All children in care and young people will have everything that a good parent would want for their own children

Halton’s Present Halton’s Future
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1. **Introduction**

1.1 **Background**

This strategy aims to improve outcomes for children in care and care leavers through the provision of a sufficient number and range of high quality placements and accommodation options. It also sets out how the Council will work with partners over the next three years to meet the statutory ‘ Sufficiency Duty ’ set out in legislation.

As well as meeting our Sufficiency Duty and improving outcomes for children and young people, success in delivering this strategy will realise significant cost savings for the Council. This is because having a sufficient number and range of local placements is good for children and young people as well as making good economic sense. Having to accommodate children in residential provision at distance as a result of a lack of local fostering placements for example, as well as conflicting with the child’s best interests, is very expensive and cost inefficient.

1.2 **Legislation – the Sufficiency Duty**

The sufficiency duty sets out a requirement for local authorities to “systematically review the current situation in relation to ensuring sufficient accommodation to meet the needs of Looked After Children / Young People and Care Leavers”.

The sufficiency duty must be seen as part of a mechanism that provides young people with the most appropriate placement to meet their needs and improve their outcomes through quality assessments, care planning and decision making. The guidance also advocates strengthening the links between practitioners working with individual looked after children and staff with responsibility for the commissioning function.

The sufficiency duty statutory guidance acknowledges the importance of taking earlier, preventive action to support children and families to prevent children becoming looked after. This is through the provision of preventive and early intervention services to reduce the need for care proceedings as well as through clear robust links into universal and targeted services.

Local Authorities need to assess existing commissioning practice and identify how to ensure that services commissioned away from the Local Authority can in future be delivered more locally, wherever this is practically possible and providing it is consistent with the child’s welfare. Although the sufficiency duty lies with the local authority, the duty will be implemented most effectively through a partnership between the local authority and its Children’s Trust partners.

The guidance is clear that local authorities should not move children from out of authority placements for the sole purpose of meeting the sufficiency duty if their needs are being met by the existing range of services involved.
1.3 The Halton Context

Halton is a largely urban area; its two biggest settlements are Widnes and Runcorn which face each other across the River Mersey, 10 miles upstream from Liverpool. The population of Halton has recently started to increase, in part due to a concerted effort to build new houses, as well as increased inward migration.

Halton’s population current estimate is 126,903 (*Mid-2016 estimates, ONS*). Breaking down Halton’s population by age shows that the borough has a slightly higher proportion of children and young people aged 0-24 than commonly found across England and Wales. (30.3% compared to 30.1%)

Halton’s population is projected to grow to 129,900 by 2028

Halton’s estimated population growth (2.4%) during this time is less than the North West as a whole (4.4%) and significantly less than the National growth (8.4%)

The Borough is currently ranked as the 27th most deprived local authority in England and has a higher proportion of children in poverty than found in the North West overall and nationally. 28.1% of children in Halton live in poverty (*2016, End Child Poverty*).
1.4 Halton Children in Care and Care Leavers

We know that the number of Children in Care in Halton is too high and that we have not in recent times achieved permanence of children outside of care in sufficient numbers and in a timely manner. This has contributed to the Council having insufficient capacity in our in-house fostering service and at present there is not an adequate range of care leaver accommodation.

The number of children in care in Halton has been increasing year on year and the population of children in care at the end of September 2017 is the highest number seen in Halton at 268. This represents a 4.3% rise from September 2016. At the end of December 2017 the population had reduced to 260, however this is still considered a very large care population, higher than the regional and national average.

We have too many children placed out of the Borough, too many children placed in residential care, and we have an over reliance on independent fostering agency carers to meet our placement needs.

For the vast majority of children in care their needs will be best met in a family placement that is local to their home community. A lack of sufficiency in in-house foster placements has resulted in many children being placed outside of the Borough in high cost independent fostering or independent residential care. This Sufficiency Strategy seeks to address this.

We know that providing and maintaining quality placements for children and young people is more than having sufficient accommodation options. For example, children entering care often have poor emotional wellbeing and may need access to mental health services, specialist support with their education, or support in relation to a disability. We will therefore work more effectively with partner agencies to ensure sufficient wraparound support services are available to the children we place and help deliver better placement stability.

1.5 What Children and Young People Told Us

We know that older children in care and care leavers have told us consistently that the range and quality of accommodation for care leavers is not adequate.

Most children in care tell us that they have a preference for foster care over residential care, though a small number say they prefer the option of residential care, struggling to settle in a family (our position is that family based care is always the first option).
2. Our Vision

This strategy sets out our strategic approach to providing the *right placements in the right place* for all of our children in care and care leavers. Having the right sufficiency approach is essential for improving outcomes for children in care. It is also essential for delivery of the objectives in the Children in Care and Care Leavers Strategy 2017 - 2020.

Our vision in relation to placement provision for children in care and care leavers is as follows:

- Halton’s children will be supported to stay with or return to their families and communities wherever it is safe to do so.

