

# **WEST SUSSEX**

# **Children Looked After Needs Assessment 2017**

# September 2017

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### Introduction

*Promoting the Health and Wellbeing of Looked after Children* (DfE/DoH 2015) recommends that the needs of the looked after children population should be identified through the Joint Strategic Needs Assessment process. The purpose of this document is to assist stakeholders and commissioners in their understanding of social care, health, education and accommodation needs, therefore enabling commissioners and service providers to identify priorities for action and adequately plan to address those needs. In assessing and challenging the available data, it suggests indicators for monitoring progress towards unmet needs. The needs assessment is a key underpinning document for both the Child Looked After strategy and the sufficiency strategy.

This needs assessment is focused on children who are looked after by the local authority in West Sussex. The term 'looked after' is defined in the 1989 Children's Act. A child or young person aged under 18 becomes looked after by the local authority if they are in their care or provided with accommodation for a continuous period of more than 24 hours in the exercise of its social services function. A child can enter the care system by two main routes:

#### Under section 20 of the Children Act 1989:

The local authority will find suitable accommodation for a child when the parents accept and agree that they cannot provide a suitable home for their child, whatever the reason and regardless of whether the reason for this is temporary or ongoing. Parental responsibility remains with the parent/guardian and any person who has parental responsibility can remove the child from local authority accommodation at any time.

#### Under section 31 of the Children Act 1989:

If a local authority believes that a child is in danger of being harmed, the local authority will apply for a care order which will be made by a court. The court will take all the circumstances into careful consideration before doing this. When a care order is made, the local authority acquires parental responsibility for the child and has the power to determine the extent to which a parent or guardian of the child may meet their parental responsibility for that child. A court order can either be a full court order or an interim court order, where the council can take the child into care on a temporary basis.

Children are taken into care for a variety of reasons, nationally the most common reason is protect a child from abuse or neglect. This is also the case in West Sussex. In other cases their parents could be absent or may be unable to cope due to disability or illness.

A child ceases to be looked after when he or she reaches 18 years old. On reaching their 18th birthday, the status of the child changes from being 'Looked After' to being a 'Care Leaver', who remains eligible for help and assistance from the local authority. The Children (Leaving Care) Act 2000 aims to:

"delay young people's discharge from care until they are prepared and ready to leave; to improve the assessment, preparation and planning for leaving care; to provide better personal support for young people after leaving care; and to provide the financial arrangements for care leavers." A specific cohort of looked after children is unaccompanied asylum seeking children (UASC). An unaccompanied asylum seeking child is a child under the age of 18 who is outside their country of origin and who seeks asylum in their own right, who is separated from both parents and is not being cared for by an adult who by law has responsibility to do so. Children who arrive in the UK on their own are supported by the local authority's children's services in the area where they are found. Local authorities have a duty of care to ensure that the welfare of UASC are met and are 'looked after' under section 20 of the Children Act 1989.

By definition, children who have become looked after and care leavers are more likely to have negative life experiences that result in poorer outcomes in terms of health (including emotional health and wellbeing), lower educational attainment, poorer employment prospects, and are more likely than average to be engage with the justice system. We need to be able to improve these outcomes and life chances.

Improving outcomes for children who are looked after must be rooted in good data analysis to enable us to implement solutions that lead to significant improvement in life chances. This will enable us to monitor and evidence change and drive through the improvements in services which provide the best outcomes. The needs assessment is a vital tool to achieve this.

The looked after population is a transient group and, as such, key issues vary as different needs and new challenges emerge. For example, issues such as child sexual exploitation (CSE), radicalisation, changes in court processes and procedures, adoption and permanency all have an impact on the looked after population. There is also a need for realism that services are provided in a climate of reducing resources, presenting challenges to working practices in responding to the needs of children looked after (CLA).

