

# Tower Hamlets Sufficiency Strategy 2023-2026

'Ensuring children in our care have access to sufficient, high quality accommodation they can call home'

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## 1. Executive Summary

Every child deserves the best start in life. As corporate parents, the Council is responsible for providing children in our care with the same level of care and support that any parent would provide to their own child. Children leaving care at age 18, may also need ongoing support into adulthood up to the age of 25.

In our role as Corporate Parents, we have a profound responsibility to ensure that our Children Looked After and Care Experienced Young People have a happy and secure childhood, and access to a safe, stable loving environment that enables them to grow into confident and successful young adults. We are dedicated to the vision of every child being healthy, safe, and successful,<sup>1</sup> championing their well-being and ensuring they have the opportunity to reach their full potential. Our placement sufficiency strategy will help us to ensure that children who are looked after have access to a quality, safe and stable environment that meets their needs.

Tower Hamlets is a unique borough characterised by diverse demographics and high levels of deprivation, which have implications for the complexity of need and availability of suitable placements for children coming into care. We recognise the importance of providing culturally sensitive placements that meet the cultural, religious, and language requirements of children coming into care in our borough. Additionally, our focus is on addressing the challenges posed by deprivation, ensuring comprehensive strategies that support families and address socio-economic issues.

The past two years have brought unprecedented challenges. The pandemic significantly affected our communities and the services we provide. The recruitment of foster carers has been particularly impacted during this period, resulting in lower numbers being recruited and a reliance on Independent Fostering Agencies (IFA). This is a national issue, not unique to Tower Hamlets.

Our commitment as a local authority is to work closely with partner agencies to support children in living within their families and communities whenever possible. When it is not feasible for children to live at home, we will strive to place them as close as possible to their homes and communities, except when there are specific reasons where this is not appropriate. Matching children's racial, cultural, and religious backgrounds in placements is a priority, ensuring high-quality placements through improved quality assurance mechanisms and collaboration with Integrated Commissioning. Given the challenges of ensuring sufficient placements within Tower Hamlets itself, our strategy focuses on securing placements both within the authority and neighbouring authorities to meet the practical implications effectively.

Our objective is to find the right placement at the right time for every child in our care, tailoring it to their specific needs. This three-year strategy outlines our commitment to developing the necessary resources and practice improvements to achieve our goals for Children Looked After and Care Experienced Young People.

<sup>&</sup>lt;sup>1</sup> Better Together <u>Supporting Families Division Shared Resources - Better Together Practice Handbook Final July 22.pdf</u> - All Documents (sharepoint.com)



## 2. Purpose of this strategy

Every child deserves access to a safe and stable home. As Corporate Parents, it is our duty to ensure that every child under our care receives the help, support and accommodation necessary to thrive. In accordance with the Sufficiency Duty 2 (Section 22G of the Children Act 19893) we are committed to doing our utmost to meet the needs of children looked after within the borough

Ensuring there are sufficient and suitable placements available to meet the needs of children under our care is our priority. This strategy will explore and aim to address the increasing demand for placements and the changing and complex needs of children requiring our care, it will seek to identify and understand the current and projected demand for placements. This involves analysing data and trends related to the numbers of children entering care, the reasons for their entry, and their specific needs. By gaining a comprehensive understanding of the demand, we can make informed decisions and allocate resources effectively to ensure an adequate supply of placements that meet our children's needs.

Our sufficiency strategy will also support us to improve the quality and suitability of placements. Considering factors such as the stability, safety, and well-being of children within placements, as well as the availability of placements that cater to the diverse needs of children with complex circumstances. The strategy also explores initiatives to recruit and train more foster carers, increase the availability of residential care options, and explore innovative placement models that better meet the needs of children.

Through this strategy we seek to promote positive outcomes for children in care. Ensuring that there are enough safe, suitable placements available, children can have the stability, support, and nurturing environment they need to thrive.

### 3. Background: The national and regional context

Nationally, a growing demand for placements, driven by factors such as increased awareness of child welfare issues and changes in family dynamics, has placed significant strain on existing resources. Insufficient placement capacity, particularly for certain age groups or children with specific needs, has led to placement shortages and compromised outcomes for some children. Additionally, concerns about placement stability and the quality of care provided have highlighted the need for targeted improvements. However, amidst these challenges, there are also promising developments, including innovative placement models and collaborative efforts between agencies and communities.

The Independent Review of Children's Social care published in May 2022 emphasises the need for a fundamental shift in the way we deliver care to children and young people. As a local authority, we have a crucial role in implementing these recommendations and prioritising the well-being, rights, and future success of children in care and care leavers. A key finding for the review is that the number of children entering care has been steadily increasing. This trend highlights the growing demand for suitable safe and stable placements.



<sup>&</sup>lt;sup>2</sup> Independent review of children's social care: final report - GOV.UK (www.gov.uk)

In response to the review, the government launched its 'Stable Homes, Built on Love: strategy and consultation'<sub>3</sub>. The strategy focuses on providing nurturing, stable and loving homes for children in care and care leavers it addresses the importance of stable and nurturing placements for children in care recognising that stable homes are crucial for children's well-being, development, and positive outcomes. It emphasises the need to provide children with secure and supportive environments that promote their emotional, educational, and physical needs.

To complement the review and consultation, Ofsted's new inspection framework places a greater emphasis on the experience and progress of care leavers, highlighting the need for services to provide tailored support to help care leavers achieve their full potential. Inspectors will evaluate how well care leavers are supported, including their access to education, employment, and housing.