- For those children who cannot return home, we will achieve permanency through adoption, special guardianship and permanent fostering in a timely manner.

- The vast majority of children will live in a family placement as opposed to a residential one, and most of Halton’s children will live locally, in the Borough area boundary or within 20 miles.

- Children with disabilities will have the same access and opportunity to live in family placements, to be placed locally, and to achieve permanency outside of care via adoption and special guardianship.

- As many children in foster care as possible will be supported to stay put with their carer beyond age 18, or where not possible will have access to a range of suitable supported accommodation, including supported lodgings provision, trainer flats, or semi supported accommodation provided by the Local Authority.

- We will improve the timeliness of adoption.

- We will improve the timeliness of care planning and utilise commissioning and partnership working to support the development of sufficiency and to ensure we achieve cost efficiencies.
3. Placement Needs Analysis
We have undertaken a placement needs analysis to inform this placement sufficiency strategy. This section summarises the main findings from the analysis.

3.1 Current Profile of children in care

We have a high rate of children in care, compared to the national, regional and statistical neighbour averages.

The number of children in care has been increasing since June 2014, with a 4% increase in the last 12 months.

We are however projecting reductions in the children in care population during the course of this Sufficiency Strategy (2017 – 2020) as Halton’s child population is projected to decrease and we intend to achieve permanency for our current children in care population more timely over this 3 year timeline, when we anticipate children in care numbers to have stabilised at about 200. This strategy is informed by and seeks to drive that projected reduction.

The gender split within the population is 55% male, 45% female. 96% of children in care in Halton are White British, with only 10 children being identified from a different ethnic background. This is in line with the makeup of Halton’s general child population. 29 children in care have a disability recorded (11%).

The age breakdown of children in care at the end of December 2017 was as follows:

- Age 0 to 4 – 58 children (22%). National average comparator 20%
- Age 5 to 10 – 84 children (32%). National average comparator 21%
- Age 11 to 15 – 79 children (30%). National average comparator 38%
- Age 16 and over – 45 children (17%). National average comparator 22%

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1 Data as at 31 December 2017
During the period January 2017- December 2017:

84 children were admitted to care. Of these 22 (26%) were aged 11-17 years old at the point of entering care.

This was a reduction in admissions from care from the previous 12 months where 98 children had entered care; however the proportion of those aged 11-17 at the point of entering care had increased from 22%. The proportion of those aged 0-4 admitted to care also increased from 41% during 2016 to 47% during 2017.

The majority of the children entering care have Abuse or Neglect recorded as the Primary Need. This is the case for 56% of the children entering care during 2017.

During the period January 2017 – December 2017:

76 children ceased care. This was a decrease on the previous year, however 22 (29%) were discharged from care to adoption.

This represents a significant increase on the previous year where 12 children were adopted (15%).

Performance in the number of days taken to move through the adoption process is measured in the Adoption Scorecard, and this is measured over a three year average. For both the number of days from entering care to placement with prospective adopters, and the number of days from Placement Order to match with prospective adopters, Halton has been reducing the average.

The percentage and number of children discharged from care as a result of Special Guardianship orders has decreased from 15 (19%) to 9 (12%) over the past 2 years.

The number of unaccompanied asylum seeking children in the care of Halton Borough Council has increased to 8 (3%) of the children in care at the end of December 2017.
3.2 Placement need v placement availability

Placement need
Almost 80% of Halton’s children in care were living in a family environment at the end of December 2017. This includes those in internal and external foster care, and those living at home with parents. In total:

- 163 children were living in a foster placement
- This was 63% of the children in care population.
- Of these, 49 were placed with independent fostering agency carers,
- 114 with in-house recruited foster carers or were placed with connected persons foster carers.

The above figures indicate that we are over reliant on the independent sector fostering agency placements.

At 31 December 2017, 40 (15%) young people were placed in residential care provision. The national average is 13%. All of these children were placed externally as Halton has no internal residential children’s homes, at this time, bar a short term break specialist unit for children with disabilities. None of the children were placed in children’s homes in the Borough, although most were within 20 miles of Halton. As measured at the end of the statutory reporting year\(^2\) there were 10% placed more than 20 miles away.

Additionally there were 19 children and young people utilising our internal short breaks children’s home, of whom 2 had child in care status due to the overall package of support being delivered over 75 nights per year.

The average age of the young people entering residential placements during 2017 (the child may have been a residential placement previously) was 14 years old.

There were two young people placed in secure accommodation outside of Halton and one young person accessing residential short breaks externally.

At the end of December, 7 children were placed for adoption, which equates to 3% of the children in care population. These children had been in placed for adoption for an average of 212 days with their adoptive carer awaiting an Adoption Order.

