



Stoke-on-Trent

Children in Care Placement Sufficiency Strategy 2014- 2016

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Children in Care Placement Sufficiency Strategy

Introduction

This strategy document sets out how Stoke-on-Trent City Council intends to meet the Sufficiency Duty as laid down in Section 22G of the Children Act 1989. In developing this strategy we are aware of the new regulations for children in care which came into force in April 2011 and of the severe financial restraints on local authorities reflecting the need to meet the needs of the child and use limited resources in the most effective and efficient way.

This strategy sets out Stoke-on-Trent's response to this statutory guidance and is the plan to ensure sufficient accommodation of all types for children in the care of this authority recognising the importance of earlier, preventative action to support children and families so fewer children become looked after.

The strategy takes into account the rise in numbers of children in care across the country, triggered in part by economic pressures alongside a number of high profile tragic cases and learning from serious case reviews. The number of children in care locally has risen significantly over the last 3 years with a population of 410 in March 2011, which rose to 440 in March 2012 and which stood at 480 at the end of March 2013.

Whilst our overall aim is to prevent children coming into care wherever possible, by providing family support and engaging with the wider family finding options and support packages for children who are near or on the edge of care, we aim to ensure all our care provision is of high quality and meets the individual needs of our children.

The strategy is underpinned by detailed action plans.

Vision

The overarching vision for the children in care service is to **'find me a family I can be part of forever'**. This expresses our vision that permanency provides the very best environment for children to feel safe and secure which will enable them to reach their potential and enter adulthood being able to achieve happy and fulfilling lives.

Our aim is for all children who are looked after by Stoke-on-Trent City Council is to be placed in high quality local family settings in the city, allowing them to maintain links with families and friends and also minimise disruption to their education. We aim to place each child, as far as is practicable, within family settings such as our own internal foster care provision, which is our preferred option. However, there may be times when children need to be placed in provision outside the city because they need a specialist resource or in order to keep them safe. These placements are reviewed on a very regular basis in order to establish that they remain the best option for the child.

We believe that internal provision is able to provide the best quality placements for the majority of children. As well as being local to the child's family and school the

whole of the children in care service is managed by one strategic manager. This means that children and their placements are seen and managed in an holistic way which enables children to remain in placements that may otherwise have disrupted.

Our Approach

Every placement decision is based on a full assessment of the child's needs taking into account as far as possible the child's wishes and feelings. The decision for a child to come into care or for the Public Law Outline (court proceedings) process to begin is made at our case directions meeting which is held on a weekly basis. This is chaired by the Strategic Manager for Safeguarding and Vulnerable Children and also attended by the Strategic Manager for Children in Care. This process ensures consistency and appropriate challenge ensuring that all avenues have been explored to enable children to remain at home or to live with family members without entering the care system. If it is felt that a child needs to come into care in an urgent situation the decision can be made outside of this process but is always made by a strategic manager.

A member of our Placement Finding Team attends Case Directions. This enables them to identify appropriate placements as soon as possible. The majority of our children within care proceedings have planned placements. There are occasions when children enter the system in an unplanned way but the process for placement finding remains the same with a placement request form being completed and signed off by a strategic manager. This enables a clear audit trail of the decision making process but also enables the placement finding team to have as much information as possible so that the child can be appropriately placed.

Our Pledge

We have a pledge or promise to the children in the care of the city council and those who are care leavers. This pledge is publicly available, developed with our young people and covers four areas:

- Service Delivery: ensuring they have a good home and help them to stay fit and healthy
- Involvement: ensuring they are asked for their views about the decisions that affect their life
- Achievements: ensuring they are helped to get the best from their education and make a successful move on from care into adult and independent life
- Retaining and developing identity: encouraging and supporting them to develop into the best person they can be.

We also have a foster carer's charter for our internal foster carers .The charter was developed with our foster carers and clearly lays out our expectations of foster carers as well as the expectations that carers can have of the local authority. The charter shows our aspiration of high quality provision of care for our children and what we are doing to ensure that carers can meet these standards.

Local Context

Following on from Professor Munro's report in 2011 Stoke-on-Trent actively pursued a model of systemic practice as our theoretical underpinning to social work practice. We had already looked at a range of models and following a pilot at the end of 2011 the structure was changed to create social work pods and the model fully implemented in April 2012. The pods are made up of 2 social workers, 1 social work assistant and a pod coordinator. Whilst each child will have a lead worker the case loads for each child are owned jointly by the pod. This ensures that someone familiar with the case will be able to visit children or deal with issues if the lead worker is unavailable, on leave or off sick.

We are committed to providing high quality training in the area of systemic practice to all our social workers and managers. This comprises of a 15 day programme with accreditation for all those completing the presentation and assignments. Our specialist CAMHS for children in care, Yellowhouse, provides on-going support to the pods to help embed this new way of working.

Stoke-On-Trent is a Munro development demonstrator site, which formally recognises our progress and plans within a national learning and sharing environment with other authorities. Whilst we are hopeful that this new way of working will safely reduce the number of children in care our main aim is to ensure that we have the right children in the right part of the system.

In the summer of 2012, however, we saw a dramatic rise in the number of older children entering the system. This was partly attributed to the Southwark ruling, (which gave the primary responsibility to children who found themselves homeless to social care rather than housing) but we also saw a need to work in a very specific way with families of older children. As a result a new additional social care pod was created to provide this service. This service has worked with a range of families and prevented 66 children from entering the care system or assisting in their return home very quickly. This pod is jointly funded with Troubled Families resource, locally known as Families Matter, and links closely with our locality teams.

We are currently working with our key partners and our internal colleagues in the localities to embed our step up step down arrangements. We currently have 3 social workers based in the localities to provide advice and guidance to colleagues to enable work with families to take place to prevent escalation to our part of the service. We are also starting to look at how the localities can be instrumental in helping children to return home after a period in care.

Alongside the preventative work we continued to increase our internal provision successfully increasing the number of foster carers between 2011 and 2013. We also increased our small group home provision by 2 homes bringing our in house residential provision to 10 small group homes providing placements for 20 children. We also have a specialist unit providing respite care for children with disabilities.