The Pan London Care Leavers Compact provides a framework for developing consistency, breadth and quality in the support offered to London's Care Leavers. The Compact is an agreement between local authorities, housing providers, and other organisations to support care leavers in London. The Compact sets out commitments to help care leavers access education, employment, and training opportunities, and to provide them with appropriate housing and support.

The cost-of-living crisis places a financial strain on families and individuals, making it more challenging to meet basic needs and provide a stable home environment for children. Economic hardships, such as rising housing costs, unemployment, and poverty, can contribute to increased family stress, which may lead to a higher risk of neglect, abuse, and family breakdown. As a result, the numbers of children entering care may rise due to these challenging economic circumstances.

Additionally, the COVID-19 pandemic has introduced a range of unique challenges. Lockdowns, school closures, and disruptions to essential services placed additional stress on families, exacerbating pre-existing vulnerabilities. The pandemic's impact on mental health, increased domestic violence incidents, and limited access to support services at thetime can, in the longer term, contribute to an elevated risk for children's well-being and safety and consequently may contribute to an increase in the numbers of children coming into care.

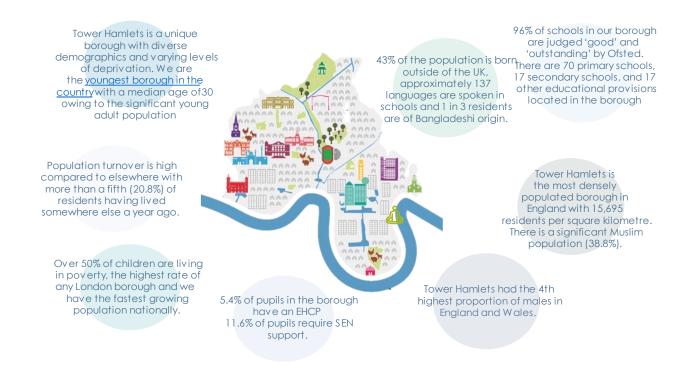
The availability of suitable placements can also be affected by these factors. The economic consequences of the cost-of-living crisis may strain resources allocated to support services, including the provision of placements. Budget cuts and financial constraints may limit the capacity to establish and maintain an adequate number of high-quality placements to meet the increasing demand. Similarly, the COVID-19 pandemic has disrupted various aspects of the placement system, including foster care availability, residential care capacity, and recruitment and training of carers. These disruptions can further limit the availability and stability of suitable placements for children entering care.

To be the best corporate parent to children in our care and those leaving our care we must re-examine, reimagine and reshape our services in line with the needs, views and experiences of our children in care and care leavers as well as national reviews, strategies

<sup>&</sup>lt;sup>3</sup> Children's social care: stable homes, built on love - GOV.UK (www.gov.uk)

and frameworks to ensure we provide the best support possible to our children that enables them to thrive and live their best lives.

## 4. Tower Hamlets: Our Borough



## 5. Our children – their views

Through our children living in care council (CLICC), young people have set out their priorities:

- Delivering 'Wrap around' services to make sure all services come together for the young person
- Ensuring young people experience smooth transitions from one place or situation to another
- Developing and improve relationships between staff and young people
- Reducing referral fatigue for young people when accessing new services and support
- Enhancing training and awareness for social workers on the range of services and support available for young people

We are dedicated to understanding and responding to the diverse needs of children in our care. Our commitment is to ensure placements that provide children with the support and nurture they need. Placements must align to each child's unique journey. Diligence in matching children with suitable environments involves thorough assessments, considering familial and community connections. Carers receive training to address behaviours and prevent placement instability. Our commitment to creative and sensitive solutions reflects our dedication to fostering stability, growth, and a nurturing environment for every child.

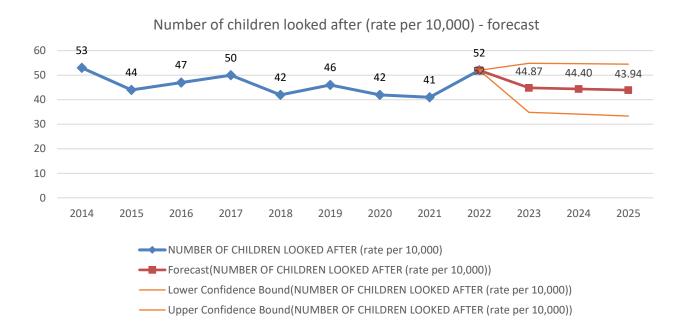


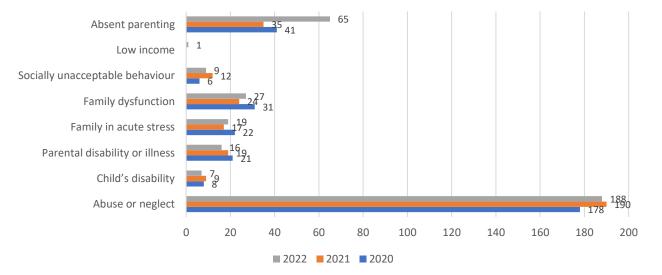
## 6. Needs Analysis: Our children looked after

At the end of March 2022 there were 332 children looked in Tower Hamlets. Historical data analysis over the last 9 years tells us that on average 310 children are looked after in the borough. The rate of children looked after per 10,000 of the population is 52 which has increased from the previous year but is still lower that regional and statistical neighbours.

At the same period there were 238 care leavers aged 19-21 which is also lower than regional and statistical neighbours.

Analysis of numbers of children requiring care indicates that although there are sporadic moments of increase, on the whole numbers are likely to decline. However, we must take into consideration contextual factors such as the cost-of-living crisis, aftermath of the pandemic, and the increasing complexity of need of children which could see figures rise significantly above projections.





