irish (1.2%).

The social, economic and environmental circumstances in which people live impact significantly on their health and well-being. Overall, levels of deprivation in Central Bedfordshire are relatively low. However, when deprivation is assessed for the small areas known as Lower Super Output Areas (LSOAs), three LSOAs are in the most deprived 10-20% in England. These are within Dunstable, Parkside and Houghton Hall. A further six LSOAs are in the most deprived 20-30% in England. These areas are named as Parkside, Leighton Buzzard North, Tithe Farm, Dunstable Northfields, Sandy and Flitwick.

The Income Deprivation Index (IDACI) can be used as a tool to look at the proportion of children aged 0-15 living in income deprived households. This is defined as households that receive work related benefits or where income is below 60% of the national median. The table below shows those LSOAs in Central Bedfordshire that are regarded as the 30% most deprived in It also shows the proportion of children living in income deprived households in that LSOA.

**Table 1: Percentage of children in income deprived households (IDACI) with Central Bedfordshire (JSNA, 2013)**

<b>LSOA</b>	<b>Percentage</b>
Manshead 594	46%
Houghton Hall 508	41%
Houghton Hall/Tithe farm 618	41%
Parkside 601	37%
Leighton Buzzard North 609	36%
Sandy 433	34%
Leighton Buzzard North/ Linslade 557	34%
Parkside 602	32%
Tithe Farm 619	32%
Dunstable Northfields 596	31%
Dunstable Northfields 595	30%
Flitwick	29%
Dunstable Northfields 599	27%
Caddington 562	27%

### **Projected demographics**

It is projected that an additional 1,200 (2%) children will be living in Central Bedfordshire by 2016. The main drivers of the rising population are increasing life expectancy, a rising birth rate and inward migration. There are significantly more births in Central Bedfordshire than deaths. A net migration due to more people arriving than in the area than moving away also contributes to the rising growth.

Based upon demographic evidence of an increasing population within Central Bedfordshire across most of the age ranges (outlined in Table 2) and taking into account the national trends in vulnerable families requiring support, the Council will need to plan for a growth in the number of children who will require preventative services, and possibly who will come into the care system.

At present we are particularly aware of an upward trend in the population of pre school primary aged children which has both been noted as a trend locally and nationally. This upward trend is predicted to continue. Central Bedfordshire is

also a growth area in terms of housing, with an average of 1,771 new homes expected to be completed each year over the next five years. Within Central Bedfordshire, as at January 2013, the 130 mainstream schools (excluding nurseries) catered for a pupil population of approximately 37,500 pupils aged 4plus to 18plus. For example, we anticipate that universal educational provision will rise by 7,500 in the coming years - from approximately 37,500 pupils in 2013 to just fewer than 45,000 pupils in 2018.

Any future services delivered by the Council will therefore need to be flexible and responsive enough to manage this demand and the growth in populations, or to mitigate against it, with the development of preventative services.

**Table 2: Growth in 0-19 population from 2011/12 with projections through to 2021**

<b>Population (0-19)</b>		<b>Projection data</b>	
<b>Age range</b>	<b>2011/12</b>	<b>2016</b>	<b>2021</b>
<b>0-4 years</b>	16,115	17,750	17,875
<b>5-9 years</b>	15,000	16,795	18,470
<b>10-14 years</b>	15,430	15,190	17,065
<b>15-19 years</b>	15,575	14,460	14,490

Appendix A provides further information on demographic figures and trends.

## 4. CHILDREN IN CARE POPULATION

### Current Children in Care population

The number of children in care (CIC) in Central Bedfordshire has increased since 2010. This is illustrated in table 3 below.

**Table 3: Children in Care in Central Bedfordshire**

<b>Total CIC</b>	<b>March 2010</b>	<b>March 2011</b>	<b>March 2012</b>	<b>March 2013</b>	<b>March 2014</b>
Central Bedfordshire (Children In Care)	165	175	210	245	273
Central Bedfordshire Rate per 10,000	29.0	31.0	37.2	42.8	46
Statistical Neighbour <sup>2</sup> Average (rate per 10, 000)	44.6	46.0	45.4	43.0	42.7
National Average (rate per 10, 000k)	58.0	59.0	60.7	59.6	60.0*

\* Publication released by DfE on 30 September

The table above shows that in 2010 Central Bedfordshire had very low numbers of children in care, compared to for example, our statistical neighbours and national averages. However the numbers coming into care steadily increased from 2010, representing approximately a growth in this population of 13% per annum.

Trends in relation to our Looked After Children's population show that children aged 0-4 years are most likely to enter the care system and also to be discharged from it. This would indicate an increasing need for short term intensive interventions to address the needs of this cohort. Appendix B includes a detailed breakdown of the characteristics of the Central Bedfordshire children in care population.

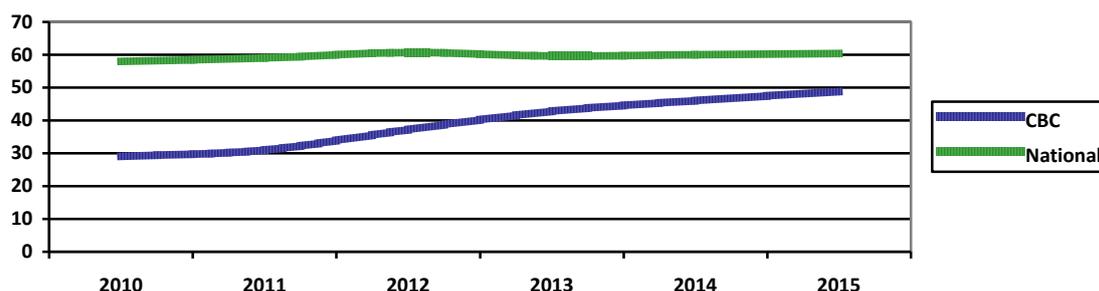
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<sup>2</sup> Statistical neighbours are Bracknell Forest, Cheshire East, Essex, Hampshire, Leicestershire, South Gloucestershire, Warwickshire, Worcestershire, West Berkshire and West Sussex. Drawn from DfE Publication released September 2010.

## Projected children in care population

Based on the known demographic growth of children in care as outlined in Table 3, it is expected that the number of children in care will increase. Figure 1 and table 4 below illustrate what the Council predict will be the projected increase in cases of children in care over the next 12 months based on the current rate of growth. Through benchmarking thresholds for entering care and comparing against best practice across the country, the Council has now established practices which it is anticipated will plateau the numbers entering care whilst also ensuring the number of children entering care remains appropriate. This is illustrated in Figure 1 and Table 4 below.

**Figure 1: Illustration of projected increase within CBC using local and national rate per 10,000 of the population**



**Table 4: Projected Children in Care population**

	March 2013	March 2014	March 2015*
Central Bedfordshire population (0-17 year olds)	57,300	57,700	59,385
Central Bedfordshire (Children In Care)	245	273	290**
Central Bedfordshire Rate per 10k	42.8	46	48.8***
Statistical Neighbour Average (rate per 10k)	43.0	42.7	41.8***
National Average (rate per 10 k)	59.6	60.0	60.4

\*Represents mean % increase from March 2010 – March 2014. Currently 13.5%.

\*\* Due to new processes implemented and investment in early help and family support services, the Council anticipate the rate of increase in 2014/15 will be approximately 6%.

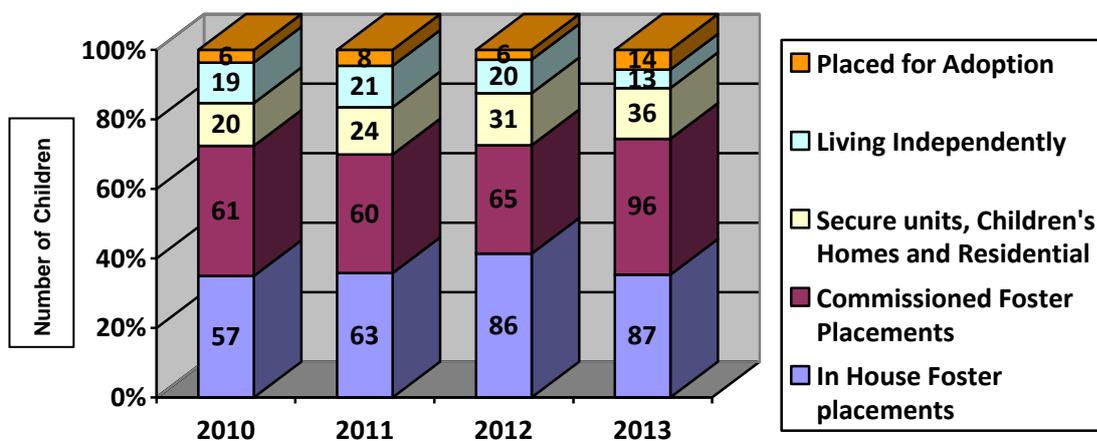
\*\*\*These figures are an estimation only and have been drawn from previous trends by the author of the plan

## 5. PLACEMENT PROVISION

### Current Placement Mix and Cost

As of March 2014 the Council had 273 children placed in care. Table 5 below shows the breakdown of where children are currently placed and shows the increase in demand since 2010.