#### Scope and purpose

The needs assessment focuses on the current CLA population, changing trends over time, comparisons with other authorities, outcomes for CLA and care leavers, and predictions of future needs. Specifically the purpose of this health and social care needs assessment is to:-

- Describe the number of children in the care of West Sussex, their characteristics (age, gender, ethnicity, disability, legal status) currently and over time;
- Examine trends in West Sussex and compare with statistical neighbours<sup>1</sup>, the South East Region and England;
- Identify the risk, and protective factors, relating to children entering care;
- Identify and describe outcomes for children looked after and care leavers, in relation to health (physical, emotional and mental), educational, safety and longer term outcomes of children leaving care;
- Identify existing services and provision in the social, health, private and community sectors;
- Identify provision of services against national guidelines / performance;

 <sup>&</sup>lt;sup>1</sup> Defined by CIPFA as being Hampshire, South Gloucestershire, Gloucestershire, Worcestershire, North Somerset, Dorset, Essex, Leicestershire, Bath & North East Somerset, Poole

• Identify any gaps in current services, and make recommendations on areas which need improvement or changes to meet current and changing need.

#### West Sussex strategic context

In October/November 2015 OFSTED undertook an inspection of services for children in need of help and protection, children looked after and care leavers, and a review of the Local Safeguarding Children Board. The report was published in January 2016, and the findings were that the services "Require Improvement" in all areas. Whereas many recommendations from the previous inspections have been implemented, there are still some challenges such as:

- Timeliness of initial child protection conferences, which can be inconsistent
- Changes in social workers affecting relationship stability between workers and young people
- Lack of detailed picture of prevalence data of child sexual exploitation, missing children, female genital mutilation, radicalisation, and child trafficking
- Permanency planning needs to be more timely and robust
- Unreliable health data; the local authority is not confident that children receive timely assessments. Strengths and difficulties questionnaire are not used to understand emotional and mental health needs
- Return interviews for children who go missing from home or care are carried out in too few cases, and often are not of good quality
- Some children need more help to understand what has happened to them and why they are in care
- Some children have limited awareness of their entitlements and how to complain
- Care leaver pathway plans are not sufficiently detailed
- Not enough care leavers in education, employment or training; low percentage in higher education; insufficient range of opportunities provided by the local authority
- The local authority does not understand the dominant themes arising from complaints by looked after children

The Care Quality Commission (CQC) also inspected in 2015, and released a report "Children looked after and safeguarding: The role of health services in West Sussex" in November 2015. Concerns raised as a result of this inspection included waiting times for Child and Adolescent Mental Health Services (CAHMS), access to CAHMS for those who were not in stable placements, lack of liaison between CAHMS (both general and the specialist service for looked after children) and the looked after children (LAC) health teams, and the lack of contribution by GPs, health visitors and school nurses to reviews.

#### **Key findings**

- The rate of looked after children for West Sussex has consistently been lower than that for England.
- The rate for England has remained constant between 2012 and 2016, whereas the rate for West Sussex has fallen slightly over this period.

- Compared with England the profile of looked after children in West Sussex is older with a similar proportion of those aged 4 and under and smaller proportion of those aged 5 to 9 years.
- Children aged 10 years and over accounted for over 70% of looked after children in West Sussex in 2016. This proportion has increased since 2012, when it comprised 63% of the total.
- There has been a steady increase in UASC numbers (from 25 to 36) between 2012 and 2015, and a marked rise (from 36 to 63) between 2015 and 2016.
- Compared with England, proportionately fewer children in West Sussex are looked after under a care order and more are accommodated under section 20.
- The age profile of those who started to be looked after in West Sussex has grown steadily older; 45% of children who started to be looked after were aged 10 years and over in 2012, this proportion had grown to 55% by 2016.
- The proportion of West Sussex looked after children who are in foster placements has been consistently lower than that of England over the period 2012 to 2016; it stood at 65% in 2016 compared with 74% at this time for England.