#### Need - Reasons children come into our care



Addressing child abuse and neglect remains a key priority and we must ensure our placements provide the caring, warm, and loving environment these children need. A reduction in socially unacceptable behaviour is positive, however fluctuations in family stress, and dysfunction highlight the need for nuanced, targeted support programs. An increase in presenting need related to low income calls for initiatives addressing poverty. When children become looked after our placement sufficiency interventions are diverse, preventive, and holistic, tailored to specific child needs.

Numb	ber	Perce	Percentages	
Female	Male	Female	Male	
9	6	8.3%	3.2%	15
12	17	11.1%	8.9%	29
16	26	14.8%	13.7%	42
40	46	37.0%	24.2%	86
31	95	28.7%	50.0%	126
108	190	36.2%	63.8%	298
	Female 9 12 16 40 31	9         6           12         17           16         26           40         46           31         95	Female         Male         Female           9         6         8.3%           12         17         11.1%           16         26         14.8%           40         46         37.0%           31         95         28.7%	Female         Male         Female         Male           9         6         8.3%         3.2%           12         17         11.1%         8.9%           16         26         14.8%         13.7%           40         46         37.0%         24.2%           31         95         28.7%         50.0%

#### Children looked after by age and gender (31 December 2022)

Table 1

The majority of children in care in Tower Hamlets are aged 10 -17 years old and there is an overrepresentation of male children in care (63.8%) of these 50% are aged 16-17.

Older children sometimes present with more complex issues and foster carers many times prefer younger children. This aligns to regional trends and it is likely that the aftermath of the pandemic and cost of living crisis will see complex needs increase. An older cohort in general, but particularly male children can present, as 'harder to place' in a family-based environment. This can result in the need to identify bespoke placements at high cost to ensure the appropriate care and support.

We remain determined to create opportunities where siblings are able to stay together, to support each other and to thrive. We diligently search for suitable placements to keep siblings together, offering comprehensive support. This includes assistance with school runs for siblings attending different schools and therapeutic intervention through TFACT to aid foster carers in meeting the needs of siblings, preventing placement instability.

## 7. Ethnicity of our Children Looked After

This table gives a snapshot of the ethnic origin of children looked after. Around a third of all children looked after are of Bangladeshi origin.

The demography of the borough has a correlation to the lower-than-expected children looked after population in comparison to our regional and statistical neighbours. The reasons for this vary:



- Adultification children from Black, Asian and minoritised ethnic communities are perceived as being more 'streetwise', more 'grown up', less innocent and less vulnerable than other children<sup>4</sup>
- Honour, reputation and stigma cultural beliefs, family honour, and maintaining a
  positive image can create barriers to acknowledging and seeking help for issues within
  the family. The fear of shame or stigma to the family can discourage individuals from
  disclosing or addressing situations that may require intervention. There may be a
  reluctance to involve external agencies with a preference to manage difficulties within
  the community.
- Different perceptions about abuse: Some communities may have different perceptions
  of what constitutes child abuse. Children may not realise they are being abused, for
  example if they are growing up in a culture that routinely uses physical punishment. Or
  they may feel that there is no point in speaking out because the adults around them are
  unlikely to stop the abuse.

Ethnicity: Children looked after	Mar-22	Dec-22	Mar-22	Dec-22	% of U18 Population
Bangladeshi	93	75	28%	25%	57%
White - British	41	37	12%	12%	15%
Any Other Asian Background	38	35	11%	12%	2%
African	31	25	9%	8%	5%
Any Other Ethnic Group	25	19	8%	6%	2%
White & Black Caribbean	22	19	7%	6%	2%
Any Other Mixed Background	21	24	6%	8%	2%
Any Other White Background	13	12	4%	4%	4%
White & Black African	13	15	4%	5%	1%
Caribbean	11	9	3%	3%	2%
White & Asian	9	13	3%	4%	2%
Any Other Black Background	7	7	2%	2%	3%
Chinese	3	1	1%	0%	1%
Information Not Yet Obtained	2	3	1%	1%	0%
White - Irish	3	1	1%	0%	0%
Gypsy/Roma	0	3		1%	0%

Table 2



<sup>&</sup>lt;sup>4</sup> (Davis 2022; Davis and Marsh, 2020; Georgetown Law Center on Poverty and Inequality, 2019).

## 8. Complexity of need

#### Children in Custody:

We have very low numbers of children in custodial settings<sup>5</sup>. Children in custodial settings receive thorough support through close collaboration between social workers and relevant professionals. Our approach emphasises high-quality assessment, planning, and continuous review of their outcomes. When children are remanded into custody, the Youth Justice Service (YJS) promptly organises multi-agency meetings to explore alternative community options for the court's consideration. Meticulous preparation for their return to the community involves collaboration with the YJS and other partners, guided by specific Custody and Resettlement guidance.

#### Children with a Disability:

## Range of complex and medical needs by children looked after or in receipt of leaving care support December 2022

Disability	Number
ADHD	2
Autism	3
Visual Impairment	1
Squint	1
Dietary Disorder, Eczema, Global Developmental Delay, Hearing Impairment, Speech and Language Difficulties, Squint	3
Cardiac	1
Autistic Spectrum Disorder	1
Deafness	2
Visually Impaired Blind	1
Learning Disability	1
Total	16

Table 3

#### Range of medical/disability of children looked after by age group

Condition/Disability Type	1 - 4	5 -9	10 - 15	16-17	Grand Total
ADHD			1	1	2
Autism			2	1	3
Visual Impairment				1	1
Squint			1		1
Dietary Disorder, Eczema, Global Developmental Delay, Hearing Impairment, Speech and Language Difficulties, Squint			2	1	3
Cardiac		1			1
Autistic Spectrum Disorder				1	1
Deafness		1		1	2

<sup>&</sup>lt;sup>5</sup> At the end of March 2023 there were 2 children in custodial settings.



