Looked After Children

Sufficiency Statement

2016-19



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# Executive Summary and Introduction

* 1. The Corporate Parenting Strategy (2015-18) sets out our vision for every child or young person who is looked after to achieve their full potential and have the best life chances.
  2. To ensure our vision for Looked after Children is achieved we have set five strategic priorities:

• **Priority 1**: Ensure all children and young people are safeguarded in their placements and communities

• **Priority 2**: Improve the timeliness of care proceedings, placement stability and choice in order to achieve permanence for children

• **Priority 3**: Support good health outcomes for Looked after Children

• **Priority 4**: Improve educational outcomes for Looked after Children

• **Priority 5**: Encourage participation and positive activities

* 1. This will mean something different for every child and young person and we are committed to making sure that children and young people are looked after only when they need to be. If they are in our care then we are committed to making sure they are looked after in the right setting with the right support.
  2. Part of our commitment to improve the lives of our children and young people will involve targeting the root causes of why children become looked after as part of our wider early help, intervention and prevention agenda. This will mean that when necessary we will take earlier, preventive action to support children and families so that fewer children become looked after.
  3. The sufficiency statement has been developed to support the delivery of the Corporate Parenting Strategy and focuses on assessing the demand and supply of placements for children who are looked after and care leavers.
  4. It is critical that the delivery of improved outcomes for children and young people who are looked after and care leavers takes place through a single plan. The Havering Children’s Service Improvement Plan states that strategic commissioning decisions are based on good intelligence. Delivery of this includes the Sufficiency Statement that will focus on:
* Sufficient accommodation in terms of numbers of individual placements provided;
* Securing a wide and varied range of accommodation through a number of providers;
* Having accommodation that meets the needs of children who are looked after.
* Ensuring a range of accommodation that includes the needs of children with special educational needs and disability (SEND)
  1. This statement analyses Havering’s current position in relation to meeting its sufficiency responsibilities through reviewing the following areas:
* Early Help Services
* The range and number of placement providers
* Children’s social care work force and implementation plans.
* Ensuring the Local Offer for children with SEND is up to date and is responsive to need.
  1. The Sufficiency Statement looks at the demand and supply across these services, analysis gaps and challenges and recommends actions and activities that will be reported through the Children’s Services Improvement Board. The Statement and supporting actions and activities are not an end in itself; it provides an agreed direction of travel and a common commitment to action
  2. The monitoring of actions set out in the Service Improvement plan will demonstrate whether the statement is working. Monitoring will be carried out on a monthly basis at the Children’s services improvement Board and the following report written:
* Six monthly reports to the Corporate Parenting Board.
  1. Through working towards the recommended actions Havering will be better placed to provide sufficient accommodation for its children looked after now and in the future.
  2. A ‘Sufficiency’ duty is made of Local Authorities under the Children’s Act 1989 (Section 22G). The Sufficiency Duty requires Local Authorities to improve outcomes for Looked After Children by requiring Local Authorities to take steps that secure sufficient accommodation to meet the needs of children in their care, and where reasonable, within the authority’s area. The accommodation should meet the needs of children that the Local Authority are looking after and whose circumstances are such that it would be consistent with their welfare for them to be provided with accommodation that is in the Local Authority’s area.
  3. **Havering:** On 31March 2016 there were 229 children being looked after by Havering Council. This was a decrease of 5% on the previous year but still remains higher than previous years. (see appendix A Performance Reporting for 2015-16).
  4. Demand for placements in Havering has substantially increased and provision provided by the Council has struggled to keep pace with this change, particularly in the tough economic climate.
  5. Consequently more children have been placed with independent providers, often outside Havering. This has increased the challenges around securing the most appropriate placements for children, particularly in an emergency.
  6. In relation to sufficiency responsibilities Havering faces the following key challenges as identified in the Corporate Parenting Strategy (2015-2018):
* We will continue to undertake work to understand our Looked after Children; this work will inform our commissioning activity to find suitable and sufficient placements.
* We will reduce the use of independent fostering agencies
* We will reduce the out of Borough placements which are further than 20 miles
* We will increase the number of in house foster carers for targeted groups (targets to be based on age specific projections)
* We will increase our focus on the rehabilitation of children and support to individual families.
* We will continue to work closely with the North East London Adoption Group to ensure we are pooling resources and consequently securing best matches. This will include direct participation with the development of the Pan London plan for the Regional Adoption Agency.
* We will work to ensure all assessments are initiated within one week; pre- empting challenges and thus supports the timeliness of court proceedings.
* We will shift our focus to Pre-Proceedings by developing clear processes which ensure that as much activity as possible is front loaded. This includes robust care planning, the coordination of viability assessments, expert assessments and parenting assessments.
* We will continue to review cases which go over 26 weeks to ensure that lessons are learnt and practice improved
  1. **The voice of the child:**  Havering has a newly established Children in Care Council and the action plan and recommendations will be shared with the group for comment. We have Viewpoint, an online questionnaire that is used to capture the voice of Looked After Children and children on Child Protection Plans. Data from this is considered at the Children’s Services Improvement Board to inform service planning and safeguarding. We are enhancing our ability to capture the voice of the child through a new web based application called MOMO (Mind of My Own) that helps young people to express their views more clearly and get more involved in meetings and reviews. We will develop and adapt MOMO to ensure the disabled children and young people including those who are non-verbal communicators can have their voice heard more clearly. The web based app will accessible from young people phones and computers. Going forward this application will be an integral part of care planning for Looked After Children and Children with a Child Protection Plan.
  2. Child centered assessments identify the needs of children and young people and the outcomes to be met. We are enhancing our ability to capture and record progress against outcomes by introducing “Outcome Star”. This will initially be trialed in our Early Year’s team prior to a wider role out.
  3. **Data Sources**

We have produced our Sufficiency Statement using a range of sources:

* Havering’s Corporate Plan
* This is Havering 2015
* Joint Strategic Needs Assessment 2014
* Children’s Services service Plan 2015/16
* Children’s Service Improvement Plan 2015/16
* Corporate Parenting Strategy 2015-2018
* Children’s Service Performance Data 15/16
* A Strategy for Children and Young People with Special educational Needs and Disabilities

2015 -20

* Draft Transition Protocol from child to adulthood 2015-18

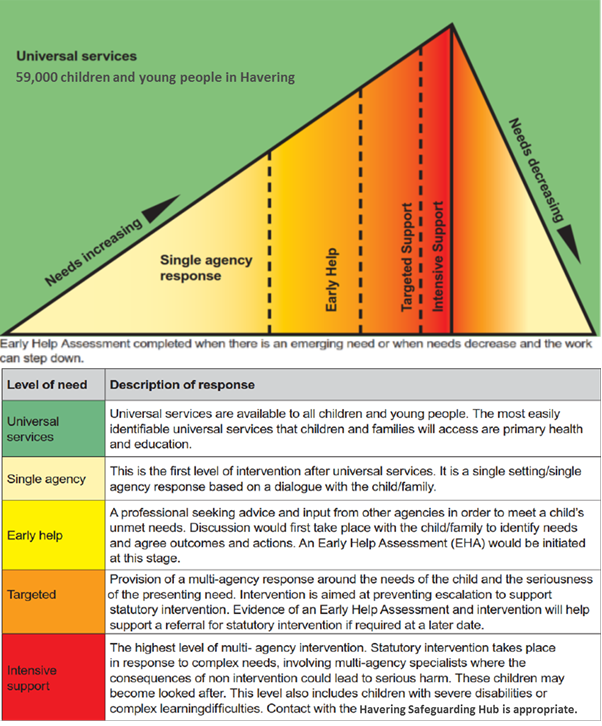
Quantitative and qualitative information has been used to inform the analysis. The majority of the quantitative data has been obtained from CCM reports provided by Havering Council’s Performance team. Other internal recording systems have also been used. There are some areas that are not recorded on CCM (such as information on additional needs of children looked after, and more detailed reasons for entering care) that would be useful to have aggregated data available on to allow for further analysis and future planning. Such areas are being identified.