## Recommendations

The needs assessment makes a series of core recommendations:

#### Data recommendations

- 1. Conduct further in depth analysis of local and national data to understand the local population of looked after children, and the differences between the West Sussex cohort and the national cohort (e.g. age structure, legal basis etc.).
- 2. A common theme throughout services for looked after children is that data on Frameworki is not reliable, and local datasets are maintained which are checked to ensure accuracy and reliability. A data audit should be conducted, to ensure transparency and quality, and to inform performance reports and dashboards.
- 3. Monitor and analyse Integrated Prevention and Earliest Help (IPEH) data, to identify trends and patterns in the characteristics and journeys of young people in touch with Children's Social Care.

#### **Health recommendations**

- 4. The looked after children health teams receive notifications when children are placed in the area by other local authorities. Improved liaison with the health teams could provide a more accurate understanding of children placed from outside of area.
- 5. Improve liaison between Children's Social Care and the looked after children's health team, to improve timeliness and quality of health reviews.

#### **Engagement recommendation**

6. There is a lack of evidence of large-scale engagement with looked after children, care leavers, and unaccompanied asylum seeking children; it is therefore not possible to determine whether the experience of West Sussex CLA reflects the national picture. West

Sussex County Council should commission a survey of looked after children and care leavers in order to collect evidence of their experiences.

#### **Education recommendations**

- 7. Develop partnerships between virtual school and Children's Social Care to ensure educational support for children who enter care, especially at transition points.
- 8. Implement new model for Children Looked After Monitoring (CLAM) to improve input from the virtual school in placing children, proactively avoid disrupting education when moving placement, and to improve the educational stability of looked after children.
- 9. Monitor the impact of placement change on educational stability of looked after children.

#### Transition and leaving care recommendations

- 10. Implement changes to ensure looked after children receive pathway planning from the age of 16.
- 11. West Sussex County Council should consider the introduction of training flats to help prepare care leavers to live independently.

In addition, the needs assessment raised further questions, gaps and opportunities which need to be explored:

#### **Issues with Social Care**

- How are those children who return home monitored?
- Is there an organisational framework for return home work?
- Is there any local data where long term fostering is the permanence option, and monitoring of this?
- Is there any information on how many looked after children placed by other local authorities are known due to police/health/education involvement?
- Have any processes yet been put in place to address the concern that that return interviews for children who have been missing are not always carried out, and are not always of good quality?
- Does West Sussex County Council know the prevalence of child sexual exploitation (CSE) incidents?
- How many looked after children are identified as being at risk of CSE?
- What services / support are available to young people at risk of CSE?
- The statutory timeframe for health reviews is annual (bi annual for children aged under 5 years), and there is an expectation that these are carried out within 8 weeks of their due date. For those children unable to consent to the health assessment i.e. under 5s, 5-13 years, and those who have complex needs and lack capacity, there can be a significant delay in obtaining the appropriate paperwork from social workers.
- What local data is now available, to better inform the assessment of the health of looked after children in West Sussex?
- Is there any local data on the health needs of children placed in West Sussex from out of county?

#### **Issues with Health**

- No lead commissioner for looked after children health services.
- No commissioned service for initial assessment for unaccompanied asylum seeking children.
- No confidence in immunisation data on Frameworki, limited confidence in substance misuse data.
- CAHMS Looked After and Adopted Children service do not share information with the looked after children health team; addressing this was a recommendation within the CQC 2015 Inspection Report.
- West Sussex CCGs are not meeting their statutory requirements in a number of areas. They have a delegated responsibility under section 10 of the Children Act but do not always act to discharge this, and do not understand their role as part of the Corporate Parent Agenda as the health parent for looked after children.
- The Corporate Parenting Panel does not have regular health representation, the last time health attended was 2014, the next time will be October 2017.

#### **Issues with Education**

- The placement profile of looked after children is not well understood.
- The impact of placement changes on educational stability is not linked.
- Placement stability and its effect on educational outcomes is not being monitored.
- West Sussex County Council does not proactively avoid disrupting education when it becomes necessary for a child to move placement.
- The virtual school is not routinely consulted when a placement is being arranged for a child.
- The placement of children within West Sussex by other local authorities places demands on the Alternative Provision College.
- When young people are placed by West Sussex in out of county placements the issues relating to care planning and education provision become more acute because the network of schools and other education providers is not immediately accessible.