Table 5 – Historic information relating to children in care by placement type



The table confirms that in line with best practice the Council consistently tries to place children with suitable foster carers first, and will only look to commission external providers after all in-house options have been exhausted.

#### a) In-House Fostering

The Council is committed to the use of fostering as a first option for children and young people who come into the care system. This option allows us to minimise overall placement costs, reduces the risk of placement moves, to maximise the outcome potential for young people and reduce overall placement costs. For

example, research indicates that foster care may even be a protective factor against the negative consequences of maltreatment.<sup>3</sup>

Foster placements can be sourced from:

- The child's existing network
- Foster Carers previously approved by the Local Authority
- Independent Fostering Agencies (IFA's)

All three of the above options may provide a placement in or near the young person's home community, though this is not guaranteed.

When a child becomes looked-after or there is a plan to do so, full exploration is made of Family and Friends (otherwise termed as *Connected Persons*), to ascertain if the child can be safely and suitably placed with a Connected Person.

Fostering continues to be a mixed market, with a continued dependency on IFA's providing some of the placements we require. In March 2013 there were 87 (48%) young people placed with in-house carers (which include Connected Persons approved as foster carers), in comparison to 96 (52%) young people placed with IFA carers. As of the 31<sup>st</sup> March 2014, these figures remain somewhat balanced with 108 young people in commissioned provision as opposed to 100 young people residing with in-house carers or family or friends. The Council will continue work to drive down the ratio of in-house placements to IFA placements so that in the future the majority are in-house or provision provided by family or friends. This should also significantly reduce associated costs as a review of financial information indicates that the average cost of an individual placement (including with family or friends) is £160 per week as opposed to £776 for an externally commissioned placement. Reducing external

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<sup>3</sup> Horwitz, S., Balestracci, K., and Simms, M. (2001) Foster care placement improves children's functioning. *Archives of Paediatric Adolescent Medicine*, 155, 1235–60.

placements by 10% alone could therefore result in an approximate saving of £320,000 per annum.

### **b.) External Fostering – IFA framework**

During 2010-11 Central Bedfordshire Council joined in partnership with Luton Borough Council and Bedford Borough Council to develop a Framework Agreement for the provision of independent fostering agency placements. It was recognised by the partners that a more systematic and holistic approach was required to provide a consistent quality assurance framework, to reduce negotiation times and to provide a better understanding of and control over the pricing structures of placements.

The contract commenced on 1 November 2011 by tendering a framework agreement with 18 independent fostering agencies. Since its implementation the framework has resulted in both an improvement in the quality of provision and a reduction in the costs of placements.

For example as at the 31<sup>st</sup> March 2014 out of the 108 young people with Independent Fostering agencies, 90% were with agencies aligned to the IFA framework provision. The approximate cost of these placements was £776 per week per child. In comparison, there were 10 young people in non IFA framework provision at an approximate cost of £904 per week. If all young people therefore were within the framework, this would equate to a savings of approximately £1,607 per week and £86,840 per annum.

### **b) Adoption**

In 2012 the government launched a national adoption reform plan. These regulations are now in effect. As part of these reforms there is now more of an emphasis on improving timescales for both children and adopters by streamlining the process and ensuring there is a sufficient supply of suitable adoption places to meet the needs of those children where adoption is an appropriate course.

In line with these reforms, the Council has reviewed its own internal processes to reduce timescales. We have also explored methods for increasing the number of adoption places available and for reducing disengagement throughout the recruitment phase of the process.

The adoption team are currently supporting 15 families who have children living with them who have been placed for adoption, but where the formal adoption order has not yet been made. For the year 2014 – 2015, we expect that we will need to find additional adoption households families for around 20 further children.

A recent large scale study (Selwyn, 2014<sup>4</sup>) concluded that the proportion of adoptions that disrupt post-order lies between 2% - 9% and that the overall rate is 3.2%. Factors correlated with placement disruption include the length of time the young person has been in care, their age, the complexity of their behaviour problems and the extent of parental rejection they have experienced. Over the last two years the adoptions team have not identified any placement breakdowns specific to Central Bedfordshire children and young people.

The risk of adoption break down will continue to be minimised with the use of a robust matching policy which is aligned to a detailed and responsive adoption support plan. The Council will continue to respond to requests for support from adoptive families in a timely manner and will ensure we retain and develop practitioners with the expertise required to provide direct work to young people and their families. The Council will also continue to organise annual events for adopted children and their families which engage them with the adoption team and provide peer support. These activities are known to be directly correlated with a reduction in the number of families approaching the team at crisis point.

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<sup>4</sup> Selwyn, J. (2014) Beyond the Adoption Order: Challenges, Interventions and Adoption disruption. UK: University of Bristol School for Policy Studies and Hadley Centre for Adoption and Foster Care Studies.

### **c) Residential Provision**

Residential provision is required for children with the most complex needs. Where health and education services are provided in the placement, contributions are received from these agencies. These arrangements are managed through the Joint Allocation Panel.

Where it is identified that the needs of young people can be fully met and managed locally, this is provided by our in-house residential commissioned provision. Currently this is provided by St. Christopher's Fellowship, a charity based organisation. The Service Level Agreement with St. Christopher's Fellowship runs until October 2014. Plans to expand the provision offered with an additional two bedded unit have been implemented. The additional beds are available to both Central Bedfordshire Council and Bedford Borough Council. This action has increased beds available whilst reducing the unit costs of this provision. For example, the unit cost in St. Christopher's Fellowship up to November 1<sup>st</sup> 2014 was £3,076 in comparison to the new negotiated cost of £1677 per week per unit. This also compares greatly with the cost of an independent specialist provider (excluding health and social care contributions) which approximately cost £3,077 per week (excluding health and social care contributions). The approximate saving per week therefore equate to £1399 per week or £72,748 per young person per annum.

The new service will encompass a therapeutic approach to address the increasing complexity of young people requiring specialist provision within the area and should minimise the need for similar placements (i.e. therapeutic) to be sought out of county.

### **d) 16+ Accommodation Emergency Provision**

The Council routinely analyses the need for 16+ accommodation based on the number and individual needs of children within the care system. This has demonstrated that there is a wide gap in the availability of semi-independent and fully independent accommodation for young people leaving care.

Central Bedfordshire Council, as of the 31<sup>st</sup> March 2014 had 46 looked after children and care leavers aged 16-17.

- Of these, 39% (n = 18) are looked after under Full Care Orders and will require accommodation until their eighteenth birthday.
- 4 are placed with family and friends and 12 are fostered. These young people may require semi-independent accommodation if they choose not to remain looked after under the Staying Put arrangements.
- 7 are looked after in residential homes/hostels, 12 are in “Independent Living” provision and 5 are Unaccompanied Asylum-Seeking Children. These young people are likely to require accommodation.
- 1 is accommodated in residential school settings, and 4 are in short-break residential provision and are therefore unlikely to require this type of provision.

A review of the characteristics of this cohort informs us that any contractors providing these services will also need to take into account the cultural and religious needs of a significant number of service users. It is known for example that whilst 74% of this group were British, 26% were either White Other, Black, Asian or of dual heritage.

A finer analysis of trends informs us that approximately 36 young people aged 16 plus leave care each year within Central Bedfordshire. However local and national trends<sup>5</sup> indicate that not all of these will require semi-independent accommodation. For example, national trends indicate that 26% of 16 year olds, 39% of 17 year olds and 36% of 18 years old move into semi independent accommodation. We therefore anticipate that approximately 12 care leavers will require semi independent accommodation each year based on current trends.

In 2013 it was recognised that there was a shortage of this form of placement across the area and the Council has since undertaken significant work to address this gap in provision and to improve the quantity and quality of

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<sup>5</sup> Department for Education (2012) *Care leavers in England: Data pack*. UK: DFE.

accommodation for care leavers through use of a framework agreement with semi-independent providers.

A thorough needs analysis was undertaken to develop an accurate picture of this service user group and projected demand for this type of provision. The service specification was grounded in local need and evidence-based practice and 'what works' for care leavers. Providers of semi-independent and supported accommodation were invited to tender against three 'bands' of provision - high, medium and low-needs. This stimulated the provider market within Central Bedfordshire and neighbouring authorities. It will also allow us to contract providers with the highest quality accommodation and support that can be matched to individuals' needs, wishes and feelings in the areas where they feel safe and supported and close to the amenities and opportunities for education, employment and training that will improve their quality of life.

The development of this provision has been closely informed by the young people's views who have been actively engaged in all stages of the commissioning cycle.

### **Future placement mix and cost**

The Council predict there will continue to be a slight increase in numbers of children placed in care up until 2015. This prediction is based upon the known growth of the CIC population within Central Bedfordshire. This is fully outlined within Table 6.

Table 6 shows that we predict there will be a significant decrease in the demand for commissioned foster care placements due to an investment in financial incentives for in house carers. We therefore anticipate that we will need approximately 106 IFA placements as of the end of March 2015.

