

Children and Young People Scrutiny Commission Adolescents (aged 14-17) Entering Care Review - Scope

1. Introduction

- 1.1 Scrutiny Commission's may undertake in-depth investigations into service areas to assist the Council's policy review or development process. Such reviews generally take place in areas where the issues are complex and which require a more detailed assessment of the evidence and where contributions from multiple stakeholders are required.
- 1.2 Through its review and monitoring work, the Children and Young People Scrutiny Commission (CYPSC) is aware that the demography of young people entering care is evolving, where children are now more likely to adolescents (aged 14+) and often with complex and multiple needs. This changing pattern of demand has left children's social care services facing both structural and financial challenges as it seeks to respond to the needs of this cohort of young people.
- 1.3 The proposed review by the CYPSC aims to assist local policy and practice in this area by highlighting challenges faced by local services, reviewing and comparing existing support structures for young people and making recommendations for improvement.

2. National Context

- 2.1 Under the Children's Act (1989) Local Authorities have a legal responsibility to safeguard and promote the welfare of children in need and to provide appropriate services to support such children in their local area. Local Authorities also:
- Have a duty to provide accommodation to children in need (Section 20);
 - Provide additional support to enable a child to reach reasonable levels of health or development where a child is assessed to be 'in-need' (Section 17);
 - May make necessary enquiries to decide whether to act to safeguard a child's welfare where they may be at risk of suffering or harm (Section 47);
 - May use powers to apply to court for an order to place a child in their care (Section 31).
- 2.2 Local Authorities provide a tiered range of services to meet these obligations and to respond to the local needs of children and families:
- Tier 1 - Universal Services such as schools, children centres, health visiting;
 - Tier 2 - Targeted services for children and families who are beginning (or at risk of) experiencing problems;
 - Tier 3- Specialist services to support children with multiple needs such as family support or disabled children;
 - Tier 4 - Highly specialised services for children with severe or complex needs such as looked after children.

Demand for children's social care services

- 2.3 In 2019/20, in excess of 640,000 referrals were made to children's social care services in England. The number of young people within the social care system has been growing since 2010/11 with increases in activity recorded in all aspects of child's social care and support provided by local authorities.

	Total 2019/20	% Increase 2010/11-2019/20
Referrals to Children's Social Care	642,980	+7%
Children in Need	389,260	+4%
Child Protection Enquiries (Section 47)	201,000	+129%
Children on a Child Protection Plan	51,510	+32%
Looked After Children	80,080	+24%

- 2.4 Whilst it is difficult to determine the precise nature of the drivers behind the increase in demand for children's social care services, evidence supplied within the annual social care assessment of Association of Directors of Children's Services (2021) would suggest the following influences:

- Demographic changes with an increase in 0-17 population;
- Parenting capacity /needs of parents (mental health, drug abuse/dependency domestic abuse);
- Poverty and the impact of welfare reforms;
- Growing awareness of non-familiar safeguarding risks (especially among adolescents).

- 2.5 Analysis of national data for 2019/20 indicates that domestic parental violence was the most numerous factor recorded in the completion of the Children in Need assessments. The other most common factors within the Children in Need assessments were are as follows:

Children in need factor identified at end of assessment 2020 (England)	
Domestic violence (parent)	169,860
Mental health (parent)	156,140
Emotional Abuse	110,300
Neglect	91,170
Alcohol Abuse (parent)	72,620
Physical abuse	70,740
Domestic violence (child)	64,500

2.6 The rate of children's social care activity reported by individual local authorities also varies widely. In 2019/20 the average rate of Children in Need across England was 324 (per, 10,000 0-18 children) though this was as high as 870 in Middlesbrough and low as 177 in Richmond Upon-Thames. Wide variations for children's social care activity among local authorities are also reported for Children on a Child Protection Plan and Looked After Children.

2019/20	HACKNEY	England	LA Highest	LA Lowest
Children in Need (Rate per 10,000)	485	324	Middlesbrough - 870 Blackpool - 718 Hartlepool - 696	Richmond UT -177 Hertfordshire - 185 N Somerset - 197
Child Protection Plan (Rate per 10,000)	38	43	Blackpool - 124 NE Lincs - 118 Middlesbrough - 116	Westminster - 11.5 Ken & Chelsea - 14.5 Barnet - 16.7
Looked After Children (Rate per 10,000)	68	67	Blackpool - 223 Middlesbrough - 189 NE Lincs - 166	Wokingham - 24 Richmond UT - 27 Redbridge - 31

2.7 A number of bodies have attempted to explain the reasons behind such variations in local authority activity including the National Audit Office (NAO, 2019)¹ and Association of Directors of Children's Services (2021)². These organisations concluded that variations in local authority children's social care activity were increasing and could be attributed to a number of factors including:

- Varying levels of deprivation;
- Local transformation programmes;
- Housing supply difficulties;
- Insecure work;
- The number of unaccompanied children seeking asylum seekers.

2.8 The NAO report also identified a number of localised factors which may explain some of the variations among local authority children's social care activity:

- Local policies and practice of individual LA's;
- Local market conditions;
- Characteristics of children and young people in that area;
- Historical patterns of service demand and government funding.

Impact of Covid Pandemic

2.9 The Covid-19 pandemic has also impacted on vulnerable children and families and children's social care services designed to support them. For some families life has evidently become more challenging as Covid has exacerbated disadvantage

¹ NAO - Pressures on Children's Social Care, 2019

² Safeguarding Pressures, March 2021

particularly among lower income groups who have experienced heightened job insecurity and greater reliance on state assistance. There are also concerns that school closures may have exposed children to greater risk of abuse (domestic violence, parental drug misuse or mental health concerns) and reduced oversight and detection of children experiencing neglect. With families locked down, social networks reduced and limited access to statutory and other support services (schools, youth clubs, nurseries) there is also a concern that Covid 19 has had a detrimental impact on both children's and parents mental health.

- 2.10 Nationally, referrals to children's social care in 2020 remained lower (5-10%) than pre-pandemic levels largely as a result of the closure of schools. However, even when schools were reopened in the autumn of 2020, this did not result in an expected surge of new referrals. In this context there is a concern that projected levels of need resulting from the pandemic remain at odds with the number of children's social care referrals and whether vulnerable young people may be going under the radar. In this context, the ADCS report from March 2021 concluded 'that full impact of the pandemic may yet to have been seen'.
- 2.11 The pandemic also impacted on the children's social care service provision and the nature of cases coming forward where audits undertaken by the DfE (2019) and ADCS (2021) noted that Covid had:
- Impacted on staff availability to work;
 - Necessitated social workers to use virtual means to contact some children;
 - Led to an increase in cases involving domestic abuse;
 - Led to an increase in the complexity of cases needing support.
- 2.12 Of particular concern in this reporting was the increase in the complexity of cases presenting for support at children's social care services which has exacerbated 'social care placement sufficiency issues'. As a consequence, many local authorities reported a deterioration in the availability of children's social care placements and increasing costs for private provision such as placements with independent fostering agencies and within residential care.
- 2.13 Given the pressures around the availability of residential social care placements, concerns have arisen nationally about children being placed in unregulated accommodation and the quality of these care arrangements. The DfE have since moved to tighten up LA placements of looked after children, and as of September 2021 all such children must be placed in (Ofsted) regulated accommodation.