**Key priorities:** To deliver on The Children’s Services Improvement Plan 2015 priorities set out in 1.5 above, the Sufficiency Statement sets out the need to:

* Develop Edge of Care services so that only the right children are placed in care
* Improve the timeliness of initial health assessments
* Ensure the voice of the child is heard and positively influences the development and quality of services;
  + continue to increase our numbers of in house foster carers
  + Reduce our use of residential care by developing in house specialist foster carers
  + Commission a framework for family/parenting assessments
  + Ensure that there is sufficient range of accommodation in or near Havering to meet the demand and needs of children looked after;
  + Ensure that children and young people are in placements and accommodation that best meet their needs
  + Develop the market so that placements can be secured through a range of providers;
  + Commission a framework for residential and semi-independent provision
* Commission a service for young carers
* Embed Early Help services;
* Review and develop Havering’s contact provision and maximise our internal resources
* Ensure that quality assessments and care planning identifies and meets the needs of children looked after;
* Review and develop our assessments of special guardianships and maximise our internal resources
* Establish and develop a model for Havering residential care provision;
* Put clear Pathways Plans in place when a child is 15½ including their accommodation and support plans to inform commissioning;
* Develop the market for a range of suitable accommodation options for care leavers, including increasing the number of young people in staying put arrangements.
* Embed Short Breaks services to increase support to disabled children, young people and their families and reduce likelihood of parental request for accommodation and becoming LAC.
* Develop a higher level of integration with Adult’s services through Children and Adults with Disability service becoming a 0-25 service, to inform future planning and service need

# Early Help Services

* 1. **Children in Need:** As of 31 March 2016 the number of CiN Plans has increased to 267, with a yearly average of 193. The increasing number of CIN plans is unprecedented and we have seen some of the highest numbers since before April 2013 when this style of reporting began
  2. There has been an increase in the number of CiN Plans with N1a - domestic violence as the main category of abuse with an increase from 7 (6%) in April 2016 to 36 in March 2016 (13%) although over half of these cases have stepped down from Child Protection Plans.
  3. The number of Plans with N1C-Parental Substance Abuse has also increased from 3 in April 2016 to 11 in March 2016. These relate to 6 families including 1 sibling group of 4 and another of 3.
  4. There are 12 Plans that have been in place for more than 18 months; 11 are held within the Children and Adults with Disability service with 1 of these having been operational since 2007.
  5. The number of children with no recourse to public funds (NRPF) increased to a monthly high of 25 for the third time during 15/16 resulting in a monthly average of 20.
  6. Gooshays, in the north of the borough, continues to have the highest percentage of children on a CiN Plan (13.6%) compared to Emerson Park which has the lowest (0.4%).
  7. Early Help services can help to prevent children and young people from coming into care. Despite difficulties for such services under the current financial climate, this section sets out the needs for continued investment in Early Help.
  8. **Early Help:** “Early Help is the support that can be provided for a child, young person or family who may have additional needs that cannot be met by universal provision and there is perceived to be no risk of significant harm.
  9. In Havering the vision for Early Help is shared across all agencies forming an umbrella of organisations that are accountable to the Local Safeguarding Children’s Board. The aim is to provide support early on, at any point in a child’s life, rather than reacting later.
  10. Every child will get the right help, at the right time, delivered by the right group of services. The plan to meet their needs will have been informed by a full and comprehensive assessment common to all key agencies working with families across the borough to avoid them re-telling their story. It will have been developed with the full involvement of the child, young person and their family, and will be aimed at preventing an escalation of needs
  11. **Multi-Agency Thresholds Guidance (November 2014):** The Children’s Trust Board commissioned guidance that would enable professionals to work together to ensure timely early intervention is provided for children and families when needed. The guidance sets out:
* The thresholds for access to services which support the actions needed to improve the outcomes for children;
* A common language along with regulation and good practice;
* Levels of individual and agency responsibility when working with children, young people and families;
* The tools in place to support professionals in their role
  1. The guidance is supported by a model called the Wedge, which identifies the needs of the child and required responses.



* 1. Early Help is the response made when a professional identifies additional needs and seeks advice from another agency. This is met by a core Early Help team hosted by Havering Council which provides advice and operational support to the delivery of Early Help across the LSCB partner organisations.
  2. Alongside direct support provided through relevant organisations such as schools, health visitors and midwives, the Council has the following provision for children and families requiring Early Help support:
* Children’s Centres for 0-17 year olds;
* Services to support young carers, young offenders and young people misusing substances. We provide targeted sexual health services for young people and young homeless.
  1. **Early Help Assessments (EHA):** All Early Help provision is underpinned by the consent of the family and incorporated into an Early Help Assessment (EHA) which culminates in a clear plan of support. Children’s Services Early Help team have been developing the EHA over the past two years to ensure that joint working of all organisations and individuals is improved across the borough. The numbers of EHAs completed in the last financial year are predicted to surpass that of the last financial year; as the current figure for this year is 581, where last years were recorded at 603 ending the financial year.
  2. This will result in accelerating improvements in early identification of need, cross-agency intervention and more effective preventive services. Current priorities are now to evidence the impact of this work, and monitor the outcomes for children and families supported at the Early Help level.
  3. **Team Around the Family (TAF):** A TAF is a meeting where parents and professionals supporting the child and family meet to agree a plan of how the needs identified in the EHA will be met. This includes establishing responsibilities, actions and timescales. TAF meetings should be organised regularly to discuss progress and update the plan. The full participation of the child and family are critical to success.
  4. **The Havering Multi-Agency Safeguarding (MASH) Hub:** The MASH is a multidisciplinary initiative that provides a joined up, consistent approach to all notifications of concern relating to child safety. The service provides a multi- agency access point for all child concerns requiring a social work response and enables swifter decision making for those concerns of the highest level of need. The Screening Team also offers advice to agencies and professionals.
  5. **Troubled Families Programme: The Troubled Families Programme was launched in 2011** as a Department for Communities and Local Government 3 year initiative to support local authorities in addressing the needs of families with multiple and complex needs. Havering were successful in meeting its target of supporting 450 families in sustaining positive outcomes. Nationally these included families considered to have children not attending school, family members involved in crime or anti-social behaviour and adults on out of work benefits. Families nominated to Havering’s Troubled Families Programme would have an identified lead worker who assesses the unmet needs and puts together a transparent action plan; working alongside identified specialist workers who support the family to sustain positive outcomes.
  6. Havering is an Early Adopter of Phase 2 of the Troubled Families programme, a Department for Communities and Local Government initiative to support local authorities in addressing the needs of families with multiple and complex needs. Families must meet 2 of 6 criteria’s which include issues around Crime and ASB, School attendance, Children in need of Help (known to existing services), Worklessness and Financial Exclusion, Domestic Abuse and Health issues.
  7. Havering’s Troubled Families Team is a multi-disciplinary team consisting of seconded Job Centre Plus Troubled Families Employment Advisors, An Adult Mental Health Worker and an IDVA.
  8. **Primary Mental Health Early Intervention Service:**

We have primary mental health dedicated workers for the 0-19 year olds based together and support any mental health needs as identified through the health assessment, initial assessment or review health assessment. THE MHW workers are linked to the schools and children’s centres and provide advice and consultation to any worker who has a concern. We are aiming to strengthen this offer through the CAMHS transformation plan and the Early Help provision.