The number of children placed in secure units, children's homes and hostels remains low (12.5%). As of the 31<sup>st</sup> March 2014 there were 34 young people residing in residential care which represents 12.5 % of the Looked After Children

population. In terms of placement type as of the 31<sup>st</sup> March 2014, 73% were recorded as residing in a residential home or unit, 17% were residing in an in-house residential home, 0.05% were listed as residing in a residential school and 0.02% were residing within a medical or nursing home. To minimise the need for residential care as a placement option, the Council will aim to keep the number of young people residing within residential units as low as possible by continuing to intervene early as a means of improving young people's life chances.

The number of children placed with adoptive parents, or with parents has grown from 6 in 2010, to 15 in 2014. We anticipate that the demand for this placement will further grow to 20 within the next financial year. Further work therefore is planned to increase the amount of suitable adopters available.

**Table 6 – Projections of children in care by placement type to 2015.**

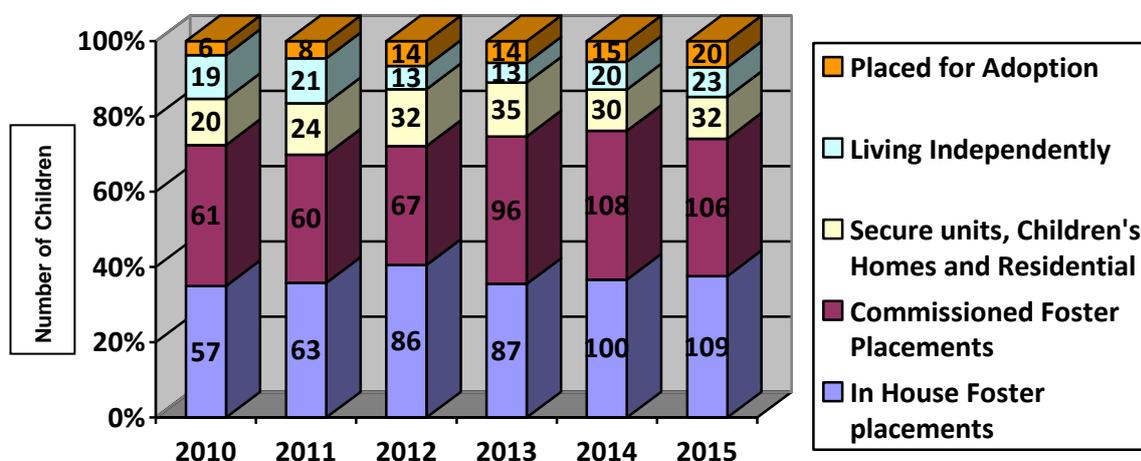


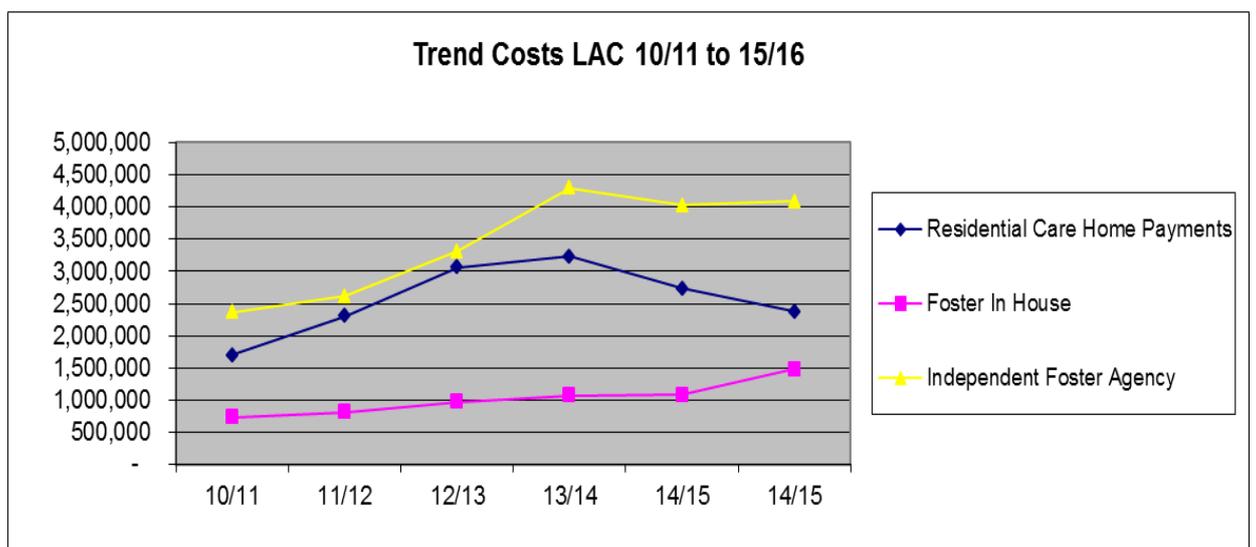
Table 7 outlines what we anticipate will be the predicted cost and the demand for placements if we continue as we are. Based on historic growth and demand for placements, we can predict that foster carer placements will continue to be more frequently required than the other placement options. Locally we anticipate a potential shortage of approximately 7 foster carers in the next year. New processes for attracting in house carers are in place to address this shortage.

**Table 7 – Comparative costs of placement types\***

Chart	Actual 10/11	Actual 11/12	Actual 12/13	Actual 13/14	Budget 14/15	Budget 15/16
Residential Care Home Payments	1,701,986	2,311,033	3,066,899	3,229,433	2,733,830	2,733,830
Foster In House	736,387	811,852	973,855	1,069,004	1,081,360	1,718,360
Independent Foster Agency	2,364,036	2,611,564	3,307,846	4,293,226	4,030,000	3,312,000

\*Assumes implementation Foster Fee Scheme and increased In House placements

**Figure 2: Predictive financial trends**



## **6. VIEWS OF CHILDREN AND YOUNG PEOPLE ABOUT CHOICE AND SUFFICIENCY OF PLACEMENT**

The Council recognises the need to put children and young people at the heart of all decision making directly related to them, as outlined within the Department of Education (2010) care planning guidance.<sup>6</sup> In response to this, we ensure that every young person (pending age and understanding) is given the opportunity to express their wishes and feelings, including children with specific needs. Children and young people's views are always discussed with their assigned social worker, recorded and given due consideration before a placement decision is made. It is also collated at every review meeting and at case conferences. The possibilities and options identified are then explained, discussed and, if necessary, reassessed in the light of the child's views.

The Council has a responsibility to try and keep children in their local communities if they cannot live with their family. Children and young people are consulted with, if it is proposed they should be placed outside of the authority. In this instance, the Independent Reviewing Officer is consulted as well as the parents of the child and/ or young person.

If the child or young person is not happy with the decision, the Council ensures they have access to an independent advocacy service to support them. For example, we supported 62 young people to access an independent advocate in the period 2013-14. This represented a 58% increase in the numbers accessing an advocate since 2012/13. This increase is positively correlated with the continuous promotion of the service across the Council.

For further information about the way the Council has agreed to work with Children in Care, please see the Council's [Children in Pledge](#). Primarily this sets out the Council's pledge to children in care and emphasises its commitment to work in partnership with young people when making decisions which impact

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<sup>6</sup> Department for Education (2010) Independent Reviewing Officers Handbook. UK: DFE

upon them and to take necessary actions to enable them to consistently achieve positive outcomes related to their physical, mental and economic wellbeing.

The information outlined above is useful to inform placement decisions. In our last Sufficiency Plan (2012-13) it was recognised that there was a need to embed a more systemic way of collecting the views of children and young people to inform future service design. This work has been undertaken and we have since completed a more in-depth analysis of young peoples' views to ascertain how happy and safe they feel in their current placement and to identify if there are any notable trends which we have used to inform our future commissioning intentions.

In 2013, the Council evaluated, from a young person's perspective, the in-house residential homes (excluding provision for children with disabilities) commissioned by the Council. Getting feedback from young people about the quality of their homes and their outcomes was central to this work. Two in-house homes were visited, and 8 young people were interviewed about being looked after. The views of home managers and care staff were also solicited to provide a 360-degree view of children's care.

Young people reported feeling safe and happy in their homes. They were satisfied with the level of support (both practical and emotional) that they received, and also had good support for their education. 87.5% said their attendance or attainment had improved while in their current placement. On average, a placement in these homes lasted twice as long as a placement with any other residential provision used by the Council, and twice as long as any of the young person's other previous placements.

However, the interviews also spoke revealingly of issues around friendship and transition planning. This replicates trends in the national picture that it is difficult for young people within residential homes to form close friendships with other young people in this setting and often the young people (from a staff perspective) to plan for their life after care. This was largely due to the young

people not been aware of where they may go after they left the provision. It is anticipated that through the leaving and after care framework we now have improved these processes with increased options and an overall awareness of leaving and after care accommodation across the area.

A similar survey of spot-purchased residential provision was completed and included a series of interviews with young people placed out-of-area. All young people reported feeling safe in their homes and 75% said they were happy there. Similar issues with friendships and transition planning emerged as within the in-house provision, with some additional problems around family contact for young people placed a long distance from home.