Funding for Children's Social Care

- 2.14 Funding for children's social care is provided through central government grants to local authorities, the majority of which is not ring-fenced and is left to individual authorities to determine how this is spent according to local needs and priorities.

Total spending by local authorities on children's social care funding in England totalled £10.6 billion in 2019/20.

- 2.15 The table below shows total spending on children's social care services by local authorities from 2014/15 through to 2019/20. This shows that local authority spending on children's social care has increased from £9.2billion in 2014/5 to £10.6billion in 2019/20.

<i>Totals</i>	2014/15	2015/16	2016/17	2017/18	2018/19	2019/21
England	£9.2b	£9.1b	£9.2b	£9.5b	£9.9b	£10.6b
Inner London	£841.4m	£829.9m	£863.7m	£818.3m	£866.7m	£916.3m
HACKNEY	£73.9m	£75.7m	£79.4	£79.6	£85.6m	£88.1m

- 2.16 Demand for children's social care services continues to outstrip increased spending, which has created significant budgetary pressures. The Local Government Association (LGA) analysed children's social care spending in 130 (out of 151) local authorities and concluded that despite children's social care budgets rising by £535m in 2019/20 many local authorities overspent, cumulatively totalling £832m.

- 2.17 A detailed assessment of budget pressures within Children's Social Care undertaken by Oxford University³ on behalf of the DfE identified a number of key factors behind these budgetary pressures of local authority children's social care budgets:

- Rising demand nationally for children's social care (e.g. LAC, CPP, CiN);
- Increased complexity of the needs of children, young people and their families (CSE, criminal exploitation);
- An increased adolescent looked after child population, who are likely to need continued support from children's social care beyond the age of 18.
- Supporting care leaver entitlement of unaccompanied asylum-seeking children, which is not fully funded by the Home Office;
- An increase in the proportion of care leavers making the transition to higher education, placing an additional financial cost on children's social care budgets.

- 2.18 Data analysis by the National Audit Office suggests that whilst government funding has fallen in real terms since 2010/11, Local Authorities have generally sought to protect spending on children's social care.⁴ Nonetheless, the ADCS predicted that an additional £824m would have been required at the end of 2019/20 to just maintain levels of provision.

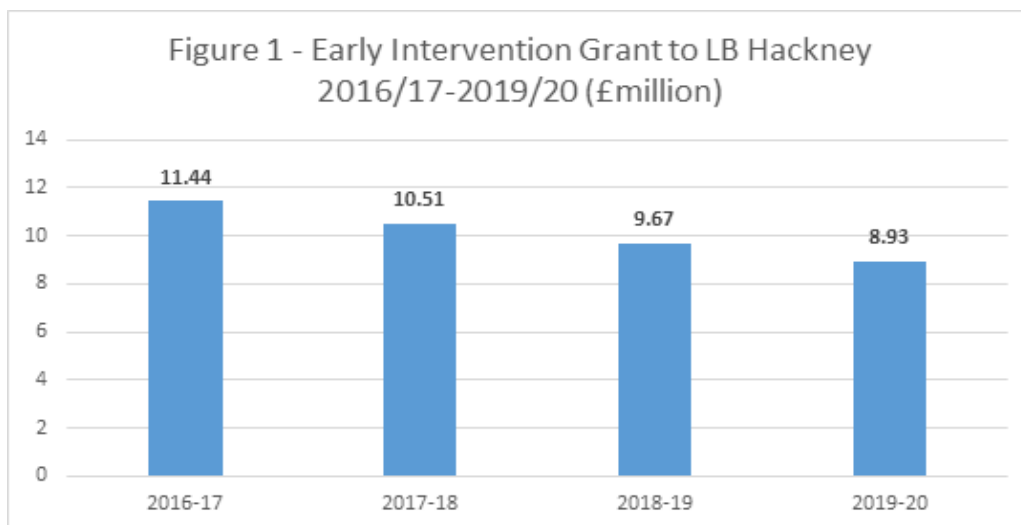
³ Children's social care cost pressures and variations in unit costs, Lisa Homes, Rees Centre UoO, 2021.

⁴ NAO, Financial Sustainability of local authorities, March 2019

2.19 Whilst local authorities appear to have protected spending on statutory children’s social care services, spending on non-statutory services has fallen in many local authority areas. The NAO report into children’s social care found that for England as a whole, spending on preventative services by local authorities (as a proportion of all money spent on children’s social care services) fell from 41% in 2010/11 to 25% in 2017/18. In addition, data from the DfE indicates that spending on non statutory services has decreased by 35% in real terms between 2012/3 and 2019/20.⁵ Thus whilst the cost of children’s care is increasing, spending is increasingly skewed toward acute services rather than providing effective early help.

2.20 Aside from spending pressures within statutory children’s social care services, the fall in spending on prevention is also attributable to the decline in the Early Intervention Grant (EIG) which has been used to fund a range of preventative interventions for children and young people. Total funding to local authorities through the EIG was £2.37billion in 2012/13 but this has reduced significantly since this time. Total funding through the EIG in 2019/20 was £1.03 billion, which represents a 57% reduction over this 7 year period.