* 1. Havering was successful in its submission of the CAMHS Local Transformation Plan and has 5 workstreams aimed at increasing expenditure to provide better universal and targeted mental health provision for children and young people in the borough:
* [Theme 1: Building Resilience and Promoting Prevention](#_Toc431928130)
* [Theme 2: Developing a Wellbeing Hub](#_Toc431928131)
* [Theme 3: Maximising use of Digital Resources & Guided Self Support](#_Toc431928132)
* [Theme 4: Better support for children, young people and families with mild/emerging behaviour difficulties](#_Toc431928133)
* [Theme 5: Better support for looked after children and those leaving care](#_Toc431928134)
  1. Key elements that Havering have considered within the local CAMHS transformation plan include (but are not limited to):
* Improvements in early intervention to include building support for emotional needs (distinct from mental health), targeting investment in lower level and earlier help (CBT and therapy), and collaborative commissioning with schools to support whole school resilience building
* Redesign services to remove the traditional tiers of CAMHS and have a single point of access for referrals, while exploring options for a dedicated service for LAC and outreach. This will see improved monitoring of CAMHS outcomes, access and to penalise breaches
* Investment in skills and training of parents, children themselves, schools staff and staff in universal services, including a GP hotline, Mental Health Champions and a ‘Mental Health is Everyone’s Business campaign’
* Utilise new technologies to support better services for children’s mental health
* Joint working between agencies and co-location of workers, with a single point of access into services and integrated electronic records
* Health promotion, prevention and early intervention through effective outreach into schools, primary care and hard to reach groups
* Children’s self-help and self-management
* Technological solutions to include a digital directory of services and digital platforms for assessing outcomes and for use in clinical applications Outcomes monitoring that looks at the whole pathway and goals compatible with the new CAMHS payment by results and personal budgets
  1. **Conclusion:** Through Early Help services and increased multi-agency working more children and families in need of help are being identified at an earlier stage. Careful monitoring is required to see the impact that the development of Early Help services are having to prevent more intensive support and children coming into care.
  2. CAMHS transformation to support the mental health needs of children and young people with severe learning disability , including Autism where challenging behavior is a concern

3. **Edge of Care**

3.1 Edge of Care: Children are defined as on the ‘Edge of Care’ when they have been assessed by social workers as being at a high risk of being accommodated by the local authority. The Council has a pathways approach and a set of wrap-around services that are set out in this section.

3.2 The Early Help service has created a team of practitioners who will be providing intensive and targeted intervention to young people and their families in order to remove the likelihood of children entering care. This team will also work jointly with social care teams to build resilience and offer support to families to enable children to return and remain within the family home.

**3.3** Initial findings have shown that over 100 cases have stepped down from social care teams to Early Help services. This is a positive sign that the early help team are enabling more young people to return home.

3.4 Family Group Conferencing (FGC): FGC promotes the involvement of the wider family to achieve a resolution of difficulties and offer a way of ensuring that the family’s wider social network has been engaged for the benefit of the child. It encourages families to find early solutions to problems within a professionally supportive framework. We have seen an increase in the number of FGC’s being completed this year. During 2014/15 51 FGC’s took place compared to 96 for 2015/16.

# Children Looked After Demand

* 1. Even the best early intervention cannot prevent some children needing to come into care. This section sets out the current picture of demand from children entering into Havering’s care system.
  2. The evidence over the past few years demonstrates the upward trend of children being placed in care in Havering. Over the 2015/16 financial year the number of children continued to remain high for Havering and resulted in a yearly average of 229 compared to 190 for 2013/14 and 223 for 2014/15. This is subject to constant monitoring.[[1]](#footnote-1)
  3. Comparisons with national and statistical neighbour data on the rate of children who are looked after shows that:
* The Havering rate at 45 per 10,000 is lower than the national average of 60 per 10,000 and London average of 52 per 10,000 and our statistical neighbor of Bexley at 50 per 10,000.
* It is comparable to our regional neighbours of Outer London at 47 per 10,000.
  1. **Profile of children looked after:** The tables below set out the profile of children who are looked after by age, ethnicity, gender, and legal status.
  2. **Age profile**

The highest proportion of Looked After Children is in the 11-15 year old age group, followed by the 16-17 year old age group (Figure 1).

There is a total increase in numbers of LAC in the borough with the highest age group increase in the 16-17 year old age group (Figure 1).

Table 1 Number and percentage of Looked After Children (LAC) by age group and year

|  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| LAC BY AGE - Percentage | AVERAGE 2012/13 | | AVERAGE 2013/14 | | AVERAGE 2014/15 | | AVERAGE  2015/16 | |
| AGED 0 TO 4 YEARS | 36 | 19% | 29 | 15% | 33 | 15% | 39 | 17% |
| AGED 5 TO 10 YEARS | 38 | 20% | 42 | 22% | 58 | 26% | 57 | 25% |
| AGED 11 TO 15 YEARS | 63 | 33% | 61 | 32% | 68 | 31% | 80 | 35% |
| AGED 16 TO 17 YEARS | 52 | 28% | 59 | 31% | 64 | 29% | 53 | 23% |

Figure 1 Number of Looked After Children by age group and year

* 1. **Ethnicity profile:**

The ethnic profile of LAC in Havering is similar to the general Havering population with a majority of white population. Over the last 4 years there has been a reduction in the white proportion of LAC and an increase in the black proportion of LAC (Figure 2).

Figure 2 LAC ethnicity by year

* 1. **Gender profile:**

The number of male LAC is higher than female and both have increased over the past 4 years (Figure 3).

Figure 3 Number of LAC by gender

**4.8 Looked after Children with a Disability profile**

Despite the overall number of looked after children with disabilities being low, the highest proportion of Looked after Children with a disability is in the 11-15 year old age group (figure 4)

The profile has changed during 2015-16 and whereby both the 5-10 year old age group and the 16-17 year old age group are the next two age groups of looked after children with a disability.

**Figure 4. Number of LAC with a disability**

**4.9 Looked after children with a disability ethnicity profile**

The ethnicity profile of LAC with a disability is similar to the general Havering population. During 2015-16 White British has increased and Black African and mixed Caribbean ethnicities are equally represented (figure 5). It must be noted that due to the small cohort very small changes can seem to make substantial changes.

**Figure 5. LAC with a disability ethnicity profile**

**4.10 LAC with a disability gender profile**

The number of female LAC with a disability is higher than male. For the first time in four years the number of female LAC with a disability is higher the male LAC with a disability (figure 6).

Figure 6. LAC with a disability gender profile

* 1. **Unaccompanied asylum seekers**

There were 19 recorded UASC as at 31st March 2016. This is a significant increase from 3 as at 31st March 2014.

* 1. **Children looked after by ward of family residence**

Gooshays, Heaton and South Hornchurch have the highest number of children looked after. This is in line with deprivation in the borough. About 8% of LAC come from out of borough (20).

* 1. **Children looked after by legal status**

The majority of LAC in 2014/15 were accommodated on Voluntary Accommodation (49%) followed by being accommodated on a Full Care Order (33%) – see Table 2.

Over the past 4 years there is an increase in LAC accommodated in voluntary accommodation (38%-49%) and a decrease in Full Care Orders (42%-33%) – see Figure 7 .

Table 2 LAC by Legal Status

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| Lac by legal status - percentage | Average 11/12 | Average  12/13 | Average  13/14 | Average  14/15 | Average  15/16 |
| Section 31 – full care order | 42% | 37% | 38% | 33% | 39% |
| Section 38 – interim care order | 15% | 16% | 14% | 11% | 9% |
| Section 20 - voluntary accommodation | 38% | 36% | 40% | 49% | 46% |
| Section 21 - placement order | 6% | 11% | 8% | 6% | 6% |

Figure 7 LAC by legal status

* 1. **Overview of LAC accommodation**

For 2015/16 the Havering profile was (Table 3 & figure8):

* 62% in foster care placements (30% in agency foster care and 32% in in-house foster care)
* Over the past 4 years there has been an increase in agency foster care (21%-30%) and a decrease in in-house foster care (39%-32%).
* 7% of LAC in residential accommodation
* Over the past 4 years there have not been any major changes in residential care (8%-6%)
* 3% of LAC with a disability in residential accommodation
* Over the past 4 years there has been a decrease in children with disability in residential care (5%-3%).

Table 3 LAC by placement type and year

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| LAC by placement type - percentage | 2011/12 | 2012/13 | 2013/14 | 2014/15 | 15/16 |
| Residential | 8% | 8% | 5% | 6% | 7% |
| Children with disability (CWD) residential (not included in the above) | 5% | 4% | 3% | 2% | 3% |
| P&V agency foster care | 21% | 24% | 28% | 29% | 30% |
| In-house foster care | 39% | 39% | 37% | 34% | 32% |
| Family and friends | 12% | 8% | 9% | 9% | 10% |
| Placed with prospective adopters | 2% | 5% | 4% | 3% | 2% |
| Placed with parents | 5% | 2% | 2% | 1% | 0% |
| Supported/semi-independent living | 8% | 6% | 9% | 13% | 11% |
| Secure accommodation | 0% | 1% | 2% | 1% | 0% |
| Other, boarding school, health trusts, family units, etc. | 1% | 1% | 1% | 2% | 1% |

Figure 8 LAC placement type 2015/16

* 1. **Care admissions and discharges:**

Leaving care data and reason for leaving care. Understanding discharge reasons helps to inform future service planning and edge of care support.