The views of young people in foster placement are also gained in a range of ways. Independent Reviewing Officers ensure that each young person has an opportunity to talk about their placement and anything they may wish to say. This can be through a one-to-one discussion prior to the review or at the review if the young person is comfortable with that. We also seek written feedback from those placed with foster carers, when foster carers are reviewed annually.

In the coming year we intend to continue to seek young people's views using a range of strategies to ensure all placement decisions take account of their views and wishes and as a means of monitoring the quality of provision on offer.

## **7. MANAGING DEMAND**

The Council directly delivers and commissions a variety of services that aim to minimise the need for children coming into the care system, to improve outcomes for the cohort in care and to return children to their family of origin where assessed as appropriate. Although not specifically linked to sufficiency, it is important to recognise that by acting early and intervening swiftly, many children and families can remain together safely.

Details of the key preventative services are outlined below:

### **a) Access and Referral Hub**

The Access and Referral Hub went live on 1<sup>st</sup> April 2014. This is a joint enterprise between Social Care and Early Help staff who aim to provide swift proportionate advice and services to the Public and professionals; thereby ensuring there is only one front door. The Hub incorporates other parts of the service and enables easier access to support services for children and families. The Council's approach to MASH development with partners is to incorporate this alongside the already improved access and referral arrangements to all families, children and young people who ask for advice or support. This ensures specialist services such as safeguarding services to children at risk of harm are effectively targeted and that timely and effective early help services are provided to those with emerging problems.

### **b) Early intervention services**

Our commitment to early help is central to our Children and Young People's Plan with 'Early help for all who need it' cutting across our four priority areas:

- Improved educational attainment
- Protecting vulnerable children
- Early help and improving life chances
- Being healthy and positive

Early help supports the broader Council priorities of promoting health and well being and protecting the vulnerable. It additionally offers value for money by working in a preventative way to reduce future spend within specialist services.

Early help means providing support as soon as a problem emerges, at any point in a child's life, from the foundation years through to teenage years.

Our early help offer recognises the crucial role that all family members (i.e. not just mothers and fathers, but step parents, grandparents, siblings and other extended family members and carers), play in influencing what children experience and achieve as well as the consequences to children when families are in difficulty.

Early help services focus on children, young people and families who may need support either through a single service or through an integrated multi-agency response. They work with families where there are signs that without support a child may not achieve good outcomes and fulfil their potential. However early help services are also critical in preventing escalation into specialist services.

As of the 31<sup>st</sup> March 2014, there were 1256 referrals for Early Help Assessments. The vast majority of these cases were successfully dealt with within the Early Help arena (approximately 68%). Furthermore 13% (n=171) acted as a step down measure from social care.

Further information about the early help offer provided by the Council can be found at [www.centralbedfordshire.gov.uk/eha](http://www.centralbedfordshire.gov.uk/eha).

### **c) Managing risk within the family/community**

The Council has a variety of ways to manage and mitigate against risks posed to children and families. The key services are detailed below:

## **Intake and Assessment Team**

The Council has a statutory requirement to provide a service which receives all contacts and referrals in relation to children and young people.

This team is the point of access for parents, children, professionals and the public who have concerns regarding children. The team undertake a comprehensive assessment should the threshold be met. They also offer professional advice, support and signposting services. Any work with children and families is conducted under Section 17 (child in need), or Section 47 (child or young person is deemed to be at risk of immediate significant harm), as defined in the Children's Act 1989.

If it is assessed that the child or young person is at risk within their family, then a plan is formulated and local and family resources are considered in order to reduce the risk. On rare occasions, children may become Looked After by the local authority under Section 20 of the Children's Act 1989 and court proceedings may be initiated.

Last year there were approximately 2500 referrals to the Intake and Assessment team. Of these, approximately 60% resulted in the provision of social care services (i.e. assessment). The family interventions delivered by these teams furthermore keep the proportion entering care appropriate and ensures children remain safely within their families.

## **The Locality Family Support Service**

The Locality Family Support Service consists of seven teams covering the county and based at the Dunstable and Biggleswade children's services offices. These teams provide a social work service to CBC's most vulnerable families and focus on the following localities:-

Dunstable North & South; Houghton Regis; Leighton Buzzard; Sandy; Biggleswade and Flitwick/Ampthill.

All the children in these families are considered to be in need (Section 17, Children's Act 1989) and a proportion of them are considered to be at risk of harm (Section 47, Children's Act 1989). The teams provide an intensive social work service which supports, challenges and enables families to ensure that the overwhelming majority of children remain at home with their parents with improved levels of parenting and lower levels of harm. The teams also identify families which cannot respond to interventions and whose children therefore require the services of the care system to ensure their safety. The early identification of these children is essential if care planning and service provision are to ensure they have the best possible life chances. The teams work with extended families networks to identify family members who may be able to care for children when their parents are not able to. The teams also work with a number of children and young people with attention deficit and conduct disorders, complex health issues and mental health concerns. Many of the parents have drug and alcohol addictions, mental health problems, learning disabilities and experience domestic violence.

The teams use assessment, planning, timely interventions and regular reviews as a means of change and growth in families. They also work closely with a wide range of internal teams (Family Intervention, FAST) and external partners (Health, Police, Voluntary sector) to address the often complex needs of families.

### **The Family Intervention Service**

The Family Intervention Support Service comprises of three distinct areas of work including the Family Intervention Support Service (FISS), the Family Adolescent and Support Team (FAST) and the Homelessness and Mediation Service (HAMS).

The Family Intervention Support Service (FISS) works with children and families who have complex needs and therefore require either child in need or child protection plans.

This service in 2013/14 worked with 177 families. Of those receiving support, 33% of families achieved all goals agreed, 18% met the payment by results element as set by the Troubled Families criteria and a further 1% achieved sufficient progress to move successfully down into step down services. Work completed by the team and evidence collated by them also enabled social care practitioners to manage safeguarding and benchmarks for care by identifying cases where children should become looked after (n=7).

The Family and Adolescent Support Team (FAST) provide intensive 12 week crisis support and interventions to families with adolescent children to prevent family breakdown.

In 2013-14, the FAST team worked with 88 families. Of those, 74% demonstrated improved outcomes including achieving sufficient progress to move to step down services (n=52), 1% became accommodated (n=7), 5% was safely returned to the family home (n=1) and 5% was supported to access supported lodgings. Feedback regarding the service provided is consistently collected from both parents and young people. A review of this highlights positive experiences of the service

The Homeless and Mediation Service (HAMS) provide advice and guidance to professionals who work with young people identified as being homeless.

In 2013-14, the HAMS service worked with 184 young people. Primary issues related to young people presenting as homeless (n=56), seeking advice (n=38), followed by the need for mediation (n=18) and an emergency crash pad (n=11). Following intervention and appropriate intervention, some outcomes noted included young people returning home (10%), young people securing a hostel (11%) or being supported to remain within the family home (11%).

## **Children with Disabilities Team**

The Children with Disabilities (CWD) Service works with children and young people from birth to 18 years. Direct and indirect work provided by the team aims to support families to carry out their day to day tasks and thereby to enable the child to live with them.

The service supports families through their journey (from assessment to accessing provision and beyond), where threshold criteria's are met. In 2013/14 the CWD team supported 238 children or young people. A range of in-house and external provision is also financed from the service budget to alleviate pressures on families with a disabled child. Within this period all of the disabled children and young people, with the exception of the Looked After Children, in the service were supported through a range of short breaks.

Demand is managed by consistently reviewing a range of data collated on this cohort and through management oversight at panel processes which enables service leads to have an overview of on going need and to plan effectively for addressing the needs of disabled children, young people and their families.

Outcomes within the service are monitored through the Children with Disabilities Panel (CDAP) and through the Joint Allocation Panel (JAP) depending on the complexity of the case and the needs of the child.

The Children with Disabilities Service also operates a separate duty system which ensures access to services is via officers who have the specialist knowledge which other professionals and parents value.

## **Looked After Children's Team**

The Looked After Children's Team works with children whose long-term plan is to be looked after by the Local Authority for the duration of their childhood.

The team is responsible for ensuring that all looked after children are visited, consulted and have robust plans in place to ensure good outcomes. This includes in particular their education, health (including emotional health) and plans about their permanent placement. As appropriate, children are moved into adoption or become subject of special guardianship or residence orders. Many remain in foster care, although for some residential placement is most appropriate. In other circumstances children may return to live with their families.

In 2013/14 the Looked After Children's team worked with 358 young people. The numbers of young people aged 0-12 (n=179) and 13 plus (n=179) supported by the team were evenly proportioned.

Outcomes for the cohort are wide ranging and collected from a range of sources. This includes the percentage of Looked After Children visited within timescales. In 2013/14 100% of children worked with within the team were visited within appropriate timescales.

The Council also recognise that Looked After Children are particularly vulnerable to poor mental well being and therefore continuously monitor this domain allowing for identification and the allocation of appropriate resources to address issues arising. As of March 2014, 100% of our Looked After Children population completed a Strengths and Difficulties questionnaire (SDQ). The average score for the group within the period 2012/13 was 14.2 which would be considered as "borderline" (i.e. have some additional needs).