2.21 EIG funding to Hackney has also fallen from £11.4m in 2016/17 to less than £9m in 2019/20, a 22% reduction.



Independent Review of Children’s Social care

2.22 A commitment to review children’s social care provision was made as part of the Conservative Party manifesto for the General Election of 2019. Josh MacAlister was appointed to lead this review in 2020 and commenced work in January 2021. The review is known as The Independent Review of Children’s social care in England which aims to:

⁵ DfE, Statistics: Local Authority and School Finance

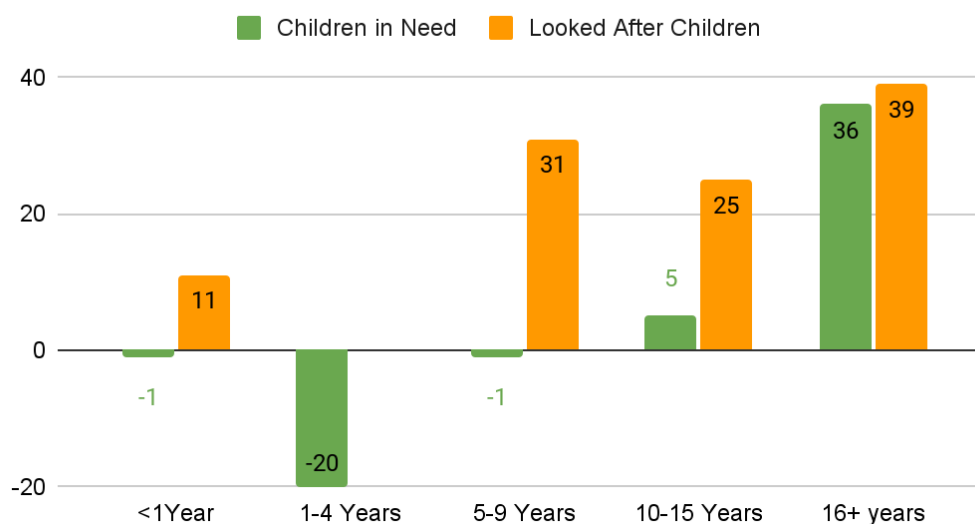
'Look at the whole system of support, safeguarding, protection and care and children's journey into and out of care systems, including relevant aspects of preventive service that are provided to children and families as part of early help'

- 2.23 The review aims to address 7 key questions:
1. The nature and level of support needed to improve long-term outcomes of children referred to or in receipt of social care support;
 2. How can children be supported to stay safely with their families and enable them to thrive thus avoiding the need to enter care?
 3. How can service accessibility and timeliness of social care interventions be improved for those children that need them;
 4. How can services ensure that children have a positive experience of care that prioritises stability;
 5. What are the key enablers to deliver improved social children's care and how can these be supported (e.g. stable and resilient workforce, system leadership and partnerships)
 6. What is the most sustainable and cost-effective way of delivering services, including high-cost services?
 7. What accountability arrangements are necessary to which balance is needed for the state to protect and promote the welfare of children with the importance of parental responsibility, and how local authorities oversee and discharge their duties.
- 2.24 The Independent Review of Social Care has set out its 'case for change' in a [report](#) published in August 2021. As well as highlighting the increased numbers of young people within the social care system, the report also noted the significant change in the demographic profile of children in care. The review is ongoing and is not expected to report until late 2022.

Adolescents entering care

- 2.25 One of the most significant changes in children's social care has been the changing demography of children being supported by or looked after by local children's social care services. Analysis of demographic data for Children in Need and Looked After Children between 2010/11 and 2019/20 demonstrates that children's social care services have seen a greater increase in the number of adolescent aged children they are supporting.

Changes in Age Profile - % change 2010/11-2019/20



2.26 Nationally, teenagers are the largest growing cohort of children in relation to both child protection and social care. Over the period 2010-2020⁶:

- The number of looked after children:
 - aged between 10-15 increased by 25%
 - aged 16 and over increased by 39%
- The number of children on a Child Protection Plan:
 - Aged 10-15 increased by 58%
 - Aged 16 and over increased by 258%.

2.27 The underlying reasons for this increase in the number of adolescents being supported by local children's social care services are clearly complex, but it is apparent that the understanding of the risks that teenagers face has evolved, particularly in relation to those risks that they face outside the home. Local Authorities now have an improved understanding of the risks that adolescents face in relation to:

- Criminal exploitation and young people drawn in to drug supply;
- Child sexual exploitation and trafficking;
- Serious youth violence and gang associations and involvement;
- Peer on peer abuse;
- Young people going missing from home;
- School exclusion.

2.28 In a report by the Children's Commissioner⁷ into the characteristics of teenagers entering care, it was found that there were an increasing number of adolescent young people who, despite being in contact with local services, were not getting the support that they needed. The report suggested that approximately 120,000 young

⁶ DfE: Statistics: Children in Need and Child Protection

⁷ [Characteristics of Teenagers Entering Care](#) Children's Commissioner 2021

people aged 13-17 may be falling through the gap and not getting the care and support that they needed, specifically referring to the following cohorts;

- Those referred to social care multiple times but who were not allocated a social worker;
- Children who were absent from school or who had permanently excluded;
- Children with special educational needs and who had multiple exclusions from school;
- Children who had missed large portions of school or dropped out of the school system in Year 11.

2.29 There is an acknowledgement that teenagers and other adolescents entering care do so with more complex needs and as they are often exposed to multiple risks. Supporting adolescents in care can therefore be challenging, particularly as there may be exacerbating factors:

- Adolescents may face harm from multiple sources, both within and external to the family home;
- Adolescents may be involved with different agencies (e.g. health, youth justice, police, education) who may have different approaches to supporting them;
- With multiple agencies involved with different approaches to young people, accountability for supporting young people can be diffuse.

2.30 The cost of meeting the needs of this group of adolescents entering care is significant with many complex packages of care, often requiring placements in high cost residential or semi-residential care settings or with specialised foster carers. [National research](#) indicates that unit costs vary between £1,000 and £8,000 per week, with concerns around limited supply driving up costs and the quality of care arrangements. This is widely recognised to be contributing to significant pressures within children's social care budgets.

2.31 As part of its Social Care innovation programme, the DfE has established a workstrand to investigate adolescents with complex needs and who require social care support. This aims to identify and share good practice in supporting this cohort of young people requiring social care support. A number of projects have been identified through this project which have/ are contributing to new understanding or improved practice in supporting adolescents on the edge of care or in receipt of care.

[Child sexual exploitation project: Wigan and Rochdale evaluation](#) The project's effectiveness at reducing the number of young people affected by sexual exploitation being placed in high-cost or secure accommodation that doesn't always meet their needs. (March 2017)

[B Positive Pathways](#) Combining 4 tried and tested models (No Wrong Door, Mockingbird, Signs of Safety and PACE) into an integrated support service. (March 2020)

[Sefton Community Adolescent Service](#) A single, integrated service to support young people at risk of gang involvement, child sexual exploitation and youth crime. (July 2017)

[Contextual Safeguarding Pilot](#) A new approach to understanding and responding to young people's experiences of significant harm beyond their home environment.

[Enfield family and adolescent support service \(HUB\)](#) Review of the family and adolescent support service (FASH), which aimed to change the way support for children and adolescents is provided.

[Gloucestershire Adolescent Innovation Project](#) A unified, authority wide approach for adolescents including dedicated multi agency teams, integrated attachment theory and restorative practice.