Needs Analysis

Population

According to 2012 mid-year estimates published by the Office of National Statistics (ONS), the total population of 0-19 year olds living in Stoke-on-Trent is 61,800, an increase from approximately 61,000 in the 2001 census. The 2011 age breakdown is shown in the table below.

| Age | Number of children and young people |
|--------------------|--|
| Aged 0 - 4 years | 17,500 |
| Aged 5 - 9 years | 14,900 |
| Aged 10 - 14 years | 13,600 |
| Aged 15 - 19 years | 15,800 |
| Total | 61,800 |

The increase of approximately 800 children in the city does not tell the full story. There has been an increase of over 3,500 children in the 0-4 age group and a decrease of nearly 3,000 children in 10-14 age group. The 5-9 age group has increased slightly and the 15-19 age group has decreased slightly.

The population of 0-19 year olds is expected to continue to increase. According to the latest projection figures (ONS, 2011) the city is expected to have a 0-19 population of 63,182 by 2016. These figures have been considered in this strategy and further breakdown on the ages of these population changes is included in the relevant section of this strategy.

The Number of Children in Care

The number of Children in Care (CIC) has risen significantly over the last 3 years with a population of 410 in March 2011, which rose to 440 in March 2012 and which stood at 480 at the end of March 2013. Whilst this trend is mirrored in most Local Authorities across the Country and may have been influenced by the economic pressures, there is a need to understand the data to inform service planning and ensure that we have sufficient high quality placements for our children in care.

Number and Rate of Children in Care 2009 to 2013 – local and comparisons with statistical neighbours

| | Number of Children in Care | | | | | Rate of Children in Care | | | | |
|-----------------------------|----------------------------|---------------|---------------|---------------|---------------|--------------------------|-----------|-----------|-----------|-----------|
| | 2009 | 2010 | 2011 | 2012 | 2013 | 2009 | 2010 | 2011 | 2012 | 2013 |
| England | 60,900 | 64,450 | 65,500 | 67,080 | 68,110 | 54 | 57 | 58 | 59 | 60 |
| Kingston Upon Hull, City of | 525 | 570 | 620 | 615 | 650 | 94 | 104 | 114 | 113 | 120 |
| Middlesbrough | 275 | 320 | 330 | 355 | 360 | 87 | 101 | 104 | 111 | 114 |
| Hartlepool | 150 | 165 | 165 | 175 | 190 | 72 | 80 | 80 | 85 | 95 |
| Stoke-On-Trent | 395 | 405 | 410 | 440 | 480 | 73 | 74 | 76 | 81 | 88 |
| Tameside | 330 | 350 | 375 | 390 | 390 | 68 | 73 | 77 | 80 | 80 |
| Doncaster | 425 | 470 | 450 | 510 | 495 | 65 | 72 | 69 | 78 | 76 |
| Rotherham | 405 | 410 | 390 | 380 | 390 | 71 | 73 | 69 | 68 | 70 |
| Wakefield | 345 | 375 | 395 | 435 | 445 | 50 | 54 | 58 | 64 | 65 |
| Redcar and Cleveland | 140 | 155 | 150 | 170 | 175 | 47 | 55 | 53 | 62 | 63 |
| North East Lincolnshire | 150 | 155 | 145 | 155 | 200 | 43 | 44 | 42 | 45 | 58 |
| Barnsley | 260 | 245 | 245 | 230 | 235 | 53 | 50 | 50 | 47 | 48 |

The DfE categorise the age bandings for children and young people into the following: 0-4, 5-9, 10-15 and 16+ and whilst there has been a net increase in all categories, there has been a significant changing profile by age band.

Numbers of Children in Care by Age Group (% of city population)

| | 2009 | 2009 | 2010 | 2010 | 2011 | 2011 | 2012 | 2012 | 2013 | 2013 |
|----------------|------|-------|------|-------|------|-------|------|-------|------|-------|
| 0 to 4 years | 84 | 21.4% | 99 | 24.5% | 110 | 26.8% | 113 | 25.7% | 145 | 30.3% |
| 5 to 9 years | 66 | 16.8% | 71 | 17.6% | 69 | 16.8% | 91 | 20.7% | 97 | 20.3% |
| 10 to 15 years | 179 | 45.5% | 169 | 41.8% | 158 | 38.4% | 161 | 36.6% | 151 | 31.5% |
| 16 and over | 64 | 16.3% | 65 | 16.1% | 74 | 18.0% | 75 | 17.0% | 86 | 18.0% |

In 2011 56.4% of the children in care were over the age of 10 years. In 2013 this had fallen to 49.5%. This is partly due to children who had remained within the system for some years reaching the age of 18 but also due to the fact that fewer children in the 10 – 15 year age bracket were entering the system. The percentage of children over the age of 16 has remained as a steady percentage of our population and has been largely due to the Southwark ruling which has led to a number of young people entering the system post 16.

By March 2013 we had seen a rise in our 0-9's from 43.6% in 2011 to 50.6% in 2013.

This supports the notion that the admission of children into care is linked to the safeguarding activity for the most vulnerable and youngest children in the City and reflects a changing focus that supports the older age young people to either remain living at home or to have moved on to supported living arrangements.

Numbers of Children in Care by Placement Type as of 31st March

| | 2009 | 2010 | 2011 | 2012 | 2013 |
|--|------|------|------|------|------|
| Family Centre / Mother and Baby Unit | 0 | 0 | * | 0 | 0 |
| Foster placement with relative or friend | 68 | 69 | 54 | 57 | 69 |
| Residential (internal and external residential) | 42 | 44 | 47 | 50 | 50 |
| Independent living | 8 | 10 | 12 | 9 | 17 |
| Missing from placement - Whereabouts unknown | 0 | 0 | 0 | * | 0 |
| NHS / Health Trust / medical or nursing care estab | 0 | * | * | 0 | * |
| Other placement | * | * | 0 | * | * |
| Placed for adoption | 29 | 17 | 15 | 20 | 17 |
| Placed with parents / person with parental resp. | 29 | 28 | 31 | 28 | 43 |
| Placement with other Foster Carer | 203 | 224 | 243 | 269 | 277 |
| Residential School | 9 | 8 | * | * | * |
| Secure Unit | * | 0 | 0 | 0 | 0 |
| YOI or Prison | 0 | 0 | * | * | * |

Key: * = Counts of five or fewer suppressed to avoid indirect disclosure

The number of children placed with foster carers continues to rise with 44 more children being placed in foster placements at March 2013 as compared with March 2011. The number of connected carers (carers who are approved for a specific child and are either members or friends of the child's family) also has risen from 54 to 69 during the same period. Placements with connected carers tend to be on a shorter term basis as our aim would be to move these carers on to be Special Guardians if the children were remaining on a permanent basis. The numbers of children in residential placements has increased by 3 between 2011 and 2013 with 50 children having a residential placement at the end of 2013. Our own provision increased in 2012, however, enabling a total of 20 children now to be in internal residential provision which provide local placements in 2 bedded homes.