Evidence indicates that placement stability can also make a positive difference to young peoples' lives, giving them the opportunity to form strong attachments with carers and friends, maximising their resilience, and improving their chances of achieving positive outcomes<sup>7</sup>. As of March 2014, 29% of young people who have been looked after continuously for at least 2.5 years (aged under 16 years) are currently residing in a placement where they have spent at least 2 years.

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<sup>7</sup> Unity, S. (2008) Multiple Placements for Looked After Children. Available at <http://www.communitycare.co.uk/2008/10/27/multiple-placements-of-looked-after-children/>

## **8. ENSURING SERVICES MATCH THE NEEDS OF CHILDREN**

The Council and its partners recognise that the children, young people and families we work with present with a wide spectrum of need and that a variety of different responses is therefore required to ensure that all services provided are focussed on the individual needs of the child, young person or the family.

### **a) Good Care Planning**

Revised care planning regulations came into force on 1<sup>st</sup> April 2011. These support arrangements for robust care planning, placement and case review for children looked after. They also aim to improve the care and support provided to care leavers.

The Conference and Review Service is focussed on the quality of care planning and provides challenge and scrutiny to operational practitioners and managers when gaps in relation to timely and appropriate plans for children have been identified. In addition across Children's Social Care the service has responded to new requirements arising from the Family Justice reforms.

Care planning processes focus robustly on the child. IRO's meet with children before their reviews and care plans set out how all aspects of the child's future placement and support needs are to be met.

The outcomes of health assessments and Personal Education Plans are scrutinised and identified needs responded to in the care plan.

The Council takes positive steps to ensure that looked after children retain contact where appropriate with their birth family. Care plans set out plans for contact between the looked after child and siblings, parents, grandparents and other significant adults in the child's life where it is appropriate to do so.

## **b) Effective decision making**

The Council manages three decision making panels to effectively allocate resources for individual cases. The main remit of these panels is to ensure that care thresholds are met and that the right resources are allocated at the right time. By working effectively the panel aims to improve placement stability by matching needs to appropriate placements.

The Central Bedfordshire Council Resource Panel ensures consistency of practice and decision making across children's social care whilst also ensuring limited resources are managed effectively.

The Joint Allocation Panel has been established to look at requests for provisions where joint funding is requested from Education and/or Health.

Information from both panels is used to inform future commissioning, particularly relating to the sufficiency plan.

## **c) Quality Assurance framework**

Children's Social Care has a Quality Assurance Framework which sets out the activity in relation to compliance and qualitative auditing and improvement measures. The purpose of the Quality Assurance Framework is to:

- improve outcomes for children, young people and their families;
- set practice standards against which the quality of services and their impact be measured;
- ensure that the services provided are of a consistent high standard and sustainable through regular evaluation;
- is both reflective and proactive through the measure of quality and impact of service delivery;
- support the continuous improvement and development of practice;
- influence the development of policies and procedures to support staff in delivering good practice.

The Framework sets out measures by which practice can be evaluated through the audit function and practice standards for practitioners.

Child Protection Conference Chairs and Independent Reviewing Officers (IROs) play a key role assuring the impact and quality of work undertaken by Children's Social Care, ensuring that performance indicators and procedural requirements are met, and that plans set out for children and young people are outcomes based and meet the specific needs of the child/young person.

The Quality Assurance Framework within Children's Social Care, is also linked to Bedfordshire's Safeguarding Children's Board Performance Framework.

#### **d) Dispute Resolution Process (DRP)**

The IRO has a duty to monitor the Local Authority's performance overall, not just in respect of the review of the child/young person's case. IRO should identify poor practice, and must negotiate with the Local Authority's managers up to the highest level. The IRO is required to consider a referral to the Child and Family Court Advisory and Support Service, where the child/young person's human rights have not been observed.

The DRP allows IROs to resolve concerns and disputes at the very earliest opportunity through a process of escalation to the Team Manager and if necessary the Head of Service.

Most other concerns will be raised with the Team Manager through the existing Quality Assurance process. A 'RAG system' is now in place and ensuring that more urgent or serious matters are highlighted. Most concerns are resolved through quality assurance process.

## 9. HOW THE COUNCIL WILL COMMISSION PLACEMENTS TO MEET IDENTIFIED NEEDS

All commissioning will be managed consistently in line with Central Bedfordshire's Children's Services Commissioning Framework using the commissioning cycle illustrated below.

**Figure 1: Commissioning Cycle**



The Council will commission and deliver services based on five principles.

- a) Our processes will be transparent, fair, collaborative and consistent
- b) We will demonstrate value for money, efficiency and better outcomes for our customers and communities
- c) We will have the right service providers
- d) Children, Young People and families will be involved in everything we do
- e) We will continue to learn and improve alongside our providers

The Council's commissioning team work closely with social workers and other colleagues to ensure that the needs of the child inform what services are provided for them.

The commissioning team also analyse the effectiveness of different types of intervention and placement provision to understand how best to meet children's

needs. This will include on going review of current provision to ensure it remains fit for purpose and ensuring that providers of all placements use all resources available to them to improve children's social, physical and educational outcomes.

## **10. FUTURE COMMISSIONING INTENTIONS AND DEVELOPMENTS**

The Council recognises the need to constantly review the supply of appropriate places for children. The demand for placements changes constantly and therefore it is vital that the Council's commissioning approach is flexible and allows the opportunity to respond to changes in demand.

At present it is clear that the Council needs to:

- Explore methods to increase the recruitment of in-house foster carers by a minimum of 10% over the next 12 months
- Identify and approve 20 additional adoption household by the year 2014-15
- Re-commission existing specialist residential placements within the local area
- Secure semi independent accommodation for approximately 12 care leavers per annum
- Increase the amount of high quality places to meet the increasing demand for places within 20 miles<sup>8</sup> of children's homes.
- Ensuring the quality and safeguarding standards within residential provision remains high

The Council's overarching intention is to continue to collaborate with a range of providers to secure the broadest range of placements possible in the most effective and cost efficient way to meet the needs of our children in care.

In line with the needs identified, more specifically we will either develop or commission the following services:

### **i. Increasing the recruitment and retention of in-house foster carers**

In line with the national picture, the Council will continue its efforts to seek to recruit a wider pool of foster carers. We recognise that this pool needs to be

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<sup>8</sup> 20 miles is the statutory measurement of local placements to ensure children stay close to family/friends etc. quote from statutory duty.

representative of the diverse needs and age ranges of children and young people entering care to increase the possibility that we consistently find the right home for each child, without the requirement for additional moves.

From a review of young people currently in foster placements, we know that we need to expand our in-house provision at present by a minimum of 10% to meet the expected demand next year.

We will also draw on evidence from research<sup>9</sup> about effective recruitment and use this knowledge in practice within our campaigns such as maintaining a consistently high profile and by having ongoing publicity which is pitched at a local level through word of mouth and publicity in local press. We will also ensure our recruitment campaigns are supported by robust systems for following up enquiries in a timely manner to minimise dis-engagement. We will also make use of foster carers own networks to attract potential recruits into the system.

We will continue to provide training and support to our foster carers so that they have the right skills, qualities and confidence to be able to meet the needs of any children or young people placed with them particularly adolescents and children with disabilities.

We will additionally ensure that support continues to be available to foster carers from Child and Adolescent Mental Health Services (CAMHS) and other services as appropriate. This will be further enhanced with a new jointly tendered CAMHS service with Bedfordshire CCG which will have additional capacity to address the needs of this group. The new service is due to commence on the 1<sup>st</sup> April 2015.

We will continue to make use of independent foster agencies, particularly those providing placements local to Central Bedfordshire, wherever there is not local capacity in-house or where the in-house service is unable to meet the child or young person's specific needs.

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<sup>9</sup> SCIE (2004) SCIE Guide 7: Recruiting Foster Carers. Available at <http://www.scie.org.uk/publications/guides/guide07/carers/recruiting/index.asp>

## **ii. Incentives to attract Foster Carers.**

Recruitment of foster carers is an on-going challenge which is further compounded by the discrepancy between financial incentives offered by independent agencies in comparison to incentives offered by the Council.

To ensure we attracted and retained a pool of in-house fosters, the Council reviewed the existing fee based scheme and explored the financial implications alongside the potential benefits of increasing financial rewards to in-house carers.

Following on from this review, in April 2014 the Council introduced a fee based scheme to improve rewards to in-house carers. As part of this activity, the Council hopes to increase the provision of in-house placements and subsequently reduce the use of IFA placements by 25 over two years. It is expected that this initiative will have financial implications (see appendix D) which will be set against savings made from dis-investment in the use of independent agencies.

A full outline of our proposals are set out with Appendix D including anticipated costs of this initiative.

## **iii. New approaches to attract more adopters**

In the year 2014-15 we anticipate the need to find adoption households for around 20 children.