At the end of December:

- 14% of the children in care population were placed with parents on a care order.
- This compares to 6% nationally.
- Of these, 6 (15%) were subject to Interim Care Orders

\(^2\) Data at 31 March 2017
The number of care leavers in Halton has historically been around 60 at any one time. However, due to recent increases in the number of children in care, particularly the number of older young people entering the care system, the number of care leavers is also rising. At 31st December 2017;

There were 84 care leavers in Halton. This figure is predicted to increase over the next two years as many of the current 45 children in care aged 16 and over become care leavers, and of course as we extend our Care Leavers Offer to age 25.

Of our care leavers, at the end of December 2017 there were only 2 children living in Staying Put foster care arrangements, and no care leavers living in supported lodging arrangements.

Placement availability

Halton’s internal fostering service has;

- 124 Foster carers, equalling 71 approved fostering households with capacity to care for 131 children.

At the end of September 2017 there were 4 fully approved connected carers, a reduction of 4 from the previous year due to deregistration of some foster care households where placements had not been made for some time.

Within Halton there are;

- 39 IFA fostering households covering 10 IFAs offering 78 placements

This represents a 5% reduction from 2016 in terms of IFA households and is slightly less than the regional IFA household reductions for the same period of 8% - from 2172 to 1994.

Halton currently does not operate any mainstream in house children’s homes following its one home being deregistered in 2017 however a recent report to Children’s Trust Executive has approved a proposal in December 2017 to commission a provider to deliver the service, and we are currently in the commissioning process.
Halton does operate an overnight short breaks unit for children and young people with a range of disabilities, complex needs and behaviour. The home is registered to take up to four children at any one time, under the age of 18 years of both genders, who have either physical or learning disabilities or sensory impairment.

The children who receive this service have been assessed as being in need of short term overnight care, away from the family home. Depending on the assessed level of need packages up to a maximum of 75 overnights a year may be delivered. The home is currently rated as good by OFSTED following the last inspection in November 2017.

For a number of years Halton had substantially more externally managed residential provisions located within its boundary than the number of places it commissioned. Given the increase in use of external Residential placements this is no longer the case. During the last 4 years 2 children’s homes have closed within the borough which represents a reduction of 7 beds (24% reduction) and builds on the previous year's market reduction of 10%.

There are currently a total of;

- 12 children’s homes within the borough
- Operated by 4 providers from the private sector
- Offering 23 placements

The majority of the locally based provision is registered to meet EBD needs 10-17/18yrs with 1 provision being registered to meet disability needs.

The current OFSTED rating for the Halton located providers are;

- Outstanding - 0
- Good - 10
- Requires improvement – 1
- Inadequate – 0
- 1 home awaiting their first inspection

The Halton residential market is made up of;

- 1 six bed home
- 1 four bed homes
- 3 two bed homes
- 7 one bed homes

Halton continues to have the second highest concentration of 1 bed homes in the region.
During the past 3 years there has been a 10% increase in external Residential provision located within the North West as a whole – taken within this context the reduction in the Halton market is quite significant however with the increase in the number of placements required for Halton young people this brings some challenges to building a market that meets local needs in terms of quality, sustainability and cost.

Halton is part of the regional Placements Northwest Regional Framework for commissioning residential and fostering placements from the independent sector.

Halton joined Together for Adoption regional adoption agency in September 2017. In the previous reporting year (April 2016 – March 2017, Halton’s in house adoption service recruited and approved 9 adoptive families.

In total, we placed 10 children with our own approved adoptive families in this 12 month period. In addition, we placed 11 children for adoption with adoptive families approved by voluntary adoption agencies and 3 with families approved by other local authorities.

There are a range of provisions available for Halton Care Leavers in the borough, generally commissioned through private providers who are on the regional approval framework ran by Placements North West and St Helens MBC. Accommodation options currently available in the authority are;

YMCA
Self-contained flats 16-59yrs predominantly homeless
In total there are 66 beds of which 4 are direct access (subdivided into 3 units – 1 for hospital discharge and 2 for complex needs)

Private lettings sourced by Young People
This type of accommodation is sourced directly by Young People

Registered Social Landlords
Halton Borough Council act as the tenant and floating support is delivered into the properties at a varied level to meet specific young people’s needs

Externally commissioned providers
Floating support with or without accommodation and also small group living
Various locations and types of resources

Externally Commissioned Services
Within the North West region there are in excess of 100 companies offering Leaving Care / Semi Independent placements, this represents a significant increase within the last 7 years

These organisations deliver a combination of semi independence / group living units, Floating support with accommodation (mainly from the private rental sector) and floating support

A regional Dynamic Purchasing System has been implemented, this means that providers are able to join this process on a quarterly basis and their submissions are
then evaluated with the successful applicant’s details being added to the referrals groupings.

Halton currently use this DPS to support young people through the transition period between residential or foster care and taking up their own tenancy.

A provider from the DPS is commissioned to support each young person to develop sufficient independence skills and become tenancy ready.

The level of support can range from 24 hours a day at the beginning of such an arrangement, to 5-10 hours per week as a young person approaches 18 years of age.