The number of children placed with parents has noticeably increased over the last 2 years. By March 2013, 43 children were placed at home on care orders compared to 31 in 2011 and 28 in 2012. This increase is a direct result of the court protocol which has reduced the length of care proceedings to 26 weeks. Children who would otherwise have been returned home subject to 'no order' or Supervision Orders or have been placed with family members and been subject to Special Guardianship Orders or Residence Orders are now being made subject to Care Orders as there is not enough time to test out situations and satisfy the court that proceedings can be concluded on anything other than a Care Order. This is something that has been fed back to our local court and to a wider review of the Public Law Outline process.

Numbers of Children in Care by Ethnicity as of 31st March

Ethnicity of children starting to be looked after (% of population)

| | 2009 | 2009 | 2010 | 2010 | 2011 | 2011 | 2012 | 2012 | 2013 | 2013 |
|------------------------|------|-------|------|-------|------|-------|------|-------|------|-------|
| Any other ethnic group | 8 | 5.2% | 11 | 6.1% | 13 | 7.6% | ** | ** | 9 | 3.5% |
| Asian | ** | ** | ** | ** | 7 | 4.1% | 7 | 3.4% | 13 | 5.1% |
| Black | ** | ** | ** | ** | 6 | 3.5% | 13 | 6.4% | 10 | 3.9% |
| Gypsy/Roma | 0 | 0.0% | 0 | 0.0% | 0 | 0.0% | 0 | 0.0% | 10 | 3.9% |
| Mixed | 8 | 5.2% | 13 | 7.3% | 15 | 8.8% | 21 | 10.3% | 19 | 7.5% |
| White* | 132 | 85.7% | 148 | 82.7% | 130 | 76.0% | 157 | 77.3% | 194 | 76.1% |

*Please note: White Category includes all White, not just White British

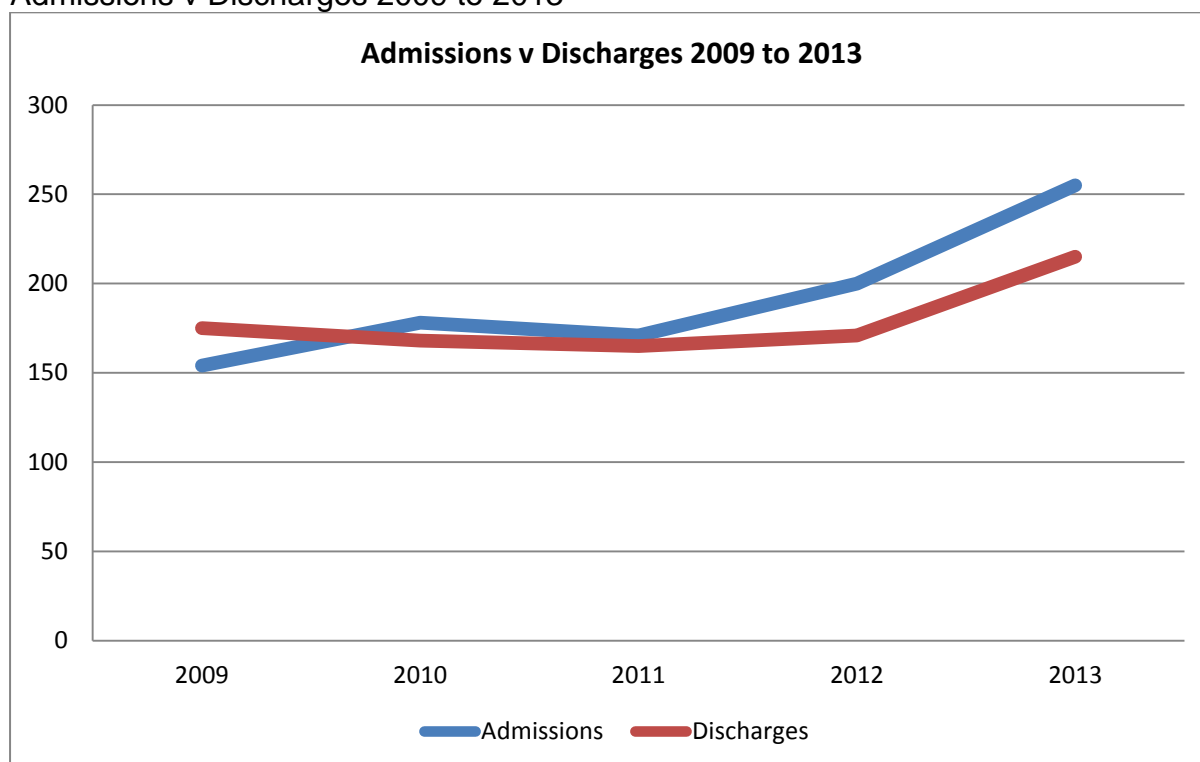
Key: ** = Counts of five or fewer suppressed to avoid indirect disclosure

In the 2011 census, 80.2% of the city's 0-19 population were identified as White British. The next largest ethnic group was Asian/Asian British: Pakistani which accounted for 7.5% of the population. Census data shows that the population of children is more diverse in the younger age group, for example in the 0-4 age range 76.3% are identified as White British (lower than the 0-19 %). The annual school census highlights a significant change in the ethnicity of children in recent years. In our schools, the younger age groups have a more diverse mix of children and a lower percentage of White British children. This is reflected in our children in care population. Due to the total increases in our children in care population, we have seen an increase in the number of White British children in the last five years but when viewed as a percentage of the total population in care, the White British population makes up 10% less in 2013 than in 2009. In addition to this, although numbers are relatively small, we have seen large increases in our Asian and Gypsy/Roma populations both in number and proportion of the children in care population and this needs to be analysed further to see how future projections may affect our services.