To match this demand the Council aims to increase the amount of adopters within the system to ensure there is a sufficient supply of suitable places to meet the needs of those children where adoption is an appropriate course.

We intend to do this by continuing to align our recruitment strategy to the proposals with the national adoption reform. As part of this strategy we are investing additional resource to ensure applications are completed in a timely manner.

The Council will remain proactive in maintaining contact and providing support to prospective adopters throughout the process and aims to minimise disengagement by having a dedicated individual within the team who will act as the first point of contact but who will also track adopters' progress throughout the application phase.

The Council are confident that procedures currently in operation are working effectively from outcomes achieved in the placement of children and recruitment of adopters within the last 12 months. We therefore remain committed to our current strategy and will continue to implement and review this to enable us to maintain a sufficient supply of suitable places to meet the needs of children where adoption is assessed as appropriate.

#### **iv. Re-commission the current contract of two local residential homes**

The current contract for residential homes ends in November 2014. The Council, working collaboratively with Bedford Borough Council are currently in the process of re-commissioning this service to secure improved outcomes for children placed within these homes. Throughout the process we will ensure that any new provider has demonstrable knowledge and experience to assure us that they can consistently provide provision which will meet the new national minimum standards.

The focus for the new management of these two homes is to provide a holistic care offer which ensures positive outcomes for young people and a smooth transition for children from the residential provision into a foster care placement, or into semi independent accommodation as assessed appropriate.

Young people's views have been fully embedded into all aspects of the commissioning of this service. We commenced the commissioning of the new service by evaluating what works well when providing residential care, by exploring young peoples' experiences of the current provision on offer and working collaboratively with social care to identify the requirements for the

future. We have also identified young people to participate in the procurement process thereby supporting us to identify a suitable provider for the future.

**v. Semi independent living provision targeted at the needs of our care leavers and in the locations where it is needed.**

A review of demand predicts the need for semi independent accommodation for approximately 12 care leavers per annum.

The Council recognised that there was a shortage of high quality places available within the area. Therefore the Council's commissioning team and Social Care worked collaboratively to put a framework agreement in place for the overall intention of ensuring there is sufficient and suitable accommodation available for each young person assessed as suitable for this pathway.

The commissioning team are committed to designing services which embed young peoples' wishes, feelings and their experiences of provision available. Throughout the process the team ensured young people were fully involved in all phases of the commissioning of this provision. For example, the team consulted with young people to help determine what type of accommodation they felt was needed and in which areas and involved care leavers in the tender evaluation process so that their experiences of using this type of provision could shape service development.

Shortlisting for a Framework Agreement is expected to take place in June 2014. As part of this process quality assurance visits to shortlisted providers' units will be carried out in partnership with the Children in Care Council. The contract is expected to be awarded and commence in July 2014.

**vi. Increase the amount of high quality places to meet the increasing demand for places within 20 miles<sup>10</sup> of children's homes.**

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<sup>10</sup> 20 miles is the statutory measurement of local placements to ensure children stay close to family/friends. Drawn from DFE (2010) *Securing Sufficient Accommodation for Looked After Children*. UK: DFE.

The Council will maintain its commitment to not seeking residential placements for children and young people unless there is no other alternative way to meet their needs. We are aware that there remains a need to develop more placements that can cater for older children, with more complex and challenging needs. For example, we know that male adolescents aged 15 years and above with a disability are more likely to end up in residential care than young females and careful consideration therefore needs to be given to how we will meet their specific needs within our strategic approach.

Central Bedfordshire currently has a good range of residential provision for children with disabilities but where needs cannot be met within this, we will ensure alternative provision is identified which meets the needs of the young person as near to Central Bedfordshire as possible. We will only however choose the option of residential care provision for young people with challenging or significant needs after all other options have been explored and agreement has been reached by members of the local joint allocation panel regarding the most appropriate provision to meet need. We are also aware that there will be a sufficiency issue in the CWD long stay provision in the next 5 years (i.e. the latest admissions to the team are ages 13/14 so will need the provision for some years which will need a focussed piece of work to address.

In placing young people with emotional or behavioural difficulties in residential care, we will also firstly consider our local contract for the provision of residential care which currently is held by St. Christopher's Fellowship.

The Council are aware of the importance of placing children as close to their home as is reasonably possible to minimise disruption to their support networks and education. Currently we have a number of children placed outside the area and are currently working towards reviewing all of these cases individually to assess their needs and identify any trends across the group as a means of informing our future commissioning approach.

Our overarching approach is furthermore to make Central Bedfordshire a more attractive place for new providers to provide high quality placements for our children. We intend to achieve this by continuing to sharing intelligence and information about service demand and by working collaboratively with the full breadth of potential providers to explore options for addressing needs arising.

**vii. Ensuring standards and safeguarding with residential homes remains a priority**

The Council is committed to ensuring all young people are placed in high quality provision which safeguards them from harm and maximises their opportunities. In line with this, we will further enhance our quality assurance processes by investing resources which will enable us to recruit a suitably trained and qualified external individual who can advise us on the on-going quality of homes where young people are placed.

## **11. GOVERNANCE ARRANGEMENTS**

This plan will be reviewed through the Children's Services management team.

In 2014, the Council will also consult with young people, providers and partners about updating the Sufficiency Plan to reflect changes in demand and to outline future commissioning intentions.

An overview of the plan will be presented to the Corporate Parenting Panel for information.

## APPENDIX A - DEMOGRAPHICS

**Table 1: Census data 2011/12**

	Population
2012	260000
2011	254000

**Table 2: Age Population Breakdown (2011)**

Age	
0 – 15 years	19%
16 – 64 years	65%
65 +	16%

**Table 3: Ethnicity (2011)**

Ethnic Group	Total	%
English/Welsh/Scottish/Northern Irish/British	228055	89.7%
Irish	3150	1.2%
Gypsy or Irish Traveller	480	0.2%
Other White	7040	2.8%
White and Black Caribbean	1790	0.7%
White and Black African	520	0.2%
White and Asian	1475	0.6%
Other Mixed	1005	0.4%
Indian	2535	1.0%
Pakistani	440	0.2%
Bangladeshi	215	0.1%
Chinese	1405	0.6%
Other Asian	1810	0.7%
Black African	2055	0.8%
Black Caribbean	1230	0.5%
Other Black	330	0.1%
Arab	360	0.1%
Any other ethnic group	500	0.2%

**Table 4: 2010 Indices of Deprivation Scores and Ranks Area**

<b>ID 2010 Score</b>	<b>National Rank (out of 326)</b>	<b>EoE Rank (out of 47)</b>
<b>10.73</b>	269	34

**Table 5: Income Deprivation Affecting Children Index Score (%)**

	<b>IDACI</b>
<b>Central Bedfordshire</b>	13%
<b>England (average)</b>	22%

**Table 6: CBC Lower Super Output Area's (LSOAs) identified as the most deprived 30% in England**

<b>LSOA</b>	
Dunstable Manshead 594	46%
Houghton Hall 580	41%
Houghton Hall / Tithe Farm 618	41%
Parkside 601	37%
Leighton Buzzard North 605	36%
Leighton Buzzard North 609	36%
Sandy 433	34%
Leighton Buzzard North / Linslade 557	34%
Parkside 602	32%
Tithe Farm 619	32%
Dunstable Northfields 596	31%
Dunstable Northfields 595	30%
Flitwick 400	29%
Dunstable Northfields 599	27%
Caddington 562	27%

Detailed information regarding deprivation in Central Bedfordshire can be found:

[http://www.centralbedfordshire.gov.uk/Images/110405%20ID%202010%20report%20v0\\_4%20external\\_tcm6-10073.pdf#False](http://www.centralbedfordshire.gov.uk/Images/110405%20ID%202010%20report%20v0_4%20external_tcm6-10073.pdf#False)

## APPENDIX B – CHARACTERISTICS OF CHILDREN IN CARE AND VULNERABLE GROUPS

### a.) Numbers entering care

**Table 7: Children in Care**

<b>Total CIC</b>	<b>March 2010</b>	<b>March 2011</b>	<b>March 2012</b>	<b>March 2013</b>	<b>March 2014</b>
Central Bedfordshire (Children In Care)	165	175	210	245	268
Central Bedfordshire Rate per 10,000	29.4	31.0	37.2	42.8	46.0
Statistical Neighbour Average (rate per 10, 000)	44.8	46.0	45.4	43.0	42.7*
National Average (rate per 10, 000k)	58.5	59.0	60.7	59.6	60.0*

**Table 8a: LAC Admissions by Age Band**

<b>Admissions</b>	<b>2010/11</b>	<b>2011/12</b>	<b>2012/13</b>	<b>2013/14</b>
<b>0-4</b>	<b>30</b>	<b>51</b>	<b>67</b>	<b>51</b>
<b>5-11</b>	<b>19</b>	<b>32</b>	<b>31</b>	<b>41</b>
<b>12-16</b>	<b>35</b>	<b>36</b>	<b>24</b>	<b>27</b>
<b>17-18</b>	<b>5</b>	<b>5</b>	<b>3</b>	<b>1</b>
<b>Total</b>	<b>89</b>	<b>124</b>	<b>125</b>	<b>120</b>

Key trend: The number in 5-11 years is increasing. A significant number of those entering care are 0-4 years of age. Overall in the last three years, the number of those entering care has remained stable.