**Placement Location**

At the end of December 2017, 31% of our children in care were placed outside of the Halton Borough area. As measured at the end of the statutory reporting year\(^3\) however there were only 10% placed more than 20 miles away.

### 3.4 Placement Stability

**Percentage of Children in Care with 3 or more placements in the year**

Performance for this measure has been positive for the last three years as the target is to keep this around 10%. At 31\(^{st}\) December 2017 performance was at 7%, however this is cumulative and is expected to increase in the final quarter of the year and bring performance in line with previous years.

**Percentage of Children in Care in placement for 2+ years**

Halton’s performance had previously been very high for this measure; however in the past four years it has been a challenge to sustain this. Performance is expected to decrease throughout the year and will remain a challenge for the local authority to maintain performance in line with last year.

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\(^3\) Data at 31 March 2017
3.5 Projected Children in care Population and Profile

We are projecting a reduction in our looked after population over the next three years. This strategy aims to safely contribute to that reduction and respond by ensuring sufficiency of placement need to meet our vision that more children will be placed in family based care and less in residential care, with more children placed in local internal resource than external IFA, residential or leaving care provision. We aim to have no more than 10% of Halton children placed with external providers by the end of this strategy in April 2020.

We will be seeking to reduce admissions of adolescents.

We are not projecting a reduction in young children aged under 4 coming into care and will be seeking to secure very early permanence for all young children admitted to care and anticipate increasing numbers of adoption placements over each year of this strategy.

We are anticipating that there may be an increase in unaccompanied asylum seeking children in Halton given the on-going instability in the world. We will aim to cater for these young people primarily in family based placements.

We anticipate demand for leaving care accommodation to increase over the next year given the increased numbers of children in care aged 16/17 at present. However as we succeed in reducing our looked after population overall and in particular in reducing admissions of adolescents, the result will be less care leavers and a corresponding reduction in demand for care leaver accommodation by the later 6 months of this strategy. We are projecting that we will be able to provide Staying Put foster care and Supported Lodgings / locally sourced supported accommodation placements for increasing numbers of care leavers by working effectively with local RSLs.

3.6 Placement Costs

The following details the average weekly unit costs per child in each different placement type:

<table>
<thead>
<tr>
<th>Placement Type</th>
<th>Average Weekly Unit Cost per Child</th>
</tr>
</thead>
<tbody>
<tr>
<td>In-house foster care</td>
<td>£303.52</td>
</tr>
<tr>
<td>Independent fostering agency foster care</td>
<td>£792.00</td>
</tr>
<tr>
<td>Independent sector residential care</td>
<td>£2,749.54</td>
</tr>
<tr>
<td>In house residential (Inglefield short breaks)</td>
<td>£428 per night</td>
</tr>
<tr>
<td>Semi supported leaving care accommodation</td>
<td>£1200 (multi-unit)</td>
</tr>
</tbody>
</table>

As clearly indicated, in-house foster carer placements are by far the most cost efficient placement option and residential provision of any sort is very high cost. Our aim to place more children in foster care, and more in in-house foster care, will support achievement of significant cost efficiencies. The cost of semi supported leaving care accommodation is very high and we aim to develop local relationships with our RSL’s to provide a wider range of supported accommodation in borough at less cost to support care leavers moving forward.
3.7 Gap Analysis

Edge of care services to prevent admissions of adolescents appear not to have been successful as admissions of 11 to 17 years olds has remained the same during the period October to September with 26 being admitted to care for both 2015-16 and 2016-17.

We have over double the percentage of children in care placed with parents (14%) compared to the national average (6%). Further work is needed to analyse the reasons for this and to address any arising practice issues, particularly given our high number of Interim Care Orders.

The low number of children in care placed in connected persons foster carer placements raises issues about our assessment processes – are we risk averse, or are we achieving good permanency outside of care via SGO. Practice in this area needs further exploration.

We currently have a significant gap in the number and range of in-house recruited foster carers. We have an insufficient number of foster carers for all types of placements except for babies, and few who are able to support more complex older children and young people, including partner and baby placements.

There is a significant gap in the provision of in-house approved (Together for Adoption (TfA)) adoptive families with only 21 approved at 31st December 2017, but being available for all 4 local authorities in the regional arrangement. In particular we need to increase provision for hard to place children.

More adoptive families prepared to offer fostering for adoption (FfA) placements are required in order to increase the number of early permanence placements. Between 1st September 2017 (TfA launch) and 31st December 2017 there were;

- 3 families approved at panel who would consider FfA
- 3 children who had been placed for FfA were matched at panel with TfA adopters
- 1 child who was placed in a FfA placement with adoption matters were matched at the TfA panel.

There is insufficient provision of foster care and of in borough residential placements for children.

There is a need to increase our use of Staying Put and Supported Lodging provision in the borough as this has been too low.

A wider and different range of supported and semi supported accommodation is required to meet the diverse needs of care leavers, for example those with learning difficulties.