Stoke-on-Trent has seen an increase in its Eastern European Community over the last 3 years and it can be seen from our data that we had a significant rise in Roma children entering the care system. There does not appear to be a pattern of Roma children being admitted to care, however, and all the children who were looked after have now appropriately returned to their country of origin.

Admissions and Discharge Activity

Admissions v Discharges 2009 to 2013



Gender of children starting to be looked after

| | 2009 | 2010 | 2011 | 2012 | 2013 |
|--------|------|------|------|------|------|
| Female | 71 | 79 | 79 | 100 | 115 |
| Male | 83 | 99 | 92 | 100 | 140 |

Children starting to be looked after in the year 2009 to 2013

| | 2009 | 2010 | 2011 | 2012 | 2013 |
|-----------------------------|---------------|---------------|---------------|---------------|---------------|
| England | 25,680 | 28,080 | 27,500 | 28,390 | 28,830 |
| Hartlepool | 95 | 95 | 70 | 85 | 85 |
| Middlesbrough | 145 | 185 | 170 | 200 | 190 |
| Redcar and Cleveland | 55 | 100 | 85 | 80 | 65 |
| Tameside | 120 | 125 | 160 | 150 | 135 |
| Barnsley | 120 | 85 | 90 | 110 | 110 |
| Doncaster | 180 | 225 | 190 | 260 | 195 |
| Kingston Upon Hull, City of | 170 | 225 | 240 | 195 | 200 |
| North East Lincolnshire | 70 | 80 | 55 | 60 | 115 |
| Rotherham | 155 | 150 | 165 | 145 | 155 |
| Wakefield | 165 | 140 | 175 | 175 | 145 |
| Stoke-On-Trent | 150 | 180 | 165 | 195 | 245 |

Numbers of Admissions to Care by Age Group

Age group of children starting to be looked after

| | 2009 | 2010 | 2011 | 2012 | 2013 |
|----------------|------|------|------|------|------|
| 0 to 4 years | 82 | 87 | 93 | 83 | 134 |
| 5 to 9 years | 23 | 35 | 30 | 32 | 43 |
| 10 to 15 years | 45 | 50 | 41 | 62 | 58 |
| 16 and over | * | 6 | 7 | 23 | 20 |

Key: * = Counts of five or fewer suppressed to avoid indirect disclosure

Our data shows that we continue to admit more boys into care than girls and that we have seen a rise in the numbers of all age groups admitted in 2013 when compared to 2011. The largest increase has been in the 0-4 year olds. It is also noticeable that we had a significant increase in older children being admitted into care in 2012 with 13 more 10-15 year olds and 16 more 16-17 year olds entering the care system in 2012 as compared to 2011. A number of measures were taken to address this including the creation of the new pods to work with older children on the edge of care and we saw these numbers start to decrease by March 2013.

Numbers of Children Discharged from Care by Age

Discharges by age group

| | 2009 | 2010 | 2011 | 2012 | 2013 |
|----------------|------|------|------|------|------|
| 0 to 4 years | 78 | 56 | 66 | 60 | 80 |
| 5 to 9 years | 29 | 31 | 32 | 15 | 43 |
| 10 to 15 years | 28 | 30 | 25 | 34 | 38 |
| 16 and over | 40 | 51 | 42 | 62 | 54 |

Numbers of Children Discharged from Care by Duration of Stay

Children discharged from care by duration of care

| | 2009 | 2010 | 2011 | 2012 | 2013 |
|--------------------|------|------|------|------|------|
| Less than 1 month | 26 | 29 | 23 | 30 | 50 |
| 1 to 6 months | 28 | 21 | 18 | 27 | 47 |
| 6 months to 1 year | 13 | 29 | 37 | 23 | 26 |
| 1 to 3 years | 66 | 40 | 36 | 53 | 46 |
| 3 to 5 years | 18 | 20 | 22 | 9 | 12 |
| 5 years and over | 24 | 29 | 29 | 29 | 34 |

Numbers of Children Discharged from Care by Reason for Discharge

Children discharged from care by care end reason

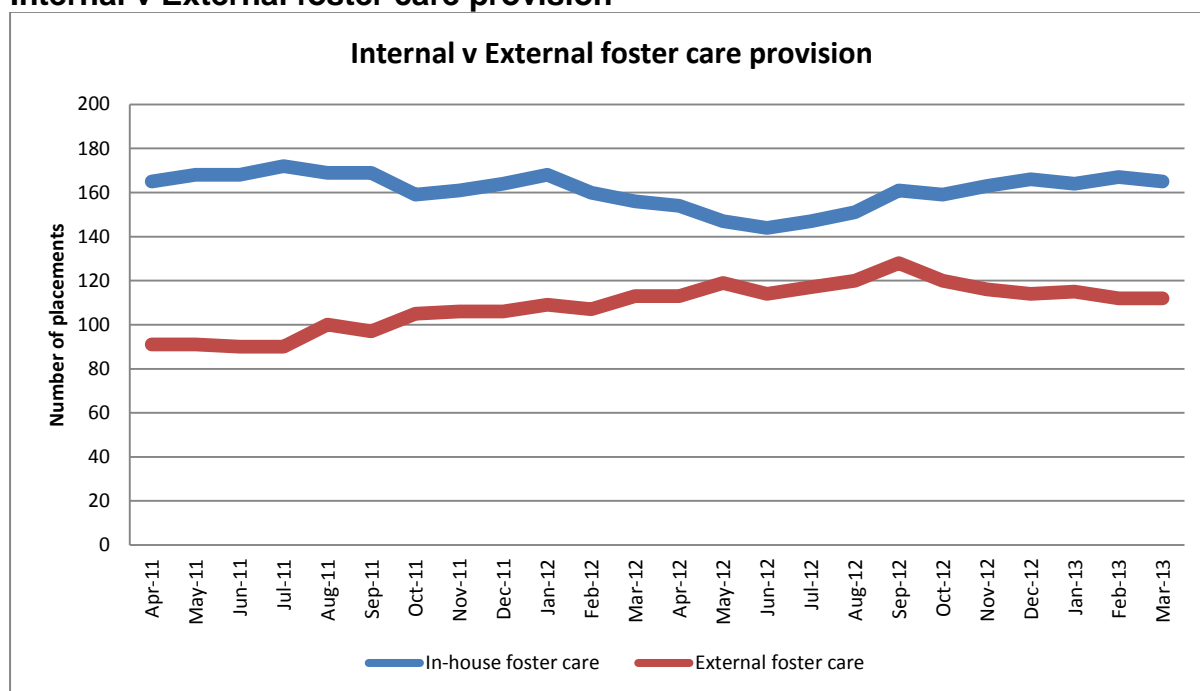
| | 2009 | 2010 | 2011 | 2012 | 2013 |
|-------------------------------------|------|------|------|------|------|
| Adopted | 39 | 30 | 33 | 29 | 45 |
| Care ceased for any other reason | 35 | 26 | 27 | 32 | 61 |
| Care taken over by another LA in UK | * | * | 0 | * | * |
| Died | 0 | 0 | * | 0 | * |