[Inside Out Project](#) A personalised intervention for children who have had multiple moves combining a range of placement options with intensive coaching support. (March 2020)

[No Wrong Door](#) A report on the programme's effect on improving support for young people who are in care or on the edge of care. (July 17)

[The Right Home](#) Multi agency support for 16- to 19-year-olds at risk of homelessness, including flexible accommodation options and personalised support. (March 17)

[North London Children's Efficiency Programme](#) An evaluation of the North London children's efficiency programme (NLCEP) where 5 boroughs worked in partnership to improve care placement. (2016)

3. The Hackney Context

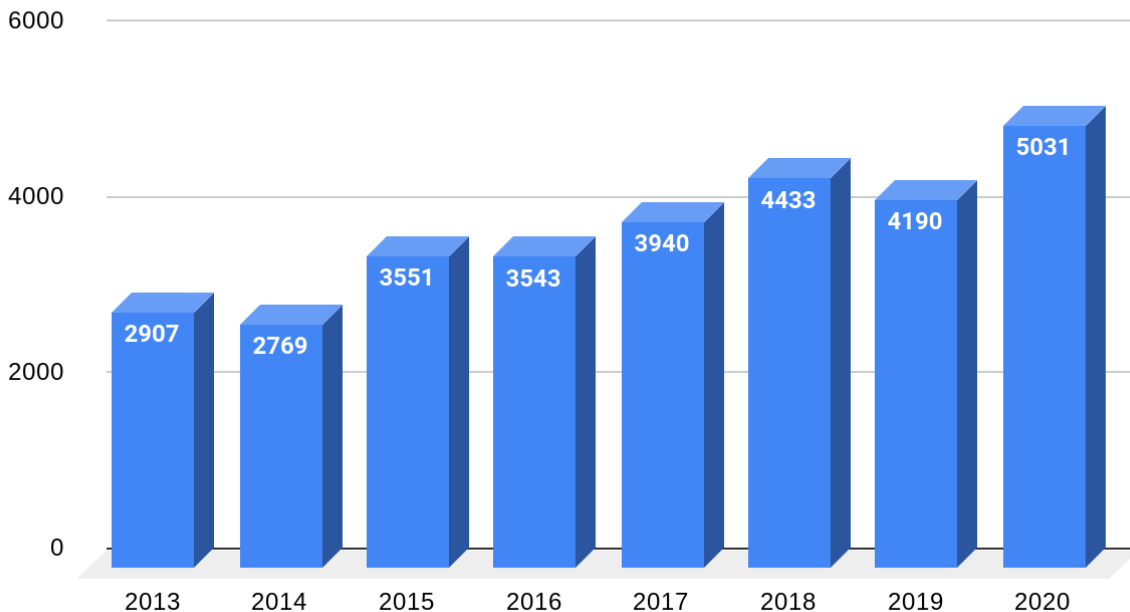
3.1 A summary of children's social care activity over the period 2013-2020 in Hackney is provided in the table below. This mirrors national data, where increased activity is recorded in every aspect of children's social care. In Hackney in the 8 year period to 2020:

- The number of referrals to children's social care have increased by 73%;
- The number of Children in Need has risen by 40%;
- The number of children on a child protection plan has increased by 9%;
- The number of 'looked after children' has risen by 27%.

Summary of children's social care activity 2013-2020 in Hackney (Activity at 31/3)									
	2013	2014	2015	2016	2017	2018	2019	2020	% +/-
Referrals to Children's Social Care	2,907	2,769	3,551	3,543	3,940	4,433	4,190	5,031	+73%
Children in Need	2,206	2,465	2,848	2,821	3,133	2,806	2,904	3,094	+40%
Child Protection Plans	225	221	216	226	330	200	194	245	+9%
Looked After Children	-	340	340	325	371	382	405	432	+27%

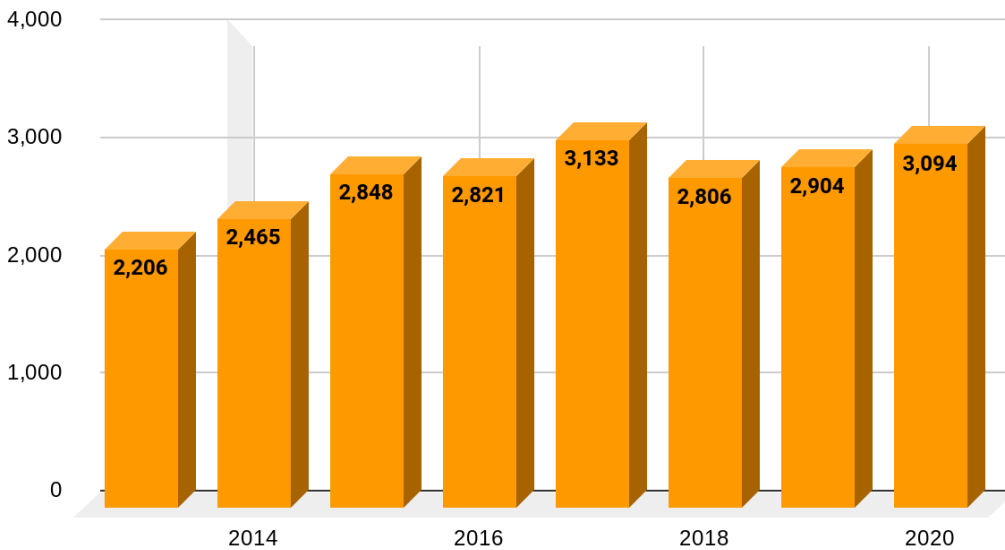
3.2 Referrals to children's social care in Hackney totalled 2,907 in 2013, but have risen to 5,031 in 2020. There has been a year-on-year increase except for 2019. This represents a 73% increase.

Annual children's social care referrals in Hackney (2013-20)