Table 4 Reasons for leaving care

|  |  |
| --- | --- |
| Reason for leaving care | Total |
| Adopted - application for an adoption order unopposed | 10 |
| Return home to live with parents, relatives, or other person with parental responsibility as part of the care planning process (not under a special guardianship order or residence order or (from 22 April 2014) a child arrangements order). | 130 |
| Return home to live with parents, relatives, or other person with parental responsibility which was not part of the current care planning process (not under a special guardianship order or residence order or (from 22 April 2014) a child arrangements order). | 5 |
| Residence order (or, from 22 April 2014, a child arrangements order which sets out with whom the child is to live) granted. | 3 |
| Special guardianship made to former foster carers | 6 |
| Special guardianship made to carers other than former foster carers | 12 |
| Moved into independent living arrangement and no longer looked after: supportive accommodation providing formalised advice/support arrangements (e.g. most hostels, YMCAs, foyers, and care leavers projects) | 33 |
| Moved into independent living arrangement and no longer looked after : accommodation providing no formalised advice/support arrangements (e.g. bedsit, own flat, living with friends) | 1 |
| Transferred to residential care funded by Adult Social Services | 4 |
| Sentenced to custody | 1 |
| Accommodation on remand ended | 4 |
| Period of being looked after ceased for any other reason | 2 |

* 1. The proportion of children leaving care through adoption has reduced from 12.4% in 2013/14 to 5.6% in 2014/15. This is lower than the 2014/15 target of 13%.
  2. There was a slight increase in Special Guardianship Orders granted over the last financial year from 9.1% to 10.1%.
  3. **Children looked after with complex needs / disabilities:**

In 2015/16 on average 8% (18n) of our Looked After Children were recorded with a disability and 3% (5n) of our Looked After population are placed within Residential accommodation for children with disabilities.

* 1. **Projecting future demand:**

Data projections based on current service model and provision of care:

* 1. **Conclusions in relation to demand:**

There has been an increase in the numbers of looked after children over the last two years and this has been impacted upon by the increasing number of unaccompanied asylum seekers. This increase appears to have plateaued however the costs of placement provision do pose a financial risk to the council. To mitigate this risk a number of initiatives are planned that include:

* Development of the Foster Carers Marketing strategy: to increase the number of in-house foster carers and in particular target the recruitment of foster carers able to cater for those children aged 10 and over.
* Recruitment of specialist foster carers
* Market development to increase local placement provision, including overnight Short Breaks provision
* Framework agreements to increase competition and quality
* Consideration of a dynamic procurement tool
* Reduce reliance on residential care

# Children Looked After Supply

* 1. **Local Authority provision: number of foster carers / placements:**

As of 31 March 2015 the Council’s fostering service had 73 approved in-house foster carer households.

* There were 19 new task centred foster carers approved between the 1st April 2015 and the 31st March 2016. Of the 19 approved 8 are able to take 2 children or a sibling group and 11 are able to take 1 child or a sibling group.
* There were 2 connected person approvals between 1st April 2015 and the 31st March 2016.
* There were 19 Special Guardianship Orders granted between 1st April and the 31st March 2016.

4.2 These figures are not necessarily indicative of the number of placements actually available to place children in, with carer’s available accommodation, personal circumstances, matching concerns and needs of other children in the placement reducing the number of placements available.

4.3 There are likely to be more mainstream fostering placements available in the area with the greatest demand. However, if the number of placements is considered as a proportion of demand, there are fewer placements per looked after child in this area.

* 1. **Recruitment activity:** The fostering service co-ordinates recruitment activity at a borough level based on the child’s placement needs. In response to growing demand and need to increase the number of placements available to the service, work undertaken in partnership with the Council’s communications team during in2015/16 increased the pool of foster carers.
  2. Recent locality campaigns have involved leaflet drops, television and radio adverts, posters, promotion on social media and drop-in days. Data from the past few years’ recruitment activity demonstrates that targeted, localised campaigns have in general been effective in generating increased levels of enquiry. In September 2015, the fostering service launched the *‘Help keep brothers and sisters together’* Siblings campaignto increase the pool of in-house foster carer’s available to accommodate sibling placements. This will be further developed in 2016-17 to increase approvals of foster carers available to look after children and young people over 11 years of age.
  3. In 2015/16 the fostering service generated 319 initial enquiries relating to foster care, compared to 2014-15 (184 enquiries). This enquiry rate resulted in an increase in fostering approvals of over 150% compared to the previous year.
  4. **Newly approved foster carers:** In 2015/16 the fostering service registered 19 fostering households. There has been an increased availability of ‘Skills to Foster’ courses to reduce waiting time and a fast track assessment process has been implemented to assess applicants who are transferring their approval to Havering Council.
  5. The conversion rate from initial enquiry to approval is higher since May 2014 (when the fostering recruitment process was streamlined). It should be noted that a foster carer may not be approved in the same year in which they made their initial enquiry. There have been 19 new approvals since April 2015 which is an increase on the number of Havering’s newly approved foster carers for 2015 to 2016.
  6. **Foster carer retention:** In 2014-15 5 mainstream foster carer households ceased fostering with the Local Authority compared to 7 in 2013-2014. These figures represent a loss in terms of placement availability and the experience and skills of foster carers. A mix of retirement, ill-health and a number of Shared carers offering Short Breaks to children with disabilities whose services have now become encompassed under the Direct Payments scheme, accounted for a significant proportion of carers who ceased fostering during the year.
  7. In recent years the fostering service had not been able directly to replace the foster carers who ceased fostering with the same or higher number of newly- approved foster carers. However, in 2015-16 the increase in the number of newly-approved carers contributed to a growth in the fostering service.
  8. **Fostering households’ target:** In March 2016, there were 77 children placed in Havering’s local authority in-house foster care (excluding family and friends) compared to an average of 74 March 2015. Over the financial year 2015-2016 there is a target for 20 new mainstream fostering households.

Since October 2014 there have been 11 de-registrations of Foster Carers. 3 of these had been fostering for some time – 20 years, 13 years and 11 years, and 6 were between 4-6 years. 2 were short term temporary approvals before moving to an SGO arrangement. During 2015-16 the number of foster carers de-registrations decreased by 6.