**Table 8b: LAC Discharges by Age Band**

Discharges	2010/11	2011/12	2012/13	2013/14
0-4	18	17	39	49
5-11	9	14	13	17
12-16	17	27	15	13
17-18	30	37	30	22
<b>Total</b>	<b>74</b>	<b>95</b>	<b>97</b>	<b>101</b>

Key trend: A significant number of those been discharged from care are in the 0-4 range (the average over the 4 years is 36%). There is an indication that the high numbers starting in this age range do not remain looked after long term. The mean number of discharges since 2010 is 92. In comparison the number of those discharged in 2013/14 was 101.

### b.) Diversity

**Table 9: Diversity of our Children in Care**

	On 31/03/2014
White	228 (85.1%)
Mixed	32 (11.9%)
Asian or Asian British	0 (0.0%)
Black or Black British	5 (1.9%)
Other ethnic groups	3 (1.1%)
	Total = 268

### c.) Gender

**Table 10: Gender of our Children in Care 31/03/2014\***

<b>BOYS</b>	<b>2012/13</b>	<b>2013/14</b>	<b>GIRLS</b>	<b>2012/13</b>	<b>2013/14</b>
Under 1:	9	3	Under 1:	13	8
1 - 4:	30	27	1 - 4:	26	29
5 - 9:	34	42	5 - 9:	19	26
10 - 15:	35	49	10 - 15:	33	42
16 - 17:	29	25	16 - 17:	17	17
	<b>Total =</b>				
	<b>137</b>	<b>146</b>		<b>108</b>	<b>Total = 122</b>

**d.) Age profile**

**Table 11: Admissions by Age Group\***

<b>Age Profile</b>	<b>2013/14</b>
0-4	51
5-11 years	41
12-16 years	27
17 plus	1
No DOB	0
	Total = 120

\* Taken from PIR / LAC admissions table above.

Key trend: Those most vulnerable to entering are those in the 0-4 age range followed by those aged 5 – 11 years of age.

**e.) Disabled Children and Young People**

As of the 31<sup>st</sup> March 2014, the Children with Disabilities Team were supporting 16 CBC Looked After Children or young people as a result of their disability on a full time basis. In addition, 222 (excluding LAC) young people were supported with a series of short breaks.

**f.) Adoption and Special Guardianship Orders**

**Table 12: Ceased to be a Child in Care because of Adoption and Special Guardianship Orders 2013/14**

Placed for adoption	14
Special Guardianship Order	17

Key note: As of 31<sup>st</sup> March 2014, 11% of children in care (n = 15) ceased to be a Child in Care because of Special Guardianship Orders and Adoption.

### **g.) Young People known to the Youth Offending Service (YOS)**

The Legal Aid, Sentencing & Punishment of Offenders Act (LASPO) 2012 introduced changes to the remand powers of Courts with a view to achieving a reduction in the numbers of children and young people who are remanded into custody. It also brought about the change of Children in Care (CIC) status for all remanded young people and leaving care status for those who remain in custody for 13 weeks or more as well as the transfer of financial responsibility to local authorities. The policy direction is therefore to manage all young people on remand in the community unless there is a serious concern for public safety.

From April 2013 to March 2014 there was 1 custodial remands, compared to 5 in 2012-13. This placement was in a Secure Training Centre (7 placement days).

### **h.) Unaccompanied Asylum Seeking Children**

Asylum seeking children and young people (UASC) are accommodated under Section 20 of the Children Act 1989. When the young person leaves care they are entitled to the same leaving care provisions as any other CIC under Section 23 of the Children (Leaving Care) Act 2000.

Overall the number of UASC has fallen from a peak of 34 in May 2010. It is however difficult to predict trends in young people arriving in the Council and claiming asylum as it is continuously subject to change. We know that as of the 31.3.14, there were 9 young people residing in semi independent accommodation. Three others young people are either in a foster care placement, a residential placement or residing with family members.

The priority is to ensure this group of young people have placements which meet their assessed needs and offer stability. Leaving and aftercare accommodation will be particularly needed given the current age ranges of this cohort, all of which are aged 17 years and over.

**Table 17: Age range of UASC in Care 2013-14**

<b>Age</b>	
15 years	0
16 years	5

17 years	2
18 years	4

\* In line with the Data Protection Act 2010, data has been suppressed to protect the confidentiality of individuals.

### **i.) Needs of young people leaving care**

Children in Care are significantly more likely to become NEET (not in Education, Employment or Training) and to struggle to secure further and/or higher education opportunities. The Council is working closely with local education and training providers, and other support agencies to develop specific projects to support care leavers.

**Table 18: No of 19-21 year old care leavers, with suitable accommodation as of 31.3.14**

<b>Age</b>	<b>Mean Average April 2013 - March 2014</b>	<b>Target</b>
19	88%	90%

**Table 19: No of 19-21 year old care leavers, in Employment, Education or Training as of 31.3.14**

<b>Age</b>	<b>Mean Average April 2013 - March 2014</b>	<b>Target</b>
19	44.8%	65%

As of 31.3.14 there were 88% of all young people Central Bedfordshire were in suitable accommodation. There has been a significant improvement since 2013 in the numbers accessing employment, education or training. This has increased from 44% in March 2013 to 64% in March 2014.

## APPENDIX C – MARKET ANALYSIS

### Fostering provision: Sufficiency of Provision to Meet Needs Locally

#### a. In-house foster carers

As of the 31.12.13, the Fostering and Adoption team ceased to be a shared service operating on behalf of both Central Bedfordshire Council and Bedford Borough Council. At this time, there were 165 registered foster carers. This has had a direct impact on the number of foster carers available to Central Bedfordshire.

#### b. Independent Fostering Agencies (IFAs)

Central Bedfordshire has a framework agreement with 18 Independent Fostering Agencies. Other IFAs are used on an ad hoc basis.

#### Table 20: Breakdown of those within framework agreement including numbers and costs

Number of children placed with Consortium IFAs (as of 31st March 2014) -	<b>99</b>
Average cost of each placement with Consortium IFA	<b>£737</b>
Number of children placed with non framework IFA (as of 31 <sup>st</sup> March 2014) -	<b>10</b>
Average cost of each placement with non framework IFA	<b>£904</b>

#### c. Residential Provision

There are 6 Private Children's Residential homes in Central Bedfordshire.

Of those there are two residential children's homes that are used by the Council as 'In-house' placements but which are also shared with a neighbouring authority as part of a joint contract. This contract is held by St. Christopher's fellowship and includes Bunyan Road (6 beds) and Clophill (5 beds). Average occupancy in the period 1.4.13 to the 31.3.14 for Bunyan Road was 80% and for Clophill was 99%. The Council also hold a

separate contract with the provider for a solo bed in Stewartby. Average occupancy for this solo bed throughout the period was 92%.

**Table 21: Usage of Private Residential Children’s Homes as of the 31.3.14 outside the area**

<b>Placement Location</b>	<b>Number of Placement</b>
Binley Woods, Warwickshire	1
Milton Keynes, Bucks	1
Heckingham, Norfolk	1
Wallasey, Merseyside	1
Peterborough, Cambridgeshire	2
Deal, Kent	1
South Gloucestershire	1
Bedford, Bedfordshire	1
Kettering, Northamptonshire	1
Luton, Bedfordshire	2
Margate, Kent	1
Stafford, Staffordshire	1

**d. Residential provision for Unaccompanied Asylum Seeking Children**

There are two providers which offer accommodation to Unaccompanied Asylum Seeking Children. One of these providers (LAMP) is based in Luton and the other (Locate) is based in Peterborough. As of the 31.3.13, there were 8 young people residing in this accommodation.

Other UASC (3) are placed with foster carers, are in residential provision or residing with family members.

**e. Children placed in specialist residential with on site education as of the 31.3.14**

In the period 1.4.13 to the 31.3.14, there were 3 children residing in residential schools under SEN who are considered LAC.

## **f. Short Break Provision**

Short Break Provision for Children with Disabilities includes Kingfishers and Maythorn. Kingfishers is located in Houghton Regis and comprises of 3 beds whilst Maythorn is located in Biggleswade and comprises of 8 beds.

## **APPENDIX D – Fee Based Scheme**

The current average cost of Independent Fostering providers is £758 per week (£39,387 per year). In contrast, the current average cost of an in-house placement is £420 per week (£21,840 per year). This presents a current cost difference of £338 per week. It is clearly desirable to increase the number of in-house placements and reduce the number of more expensive Independent Fostering placements.

The increased cost of implementing the Fee scheme with current number of in-house placements is £298k. This is cost incurred before any growth in foster placements. The increased cost of a further 10 placements in 2014-15 is an additional £144k. Adding these together, the proposed increase fits within the agreed cost for 2014-15 of £499k.

For the year 2015-16, the increase of a further 15 in-house placements is costed as £218k.