Visually Impaired Blind				1	1
Learning Disability			1		1
Total	0	2	7	7	16

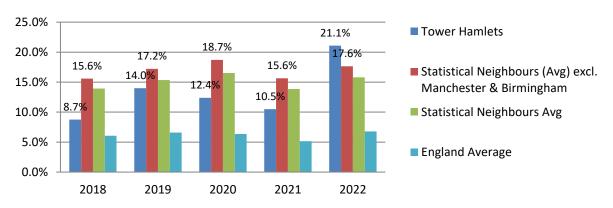
The diverse range of conditions and complexity highlights the necessity for high-level, tailored placements that prioritise inclusivity and specialised support services. Ensuring accessibility and trained caregivers sensitive to diverse needs will be key to creating a nurturing environment for this group.

#### UASC 2018-22

The numbers of Unaccompanied Asylum Seeking children have risen as a proportion of the Children Looked After population, most markedly between 2021 and 2022, this is higher than regional and national averages.

Up to May 2022, the local authority worked to a higher threshold of 0.08% of its child population rather than 0.07% as agreed by some boroughs as part of the pan-London rota scheme in order to support other boroughs with significantly higher UASC numbers. At present, the dispersal system is working well but there was a 'spike' in the number of these requests and dispersal numbers last year, following the placement of a large number of adult asylum seekers in a hotel in the borough, some of which were children.

Between September 2020 and November 2022, a total of 84 such referrals were received via the hotels. A number of these young adults subsequently claimed to be under 18, and prior to and/or following age assessments were accepted as children. With this spike in numbers and in addition to resource demands around age assessments and appropriate placements, there were also additional associated demands such as staffing and financial pressures, as well as around ensuring access to appropriate emotional and mental health and wellbeing services for this cohort.



#### Unaccompanied Asylum Seeking Children Rates as at 31 March

We have good links with private providers to source placements (via CPT) for young people aged 16 and 17 who are seeking asylum, for children under 16 who are seeking asylum or for children with special needs we would seek to provide a placement in foster care. As of 31 December 2022, we had two children seeking asylum under the age of 16 (both placed in foster care).



The number of unaccompanied minors entering the borough and requiring placements is difficult to forecast. However, we can assume that this is likely to increase and will make up a substantial proportion of the children in care in our area over time.

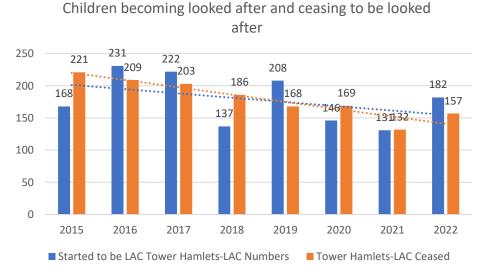
We have 155 former young people who had sought asylum and are being supported by our Through Care Service.

The Nationality and Borders Act (2022) will make proposals about the process of age assessment nationally. The Home Office have written to local authorities setting out their intention to cease the use of hotels as temporary accommodation and this may relieve the immediate pressure if successful.

Unaccompanied children have a range of additional potential needs, despite holding a lot of strengths and potential. It is important that the providers offering them accommodation are skilled and prepared to meet these needs and understand the support that they need, particularly the impact of trauma, emotional and mental health and wellbeing, and integration into UK society.

## 9. Throughput: Children becoming looked after and ceasing to be looked after

The pandemic has clearly impacted on numbers of children entering care when accessibility to services has been restricted. The trend line indicates that both children becoming looked after and ceasing to be looked after are declining, However, given the national context of the cost of living crisis and aftermath of the pandemic it is likely that numbers will increase. Older children aged 16-17 account for the majority of new entrants this is likely to be significantly impacted by the increasing number of unaccompanied children seeking asylum.



Children leave our care when it is safe and appropriate for them to do so. The main reasons young people ceased to be looked after during 2022 are they:

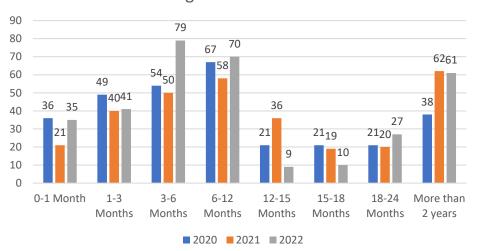
• Returned home 43.9%,



- Entered supported accommodation independent accommodation at 39.5% (reduction from 51.1% in 2021), because they reached 18 and their period of care ended
- Were adopted 8.9% (a slight increase from 6.1% in 2021),
- Were placed under a SGO (decreased from 8.4% to 2.5%.)

## 10. Time children are in care

The duration of a child's stay in care is important to consider as part of placement sufficiency. Timely and thoughtful placements are crucial to minimise the potential negative effects of extended stays. Balancing the urgency for timely placements with quality support is fundamental for promoting positive outcomes in a child's development and future.