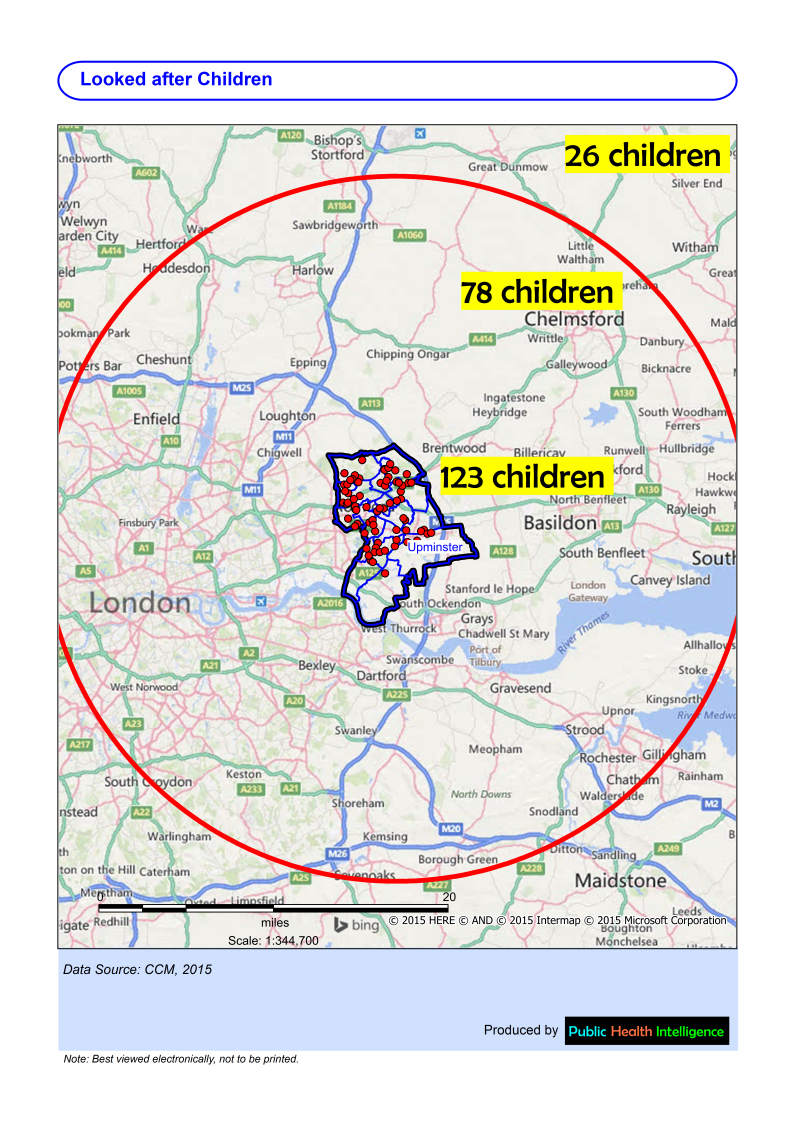
* 1. Increasing the availability of local authority foster carers will help Havering to achieve its aim of placing children within 20 miles of their home where this is appropriate.
  2. There is a gap between the number of children that local authority foster carers are approved to look after and the number they actually have, the reasons for which have been explored previously within this report. Further clarity in regard to this issue will be secured through robust preparation and assessment process and annual reviews of Foster carers which will recommend realistic approval terms.
  3. **Independent fostering agencies:** In recent years there has been a growth in the independent fostering sector in Havering. Whilst money might not generally be the primary motivation for fostering enquiries to local authorities, financial concerns are important to many people who might be considering fostering. The fostering service cannot, at face value, compete with independent agencies which can make very attractive financial offers to prospective carers.
  4. However, the local authority is committed to working with the independent sector to ensure where their services are commissioned, that they provide the highest quality care for Havering’s looked after children, alongside initiatives and incentives to ensure the best value for public funds.
  5. Although residential care is costly, if successful it can reduce long-term costs (i.e. to the health and criminal justice systems).
  6. **In house residential care placements**: The London Borough of Havering does not have in-house residential care placements within the Borough. A review of the overall need for residential care placements in Havering is currently being considered. This considers options to meet the identified need including the development of local providers to meet the needs of our children/young people to keep them in local school and able to access other professional services within the Borough.
  7. As of 31 March 2016 there were 23 children placed in residential provisions, 5 of which are in Borough. The reason for this was to improve the matching of the children placed in these homes following Ofsted inspections. During 2015-2016 all of these homes have been closely monitored to ensure that they provide a high level of care and that they improve the outcomes for our children and young people. These placements are regularly reviewed at Havering Residential Panel which has been up and running since September 2015.
  8. Residential care is increasingly used for older children with more complex needs who may have had several foster care placements. Sometimes children can find making attachments too difficult due to their experiences at home and do not progress well in a family home situation. For some young people a residential home is seen as a more appropriate choice compared to foster care.
  9. Children should only be placed in residential care where it meets their needs identified through thorough assessments. Children who are looked after should only be placed in residential care due if their needs cannot be met in a fostering placement.
  10. Evidence shows that the following factors are important in the success of children’s homes:
* Excellent management and an established purpose;
* High quality care and a low staff turnover rate;
* Positive interactions between the children and staff members;
* As secure and stable an environment as possible.
* Clear communication between the residential home and the Local Authority.
* Residential Home with clear management structure and well trained staff which would include clear roles and responsibilities
* Having specially trained and skilled staff to meet the range of needs for disabled children
  1. Although residential care is costly, if successful it can reduce long-term costs (i.e. to the health and criminal justice systems). Also, if successful it can improve outcomes.
  2. **Purchased placements – independent fostering agencies (IFAs):**

In September 2014 Havering became part of North London Children’s Efficiency Programme Tender. The purpose of this is to provide competitive cost and to improve the standards of the IFAs. See Table 5 below for details.

5.24 **Children’s residential homes and schools:** The London Borough of Havering have 5 children placed in local residential homes and 18 children in residential homes outside of the Havering area.

* Havering have 4 semi-independent providers all within Havering or just outside Borough.
* Overnight Short breaks, for children with disabilities;
* Specialist children’s homes
* There are 3 specialist Residential Homes in the Borough of Havering, one specialises in services for children with a physical disability and the other 2 specialise in services for children with learning disabilities
* There are five children including those disabled placed in residential schools

Figure 4 Map of Looked After Children placed in and out of borough and within 20 miles of place of residence



5.25 The Council’s Children’s Commissioning Team are working with Children’s Services to develop and engage with fostering agencies and residential providers. Market engagement meetings and providers forums are held at least twice per year. By developing these relationships the Council aims to have a diverse mix of provision better able to respond to emerging placement needs.

**5.26 Location of purchased placements:** The table below shows the location of purchased placements on 31 March 2015:

Table 5 Location of placement by type of accommodation

|  |  |  |  |
| --- | --- | --- | --- |
| Type of accommodation | Inside Havering | Outside Havering | Total |
| Independent Fostering Agencies | 27 | 42 | 69 |
| Residential Home | 4 | 21 | 25 |
| Residential School | 0 | 1 | 1 |
| Total | 31 | 64 | 95 |

Table 6 Location of placement - all types of accommodation

|  |  |  |
| --- | --- | --- |
| All types of placements | Inside Havering | Outside Havering |
| 2012/13 % of LAC | 60% | 40% |
| 2013/14 % of LAC | 61% | 39% |
| 2014/15 % of LAC | 55% | 45% |
| 2015/16 % of LAC | 54% | 46% |

* 1. This would indicate:
* There has been an increase in Residential placements
* There is an increasing trend in out of borough placements
  1. If an appropriate purchased placement cannot be found within Havering a child might be placed outside and the distance can vary. This can initially be disruptive for a child who may have to move schools, and lose contact with friends, while maintaining contact with their family, social worker and IRO. These placements are identified taking into account the needs of the child/young person. A greater percentage of residential placement are out of borough due to the specialist and complex needs of the individual child. These placements are closely monitored by the Placements Team, social workers and by Havering Residential Panel.
  2. In some circumstances it might be appropriate for a child to be placed outside council boundaries. For example if the child:
* Lives close to the boundary with another local authority;
* Has needs that are better met with a provider outside Havering
* Needs to be protected from harm and this can be best achieved living outside Havering
  1. Havering is committed to both increasing local authority provision available to children and young people, alongside actively working with external providers to shape and influence the needs led development of local placements.
  2. **Financial impact of placement provision:**
* The weekly costs of placements for children are less expensive when provided through local authority foster care and residential care provision. There are also additional internal costs to be considered.
* Residential costs far exceed the cost of all types of foster care but currently provide a range of services and wrap around care not available within foster care.

Table 7 Cost of placement type by year

|  |  |  |  |
| --- | --- | --- | --- |
| Type of accommodation | Actual Average Weekly cost based on out-turn position 13-14 | Actual Average Weekly cost based on out-turn position 14-15 | Actual Average Weekly cost based on out-turn position 15-16 |
| In House Foster Care | 354 | 341 | 397 |
| Independent Fostering Agencies\* | 827 | 786 | 885 |
| Residential direct costs only | 3,135 | 3,116 | 2950 |

*Source: Havering Finance Team*

*\*The IFA cost is the amount paid to agencies and therefore includes their element of overhead and profit. The foster carer will receive considerably less than this amount.*

* 1. **Adoption services:** The adoption service networks with other local authorities through:
* Membership of the East London Adoption Consortium (a network of 6 local authorities who work together to have children adopted). This widens the field of adoption placements.
* Consortium adoption managers’ meetings.
  1. There were 11 children placed with prospective adopters in 2013/14 compared to 8 in 2014/15. There were 15 adoption orders granted between in 2013/14 compared to 10 in 2014/15 and 7 in 2015/16.
  2. Early permanence significantly improves children’s emotional wellbeing and reduces the need for intensive support at later stages of their lives.  In addition, significant monetary savings can be made through children not being looked after, reducing the need for and cost of Purchased Placements.
  3. To help address the continuing fall in the number of children being placed for adoption the Government has given councils funding to cover the "inter- agency fee" from July 2015 to March 2016. This is for children who meet the set criteria and will include the cost of another agency finding, assessing and matching adoptive parents with a child.  London Borough of Havering has to date identified nine children who would meet this criteria and are monitoring the planning and progress to ensure maximum benefit from this initiative.
  4. **Children in the criminal justice system**:On 31 March 2016 there were two children looked after on remand. In previous years on the same date there were: one in 2015: one in 2014; none in 2013; and one in 2012. During 2015-16 there were 9 young people remanded to local authority/youth detention accommodation which is an increase on 4 for 2014-15. Havering does not have any secure accommodation for young people under 18.  Young people requiring this accommodation (or going into custody) are placed outside Havering.
  5. **Emergency placements:** Currently there are no local authority placements reserved for children needing to come into care in an emergency. The high demand means that vacant placements are quickly filled. When an emergency placement is required vacant local authority placements are looked for in the first instance and if there are none available, children may be placed in agency care. The Fostering and Adoption Service will development options and review the business case for the development of a cohort of emergency in-house foster cares during 2016/2017.