## Characteristics of looked after children in West Sussex

#### Numbers and rates

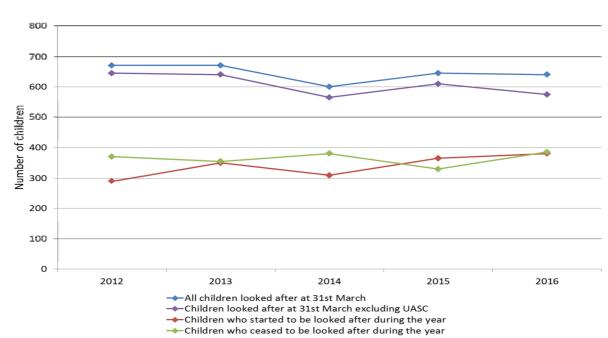


Figure 1: Number and characteristics of children looked after at 31 March, 2012 to 2016, West Sussex

Figure 1 shows the number of looked after children in West Sussex over the period 2012 to 2016. The number of children looked after by West Sussex County Council remained stable between 2015 and 2016, but fell over this period when UASC are excluded from these figures. With some fluctuation, the number of children who ceased to be looked after has remained fairly constant since 2012, whereas those who started to be looked after have demonstrated a rise over this period. In 2016 the numbers of children who started to be looked after, and those who ceased, were similar. Nationally there has been a steady rise in the number of looked after children, from 67,070 in 2012 to 70,440 in 2016, though once UASC are excluded from the total the number of children fell in 2016 from a high of 66,740 in 2015. In England the number of children who started to be looked after in the year, and the number who ceased, has increased between 2012 and 2016, and the numbers of both cohorts were similar throughout this period (figure 2).

Source: DfE National Statistics, Children looked after in England including adoption

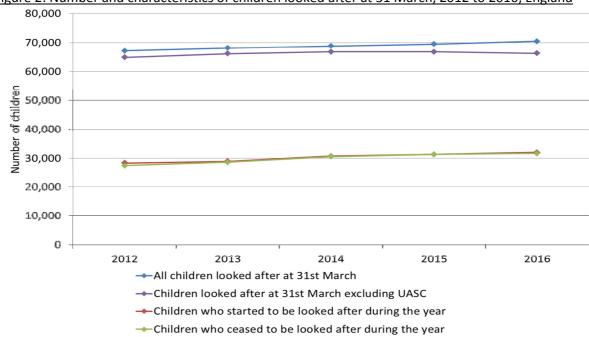
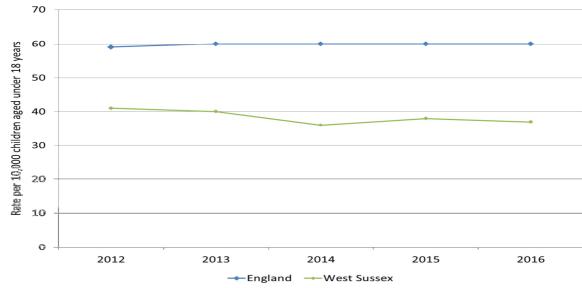


Figure 2: Number and characteristics of children looked after at 31 March, 2012 to 2016, England

Source: DfE National Statistics, Children looked after in England including adoption

The rate of looked after children (per 10,000 children aged under 18 years) is shown in figure 3, for West Sussex and England. The rate of looked after children for West Sussex has consistently been lower than that for England. The rate for England has remained constant between 2012 and 2016, whereas the rate for West Sussex has fallen slightly over this period.