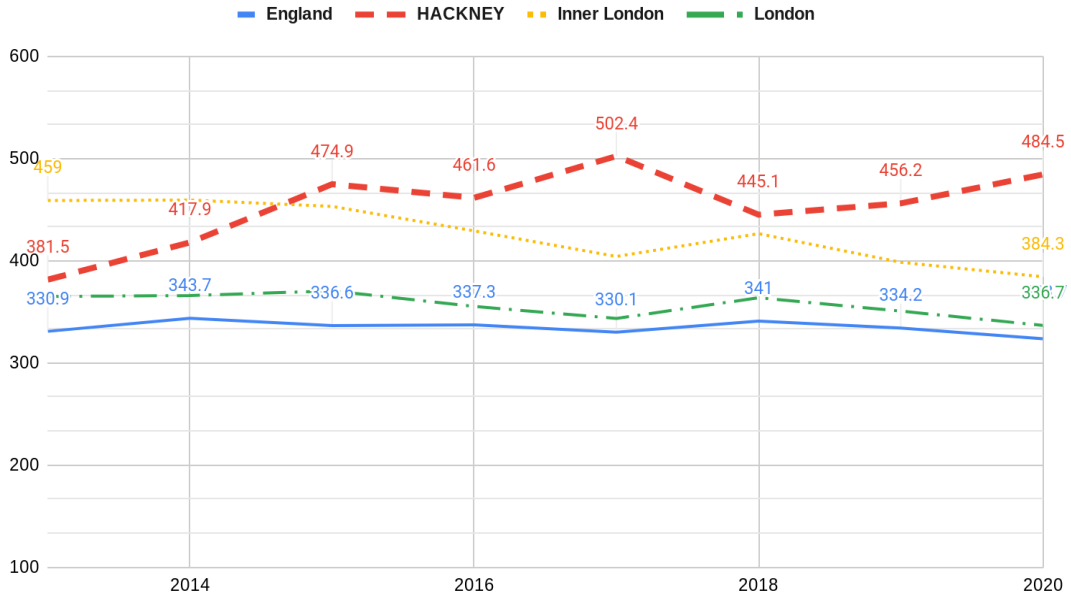
3.3 The number of children assessed to be 'Children in Need' has risen from 2,206 in 2013 to 3,094 in 2020, a 40% increase. Numbers of 'Children in Need' have fallen back from a peak of 3,133 in 2017.

Number of children in need in Hackney 2013-2020



3.4 From the most recently available data, the rate of Children in Need in Hackney is 484.5 (per 10,000). The current rate of Children in Need is significantly higher than national, regional and sub regional averages.

Rate of Children in Need (per 10,000) at end of March.

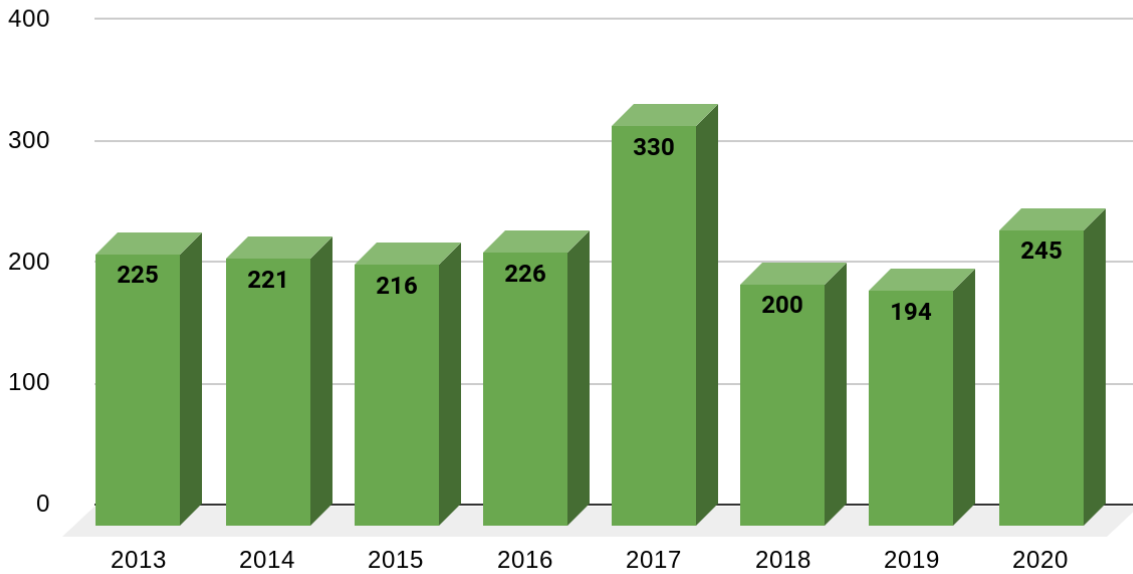


3.5 In terms of the assessed needs of Children in Need in Hackney, this also broadly mirrors national data (in 2.5) where Domestic Violence and Mental Health (of the parent, child or another person) figure prominently. Domestic violence (child, parent or another person) figured in 38% of assessments. Neglect was mentioned in 1,319 (27%) assessments for Children in Need.

Children in need factor identified at end of assessment 2020 (Hackney) from 4,844 number of episodes with assessment factor information.	
Domestic Violence (Child, Parent, Person)	1,838 (282, 1,310, 246)
Mental health (Child, Parent, Person)	1,413 (401, 894, 118)
Neglect	1,319
Physical Abuse	811
Emotional Abuse	588
Learning Disability (Child, Parent, Person)	542 (439, 78, 25)
Physical disability (Child, Parent, Person)	519 (236, 225, 58)
Drug misuse (Child, Parent, Person)	449 (142, 251, 56)
Socially unacceptable behaviour	313
Alcohol Misuse (Child, Parent, Person)	312 (24, 261, 27)
Gangs	178
Sexual abuse	148
Self-harm	137
Going /being missing	116
Child Sexual Exploitation	114
Young Carer	103
Unaccompanied Asylum Seeker	34
Private Fostered	30
Trafficking	9

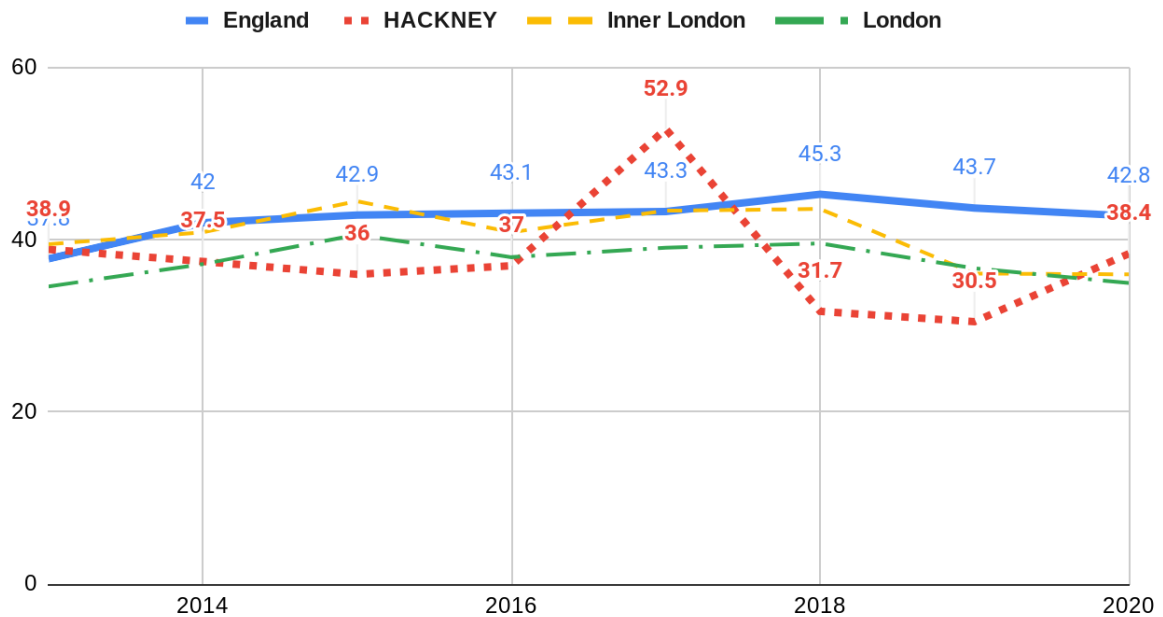
- 3.6 The number of children placed on a Child Protection Plan in Hackney (with the exception of 2017) had been falling over the 8 year period to 2019, where 194 children were on such a plan. In 2020 however, the number of children on a Child Protection Plan in Hackney rose to 245.