The reliance of independent sector fostering placements is expensive given the unit cost differences compared to in-house fostering highlighted above.
4. Supporting Children to Remain With Their Families

4.1 The Importance of Family

We believe that all children have the right to family life which offers them permanence, and that, where possible, this should be within their own birth family.

We define permanence as the securing of a child’s physical, social and emotional wellbeing throughout childhood and into adulthood, and understand that this is achieved by the provision of consistent care, stable relationships, and a secure family base in life.

For the vast majority of children, being cared for in their birth family, either in the immediate family or with extended family, is the best way to meet their needs. We recognise that children should be supported to live within their birth families and only in a small minority of cases do children have to become looked after outside of their families. We want to deliver excellent family support services that help to keep families together.

Research by the Department for Education and the Association of Directors of Children’s Services has identified that in particular outcomes for adolescents entering care in their teens are on average poor. This informs our approach and aspirations to develop and deliver excellent edge of care services to adolescents and their families to support them to stay together.

4.2 What is Currently Working Well?

We have an effective edge of care offer in our Early Help services, and dedicated community support workers in our Child in Need social work teams offering intense support to children at the edge of care.

We are embarked on a programme to introduce systemic family practice to Halton, with a focus on children with complex emotional and behavioural needs, this will further strengthen our edge of care offer through targeted evidence based models of working.

We have a high number of children in care who have been enabled to live with extended family members in ‘connected persons’ foster care. This is qualified with the acknowledgement that many of these are likely to be suitable for conversion to Special Guardianship Orders, and whilst it is good we have secured extended family member placements, we need to secure permanence outside care for many of these children.

The number of children who have had permanence secured outside care with extended family members has increased and continues to increase. The number of children who left care via Special Guardianship Orders has been stable (10 in 2016 and 9 in 2017).

We have a multi-agency Early Help Strategy and a Neglect Strategy that have a positive impact in co-ordinating early help support in a targeted way to ensure needs are met.

We have improved our use of the Public Law Outline process to avoid care proceedings and subsequent admission to care, this has yet however to reduce the number of Interim Care Orders at home which is a priority for the success of this strategy.
4.3 Next Steps

We need to take further action to reduce admissions of children aged over 11. This is especially important given what we know from the DfE research cited previously indicating that outcomes for adolescents entering care are particularly poor.

We will take the following action:

Scope the need for an adolescent support unit with a remit to support adolescents on the edge of care to stay with their families, linking to our other edge of care services.

Increase our use of Family Group Conferences to identify care for a child prior to care proceedings being initiated, this may increase our short term, appropriate, use of S20 accommodation during pre-proceedings but reduce Care Orders at home, and care proceeding activity more generally.

We will work with all of our partners to deliver our Early Help Strategy, targeting resources at the causes of children’s admission to care, e.g. substance misuse, domestic violence, neglect.

We will implement the systemic family approach to our work right across children’s social care services, focussing on families’ strengths to support them to care for their children.
5. Achieving Timely Permanence

5.1 The Importance of Permanence
We have defined permanence as ‘the securing of a child’s physical, social and emotional wellbeing throughout childhood and into adulthood, and understand that this is achieved by the provision of consistent care, stable relationships, and a secure family base in life’. Where this cannot be safely provided in birth families we need to provide an alternative family based environment to meet all of our children in care’s needs for permanence, in order to give them a safe, stable and happy childhood and to give them the best chance to succeed as adults.

In seeking alternative permanence for children, we will prioritise the pursuit of securing legal permanence for them outside of local authority care, through adoption or Special Guardianship Orders. Living in a family environment outside of care most closely resembles the ‘normal’ family environment that children not in care experience.

It is important that we achieve permanence for children in a timely manner so that they can enjoy the security, stability and attachment that this brings as early in their lifetime as possible. As such we will strive to avoid all unnecessary delay.

We will consider adoption as a permanence option for all children where they cannot safely achieve permanence with their parents or extended family.

5.2 What is Working Well?

We are securing adoption for children in care. The number of children adopted in the year to 30th September 2017 was 22 compared to 12 the previous 12 months.

Placement Planning meetings and mechanisms have supported the improved performance on numbers adopted and timeliness in adoption.

The number of children supported to leave care via Special Guardianship Orders has been stable, with 9 in the 12 months to 31st December 2017 compared to 10 in the previous 12 months. Most of these children will be living with extended families as Special Guardians with only 4 former mainstream recruited foster carers currently having children placed under Special Guardianship arrangements.

Rates of short term placement stability for children in care are good.