# Appropriate Placements

* 1. **Placement Breakdowns:** This is measured through children who have 3 or more placement moves in a year and children who are looked after continuously for at least 2.5 years who are living in the same placement for at least 2 years.
* 83% of LAC were in placements lasting two or more years, superseding the target of 80% and an increase on the previous year (79.2%).
* 10% of looked after children had 3 or more placements in a year during 2014/15 which is an improvement on 2013/14 at 10.6% and 2012/13 of 14.1%.
  1. Disruption meetings will take place for adoption breakdowns and will also take place when there are breakdowns of permanent foster placements. These are held to learn from these experiences, to further reduce the number of breakdowns in placements and inform future planning for the child.
  2. **Individual needs assessment and care planning – matching:** Before a child is placed in care and accommodation the following plans are considered: initial and updated assessment, care plan and placement plan. The child’s accommodation and care needs are assessed, and the child’s wishes and feelings are taken into account.
  3. Placement planning for every LAC includes the social worker, the placement team and the young person. The Register of foster carers identifies internal vacancies and foster carer profiles to match carers to children.
  4. The quality of information provided at this stage is likely to make a difference to the success of placements. High quality training for social workers and adequate monitoring is required to ensure accurate information at the matching stage.
  5. A good match will involve different factors depending on the child involved and needs to be considered on a case by case basis. Good matching is key in placing a child who is looked after even where the reality of needing to find an available placement, particularly at short notice and in an emergency, is a further pressure. Permanence planning is critical at the initial point of a child becoming looked after. Clear and informed planning ensures timely and accurate responses and avoids ‘drift’ and delays for a child or young person. It is important that the progress of care and permanence plans are not delayed and that care plans are reviewed within timescales**,** as this can impact negatively on the longer-term needs of the child being met.

For those times when care planning has broken down Havering has an emergency duty team. The emergency duty team is a tri borough commissioned service for the boroughs of Barking and Dagenham, Havering and Redbridge. The emergency duty team operates out of hours, weekends and bank holidays and works closely with the Children’s Commissioning team from a preferred list of providers thereby managing costs.

* 1. **Siblings:** The Local Authority makes every effort to keep sibling groups together and undertakes appropriate together or apart assessment where necessary as per BAAF guidance.
  2. **Placement choice:** The Council continues to work towards placement choice as an option for all children and young people coming into care. The Council’s aim is to offer placement ‘choice’ in terms of potential matches. Following discussions, the family, foster carer and other key individuals agree the best placement for the child or young person. When levels of demand are high it may mean that placement choice is not always possible, particularly if trying to secure a placement with local authority foster carers. The placement offered will be identified based on the needs of the child or young person. Other local authorities have similar pressures. Our aim is to increase the number of local authority foster carers and meet our target for increasing this number by 20 new carers in 15/16. The target of 20 new in house foster carers will need to remain in place over the coming years util there are sufficient foster carers to meet our demands and to reduce the number of LAC placed more than 20 miles away.
  3. Foster carer recruitment will need to be matched to our demographic profile of our looked after children which is described within this document.
  4. **Specialist foster care placements:** Havering does not currently provide any specialist foster care placements so we use Independent Foster Care Agencies (IFA) or residential care. Given the nature of the children requiring specialist care, we tend to place them out of borough in residential provision. However, we do have some disabled children / young people placed in foster placements both in house and in P &V placements. We aim to recruit 4 new specialist foster carers during 16/17.
  5. Foster carers looking after disabled children are likely to need access to short breaks on a regular basis, which includes specialist and mainstream after school and school holiday play provision
  6. **Placement stability**: Placement stability and crucially ‘permanence’ has a major impact on a child’s quality of life, outcomes and achievements. This is best achieved through good planning and matching. Hopefully then a child can settle into their placement quicker, feel secure and not then need to be moved onto another placement which can be highly disruptive. Permanency Planning meetings are held on every case every 6 weeks with the social worker and foster carer to consider proposals for permanent placements. These meetings inform the child’s family finding needs. Once potential matches are identified a selections meeting is held. From there the family who scored the highest are visited by the Family Finding Social worker and the Child’s Social worker. Following this there is a Matching Meeting, which outlines the reasons for or against the match and the plans moving forward to the Matching Panel.
  7. **Placement** planning is attended by the Children’s commissioning team who are then able to liaise closely with providers ensuing the matching process is effective. The agreed contracts that include outcomes are shared with social workers and IRO’s for LAC reviews.
  8. **Reviews:** Any issues with placements and commissioned care will be identified and acted on through regular visits by the child’s social workers and the information can be included as part of the child’s review and appropriate actions taken.
  9. Of the 498 looked after children reviews that took place during 2014/15, 90.2% (449/498) were completed within timescale compared to the previous year’s figure of 96.3 (316/328). It is worthy of noting however, that although performance has worsened, the overall activity in terms of the number of reviews undertaken had increased by 51.8%.
  10. Children looked after are encouraged to participate in their reviews. In 2014/15 97% of looked after children contributed to their statutory reviews, comparable to the previous year (98%).
  11. **Children’s Commissioning Team:** The children commissioning team will become part of an integrated commissioning unit that is being developed across Public Health, Children’s, Adults and Learning and Achievement services. The aim is develop best practice in outcome-based commissioning, improve value for money and the impact of commissioned services. This is due to go live during 2016. Areas to be recommissioned in 2016/17 are:

1. Family/parenting assessments
2. Therapeutic support for families who adopt
3. Semi-independent provision for care leavers
4. Service for young carers
5. Strengthen the family counselling service
6. Review contact provision
7. Consider the efficacy of a Dynamic Procurement tool
8. Work with London Councils for a London wide IFA framework
9. Update all Havering placement contracts to include outcome measures
10. Work with local boroughs to develop local residential provision
11. Support the recruitment and development of a specialist foster care provision, including trained and specialist carers for Short Breaks
12. Develop specialist child-minders for disabled children to provide support and reduce likelihood of parental request for accommodation.
    1. **Residential Planning Meetings:** Since September 2015 Residential Planning Meetings have been introduced to track and review placements. The panel is chaired by a senior manager for LAC and includes children’s commissioning, the virtual school and social worker managers and front line staff. Since its introduction the panel have:

* Made sure that every child looked after has a planned exit date to ensure that plans are not drifting for children. Those due to exit care in the next 6 months are monitored to track this is being achieved and highlight any blockages to progression of care plans;
* Moved a number of children from external residential placements to other types of placements that better met their needs;
* Started to track all children in residential care to monitor the progress of each child, and to enable a planned move on to alternative placement provision in a timely manner.
  1. **CCM:** CCM is being updated to ensure sufficient information is captured in relation to placements and placement costs. For example, the adoption process has been added and the fostering process is being added. Further work is ongoing to establish other ways that CCM can be used more effectively, and to make sure that the data recorded is accurate and up-to-date.
  2. **Integrated working:**  Services that support children looked after and / or care leavers in Havering include:

|  |  |
| --- | --- |
| Universal | Schools, Health including GPs and Midwives, Police, Health Visiting, Primary Care MH Team |
| Targeted | Children’s Services teams, CAMHS, Virtual Schools,  Youth Offending Services, Youth Support Services |
| Contracted out  specialist services | Targeted Therapeutic Services, a mentoring service, a family therapy service, an Adoption Support Service, Young Carers, Young People’s Drug and Alcohol Services, C-card dispensing and a targeted sexual health service. |