Key: * = Counts of five or fewer suppressed to avoid indirect disclosure

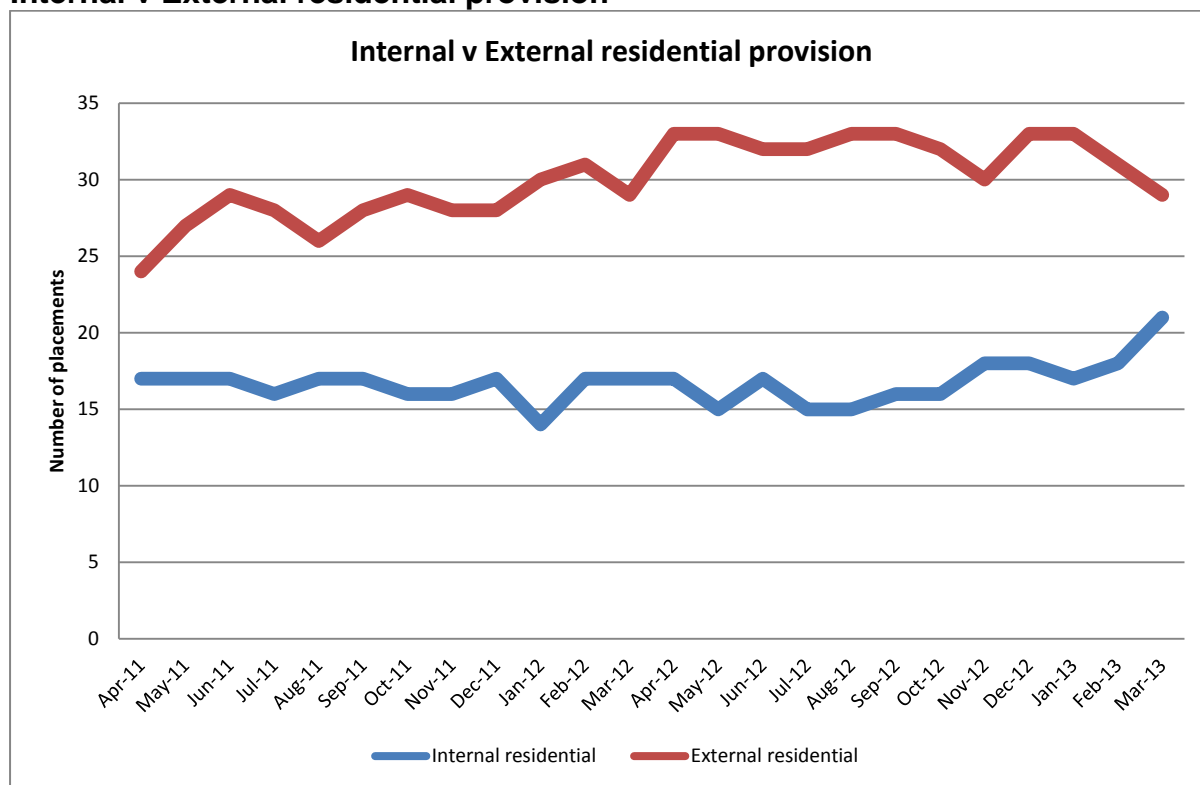
Our focus on permanency has resulted in high numbers of our children leaving as a result of adoption. We also have high numbers being made subject to Special Guardianship orders.

More children are exiting the care system after only 1 month. This could be positive in that we are very quickly resolving issues and returning children to parents or extended family. We need to explore, however, whether these children needed to enter care in the first place and this is a piece of work that will be completed.

Internal v External foster care provision



Internal v External residential provision



Current Provision

Internal Fostering

Stoke-On-Trent's Fostering Service comprises of:

1. The fostering recruitment team which is responsible for the recruitment and assessment of all general foster carers and the assessment of all connected carers including those assessed under Regulation 24.
2. The support and supervision team who provide regular and on-going support and supervision to all foster carers. This team is further split into workers who support and supervise general carers and those who provide a service to connected carers.
3. Family link workers who provide a service to carers who offer respite care to children with a disability.

The service provides a range of different placement types, including:

- Short term task focused placements providing placements for children entering the care system
- Intermediate task focused placements providing medium to longer term placements for children in care.
- Permanent and long-term carers -a fostering alternative where adoption or special guardianship is not appropriate.
- Connected carers -carers who are assessed under fostering standards and are family or friends of a specific child.

- Family Link carers – a short break care scheme for disabled children and young people providing support to children in need.

The total number of fostering households supported by the service has steadily increased from 126 households at 31st March 2011 to 140 households at the end of March 2013.

For the financial year ending 31st March 2013, Stoke-on-Trent City Council received 259 enquiries from the public regarding fostering. The conversion rate from enquiry to application increased from 31 in 2011 to 55 by March 2013, demonstrating increased effective targeting of the recruitment and selection processes. There is a rolling foster carer recruitment campaign consisting of bill board posters and radio advertisements. The campaign has a consistent theme which is based on 'Keeping children in Stoke – where they belong'. This campaign has been very successful and we have been nominated for an LGC Award for the most successful campaign. Analysis of sufficiency has informed the recruitment campaign. We currently have a gap in fostering provision for older children and the campaign due to start in November 2013 is a specific campaign to recruit carers for this age group.