Figure 3: Rate of looked after children rates per 10,000 children aged under 18 years, 2012 to 2016, West Sussex and England



Source: DfE National Statistics, Children looked after in England including adoption

#### Age profile

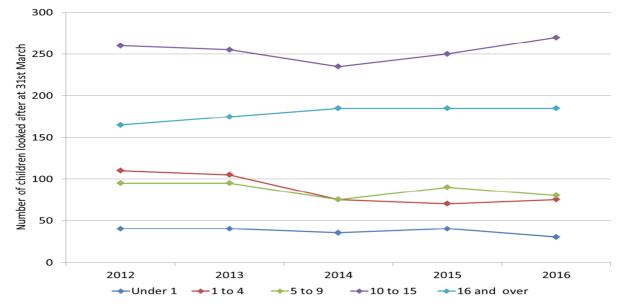


Figure 4: Age of children looked after at 31<sup>st</sup> March, 2012 to 2016, West Sussex

The age groups of children looked after as at 31<sup>st</sup> March for the years 2012 to 2016 for West Sussex are shown in figure 4. The largest group is those aged 10 to 15 years, with those aged 16 and over comprising the second largest group. Together, children aged 10 years and over accounted for over 70% of looked after children in West Sussex in 2016. This proportion has increased since 2012, when it comprised 63% of the total.



Figure 5: Profile of children looked after at 31<sup>st</sup> March by age, 2012 to 2016, England and West Sussex

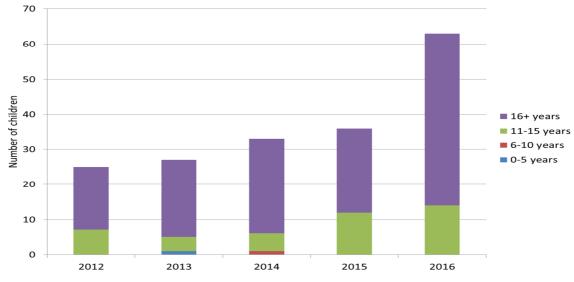
Source: DfE National Statistics, Children looked after in England including adoption

Source: DfE National Statistics, Children looked after in England including adoption

Compared with England the profile of looked after children in West Sussex is older (figure 5) with a similar proportion of those aged 4 and under and smaller proportion of those aged 5 to 9 years.

The number and age profile of UASC looked after by West Sussex, as of 31<sup>st</sup> March, is shown in figure 6. There has been a steady increase in UASC numbers (from 25 to 36) between 2012 and 2015, and a marked rise (from 36 to 63) between 2015 and 2016. While there has been small increase in the number of UASC in the 11-15 years age group the majority of the rise in the number of UASC is among those aged 16+.

Figure 6: Age profile of unaccompanied asylum seeking children looked after by West Sussex, 31<sup>st</sup> March, 2012 to 2016



Source: West Sussex CLA database

#### Ethnicity

The ethnicity of West Sussex looked after children, excluding UASC, is shown in figure 7, for the years 2012 to 2016.

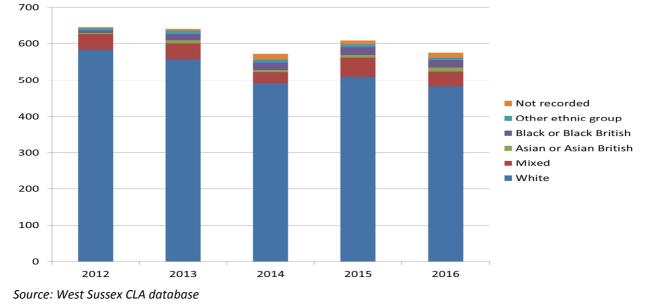


Figure 7: Ethnicity of children looked after at 31<sup>st</sup> March, excluding UASC, 2012 to 2016, West Sussex

For all years the majority of CLA are White, and over 90% of these are White British. Mixed race comprise the next largest ethnic group, typically 7-8%, and about 3.5% of the CLA population are black. Among the population of UASC (figure 8), for the years 2012 to 2015, the main ethnic group for was Asian, with smaller numbers of mixed, White non-British, and other ethnic groups. However in 2016, while Asian was the main ethnic group among UASC, a substantial proportion was of mixed race, and no "other" ethnicity was recorded.