Length of time in care

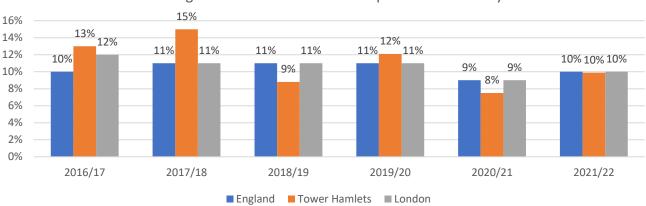
Most children typically experience stays in care lasting up to six months, with a significant number also encountering periods of up to one year. To accommodate children with short-term needs in care and those requiring out of hours placement, we have established relationships with independent fostering agencies to complement our use of in-house foster families. We are working on streamlining administrative processes and improving communication among agencies to enhance the efficiency of short-term placements.

#### 11. Stability of placements

Placement stability is an important indicator. It tells us if the quality and suitability of placements meet the needs of our children so that they can thrive. It tells us if they are happy and content.

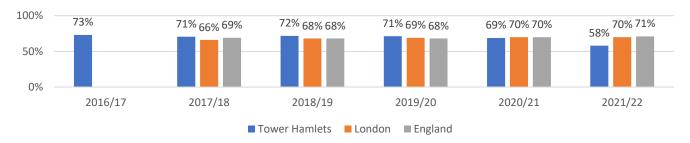
Placement moves are disruptive for our children and we need to do more to ensure we get this right first time. Three or more placement moves affects a small proportion of our overall cohort of children in care, and whilst we remain in line with regional and national averages, we must be ambitious in our efforts to minimise changes and disruption for our children.





Percentage of CLA with three or more placements in the year

Living in the same placement for at least 2 years, or are placed for adoption and their adoption and their adoptive placement together with their previous placement, last for at least 2 years



Overall, long-term stability is lower in 2022 than in previous years. Based on the data available we can assume that the remainder of children (32%) are in a stable placement and have not reached the threshold for long term stability or 3 or more placement moves in 1 year. Placement stability will require careful monitoring and review, as well as concerted and collaborative efforts across services.

Placement stability initiatives:

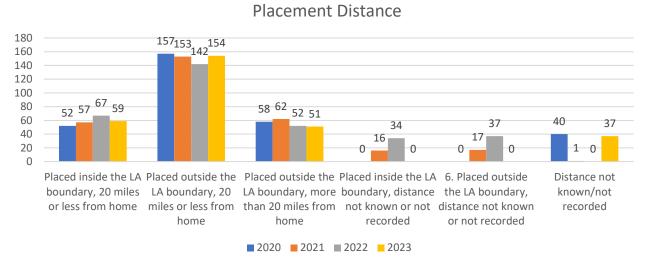
- Monthly placement stability and meetings collaboration and coproduction with Child looked after social work teams, and fostering development teams to respond to placement instability.
- Bi-monthly stability discussions with CISC team lead, targeting both short and longterm stability, especially for children with multiple moves
- Proactive support for foster carers and networks during high-risk breakdowns, with weekly team meetings for continuous action plan updates
- TFACT: Clinical psychology-led service offering therapeutic support for foster carers, Special Guardians, and social workers to enhance child well-being and prevent breakdowns
- Foundations for Attachment Parenting Group: A six-session program addressing attachment difficulties, trauma, and loss for foster carers
- Half-day training workshops throughout the year, covering topics informed by Attachment Theory and Dyadic Developmental Psychotherapy



#### Placement in borough vs out

In an inner-city London Borough with high population density and frequent changes, local placements for children are becoming challenging. However, placements for children in our care within the Local Authority boundary, within a 20-mile radius from home, show a consistent increase, reaching 67 in 2022. This suggests a strategic effort to keep children close to their familiar surroundings despite the overall placement challenges.

Placements outside the LA boundary, yet within a 20-mile radius from home has fluctuated. Placements beyond local borders are carefully considered and are a necessity for some children. We ensure that opportunities to stay connected to local networks are available, coordinated by our lifelong links service.



#### Outcomes and impact of children in their placements

The Virtual School works strategically to maintain the stability of schooling for children looked after and through their placement. The school takes a research-based approach focusing on continuity for KS4 students and critical transitions. Example KS2 to 4.

Placement stability is supported by quality schooling that meets the individual needs of the child. A particular focus is assessing and addressing any unmet SEND needs on entry to care. This approach promotes good attendance, engagement with learning and positive learning experience.

Attendance at school is due to this rising - post pandemic from 90.9% in 2021-22 and 93.2% in the first term of 2022-23. Suspension of students has been reduced by 50% year on year reducing pressure on placements. Not on roll is routinely less than 3-4% of the cohort with the majority of children new to care awaiting a fast school place, again supporting placement.

92.5% of our children attend OFSTED Good or Better Schools. 39.4% of these schools are outstanding which is over twice the national average for Children in Care. Good schools support our carers improving stability. Every Child has a PEP child and carer focused meeting building a team around the child. 84% of these plans were RAG rated Green and 0 were rated Red as a cause for concern (Autumn Term 2023).



The Tower Hamlets CAMHS in Social Care Team (TH CiSC) provides a dedicated mental health service to children with a social care plan (child in need, child protection and children looked after) referred by their allocated social worker in Tower Hamlets.

TH CiSC is both part of wider CAMHS in Tower Hamlets run by ELFT and integrated into Social Care systems in Children's Social Care in-order to overcome organisational boundaries and thresholds to providing a service to vulnerable children supported by a care plan.

CiSC are open to referrals from the social worker of children cared for by the local authority at any time but also offer an Emotional Wellbeing Screen for all children and young people coming into care to get a sense of their needs and advise or provide a service accordingly. In 2021/22 83 new referrals for children (or sibling groups) on a LAC plan were made to the team. A further 122 Emotional Wellbeing Screens for care experienced children and young people were offered and 101 were taken up.