Number of Child Protection Plans (as of 31/3) Hackney 2013-2020



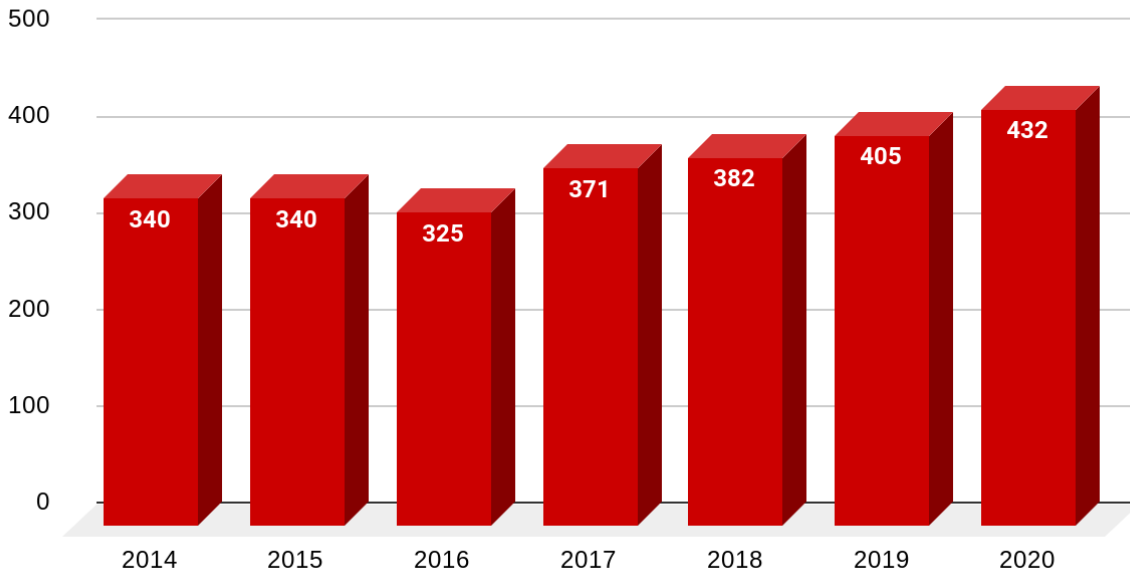
3.7 The rate of children on a Child Protection Plan is 38.4 (per, 10,000) which is lower than the national average (42.8). Comparatively, the rate of children on a Child Protection Plan (with the exception again being in 2017) has broadly been below national, regional and sub-regional averages over the period 2013-2020.

Rate (per 10,000) of Child Protection Plans (2013-2020)



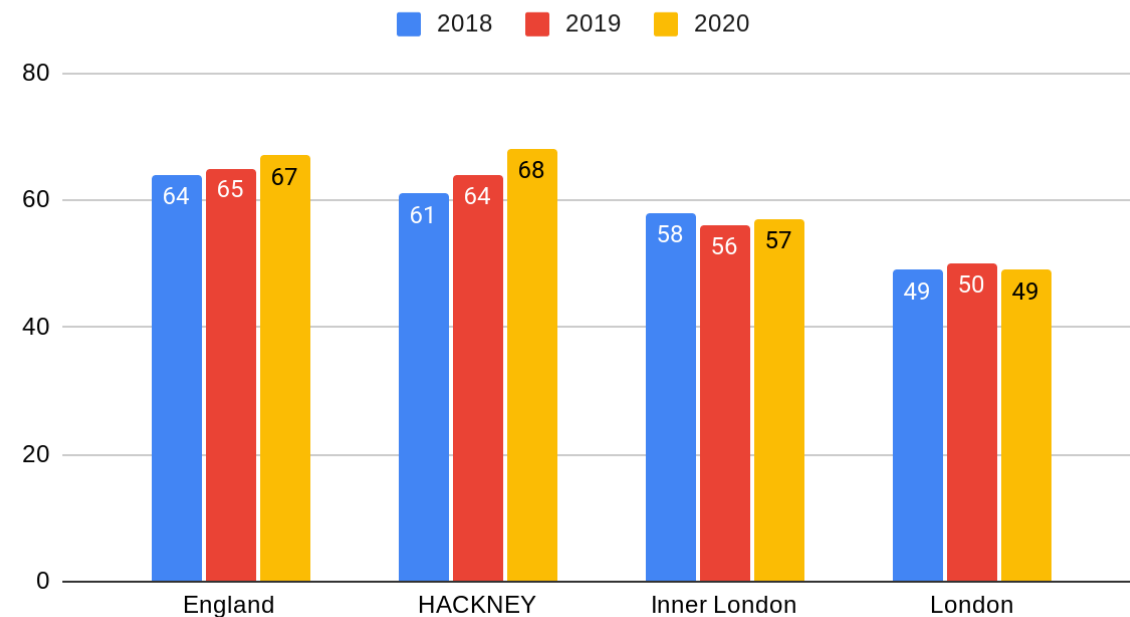
3.8 The most recent nationally collated data (from 2020) indicates that the number of looked after children (as of 31st March) in Hackney (2020) is 432. The number of looked after children in Hackney has increased year on year since 2016, and overall by 27% since 2014.

Number of Looked After Children in Hackney (as of 31/3) 2014-2020



3.9 The rate of looked after children in Hackney in 2020 was 68 (per, 10,000) which was higher than national, regional and sub regional averages. The rate of looked after children in Hackney has increased over the three year period to 2020, going against regional and sub-regional across and within London.