### **Summary of Planned Increase in In-house Foster Carers (as of 03/14)**

- Current number of in-house placements = 100
- 2014-15 planned number of in-house placements = 114
- 2015-16 planned number of in-house placements = 130

It is recognised that foster care provision in Central Bedfordshire will continue to be a mixed market of in-house and IFA placements, to provide an efficient and effective service. We aspire to increase the proportion of in-house fostering provision and reduce the use of IFA placements, in line with our statistical neighbours and preferably trend towards the higher performing local authorities with a significant majority of in-house foster placements.

### **Details of the Scheme**

#### **Tier 0 - Family and Friends carers**

This level is intended for those carers who will solely be approved for a specific child or children. Fostering allowances are currently paid at 110% of the Fostering Network recommended rate. This would continue to cover the costs for the child, and would be the payment made to friends and family carers who would not receive the household skills rate (Tiers 1 & 2). Once approved, they will be expected to complete the Training Development Standards, as well as core training such as First Aid, Safeguarding and Safer Caring.

### **Tier 1 - Mainstream carers**

This level applies to mainstream carers who are available for any children the Council may propose to place with them, within their agreed approval range. The expectation is that they show willing to consider placements presented and provide clear reasons for declining placements. They will have completed the Skills to Foster course and a full assessment that has been approved via Fostering panel. A fee of £100 per week on top of the fostering allowance for the child will be paid to newly approved mainstream foster carers for their first year of caring, or until they achieve the Training Support and Development (TSD) mandatory workforce development standards. It is expected that they will make a commitment to completing the TSD within the first year. This replaces the current additional fee of £100 that has been paid to mainstream carers where child placed is 13 or over. This acknowledges that challenging needs are present in all age bands, not just teenagers (excluding Youth Care scheme that caters for additionally complex placement needs, which is dealt with separately). They will also have completed a Personal Development Plan that identifies specific learning and development needs and how these will be accomplished. Carers who cease to meet the standards can also be reduced to a lower tier. The fostering allowance is paid at Fostering Network rates, according to the age bands as published annually.

### **Tier 2 – Mainstream carers**

Carers must have been fostering for two years at Tier 1 before progressing to Tier 2. The fostering allowance is paid at regular Fostering Network rates, according to the age bands as published annually. Carers who cease to meet the standards can be returned to a lower Tier. Carers at this level will also be required to have successfully completed additional core training as defined by the Fostering Service, maintaining an active training profile that reflects on their continuous professional development. The Personal Development Plan will identify specific training expectations that evidence competencies and contribute to the learning of others. Carers at this level will also be sought to contribute to wider aspects of the service such as being Buddy or Mentor to less experienced foster carers and/or contributing to training and recruitment activities. When they reach this competency level, the fee will increase to £175 per week per child placed.

### **Tier 3 – Mainstream carers – complex needs**

This level is currently provided within the Youth Care scheme and a higher fee of £385 is paid to a small number of carers with a commitment to providing maximum occupancy and working with complex and demanding placements that require a higher

level of support and supervision. It is proposed that this scheme is re-evaluated in near future, but for the present is continued as a small cohort and utilised more flexibly with regard to age range of placements. Practice has shown that there are younger children who may well benefit from a specialist placement such as the Youth Care scheme have to offer.

### Summary of Fees and Allowances

Age range	Fostering Network baseline	Tier 0 (no fee) Allowance	Tier 1 £100 fee + Allowance	Tier 2 £175 fee + Allowance	Tier 3 £385 fee + Allowance
<b>0 to 4</b>	£140.33	£154.36	£240.33	£315.33	
<b>5 to 10</b>	£159.85	£175.84	£259.85	£334.85	
<b>11 to 15</b>	£199.00	£218.90	£299.00	£374.00	£603.90
<b>16+</b>	£242.08	£266.29	£342.08	£417.08	£651.29

### Summary of Benefits of the new Fee scheme

- Be more competitive with neighbours and attract more carers
- Prevent children going to IFA placements and bring those in IFAs back to in-house placements in a planned way
- Incentivise foster carers to complete mandatory training and enable them to feel the council is treating them as paid professional carers
- Prevent loss of existing carers either to competitors or because they can no longer afford to foster
- Encourage foster carers who would otherwise need to work to be more available for fostering at no financial detriment to their household
- Have carers more available to meet the needs of younger children, and potential savings on extra costs such as transport to school
- Increase the provision of in-house placements and reduce the use of IFA placements by 25 over two years

## Appendix E

### Project Plan

Objective	Method	Responsible party	Timescale
1 Expand our in-house foster provision at present by a minimum of 13% to meet the expected demand next year	Draw on evidence from research about effective recruitment and use this knowledge in practice within our campaigns.	Edward Wong	From April 2014
	Increase the recruitment of in-house foster carers by a minimum of 13% over the next 12 months.	Edward Wong	By 31 <sup>st</sup> March 2014
	Provide training and support to our foster carers.	Edward Wong Jo Meehan/ Linda Johnstone	Ongoing
	Enhance CAMHS provision to address treatment needs of young people within foster care.	Sharon Simpson (CCG)/ Ben Pearson (CBC)	By 1 <sup>st</sup> April 2015
	Ensure there is capacity within IFA	Ben Pearson (CBC)	Ongoing

		to meet unmet needs in house and ensure the quality of this provision remains high.  Review process	Gerard Jones (CBC)/ Members of CSMT	Ongoing
2	Identify and approve new in house foster carers to meet demand	Introduction of fee based scheme  Identification and approval of 25 new in house foster carers.  Review process	Gerard Jones (CBC)  Edward Wong (CBC)  Gerard Jones/ CSMT	April 2014  March 2016  Ongoing
3	Identify and approve new adoption households to meet demand	Align of recruitment strategy to the proposals with the national adoption reform.  Identification and approval of 24 new adoption households.  Review process	Edward Wong (CBC)  Edward Wong (CBC)  Gerard Jones/ Members of CSMT	From 1 <sup>st</sup> July 2013  31 <sup>st</sup> March 2015  Ongoing
4	Secure improved	Identify demand and needs of	Ben Pearson (CBC)	By April 2014

<p>outcomes for children placed within residential homes locally</p>	<p>service users within current provision</p>		
	<p>Develop new specification for existing service in line with best practice and service users needs</p>	<p>Ben Pearson (CBC)</p>	<p>April 2014</p>
	<p>Re-commission existing service</p>	<p>Ben Pearson (CBC)/ Tara Geere (BBC)/ Linda Sharpstone (CBC)</p>	<p>May 2014</p>
	<p>Reviews outcomes for this cohort</p>	<p>Ben Pearson (CBC)/ Tara Geere (BBC)/ Members of CSMT</p>	<p>Ongoing</p>
	<p>Develop specification for new service in line with identified gaps and best practice</p>	<p>Ben Pearson (CBC)/ Linda Sharpstone (CBC)</p>	<p>By Nov 2014</p>
	<p>Commission new service in line with identified gaps in provision</p>	<p>Ben Pearson (CBC)</p>	<p>By April 2014</p>

		Review and monitor outcomes	Ben Pearson (CBC)/ Members of CSMT	Ongoing
5	Ensure there is high quality semi independent accommodation to meet demand	Identify demand and needs of service users within current provision  Develop framework agreement for service in line with best practice and service users needs  Quality assure all providers within framework  Commission service	Ben Pearson (CBC) / Edward Wong (CBC)  Ben Pearson (CBC)/ Edward Wong (CBC)  Ben Pearson (CBC)/ Edward Wong (CBC)  Ben Pearson (CBC)/ Edward Wong (CBC)/ Linda Sharpstone (CBC)	By Feb 2014  By April 2014  By June 2014  By July 2014
		Reviews outcomes	Ben Pearson	Ongoing

6	<p>Increase the amount of high quality places to meet the increasing demand for places within 20 miles <sup>11</sup> of children's homes.</p>	<p>Scoping the needs of all young people in out of county placements alongside relevant partners.</p> <p>Development of template to support decision making process in relation to the needs of young people in out of county placement</p> <p>Conduct review of all cases through JAP panel.</p> <p>Produce report identifying for whom and how needs may be met locally.</p> <p>Put forward and implement plan to</p>	<p>Emma Kilcommins (CBC)/ Ken Harvey (CBC)/ Sharon Simpson (CCG)</p> <p>Emma Kilcommins (CBC)/ Ken Harvey (CBC)/ Sharon Simpson (CCG)</p> <p>Members of JAP panel</p> <p>Emma Kilcommins (CBC)/ Ken Harvey (CBC)/ Sharon Simpson (CCG)</p> <p>Emma Kilcommins (CBC)/ Ken</p>	<p>By September 2014</p> <p>By September 2014</p> <p>November 2014 – March 2015</p> <p>May 2015</p>

<sup>11</sup> 20 miles is the statutory measurement of local placements to ensure children stay close to family/friends. Drawn from DFE (2010) *Securing Sufficient Accommodation for Looked After Children*. UK: DFE.

		meet needs of those (assessed as suitable) within county.	Harvey (CBC)/ Simpson (CCG)	Sharon	
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