#### 12. Placement types and numbers

Children are cared for in a variety of settings; foster care, children's homes, residential special schools, and a small number are in hospital settings. Only a few children in our care are placed in secure settings when it is necessary to do so.

Number	Tower Hamlets 2021	Tower Hamlets 2022	Tower Hamlets December 2022	Inner London 2022	England 2022
Foster placements (in-house)	109	116	114	2050	57540
Foster carers (IFA)	85	72	77	2950	57540
Placed for adoption	14	9	3	60	2140
Placement with parents	19	27	17	140	5610
Other placement in the community	0	0	0	10	2030
Secure units (2 and 1), children's homes & semi-independent living	64	103	76	930	13010
Other residential settings	11	12	14	100	1020
Residential schools	0	0	1	0	110
Other placement	0	0	0	0	710
Total	302	339	302	4190	82170

Placement types for the children we care for

#### Foster care

At 31 December 2022, 63% of children in our care were placed with foster carers. This is below the national figure of 71%.

The average proportion of foster placements sourced through IFAs has risen in the past year. There has been a consistent collaborative effort by the Children's Placement Team and The Fostering Development Team to increase the use of Local Authority carers.



The total number of children placed with in house foster carers dipped slightly between 2020/21 (116) and 2021/22 (113). The total number of children placed with in house foster carers saw a slight increase over the same period from 109 to 116, the trend to date suggests an increase for 2022/23.

Placement commissioning as an inner London Borough is challenging. As one of 32 boroughs in the capital recruiting foster carers and placing children with independent fostering agencies presents complex challenges to sufficiency, particularly for our children in Tower Hamlets.

#### Supported accommodation

Numbers of young people placed within independent living arrangements are higher than might be expected because of the numbers of Unaccompanied Asylum-Seeking Children, who are predominantly placed in this type of provision.

Supported accommodation provides structured support, life skills development, and a sense of community. However, its effectiveness hinges on individual needs, support service quality, placement stability, flexibility, and alignment with the goal of independent living. Careful assessment is crucial to determine appropriateness. We know with rising numbers of unaccompanied minors and older children coming entering care we need to consider how we bolster provision in this area.

#### Adoption

Adoption is often considered a 'last resort,' given the permanent severance of ties with a child's birth family. Once reunification or kinship care is ruled out, adoption is the next desirable outcome for children under 10, and early permanence is emphasised for those under 3. Mainstream foster care becomes the primary permanence option for older children or those for whom adoption is not feasible. The numbers of children leaving care through adoption has been reducing in recent years. Overall, the Regional Adoption Agency is intended to increase the use of adoption and timeliness for those children for whom it is most appropriate.

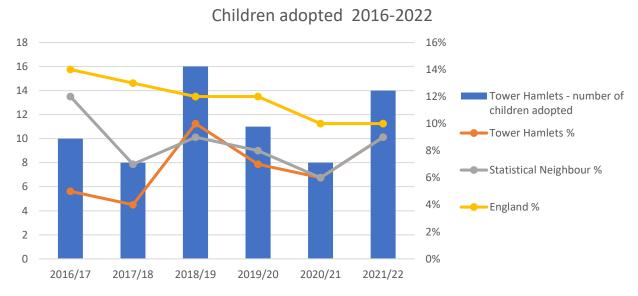
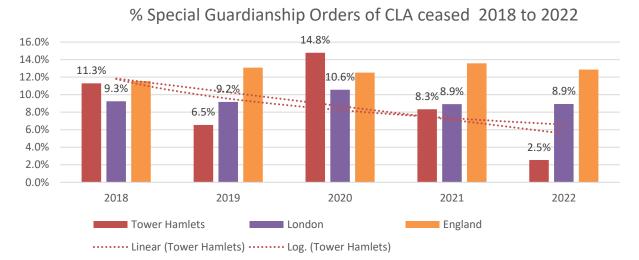


Table 4

#### Special Guardianship figures (SGO) 2018 -22

Special Guardianship Orders represent an important route out of the care system. Special Guardianship rates increased in 2019 and 2020, during which time the rates were comparable to England and above the rates for London. Subsequent years show a dip in rates of Special Guardianship Orders in Tower Hamlets with a relatively significant reduction in the last year.

SGO placements are typically with Family and Friends who have a pre-existing relationship with the child. The rates for unrelated foster carers (who hold a pre-existing relationship) applying for Special Guardianship Orders is below the national figure. This links to the need to increase the number of foster carers as addressed within the 2022 -2025 Fostering Recruitment Strategy and improvements that result in earlier identification of family members, through Family Group Conferencing and as well as an increased focus on working with family members who might become the child's Special Guardianship before care proceedings commence.



#### Figure 1

To address this we are working closer with our colleagues in the Family Group conferencing and lifelong links service and have ensured that a member of our Permanency Assessment and Support Team (PAST) is in attendance at every FGC to ensure we maintain a link and relationship with the extended family members of the child.

#### External placements - residential and childrens homes

Our Children's Placement Team (CPT) practice is to source a range of placement options for our children looked after (CLA), this may be either foster care, supported accommodation or residential children homes, which have been graded Good to Outstanding by Ofsted. If a children's home is downgraded while our CLA is placed there, then the risk will be assessed and managed in partnership with the allocated social worker, CPT, independent reviewing officer, integrated commissioning team and any other professional or family member that form the community around the child. The Head of Service and Director of Supporting Families will be notified of any children's homes which require improvement or are deemed inadequate.

CPT has a robust system regarding the sourcing of external placements. All external placements have appropriate contracts and relevant documentation (i.e insurance) in place



and all arrangements are reviewed and monitored, this includes an increasing schedule of site visits.