Permanence through fostering is approved via the Local Authority Fostering Panel and as for children with an adoption plan these children must be the subject of a full Child Permanence Report for consideration at the Adoption Panel.
5.3 **Next Steps**

Introduce a Permanency Leadership Board to drive permanency planning for all our children in care and care leavers, ensuring improvement to:

- Maintain robust tracking arrangements
- Continue to promote a culture that respects the need for urgency and timeliness in securing early permanence for children
- Pro-actively promote and increase the use of fostering to adopt placements and concurrent placements
- Continue to link adoption family finding social workers with locality social workers as early as possible in the child’s journey
- Continue to practice non-sequential family finding

**We will:**

| Work with Together for Adoption to increase our efforts to recruit adoptive families and will target recruitment for difficult to place children, working closely with colleagues in our Communications Team. |
| Ensure the service is able to make maximum benefit from the Adoption Support Fund on behalf of service users. |
| Review our approach to the assessment of extended family members in light of our low number of connected carers. |
| Begin to promote Special Guardianship as a means to secure permanence outside of care for children. We will place a particular focus on ensuring as many of our connected persons foster carer arrangements are converted to Special Guardianship arrangements as possible. |
| Develop a new Special Guardianship Policy which allows for different kinds of support packages to ensure children are not denied permanence through a lack of post order support, including financial support. In addition we will seek to make maximum benefit from the Adoption Support Fund, now open to Special Guardians, on behalf of service users. |
| Systematically review all internal and external foster placements of over one year duration to ensure that where there is no alternative plan for permanence, the current arrangement is secured as a permanent placement via consideration and approval at Fostering Panel. |
| On an on-going basis review all section 20 placements to ensure that the legal status is appropriate and to take action to ensure that section 20 status is not acting as a barrier to securing appropriate permanence and certainty for children. |
6. Local Family Based Placements for the Vast Majority of Our Children in care

6.1 The Importance of Local Family Based Placements

We will strive to ensure that almost all of our children in care are cared for in a family. The Human Rights Act sets out the right to a family life. It is essential that our children experience the benefits of a family life.

There will always be a small minority of older children who because of their needs at a particular time in their life cannot be managed in a family environment. But even the best residential provision can institutionalise children, giving them even more hurdles to overcome as adults and future parents.

Where residential provision is used, it should be for a very small number of children and for the shortest possible time, as a means to prepare young people for living in a family.

We also want all of our children to be placed locally, close to their birth family, schools and communities. Placing children locally will support them to maintain relationships with family and friends and to continue in the same school.

We know that where children are placed locally we and our partners in education and health are better able to support them and to monitor their progress. It also makes it easier for us to support them to engage with other children in care and ourselves about how we can improve their experiences and outcomes for them and other children in care. Local placements mean there is far less risk of developing an ‘out of sight, out of mind’ culture spoken about by Edward Timpson, MP at the launch of the Children and Families Bill 2013, (Act of Parliament 2014).

6.2 What is Working Well?

We are collaborating with neighbouring Cheshire authorities to enhance our marketing and recruitment of foster carers, this will mean we can reach more carers and attract more foster carers to Halton. In time this will increase our in-house fostering households and reduce our reliance on IFA and residential placements.

The majority of children are placed in or within a 20 mile radius of Halton; this means we can provide local support services to meet identified needs.
6.3 **Next Steps**

It is essential to the delivery of this strategy that we develop a good in-house fostering service which is able to meet the placement needs of the majority of our children in care. Sufficient in-house fostering provision will contribute to:

<table>
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<th>Category</th>
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<tr>
<td>a reduction in the number of residential placements</td>
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<td>an increase in the number of children placed locally and in Borough</td>
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<td>a reduction in spend on placement provision</td>
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<td>and most importantly, improved outcomes for children</td>
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The Fostering Service in Halton is currently going through an intensive period of development as we know that the service can do more to contribute to meeting the Sufficiency Duty. The following improvement and development actions have commenced, are on-going, or will be commenced as part of this strategy:

- Improvements are being made and will continue to be made to the support and supervision package that our foster carers receive, so as to aid carer retention and word of mouth recruitment outcomes.

- We will be working with our existing carers to support their development and to stretch their approval categories so more of them can care for older children, more challenging children, and sibling groups.

- Our foster carer recruitment strategy is being implemented and we aim to recruit 10 new fostering households per year from 2018/19. We are having some success attracting experienced independent fostering agency carers to transfer to us and we will continue to respond and welcome interest from such carers.

- We require foster carers for all ages and types of children except carers who can only care for babies as we have a surplus of baby carers. However, we will be particularly focussing recruitment activity on recruiting foster carers for sibling groups, disabled children, and adolescents.

- We will review and improve our out-of-hour’s emergency fostering service so that it offers improved coverage and moves towards being the service that all children are placed in out of hours in an emergency. We will recruit carers for the emergency out of hour’s scheme that are able to offer placements for young people remanded overnight by the Police.
• We will look to recruit more foster carers able to offer parent and child placements.

• We will develop a short breaks and respite foster care offer as part of a support package both to children on the edge of care and to long term permanently matched children in care who would benefit from such support.

• We will recruit carers for unaccompanied asylum seeking children so that we can place them in foster care.