Rate (10,000) of looked after children 2018-2020



3.10 In the most recent Annual Report of the Children and Families Service in Hackney, it was noted that 119 young people aged 14-17 years entered care in 2019/20, which represented 52% of the total number of children entering care. The table below provides a summary of the age group of children entering care for the three year

period to 2020 and which demonstrates that young people aged 16+ years consistently accounted for in excess of 1/3 of young people entering care in Hackney.

Age group of children ENTERING CARE						
	2018		2019		2020	
Age	England	Hackney	England	Hackney	England	Hackney
Under 1	19%	32 (15%)	19%	24 (11%)	-	22 (10%)
1-4	18%	22 (10%)	18%	22 (10%)	-	28 (12%)
5-9	18%	23 (11%)	18%	19 (9%)	-	26 (11%)
10-15	28%	68 (31%)	28%	58 (27%)	-	71 (31%)
16+	17%	72 (33%)	18%	89 (42%)	-	81 (36%)
Total		217		212		228

- 3.11 In terms of the number of young people actually in care in Hackney (as of 31/3), approximately 3/4 are aged 10 years and above and 1/3 aged 16 years and over. Data for the three year period to 2021 would appear to confirm the increasing numbers of adolescents being looked after in Hackney.

Age Group of Children IN CARE AT 31/3						
	2018		2019		2020	
Age	England	Hackney	England	Hackney	England	Hackney
Under 1	6%	25 (7%)	5%	19 (5%)	-	11 (3%)
1-4	13%	28 (7%)	13%	26 (6%)	-	36 (9%)
5-9	19%	64 (17%)	18%	58 (14%)	-	55 (13%)
10-15	39%	143 (38%)	39%	153 (38%)	-	163 (40%)
16+	23%	121 (32%)	24%	149 (37%)	-	148 (35%)
Total		381		405		413

- 3.12 In line with national findings, many of the adolescents who enter care in Hackney often have multiple and complex needs. Given the needs of such young people, it may be difficult to place them with in-house or independent foster carers and as a consequence more likely to be placed within a residential care home or semi-independent accommodation.

- 3.13 Demand for these placements has been growing year on year which has been exacerbated by Covid; in 2020/21 there was almost 3 fold increase in residential placements and doubling of semi-independent placements. The most recent data from September 2021 (table below) indicates that there were 39 young people in residential care, and 136 in semi-independent care (25 for under 18's and 111 over 18's).
- 3.14 The Children and Families Service undertook a review of children placed in [residential care homes](#) . Of a sample of 37 of those children placed in residential care:
- The average age was 15.2 years (range 11.4 to 17.7 years);
 - 60% were male and 40% female;
 - 40% were Black African or Black Caribbean, 32% dual heritage, 26% white;
 - 82% had an EHCP;
 - 21% have ADHD, 18% have autism and 11% have a learning disability.
- 3.15 In terms of the support provided to this same cohort young people in a residential care home:
- 19% had an education cost (range from £600-£1,673 per week);
 - 16% had a therapy or health cost (range £190-£2,596 per week);
 - The total average cost was £4,608 per week (range £2,300-£10,500).
- 3.16 The Children and Families Service undertook a review of children placed in [semi-independent care](#) . From this review of a sample of 28 young people within this cohort;
- 43% had been looked after by the Council for a number of years and 57% had entered care at age 16 or 17 years;
 - Of those in care for a longer-term, 50% had been moved into semi-independent provision from a residential care home, whilst 25% had moved following multiple foster carer breakdowns;
 - Of the young people who entered care at age 16 or 17 years, 43% were allocated semi-independent when they entered care within an emergency situation and 25% following multiple foster care breakdowns.
- 3.17 Increased numbers of children placed in residential and semi-independent care has contributed to ongoing budget pressures within corporate parenting and more widely across children's social care. According to the most recent Overall Financial Position of the Council (September 2021) forecast the total spend on residential care and semi-independent care for year end 2021/22 to be £9.4m and £3.5m respectively. After the application of reserves (£4.2m) and Social Care Grant (£4.5m), corporate parenting is forecast to overspend its budget of £26m by £2.4m at year end 2021/22.

Service Type	Budget	Forecast	Forecast Variance	Funded Placements	Current Placements
Residential	4,981	9,425	4,445	22	39
Secure Accommodation (Welfare)	-	234	234	-	1
Independent Foster Agency	7,688	7,125	(563)	155	139
In-House Fostering	2,400	1,809	(591)	102	73
Semi-Independent (Under 18)	1,570	1,847	277	23	25
Semi-independent (18+)	1,370	2,673	1,303	88	111
Family & Friends	869	1,030	162	44	54
Residential Family Centre (P & Child)	300	340	40	2	2
Other Local Authorities	-	135	135	-	6
No Recourse to Public Funds (18+)	290	377	87	19	14
Staying Put (18+)	500	532	32	36	33
Supported Lodging	-	49	49	-	4
Extended Fostering (18+)	-	76	76	-	2
UASC (Under 18)	-	(136)	(136)	26	23
Former UASC (18+)	-	748	748	22	58
Expenditure	19,967	26,265	6,297	539	584

Placement Type	Annual Forecast £ 000	Weekly Cost £ 000	Weekly Unit Cost (Avg)	Current YP No	Last month YP No
Residential Care	9,425	167	4,275	39	40
Secure Accommodation (Welfare)	234	-	0	1	1
Independent Foster Agency	7,125	-	952	139	133
In-House Fostering	1,809	3	459	73	81
Semi-Independent (Under 18)	1,847	1	1,325	25	30
Semi-independent (18+)	2,673	7	299	111	115
Family & Friends	1,030	-	379	54	45
Residential Family Centre (P&Child)	340	-	3,599	2	1
Other Local Authorities	135	20	252	6	6
No Recourse to Public Funds (18+)	377	4	292	14	12
Staying Put (18+)	532	13	406	33	41
Supported Lodging	49	1	228	4	4
Extended Fostering (18+)	76	1	692	2	4
UASC (Under 18)	(136)	115	757	23	24
Former UASC (18+)	748	6	297	58	59
Total	26,265	339	14,213	584	596

- 3.18 The tables above taken from the November 2021 OFP (September position) provide a summary of the budgetary position of children's social care placements including budgets, forecast variance, unit costs and numbers of placements.

Service Response

- 3.19 The children and families service have developed a number of responses to identify and address the number of adolescents entering care. These are briefly summarised here, as these will form part of the review process in which members question officers on the response to local needs.