Our payment scheme was reviewed and restructured in 2012 enabling carers to receive a fee as soon as they began fostering. This allowed us to become competitive with the private fostering agencies and has also helped increase our in house fostering provision.

Feedback from a recent West Midlands benchmarking exercise presents a regional picture of internal fostering activity for each authority. This report has started a wider discussion regarding occupancy levels, costs (unit and average), quality and common approaches for calculating costs and sharing good practices.

The strategic aims for the service are:

- To manage demand for independent fostering beds by increasing internal capacity to 195 foster carer households by March 2015. On average this will mean recruiting a minimum of 80 households and losing a maximum of 30 during this period.
- To increase the percentage of children placed with Stoke-On-Trent carers from 35% of the children in care population in March 2013 to 40% by March 2014 to the CIPFA Looked After Benchmarking Club average of 42.4% by March 2015 i.e. if numbers of children in care remain at around 520 we would expect 220 of these children to be looked after by in house foster carers.
- To maintain sufficient foster carer placements for children new born to 3 years whilst increasing foster carer placements for children aged 10-15 years.
- To continue to review the on-going recruitment campaign strategy.
- To ensure the quality of social work and other support to foster carers is maintained as the total number of households increase. This is especially pertinent to newly approved carers, to avoid any possible premature 'drop out' from fostering.
- To undertake exit questionnaires and feedback mechanisms from existing carers and use the resulting information to improve practice and thus retention.

- To learn from feedback from children and young people as to what makes foster care either a positive or negative experience.
- To learn from external sources, such as feedback from the Independent Review Mechanism, Ofsted and other fostering providers, as well as national research.

External Fostering Placements (Independent Fostering Agencies – IFA)

Stoke-on-Trent currently has a locally commissioned framework contract with 5 Independent Fostering Agencies.

We have recently contributed towards the benchmarking exercise undertaken with other authorities within the West Midlands Region to clarify the commissioned fostering arrangements. This included an analysis of suppliers and provides a basis from which to facilitate the region's procurement activity.

Our local contract is due to end in 2014 and we are exploring both a sub-regional and a regional approach to securing a framework contract from April 2015. Our plan is to extend our current arrangements for one more year. The three largest IFA's in the country are active in the region.

When we are unable to place children with in house carers we use a mixture of providers from the local framework contract and spot purchase placements. At the end of 2013 we had a total of 112 children placed with agency carers, 8 of which were UASC (Unaccompanied Asylum Seeking Children). Although this is an increase in agency foster placements when compared to 2011 data we have had an increase in the numbers of children in care and have also placed more children with in house carers as a direct result of increasing our internal provision by 19 additional foster carers.

Of the 112 children in placement with agency carers at the end of 2013, 49 of these had been new placements during the year. 17 of these 49 children remained within the Stoke-on-Trent boundary, 23 were placed in Staffordshire which is our neighbouring authority and 9 were placed further afield. We currently have a *small number of children placed in our furthest away placements. 17 children were placed with agency carers to enable them to remain with their siblings and a *small number to enable culturally appropriate placements to be made.

Key: * = Counts of five or fewer suppressed to avoid indirect disclosure

Of the remaining 63 children:

- 26 had been in placement for one year.
- 13 had been in placement for two years.
- 5 had been in placement for three years.
- 19 had been in placement for over four years.

The remaining 32 children who were not part of a sibling group were aged between 7 and 17. Recent indications show that the minimum age of the children placed with agency carers is increasing from 7 to 10 years. This is positive in that we are now

more able to place children with internal foster carers for children up to the age of 10 but shows a clear gap in provision for our older children.

Our strategic aim is to increase our internal provision and reduce our use of agency carers. We aim to do this by reducing the number of new placements made rather than disrupting children and moving them to internal carers unless it is in their best interests to do so. Our numbers have reduced and we are currently placing slightly less children with agency carers than this time last year. Despite the increase in the numbers of children in care this strategy appears to be working.

In February 2013, the Placement Finding Team took over responsibility for identifying internal foster carers as well as agency foster carers. They have focused on maximising the number of placements made using internal provision, monitoring internal carers who are 'on hold' and ensuring that they know about forthcoming vacancies to enable planned placements to be made. Internal foster placements are always considered before IFA's but children's needs are always the priority when identifying placements and there are occasions where agency placements are made even if in house carers are available.

Should a placement breakdown or a change of placement necessary the Placement Finding Team will always ensure that internal foster carers are considered before agency foster placements.

The Placement Finding Team together with the Strategic Manager conduct on-going reviews of all external placements to ensure that they are meeting the needs of children and securing the best value for money. At these review meetings we also discuss the plans for independence and check that they are being progressed so that the young people can move into independent living where appropriate at a time that is right for them ensuring the transition is fully supported.

Regular formal reviews are also conducted with agency providers to ensure that placements are of high quality and to address any specific issues raised.

Internal Residential

Stoke-on-Trent has a model of residential care based on the use of 2 bedded small group homes. These homes each offer placements for 2 young people at any one time and are situated across the city. All the small group homes are judged by Ofsted to be 'Good' or 'Outstanding' apart from 1 which has been judged as Adequate. Our small group homes are seen as an area of good practice offering some of our most challenging children the opportunity to remain within Stoke-On-Trent. This enables them to remain more easily in contact with family and friends and also allows the professional network which has built up around the young person to remain actively involved.

To ensure that our internal provision is able to meet the needs of our children there has been an investment in small group homes and another 2 homes became operational in December 2012 – making a total of 10. A small number of children who were in external residential placements have moved into these houses which offset the cost of running the 2 new small group homes.

The remit of small group homes has changed from providing placements for young people to remain until they are 18 to working closely with the young people and their families to enable these young people to return home or move to supported accommodation wherever possible.

We are currently looking at what a 3 bedded small group home would look like, both in relation to the quality of care and the cost. This may be an option for further development in the future.

We are also in discussion with local third sector organisations to look at whether we can create any further residential provision under a partnership arrangement.