• We will develop an intensive support programme for our foster carers so we can have a small group of specialist carers able to meet the needs of more complex, older children. We will explore if there is a need for this small group of carers to be salaried to ensure we have capacity to meet both emergency placement needs and also longer term placements for the most complex children.

• We will scope the need for an adolescent support unit with a primary role to support adolescents on the edge of care to stay with their families. However, in addition we will use it to support fostering families with adolescents in crisis to avoid placement breakdown and potential admission into residential care.

• We will work in partnership with our health colleagues to ensure that there is sufficient provision of therapeutic support to children in foster placement and their foster carers to promote emotional wellbeing and placement stability.

• We will ensure there are strong working relationships between fostering and residential services, social workers, and the Virtual School for children in care so as to promote stability and continuity in children’s schooling and to ensure that school stability supports placements stability and vice versa.

• We will improve our placement commissioning process to ensure we find and retain the best care at the best cost when we do need to use external care providers.

• We will develop a locally ran, directly commissioned, residential children’s home for Halton children in care. The purpose and function of this home will be to support children placed with them to step down to foster care arrangements as quickly as possible.

• We will work with local RSLs’ to open and run 1 semi-independent living ‘hubs’ – where care leavers can have access to one bedroom flats with onsite 24 hour support. We will ensure there is movement on accommodation available across the entire borough by working closely with all RSL providers.
7. Local Placements, Family Placements, and Permanence for Disabled Children

7.1 The Importance of Planning for Disabled Children

Children with disabilities and their parents have a right to expect us to provide the same opportunities to local placements, family placements, and permanence, including permanence outside of care through adoption or Special Guardianship, as we do for other children in care.

There should not be an assumption for children with disabilities that adoption is unachievable for them, that their disability prevents them from being able to live in a foster family, or that it is more acceptable for them to be placed far away from their their families and communities.

In order to meet the needs of children with disabilities for local family placements and permanence, we need to understand their placement needs and plan placement provision specifically in response to these.

7.2 What is Working Well?

A children with disability social work post has recently been introduced.

We are effectively supporting 19 children through short breaks provided by Inglefield Short Break Children’s Home to remain at home/in long term fostering arrangements.

There are good links to our SEND team, and we have a robust SEND local offer.
7.3 Next Steps

We will promote a culture that recognises the right of disabled children to grow up in a family and has high aspirations for their placement and permanence outcomes.

We will actively target adopter recruitment activity at individuals and couples who could be a family for children with disabilities.

We will work with Together for Adoption to develop multi-agency support packages to support adopters to adopt children with disabilities.

We will actively target foster carer recruitment activity at individuals and couples who can foster children with disabilities, including for short term foster placements and long term/permanence foster placements.

We will actively recruit more short break and respite foster carers for children with disabilities to provide support to permanent fostering, adoption and Special Guardianship placements, as a means to support permanence and placement stability.

We will work with independent sector residential providers to commission sufficient local/in Borough residential provision for the small number of disabled children who may require a residential placement, so as to ensure we do not have to place children at distance to meet their very special needs.

We will seek to develop a policy to fund home adaptations for foster carers and adopters where they are caring or propose to care for a child with disability where such an adaptation is necessary to meet the child’s needs.
8. Care Leavers

8.1 The Importance of Support and Stability for Care Leavers

Leaving home to live independently for young people in the general population is a challenging and anxiety provoking experience. They will be faced with new challenges and problems, but in most cases will have the support of their parents and extended family and others in their community networks. At the same time, most are not forced to leave at 18 years of age. Indeed the average age for young people leaving home now is 26.

Leaving home/care for a looked after child is an even more challenging experience. Legally children in care cease to be looked after at 18 years of age, but few of them are ready to be fully independent. We want to be able to provide our young people leaving care with support and guidance as close to that which their non-looked after peers get when they leave home as we can.

For that reason we want to provide as much family like care leaver accommodation, such as ‘Staying Put’ foster care and to grow a Supported Lodgings offer. We are reviewing our relevant policy and commissioning arrangements. These arrangements most closely resemble the environments that young people outside of care live in with their families and they are the most beneficial for supporting young people and providing continuing stability.

Where ‘Staying Put’ or Supported Lodging arrangements are not available or appropriate, we want to provide a range of supported and semi independent accommodation provision to meet the diverse needs of the care leaver population, including those with some level of complex needs or learning difficulty.

8.2 What is Working Well?

There is agreement that we need to grow our use of stay put and supported lodgings accommodation, and we are planning to tender for an independent provider to provide a supported lodgings scheme in the borough.

There is a commitment from Halton Housing (RSL) to provide accommodation to meet the needs of other care leavers who are able, and/or wish to live more independently. Property has been identified and we are about to commence the commissioning process for the support provider.
8.3 Next Steps

The commissioning process for supported lodgings and to develop local ‘hubs’, single flats for our care leavers is underway – with a planned implementation schedule for July 2018.