Contextual safeguarding

- 3.20 In April 2017, the Council was awarded £2m by DfE to help improve the way that local authorities approach child protection. The funding, from the Department for Education's Children's Social Care Innovation Fund has allowed the Council to develop a radical new approach to safeguarding, which shifts the focus of social work from the family home, to consider much wider influences.
- 3.21 The Contextual Safeguarding project aims to identify ways in which children can be protected from risks outside the family home, recognising that young people are increasingly being influenced by their peer groups and surroundings, which are outside the control of their families and cannot necessarily be addressed by traditional social work interventions, which focus on individual children and families. The Contextual safeguarding approach will help to understand the risks that adolescents face outside the home and support children and their families appropriately.
- 3.22 A [national evaluation](#) of the Hackney Contextual Safeguarding Project has concluded that this approach helps to develop a framework to address extra-familial risk and harm (EFRH) and has had some positive impact on social work practice. It was still too early however, to identify robust evidence of improved user experience or outcomes and that it would take an additional time to fully bed in this approach to local practice.

Edge of Care Project

- 3.23 The Edge of Care Project was established in response to the increasing numbers of young people entering care in Hackney, particularly young people aged 14-17 years of age. Over the past 18 months, this scoping exercise has accumulated local data and knowledge of this cohort entering care as well as evidence from other practice models used in other local authorities.
- 3.24 Learning from the above scoping exercise has informed the development of a pilot service which will work with young people and their families who are at risk of entering care. This commenced in November 2021. There are three key objectives to the service:

- To prevent young people from coming into care;
- Enabling children and young people to step down from care;
- Supporting children to remain in settled care arrangements.

3.25 It is expected that the new service will offer additional support and capacity to existing social care units and develop an evidence-based model of intervention that is effective with this cohort. The new service will be a multi-agency (social care and clinical practitioners) to help address the complex and often entrenched issues that young people may face, and tackle local disproportionalities in those young people accessing or referred to social care.

3.26 The Edge of Care pilot service is being evaluated by What Works Centre for Social Care, which will help determine the scope, nature and scale of future service provision.

4. Aims and Objectives of the Review

4.1 The Children & Young People's Scrutiny Commission is proposing to undertake an in-depth review of adolescents entering care as part of its work programme for 2021/22.

Aim

4.2 It is suggested that the overarching aim of the review should be:

'To further understand the needs of adolescents entering care and that local services are supporting these both effectively and efficiently.'

Objectives

4.3 Within the above overarching aim, there are a number of key objectives that the review will aim to address.

4.3.1 Demographic profile /needs

To review the demographic profile and adolescents pathways into care to help understand the individual and collective needs of young people and the demands these place on local social care services:

- Are there common risk factors, or patterns of needs or previous service contact of those adolescents' 'pathway' into care which may help services to plan and respond to need?
- Are there any disproportionalities within this demographic profile of adolescents entering care and how can these be addressed?
- To further understand on what legal basis are adolescents entering care (e.g. under section 17 or section 20);
- What are adolescents' perspectives of their journey into care?

4.3.2 Service response to adolescent needs

To assess of the needs of adolescents entering care are being effectively addressed by local services:

- How do the needs of adolescents guide and inform the care arrangement decisions of children in different care settings (e.g. residential care, semi-independent care or foster care)?
- What is the service response to this cohort of children entering care, and how well equipped are local children's social care structures and workforce to respond to the new and emerging needs of adolescents entering care?
- How effective are local partnerships (social care, education, health) in collectively identifying and supporting adolescents in need?
- What do adolescents think about the care and support they receive?
- What can Hackney learn from approaches taken by other local authorities in tackling this and similar issues?

4.3.3 *Commissioning*

How effective are local commissioning processes that underpin care and support packages to support adolescents in care?

- What are the range of care and support options available for this cohort of adolescents and what does the 'market' for these care options look like and how effective is it in meeting local needs (short-term demand, placement shortage, location, etc)?
- What financial and other governance controls are in place to ensure that commissioned social care placements meet the needs of adolescents in a cost effective way?
- What quality standards and service priorities underpin the commissioning of social care placements?
- What are the options for developing more localised or collaborative solutions to meet these social care placement needs of this cohort of adolescents (e.g. joint commissioning, investment in infrastructure)?

4.3.4 *Early help to prevent adolescents entering care*

To assess what opportunities there are for early help and prevention to reduce the risk of adolescents becoming looked after children:

- What role do current (Contextual Safeguarding) and future developments (Edge of Care project) have in addressing risks and preventing children from becoming looked after?
- What can be learnt from case analysis of adolescents entering care which could inform early help and prevention opportunities?
- How will the emerging Early Help Strategy target address areas of unmet need earlier and prevent adolescents entering care?
- What can Hackney learn from approaches taken by other local authorities in taking a preventative approach?

Key elements to the review

4.4 There are a number of elements to the planned review which are set out below with some potential contributors.

Objective	Contributor
National policy framework - statutory requirements	<ul style="list-style-type: none"> - Desk review - Director of Children & Families & Head of Corporate Parenting - Expert independent input
Local Policy and Practice	<ul style="list-style-type: none"> - Director of Children & Families - Head of Corporate Parenting - Data / Illustrative case studies from CFS - Edge of Care Team - Early Help Review - Partner Agencies (education, health, CVS)
Comparative assessment / best practice	<ul style="list-style-type: none"> - Desk review - Approach of Local Authorities / projects - Expert independent input: 'What works for children's Social Care', Children's Commissioner.
Effectiveness of local provision	<ul style="list-style-type: none"> - Views of young people (and their families) - Children's Care Council - Views of front line staff
Priorities for improvement and development	<ul style="list-style-type: none"> - Assessment and review of the evidence from a range of contributors.

Outline work plan

4.5

January 19th 2022 (CYP Scrutiny Commission)	Agreement of scope, aims and objectives and plan of work (Commission)
Late January (informal meeting, date TBC)	<ul style="list-style-type: none"> - National context, and local policy & practice (CFS, specialist organisations)
Mid February (informal meeting, date TBC)	<ul style="list-style-type: none"> - Comparative Assessment (Other LA's or projects)
Late February (informal meeting, date TBC)	<ul style="list-style-type: none"> - Commissioning social care placements (CFS/ other external contributors)
14th March 2022 Outline	<ul style="list-style-type: none"> - Commission

report to (CYP Scrutiny Commission)	
Final report to the first meeting of the new municipal year.	- Commission

Possible Site Visits

4.6 To clarify whether it is practical to undertake any site visits to supplement data collection processes outlined above:

- Semi-independent care settings?
- Residential care settings

Further clarification and input

4.7 The Commission would welcome further clarification and input on the following:

- How has the cyber attack impacted on child records and will this present a challenge in developing case study data?
- How will the Independent Review of Children’s Social Care (MacAlister Review) impact the care and support of this group of young people?
- Which local partners should be involved?
- What other local authorities could be invited to develop comparative assessments and inform best practice?
- Specialist input / academic and or national organisations would help to add value to this review?