External Residential Provision

Externally commissioned residential placements are used when all other internal solutions have been explored or exhausted, when there are no external foster carers or when the child's needs are complex and require specialist provision.

We have a robust approach to the commissioning of external residential placements. As part of the West Midlands Children's Residential Contract Framework we have paid no uplift for over 3yrs. The current framework provides an open, transparent pricing system which operates across the region and includes core costs as well as costs for services to meet specific needs.

We also use spot purchasing arrangements in order to gain more cost effective placements on an individually negotiated basis.

A total of 22 external residential placements were made in 2012/13. Three of these placements are jointly funded with health and/or education. Of the 22 placements made 8 are in Stoke-on Trent, 6 are in our neighbouring authority, Staffordshire and 8 are further afield.

Our aim is to reduce the number of external residential placements but we have been in a position of having placed more children in such placements in the first half of this year as compared to 2012/13. These placements are reviewed regularly by the Strategic Manager and the children placed out of area are there for very specific reasons and have clear exit plans.

We constantly strive to reduce the number of children placed outside our city and since April 13, we have returned a small number of children to our internal residential provision. The Placement Finding Team meets regularly with our internal residential managers to discuss upcoming vacancies alongside children in external residential placements. Where appropriate, plans are then made for children to return to Stoke-on Trent.

Leaving Care Provision

Historically young people have remained in residential care until 18. It has become clear that this is not right for them and is also an added cost to the local authority. If young people move to semi independence units or appropriate supported accommodation between 16 and 17 we can offer appropriate levels of support that will enable them to move into adulthood in a more confident and prepared way. All young people approaching 16 are now reviewed on an annual or 6 monthly basis to ensure appropriate plans are in place for their transition. We would not encourage any young person to move into independent or supported accommodation at the age of 16. We recognise, however, that some young people are very clear that they do not want to remain with their carers and for these young people we identify the most appropriate accommodation with adequate support to meet their needs.

Supported accommodation is identified via the West Midlands Supported Accommodation Framework which ensures that young people are living in high quality accommodation with appropriate support.

We have recently introduced a training flat which allows young people to experience living alone for a 2 week period. This followed consultation with our Children in Care Council who actively championed this as a resource. Although early days the training flat is seen as a positive learning experience for young people approaching independence. It allows us and the young person to know in a more detailed way the type of support needed and any gaps in their independence skills that we can address before a move takes place.

Adoption and Permanence

The recently published Adoption Scorecard shows that Stoke-on-Trent City Council adoption agency is performing well against both national and neighbouring authorities. A high number of children within Stoke-on-Trent leave care via adoption, 20% compared to the national figure of 13%. In terms of numbers within the region, Stoke-on-Trent has had the third highest number of children adopted (110), behind Birmingham (245) and Staffordshire (120), areas with substantially higher numbers of children in care and much greater populations.

In terms of the average time between a child entering care and moving in with its adoptive family we average 574 days, compared to a national average of 647 days. This suggests that care proceedings and family finding are taking place in a reasonably timely manner. Once it is agreed that adoption is the plan for a child and the court has confirmed this plan Stoke-on-Trent takes 188 days to match a child with an adoptive family, compared to 210 days nationally. The overall trend, however, amongst most local authorities is that it is taking longer for children to be placed with their adopters, due most likely to the significant increase in the numbers of children in care and who have an adoption plan and the challenges in recruiting sufficient adopters who are able and willing to care for those children.

Stoke-on-Trent does well in terms of placing BME children at 13%, as opposed to 7% nationally, and of those children over 5 who are adopted our figure is 9% compared to 4% nationally.

It is also noted that we have had no adoption disruptions in the last three years and we have been successful in a number of sibling groups, including sibling groups of three.

Factors which will influence timescales are the numbers of children in care; the numbers of children with an adoption plan; the number of available adopters both locally and nationally; the impact of court judgements which state that adoption should only be used as a last resort; the availability of post adoption support; and the impact of legislation, such as the Foster to Adopt model which has been embraced very positively within Stoke-on-Trent.

As a related factor, the percentage of children who leave care in Stoke-on-Trent via Special Guardianship is 14%, against a national average of 8%. We currently have the 7th highest number of Special Guardianship Orders in the country.

The adoption service has been more active in terms of advertising within the community and this has resulted in an increase in the number of enquiries in this period, 87 compared to 63 in the same period last year. It is yet to be seen whether this translates to approved adopters.

The adoption service has also been more innovative in terms of family finding and has held an "Open Day" at Britannia Stadium giving approved adopters and soon to be approved adopters information on children waiting for placement through the medium of video and profiling. This has led to seven potential matches. We are also making more active use of external resources in finding families for children. The results of this are beginning to come through as we are exploring a number of matches with external agencies.

We have also agreed to take part in an ITV documentary about the adoption process. Only adoption agencies that had been judged as Good or Outstanding were approached and the focus is on the adopters and the children being placed. We agreed to take part in this programme to highlight the good practice in Stoke-on-Trent but to also raise the need for more adoptive families to be approved.

We have been using the Adoption Reform Grant to invest in training for social workers and have recruited a number of new social work assistants to support family finding and children already placed for adoption. These are all time limited posts for the lifecycle of the grant. We have now recruited a small "pod" of social workers who can focus on adoption work with children. Social workers are responding very positively to the training which has been offered and it is hoped that these skills can be seen as recruitment tools as well as practical and effective support for adopters.

Finance

Average Cost of Children in Care 2012/13

| Type of Placement | Average Weekly Cost £ |
|--|--------------------------|
| External Residential | 3,050 |
| Internal Residential | 2,790 |
| External Foster | 818 |
| Internal Foster | 466 |
| Supported Accommodation Children in Care | 494 |
| Adoption | 279 |

- External residential placements were on average 9% more expensive than internal in 12/13.
- External foster carers were on average 75% more expensive than internal foster carers.

Residence Orders

| Financial Year | Number at end of Year | % Number Residence Orders Increase Year on Year | Total Cost for Year £'000s | % Cost Increase Year on Year |
|----------------|-----------------------|---|----------------------------|------------------------------|
| 10/11 | 99 | 2.02% | 624 | -11.06% |
| 11/12 | 97 | -2.06% | 649 | 3.85% |
| 12/13 | 102 | 4.90% | 653 | 0.61% |

- Numbers and cost of residential orders have stayed fairly stable over 3 year period.