We will write a policy briefing on Staying Put and seek executive approval to finance a stay put scheme in the borough – this will have a knock on effect as we will need to recruit more foster carers to reach our stated target.

We will work with Adult Services to improve transition arrangements for young people with disability and complex needs.

We will ensure that the provision of accommodation for young people leaving care is planned well in advance for them via well thought through Pathway Plans.

We will ensure that young people leaving care know their entitlements to support and guidance and receive them. We will publish our Local Care Leavers Offer before April 2018.
9. Commissioning and Partnership Working

9.1 The Important Role of Commissioning and Partnership Working

It is a reality that we will continue to use a mixed market approach to the provision of placements for children in care and care leavers. In light of this, it is important that operational managers and commissioners work together to shape the market in care provision so that it best meets our needs for local, high quality, cost effective placement accommodation.

It is essential that we work with partners in health, education, Police, and housing services to plan and deliver sufficient accommodation. For example, we will need support from our health and education colleagues in planning our placement accommodation, when matching particular children to specific placements, and in supporting us to maintain the stability of placements. We will want to work co-operatively with the Police to manage and support young people at risk of offending.

9.2 What is Working Well?

- We are part of the regional North West Framework for Independent Fostering and Residential provision.

- The average weekly fee that we pay for independent fostering agency placements and independent residential placement is less than the average for the region as a whole.

- The independent sector fostering market has for some years been able to compensate for the lack of capacity in the in-house fostering service, although this has resulted in higher costs and less local placements.

- We have reviewed our approach to delivering on our Children in Care and Care Leavers Strategy, have refreshed our Child in Care Partnership Board arrangements and are focused as a partnership on driving great outcomes for our children in care and care leavers.

- We have agreed to introduce 2 Placement Commissioning roles (increasing staff by 1.5FTE) to support our placement commissioning arrangements.
### 9.3 Strategic Next Steps

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<td></td>
<td>The new Placement Officer function will compliment and strengthen our current commissioning arrangements and will continue to work within the region and with the regional frameworks in place to develop sufficient capacity in the market to provide for our placement needs.</td>
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<tr>
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<td>We will seek to shape the market with a view to increasing the number of foster carers for our young people with the most complex and specialist needs as a means to reduce the use of residential provision.</td>
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<td>We will work with independent sector residential providers to commission sufficient local/in Borough residential provision for the small number of disabled children who may require a residential placement, so as to ensure we do not have to place children at distance to meet their very special needs. We have started discussions with 4 providers.</td>
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<td>We will commission alternative supported/semi-independent accommodation for care leavers that meets the diverse needs of our young people.</td>
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<td>We will work towards pooled funding for complex placements from health, education and social care.</td>
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<td>We will work with the Children in Care Partnership Board to deliver the next steps outlined in this strategy.</td>
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10. Measuring Success

The provision of sufficient placement accommodation for children in care and care leavers is essential for improving their outcomes. Children in Care should be able to expect us to provide the right placement, at the right time, and in the right place.

It is therefore essential that we make progress in delivering the next step actions in this strategy.

We will measure our success based on the extent to which:

- Our children in care population has reduced and admissions of adolescents to care have reduced. Our target children in care population for end of 2019-20 is 200. On admissions of adolescents, our target is to reduce admissions by 10% to 16 children aged 13+ entering care in the year.

- The number of children placed under placement with parent regulations will reduce. Our target is to reduce the number from 37 to 23 by April 2020 to reflect national averages.

- The number of children in residential care will reduce to 20 and the number of care leavers in private care provision will reduce to 10.

- The high percentage of children placed within 20 miles will be maintained, our target is to increase in Borough/local placements up to at least 90%.

- The number and percentage of children placed with in-house foster carers will increase. Our target is to place less than 10% of children with IFA carers.

- The number and percentage of children adopted and made subject to Special Guardianship will increase by 10% to 31 to 34.

- The timeliness of adoptions as per the Adoption Scorecard Measures will be improved. Our target is to reduce the number of days from being looked after to placement with adopters (A1 Measure) from 428 days and for the number of days between Placement Order to matching decision to reduce from 163 days 2018/19.

- The number of Staying Put and Supported Lodging placements will increase from our low starting base. The target is for staying put to increase from 2 to 10 by the end of 2019/20 and supported lodgings placements to increase from 0 to 10 in the same period.

- A wider range of alternative supported and semi supported accommodation will be available that meets care leaver’s needs.

- The overall unit costs per week per child for children in care placements will reduce by at least 5%.

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4 Reporting average 2015-18
5 Reporting average 2015-18
Progress on those measures and others will be monitored and reported via the following:

- The Children in Care Partnership Board
- Adoption and Fostering Panels and Agency Decision Makers
- Senior Management Performance Clinics
- Permanency Leadership Board
Amanda Amesbury
Divisional Manager
Children in Care and Care Leavers

Sam Murtagh
Commissioning Manager

Date of document review – April 2019