## **13. Care Experienced Young People**

The type of accommodation that Care Experienced Young People occupy when they become 18 is supported accommodation. This emphasises the potential opportunities through the introduction of the Tower Hamlets YP Supported Living Pathway to improve the quality and consistency of care that these young people receive.

The numbers exiting care through Staying Put are lower than should be aimed for. The aim should be for the numbers of young people benefitting from this ongoing stability to rise in coming years.

This confirms earlier signs that the rate of children entering care at later ages is high, although there are some signs that this trend may be changing in the last year. Unaccompanied Asylum Seekers will have some growing impact on this figure. The Edge of Care services that have been developed will continue to be vital in supporting older children to remain at home safely with their families.

The age distribution is likely to grow older following the changes in legislation regarding the provision of support to Care Experienced Young People to age 25, which will also grow the overall population of young people entitled to support.

As can be seen, the number of male Care Experienced Young People is twice that of females, which is markedly different to the overall CLA population. The reasons for this are not clear but may indicate that girls leave the care system prior to becoming 18 through other routes more than boys.

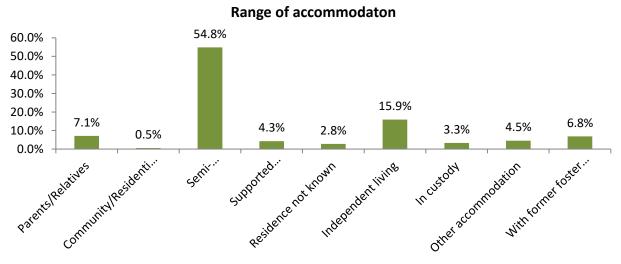


Figure 2



Numbers	Percentage Share



Age	Female	Male	Total	Female	Male	Total
17	2	4	6	0.5%	1.0%	1.5%
18	25	70	95	6.3%	17.7%	24.0%
19	28	34	62	7.1%	8.6%	15.7%
20	22	42	64	5.6%	10.6%	16.2%
21	22	37	59	5.6%	9.3%	14.9%
22	13	34	47	3.3%	8.6%	11.9%
23	10	19	29	2.5%	4.8%	7.3%
24	10	18	28	2.5%	4.5%	7.1%
25	0	5	5	0.0%	1.3%	1.3%
26	0	1	1	0.0%	0.3%	0.3%
Total	132	264	396	33.3%	66.7%	-

Table 5

## 14. Our achievements and progress towards placement sufficiency

• Tower Hamels was one of the originating boroughs for the pilot scheme introducing the Mockingbird family model in Britain, and for us it has been hugely successful. We currently have two constellations that are receiving invaluable additional support, respite and training. The Mockingbird hubs benefit from the establishment of the strong bonds and a sense of extended family to those carers and children who are part of it. We plan to launch a third constellation by 31/03/2023 and continue to increase the number of constellations. We remain committed to offering all our carers the option of being part of a constellation in the future.

Every local authority should look towards robustly evaluated evidence led models, such as the Mockingbird Family Model (MFM), when designing the support, they provide. The strength of Mockingbird is that it is based on the notion that it takes a village, rather than a service, to raise a child. '<sup>[1]</sup>

- in partnership with CAMHS in social care the Fostering Service has benefitted from the recruitment of one part-time Principle Clinical Psychologist and another full time Clinical Psychologist who are embedded within the Fostering service and provide training, consultation and support directly to our in-house foster carers in their complex task of caring for children we care for who have been impacted by complex and developmental trauma.
- We have established a Therapeutic Fostering and Care Team (TFACT), led by Clinical Psychologists as part of our plan to upskill our carers so that they can take a therapeutic approach to care and support. TFACT aims to improve the experience and outcomes for children in care via training, support and consultation with foster carers and their

<sup>&</sup>lt;sup>[1]</sup> <u>The-independent-review-of-childrens-social-care-Final-report.pdf (childrenssocialcare.independent-review.uk)</u>



supervising and assessing social workers. This includes a comprehensive programme of training to both foster carers and social workers. As well as standalone sessions on Attachment, Trauma and the Brain, Therapeutic parenting and positive behaviour strategies, managing challenging behaviour and Harmful Sexual Behaviour,

 The service is a member of New Family Social, a UK charity led by LGBTQ+ adopters and foster carers who offer extensive support and training to people considering caring for children as well as to staff involved in the recruitment and support of LGBTQ+ families.

## **15.** Placement commissioning approach and ambitions

Tower Hamlets is currently re-commissioning the Supported Living Pathway for the provision of supported housing. There has been consultation with young people in the development of this Pathway.

This will include provision for supported living independent accommodation for 16- and 17year-old Children Looked After as well as supported housing provision for those aged 18 and over.

The Council is a member of London Care Placements, which offers both local authorities and providers consistency in the costs of placements. The service also offers quality assurance of those providers. This service is due to come to end at the end of the financial year, consideration is being given to joining the Childrens Cross Regional Arrangements Group (CCRAG), which is a partnership of local authorities working together to support the sourcing, contracting monitoring and annual fee negotiations for children's placements and to improve the outcomes for all children and young people. CCRAG currently has 36 LA partners and will be launching a digital quality assurance tool.

A recent internal audit has made several recommendations to improve the procurement, oversight, and quality assurance of our commissioned placements. This includes how we ensure that there are adequate contractual arrangements in place. The revised Supported Living Pathway will ensure such arrangements are in place for semi-independent providers

A key strategic development has been partnering with 7 other local authorities in the Northeast of London in a formal partnership, the Northeast London Commissioning Partnership (NECLP). The initial programme of work has been supported by the DfE through the Innovation Fund and commenced in 2017.