* 1. Partnership work is ongoing through multi-agency groups such as the Havering LSCB. Children are also directly involved through the Children in Care Councils.
  2. The six month review process identifies any additional support required for children looked after from different agencies / public services (i.e. CAMHS or YOS). For children who are in purchased placements, additional specialist support services needed are often purchased through the provider.
  3. **Regional networking:** The Children’s Commissioning team are working on projects across London and with local neighbouring boroughs. With London Council’s we are developing an IFA framework and the use of a dynamic procurement tool. Sub-regionally we are developing a proposal for residential care.
  4. Children looked after and care leavers will inform the development of and improvements in securing placements and support for both children looked after and care leavers. The children looked after and care leavers pledge is also currently being reviewed.
  5. Work is underway jointly with Adult’s services to develop transition to adulthood for disabled young people, through the implementation of a Preparing for Adulthood Team in the Children and Adults with Disability service.
  6. **Children looked after missing from home:** A clear process is in place regarding the steps to be taken when a child goes missing. This includes a return interview carried out within 72 hours of the child returning home and a risk assessment completed.
  7. These are completed by the person closest to the child in the professional network, including individuals who are trained and independent of the local authority. The child’s Independent Reviewing Officer is also kept informed and engaged in this process. Havering has a Missing from Care and Home protocol, which sets out the process, procedure, policy and principles: When a child does go missing our joint aim is to prevent that child suffering harm and to recover the child to safety as soon as possible, We do this by partnership working information sharing, problem solving and performance management. We monitor review and manage missing young people in Havering, via our missing meeting which is linked to our CSE meeting to ensure that we are aware of the links and crossovers with these two high risk groups of young people. Multi Agency Planning meetings are held in response to missing young people and Return Home Interviews undertaken; action plans are produced in relation to young people who are missing which are used to inform the safeguarding planning for each young person.
  8. The child’s Independent Reviewing Officer is also kept informed and engaged in this process.
  9. A strategy discussion will take place within 24 hours and a strategy meeting must be held within 24 hours if the child or young person has not been found and action plan progressed. A young person who has been missing three times or a young person who is missing for a period longer than 72 hours will be managed via both the S47 process and also the virtual team multi agency missing meeting (although may be sooner dependent on level of risk). The return interview service provision is currently being reviewed. We ensure that RHI’s are progressed and these are also reviewed via the Virtual Team which formulates a multi-agency plan and response to assist in safeguarding and supporting the young person.
  10. **Children looked after and Child Sexual Exploitation (CSE):** Havering LSCB is working hard to implement its strategic plans in response to the risk of child sexual exploitation. The multi-agency Strategic Group leads on implementing a diverse action plan. Within this structure, Havering has also developed a Virtual Team which consists of our partners whilst the Operational Group Lead by the LSCB to oversee and develop practice across the Borough. A multi-agency virtual team monitors activity at a local level and ensures that those identified as at risk of child sexual exploitation are provided with a focused intervention. Local police are partners and we have a dedicated CSE SPOC and a MASE panel that is a strategic multi agency panel which ensures that disruption activity is robust and coordinated as part of a multi- agency approach to prevent, protect and prosecute. Monitoring of children and young people reported missing from home or school help to identify early those at risk of exploitation. *CSE POD PILOT and Learning*
  11. CSE performance monitoring prior to 2015/16 was not of a suitable reporting quality to use in this document. As at quarter 3 of 2015/16, of the 152 CSE Contacts received in Children’s Social Care none were looked after although 4 have since commenced, 2 males and 2 females, aged between 15 and 17.

During 2015/16, girls aged 14-15 are the most common victims of CSE.

We are keen to improve support services for these young people as they move into young adulthood. Support required by families affected by sexual exploitation ranges from family support or therapy, sexual health services, drug and alcohol services or sometimes local authority accommodation to help protect.

* 1. Children’s Services’ has set out the following priorities in relation to CSE:
* Prevent - Safeguard sexually exploited children;
* Protect - Develop environmentally focused interventions with the police to disrupt perpetrators and locations rendering children more vulnerable;
* Pursue - Promote the development of healthy sexual relations via influence in schools, and assisting the recovery from trauma and abuse in partnership with health and 3rd sector providers.

# Care Leavers and 16-17 year old Homeless Young People

* 1. **Statutory duties:** Local Authorities statutory duties towards care leavers are detailed in the Children Act 1989 Guidance and Regulations; Volume 3
  2. **Children and Families Act 2014 -** Preparing for Adulthood

Planning Transition to Adulthood for Care Leavers. This states “when young people leave their care placement the local authority must ensure that their new home is suitable for their needs”. The Local Authority duty is different depending on whether the care leaver is defined as Eligible, Relevant, Former Relevant or Qualifying.

* 1. **Demand for accommodation:** Homeless 16-17 year olds entering care over the last 5 years has fluctuated, currently numbers are relatively low the figures for 2015 are 18 young people were accommodated due to homelessness. We are also able to support effective rehabilitation home to parents due to the direct entry into a social care team, wherever this is possible and offer support and assistance to enable the majority of young people to return too, or remain within the family network.
  2. **Havering has a joint housing protocol;** Homeless young people are fast tracked directly into a CYPS team who undertake the required joint homelessness assessment within ten days. . This approach prevents delay and also any confusion or distress for young people, who do not have to negotiate a complex system across the local authority in order to be assessed. Where required young people are accommodated for the duration of the assessment period.
  3. **Care Leavers aged 16+ years:** Our data shows that the number of 16-17 year olds in care has fluctuated over the last 5 years. There has however been an overall upward trend: the number of care leavers has risen from 45 in 2011/12 to 55 as at 31st march 2016. Young peoples in this cohort represent 24% of those looked after by the local authority. This is reflected in the rise in the Looked after Children within the borough; however it is the fastest growing cohort. The predicted trend is that this figure will continue to be over represented.
  4. During the current financial year 2015-2016 it is expected that 49 children looked after will turn 18 and leave care. During the financial year 2016-2017 11 children will turn 18 and therefore leave care on or before their 18th birthday, although some may leave earlier (5 were already Relevant in July 2015). This number will increase through more young people of the appropriate age entering care this will include young people who make a direct homelessness approach, and also Unaccompanied Asylum Seeking Children.
  5. Work is ongoing in relation to anticipating the demand for different types of accommodation and support that will be needed by future care leavers from Havering in different geographical locations. This is being informed by Pathways Plans. It is a priority of the Council to ensure that Pathways Plans are clear in relation to accommodation and support that will be required for care leavers to inform the commissioning of appropriate accommodation.
  6. **Children who remained looked after until their 18th birthday:**

61.3% of children remained looked after until their 18th birthday in 2014/15 an improvement on 57% in 2013/14. However Havering is still lower than our statistical neighbours (68%) and national average (67%).

* 1. **Care leavers aged 19, 20 and 21 in suitable accommodation.**

91% of Care leavers aged 19-21 were in suitable accommodation as at 31 March 2015 compared to 66% at 31st March 2014.

A Care leavers handbook is in draft, to be completed by March 2016. This is an information document for young people to refer to aid their decision making about their future care provision and support.

* 1. **Supply – accommodation mix:** There needs to be an appropriate ‘mix’ of accommodation and support options available for Care Leavers to access to meet a variety of needs. The following accommodation options are available to 16+ years care leavers in Havering.
  2. **Current accommodation options – Heathercourt:** Heathercourt is a supported housing scheme made of 15 self-contained flats. This is a joint scheme between children’s social care and housing and is intended for looked after children and homeless young people where it is not in their interest to become looked after. The supported housing scheme is provided so that young people feel safe and secure and receive support prior to finding suitable permanent tenancies.

The Provider is required to give 10 hours support a week. A young person can access this provision aged 16-24. The service takes a flexible approach to meeting the needs of young people.