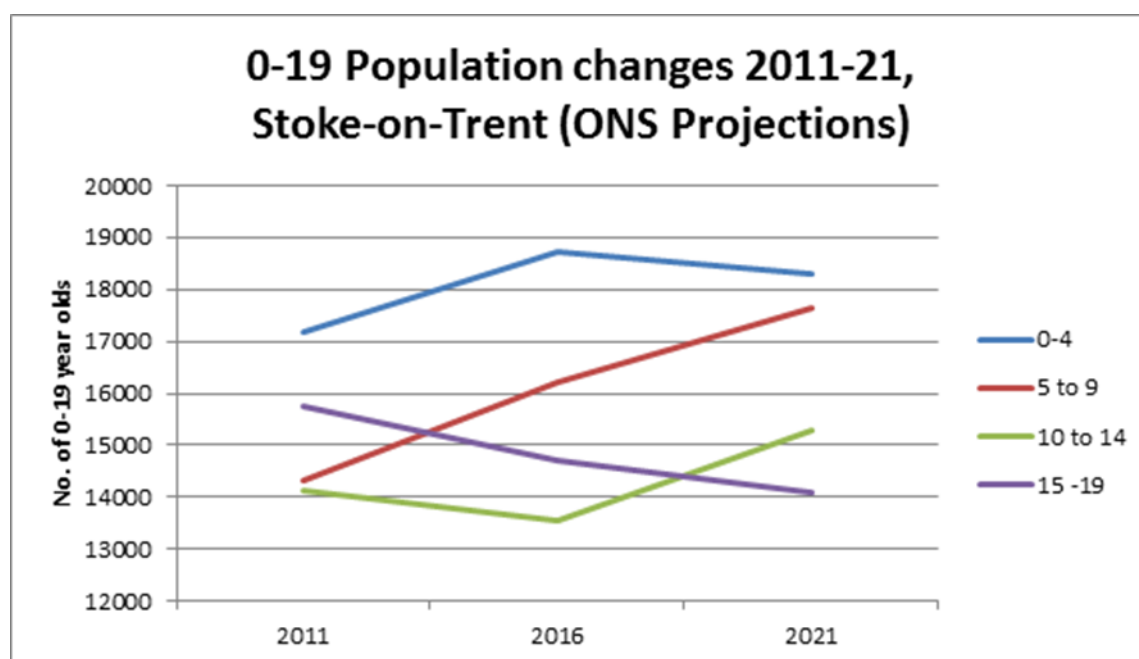
Special Guardianship Orders

| Financial Year | Number at end of Year | % Increase Year on Year | Total Cost for Year £'000s | % Increase Year on Year |
|----------------|-----------------------|-------------------------|----------------------------|-------------------------|
| 10/11 | 67 | 25.37% | 315 | 21.59% |
| 11/12 | 104 | 35.58% | 418 | 24.64% |
| 12/13 | 128 | 18.75% | 620 | 32.58% |

- Numbers of Special Guardianship Orders and subsequent cost has almost doubled over 3 year period.

Predicted demand for services 2013-16 / Strategic plan 2013-16

Latest population projections show that we will see significantly more 0-9 year olds by 2021. There will also be a significant decrease in the number of 15-19 year olds until the swell in the younger years comes through. These projections will be used to inform priorities for sufficiency of placements to meet the predicted needs of our future children in care population. The graph below highlights these changes:



Given the predicted rise in the population of 5-9 year olds we need to ensure that we have services in place to prevent a rise in numbers of children in care in this age bracket. We know that children entering the care system within this age range are likely to remain with us on a long term basis if we are unable to return to birth parents or provide permanence via a family member or connected person. Support provided by the locality teams for this group of children will be essential along with more targeted support from social care for those where there are safeguarding concerns.

Conclusion

- Current trends demonstrate that numbers of children in care are increasing as a % of the population, particularly in 0-4yrs age group and with ages 10-15 are decreasing as a % of the population. Young people aged 16 + are more steady.
- From the projections taken from the population projections up to 2021, it is anticipated the increase of children in care could be from within 0- 9yrs age group.
- Evidence of the preventative work through the support work of our 'edge of care pods' is having a positive impact in reducing the numbers of young people aged over 10yrs being taken into care. They are supporting families to

keep their young person safe, enabling them to remain home where appropriate and preventing family breakdown.

- Through pro-active regular monitoring and review processes, we have been able to identify at a much earlier stage, children who could be returned locally to the city from external, often expensive, residential care into our internal provision – therefore providing higher quality and more appropriate placement for the child and providing the authority with a more cost effective solution. We aim to continue this approach identifying the individual children and young people who, with intense packages of support, can be placed near their families and friends where appropriate.
- We need to build on our success at recruiting internal foster carers and focus recruitment, training and support for carers who will take specific age groups for example older children /young people aged between 10 to 17yrs and where families will foster sibling groups. Maximising internal foster carer places and occupancy rates is also a priority.
- We are proud of our strong adoption rates and we aim to maintain our successes.
- We have started to develop a wider range and choice of placements for 16-17yrs young people in care - increasing and supporting their independence plans. We need to further increase innovative housing options for this age group.
- Need to develop increasing sophisticated data collection and analysis, enabling a more effective and targeted approach. For example, we need to reflect the fast changing ethnic and cultural diversity of the wider city population and the specific needs of our children enhancing the quality of 'match' with the most appropriate provision.
- Increase our regional and sub-regional commissioning collaborative working with other authorities in order to optimise better value for money and manage the external market in terms of quality of offer, appropriateness of type of provision and identification of specific gaps/ specialisms.
- Explore the option for the development of internal 3 bedded residential provision.
- Continue to develop a strategic relationship and capacity building programme with potential local voluntary and community sector organisations who, sometime in the future, could become a provider of one or more specific services.
- Regularly review the costings of the various types of provision – internal and external – in order to refine any changes in direction in terms of balance and type of provision needed.
- Ensure that the above actions are completed so that we continue to offer high quality placements to children and young people in our care. Without these actions being undertaken and reviewed on a regular basis we would be almost certain to see increasing costs and poorer outcomes for children and young people.