The partnership entered a contract with a residential provider to establish 35 beds within the NEL area. There have been delays in establishing this number of beds and there are currently 24 beds established. All children who have been assessed as requiring residential care, and for whom the plan is that they should stay in London are referred to the NELCP. The Partnership will continue to work with the provider to ensure that they have the skilled staff and services available to support a wider range of young people.

At a London wide level, work is taking place to commission provision for secure placements (Secure Children's Home), including a step-down provision. The use of Secure Accommodation is relatively rare. However, where it is needed, it is difficult to access, and children are often placed at a very long distance from London and at high cost.



## 16. Our placement sufficiency priorities and values

Based on our needs analysis and in consultation with children with lived experience we have identified the following priorities and values to ensure quality, stable, loving and safe placements for children that come into our care over the next three years.

Child-Centred Approach:	Our priority is to place the well-being and best interests of each child at the centre of our strategy. We will ensure that all decisions and actions are driven by the needs, safety, and long-term outcomes of the children in our care with their voices about their placement options at the heart.
	We are committed to providing high-quality placements that offer stability,
Quality and Stability:	security, and nurturing environments for children. We will strive to minimize disruptions and transitions by getting placements right first time – ensuring we provide the right training and support to enable healthy development and positive relationships.
Promote safe, stable, loving family environments:	Strengthening our in-house fostering service offer through stronger recruitment retention and training, support the uptake of SGO's as well as keeping siblings together
Collaboration and Partnership:	Building strong partnerships with our children, foster carers, kinship carers, residential providers, and other stakeholders is crucial. We will work collaboratively to enhance communication, support, and training for carers, ensuring a shared commitment to the well-being of children.
	We value the diversity of our community and recognise the importance of culturally sensitive placements. We will prioritise matching children with placements that respect and celebrate their racial, cultural, and religious backgrounds, promoting a sense of belonging and identity.
Supporting Transition	We recognise the importance of preparing children for independence and



## 17. Our plan

Priority	Action	Outcomes	Measures
Child-Centred Approach	<ul> <li>Ensure that every decision and action is centred around the well-being, safety, and long-term outcomes of each child.</li> <li>Establish mechanisms to actively seek and incorporate the voices of children regarding their placement options.</li> </ul>	<ul> <li>Increased satisfaction and well-being of children in placements</li> <li>Active participation of children in decisions about their care</li> </ul>	<ul> <li>Gather feedback from children about their placements.</li> <li>Track and document instances of children's input in placement decisions</li> </ul>
Quality and Stability	<ul> <li>Commit to providing high- quality placements that prioritise stability, security, and nurturing environments for children.</li> <li>Implement measures to minimise disruptions and transitions by focusing on getting placements right the first time.</li> <li>Provide comprehensive training and support to caregivers to enable healthy development and positive relationships.</li> </ul>	<ul> <li>Reduced placement disruptions and transitions</li> <li>Improved skills and capacity amongst carers</li> <li>Enhanced child development outcomes</li> </ul>	<ul> <li>Monitor and report placement stability rates.</li> <li>Carers completing training</li> </ul>
Promote safe, stable, loving families	<ul> <li>Strengthen the in-house fostering service through improved recruitment, retention, and training.</li> <li>Support the uptake of Special Guardianship Orders (SGOs) and actively work towards keeping siblings together in placements.</li> </ul>	<ul> <li>Increased number of successful in-house placements.</li> <li>Higher retention rates of carers</li> <li>Increased number of SGOs and sibling co-placements</li> </ul>	<ul> <li>Track and report inhouse placement success rates.</li> <li>Monitor caregiver retention rates.</li> <li>Increase SGOs</li> <li>More sibling coplacements</li> </ul>
Collaboration and Partnership	<ul> <li>Build strong partnerships with children, foster carers, kinship carers, residential providers, and other stakeholders.</li> <li>Collaboratively enhance communication, support, and training for carers, fostering a shared commitment to the overall well-being of children.</li> </ul>	<ul> <li>Improved communication and support networks.</li> <li>Enhanced collaboration with stakeholders</li> <li>Increased overall satisfaction among stakeholders</li> </ul>	<ul> <li>Conduct regular surveys on communication and support.</li> <li>Monitor frequency and quality of collaboration with stakeholders</li> </ul>



Priority	Action	Outcomes	Measures
Diversity and Cultural Sensitivity	<ul> <li>Value and prioritise the diversity of the community.</li> <li>Emphasise culturally sensitive placements by matching children with caregivers who respect and celebrate their racial, cultural, and religious backgrounds.</li> <li>Promote a sense of belonging and identity for children in their placements.</li> </ul>	<ul> <li>Increased cultural competence in placements</li> <li>Enhanced sense of belonging and identity for children</li> </ul>	<ul> <li>Assess and report on cultural competence in placements</li> <li>Conduct surveys to measure children's sense of belonging and identity</li> </ul>
Supporting Transition and Independence	<ul> <li>Recognise the importance of preparing children for independence and successful transitions into adulthood.</li> <li>Develop a strategy focused on providing appropriate support, life skills training, and educational opportunities.</li> <li>Empower children to thrive beyond their time in care by equipping them with the tools and resources necessary for a successful transition to independence.</li> </ul>	<ul> <li>Successful transitions to independence for children</li> <li>Improved life skills and educational attainment for children</li> </ul>	<ul> <li>Monitor and report on successful transitions</li> <li>Assess and document the acquisition of life skills and educational progress</li> </ul>