* 1. At 31 March 2015 Heathercourt was fully occupied. The service provision has recently been re commissioned and the new provider will be in place from 1st April 2016. A mobilisation plan is currently being monitored.
  2. **Staying Put:** The government has brought into force a duty on local authorities called ‘Staying Put’. This duty is found in The Children and Families Bill, Part 5 Welfare of Children (98) and became an amendment to the Children Act ’89, coming into force on 13 May 2014. The Staying Put agenda provides the option for young people living in foster care to remain with their carers after their 18th birthday if both the carer and young person would like this to happen. The Staying Put arrangement can last up to three years.
  3. The Havering Staying Put policy is in draft and will be completed by March 2016.
  4. On 31 March 2015, 22 young people were living in Staying Put arrangements compared to 11 on 31 March 2014. There is a target of 25 new Staying Put arrangements by 31 March 2016 which will make a total of 47 young people in a Staying Put arrangement.
  5. **Supported housing:**
  6. **Foyers:** There is no current foyer provision howeverthe newly re-commissioned Heathercourt provisionwill be applying for foyer status during 2016.
  7. The suitability of housing options varies dependent on the young person being placed. For some groups (i.e. 16-17 year old care leavers, mothers with a baby, and children with complex needs and disabilities) there are fewer suitable placements available. It is important that young people have support in developing independent living skills including pre-tenancy skills to increase the likelihood of their accommodation being successful. It is also crucial that any waiting times are kept to a minimum.
  8. **Market development meetings:** To inform the development of a number of commissioned provisions including accommodation and support options for care leavers across Havering supplier meetings have been held. This has informed our commissioning intentions and our plans for a framework tender.
  9. **Evictions:** Care Leavers need the option to remain in accommodation that is meeting their needs and also options to move on to other accommodation, as appropriate or needed. Should issues arise resulting in care leavers needing to move on to alternative accommodation, they should be proactively supported to do this in a planned way if at all possible, rather than facing eviction.
  10. **Quality assurance:** All accommodation for care leavers is quality assured for each individual young person. The leaving care providers that Havering use need to meet the quality standards set by the Children Commissioning Unit.
  11. **Costs:** Affordability is a key issue for care leavers in relation to accommodation. All care leavers are given a leaving care setting-up-home allowance.
  12. **Support for care leavers:** Support is provided to children leaving care by the Children Looked After and Young Person Adviser Team which is adapted to meet individual needs. This includes an allocated Personal Adviser for each care leaver who starts transition planning with care leavers at age 15½ when a Pathways Plan is jointly developed with information about the child’s placement and support plans when leaving care. The leaving care process should be a smooth transition for care leavers. Transition planning is supported by the allocation of a ypa to each young person, future planning across all areas of independence are assessed reviewed and monitored both by the Lac Review process post 18 and on an ongoing basis by the young person , their social worker and the young person advisor. This information informs and updated the pathway plan and is further supported and monitored by the recent decision to use Outcome Stars to inform transition planning onto successful independence, for our young people leaving care.
  13. The appropriate pathway for disabled young people needs to be identified through joint working with Adult’s services
  14. Additional support is provided from universal, targeted and specialist services including:
* Adult services;
* Leaving care providers;
* Supporting People accommodation-based support;
* Youth support services;
* Careers, information, advice and guidance;
* Job Centre Plus
* Prospects

# Gap analysis and actions.

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| RAG Rating | Strengths | Areas to Develop | Planned Improvements/actions | Evidence |
|  | **Early Help** |  |  |  |
|  | Havering has invested in its Early Help services which includes increasingly joined up multi-agency working. The Early Help Strategy describes how Havering is moving forward in this area.  Early Help services need to be effectively joined-up and coordinated so that the right families have access to the right services at the right time | Integration of early help with other statutory services such as community health services | Work with our partners in NELFT and BHRUT during 16/17 to formulate and agree plans for an integrated 0-5 year old offer | Integrated core offer agreed across three children’s centre hubs  One hub implemented during 20161/7 |
|  | There are currently several contracted out services that provide Early Help for children and families. | The effectiveness and efficiencies of commissioned out services are being reviewed and the Early Help universal offer is being strengthened | Review of services completed and identified changes implemented | Voluntary sector review completed.  Early Help restructure implemented July/August 2016 and advocacy, participation and parental support group directly delivered by Early Help |
|  | The number of children looked after continued to increase over the 2014-15 and 2015-16 financial years. There has been a rise in the number of children aged 11-15 years and 16/17 years in care.  Strategic commissioning  decisions that are based on good intelligence. | Have sufficient accommodation in terms of the number of beds provided.  There continues to be a gap in accommodation for children coming into care in an emergency. To address this Havering is considering targeting foster carers to provide emergency and Short Breaks care, particularly for disabled children and young people. This will be progressed during 2016/17 | Procurement of a provider framework for semi-independent and residential placements  •Increase the number of internal foster carers by  •To increase the range of providers for 11-15 year olds and 16/17 years old  •To continue to Provide Staying Put arrangements for 18 plus young people increase by 2% per year | Semi-independent/residential procurement completed and framework operational and savings generated  Community and residential parenting assessments tender completed, operational and savings generated.  Successful recruitment of 15-20 new foster carers.  All placement contracts to include recordable outcomes.  Staying put numbers increased on 15/16 data. increase  Implement Mind of My Own (MOMO).  Outcome Star implemented  3-4 Emergency FC recruited during 16-17  Family therapy strengthend for 16/17.  2-3 Short break foster carers recruited during 16-17  Young Carers service commissioned. |
|  | When local authority provision is unavailable children are placed in IFA and external residential placements. However despite being able to meet the needs of Havering young people these placements are increasingly at a distance from Havering. | A strategic approach is being adopted to ensure that more children are placed within Havering, then in neighbouring authorities. Placements at a distance should be reduced as far as possible as they are more costly and in many cases less suitable for the child who will be further away from home, family and friends. | There is a requirement to reduce the reliance on residential care provision and recruit and develop local specialist foster cares. This is being progressed during 2016. | Procurement of a provider framework completed 2016 (semi-independent and residential placements).  The successful recruitment of 2-3 specialist foster carers |
|  | A robust residential review process has been implemented during 2015/16 Appropriate plans are in place for children in external residential care and IFA placements, reducing support over an agreed timescale to prepare the child to move on | Appropriate Residential care placements within/local to borough | Joint Commissioning of Residential placements with adjoining boroughs. | Agreed plans to jointly commission residentail placements. |
|  | The adoption service has seen the number of children needing adoption reduce with 11 children being placed with adopters in 2013/14 compared to 8 children placed in 2014/15 and . There were 15 adoptions made in 2013/14 compared to 10 adoptions made in 2014/15 and 7 in 2015/16 | Therapeutic provision enhanced to support adoptive parents. | To commission Therapeutic support. | Therapeutic Framework tender completed |
|  | Havering performs well in comparison to statistical neighbours and national averages in relation to the number of placements breakdowns (using the 3 or more placement moves measure). Good matching and placement choice must be in place when securing a placement. The monitoring of clear Care Plans should reduce drift and ensure that children are in appropriate placements. IROs play an important role in monitoring placements, the progression of Care and Pathways Plans and championing the needs of children looked after. | To enhance the placement planning process  Systemic family therapy approach developed for children’s social care | CCU to complete detailed notes from placement planning meetings and include in placement contracts. Contracts to be shared with SW and IRO. Placement planning notes to be referred to at LAC reviews and updates share with CCU  Systemic family therapy modules made available for permanent staff | LAC review updates shared with CCU and added to existing provider contracts  Systemic training procured and implemented. |
|  | The joint protocol for homeless 16-17 year olds is now in place Homeless young people are fast-tracked directly to the over 12s team, enabling a clear pathway for our young people. No young person who makes a homelessness approach is placed in hostel or bed and breakfast accommodation. | Concerns have been expressed regarding the number of care leavers who have been evicted from their tenancies.  Monitoring arrangements to be agreed with Housing.  To set up a working group with Housing, CCU and SW to ensure Care Leaves are well prepared for their own tenancies. | •To provide adequate support to care leavers so that they are able to  be successful in their accommodation arrangements.  •Review the suitability of adult housing stock to be converted for the use for LAC  •Scope providing pre-tenancy courses  •Scope Care leavers with complex needs who may require more intensive support (2016/17). There is a small cohort of young people who leave care each year with complex needs who do not meet thresholds for adult services.   Develop accommodation options for these young people  Joint Housing and social care panel set up during 16/17 | Reduction in Care Leavers evictions. |
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1. London Borough of Havering - SSDA 903 Benchmarking data 2015 [↑](#footnote-ref-1)