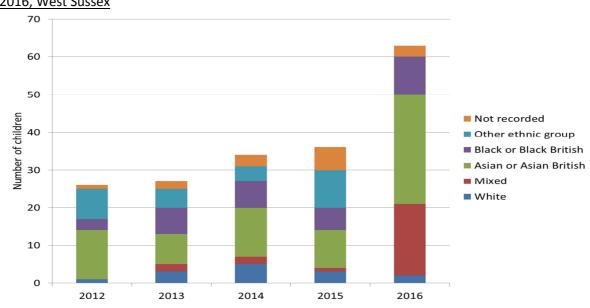
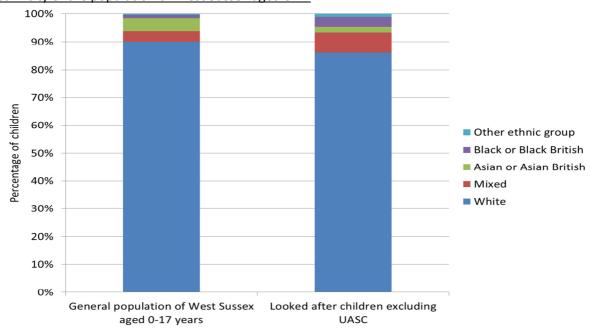


Figure 8: Ethnicity of unaccompanied asylum seeking children looked after at 31<sup>st</sup> March,2012 to 2016, West Sussex

Source: West Sussex CLA database

Figure 9 shows the ethnicity of non-UASC West Sussex CLA, looked after at 31<sup>st</sup> March 2016, compared with the ethnic breakdown of the general population of children in West Sussex, aged 0 to 17 years. Compared with the general population, West Sussex CLA have proportionately fewer White and Asian children and proportionately more Black and mixed race children.



<u>Figure 9: Ethnicity of children looked after at 31<sup>st</sup> March 2016, excluding UASC, compared with the ethnicity of the population of West Sussex aged 0-17</u>

Source: West Sussex CLA database, Nomis 2011 Census

#### Legal status

There are 2 main routes into being looked after by the local authority

- Being accommodated under section 20 of the Children Act 1989
  - Children and young people can be accommodated with the consent of those with parental responsibility. It is based on co-operative working between the Local Authority, the young person and his or her parents. Any person with parental responsibility can remove the child from accommodation provided by the local authority, without giving notice. If the young person is 16 or 17 years old, they do not need the consent of those with parental responsibility in order to be accommodated by the local authority.
- Being made the subject of a care order under section 31 of the Children Act 1989 (section 38 for interim care orders).
  - The local authority or any authorised person can apply to the court for a child or young person to become the subject of a care order; care orders can only be made by the court. Once a care order is made, the local authority obtains parental responsibility in addition to the other parental responsibility holders. A care order can only be discharged by the court on the application of any person who has

parental responsibility for the child the child or the local authority designated by the order.

Other ways a child may become looked after include:

- When a child has been removed from the parents or carers under an emergency protection order (section 44 of the Children Act 1989) and then potentially subject to an interim care order and care proceedings
- When a child has been removed from his home under a child assessment order (section 43 of the Children Act 1989)
- When a child has been removed to suitable accommodation under police protection (section 46 of the Children Act 1989)
- Juveniles remanded in care and refused bail
- Juveniles subject to a supervision order with a provision that they reside in Local Authority accommodation.

A placement order, made under section 21 of the Adoption and Children Act 2002, gives authority to a local authority to place a child with prospective adopters. It can only be made in relation to a child who is the subject of a care order or where the threshold criteria for a care order are satisfied or where there is no parent or guardian. A placement order has the effect of suspending a care order. If the placement order is subsequently revoked, the care order is reinstated. The placement order continues until it is revoked, until an adoption order is made, or until the child is 18, marries or enters a civil partnership.

The number of children in West Sussex looked after under a care order, either interim of full, has decreased over the period 2012 to 2016 both in number (from 375 to 295) and in proportion of the total (from 55% to 45%) (figure 10). The number and proportion of children looked after under section 20 have increased; in 2012 this group comprised 35% of the total, this increased to 44% in 2016. The proportion of children where a placement order has been granted has remained at around 10% of the total.

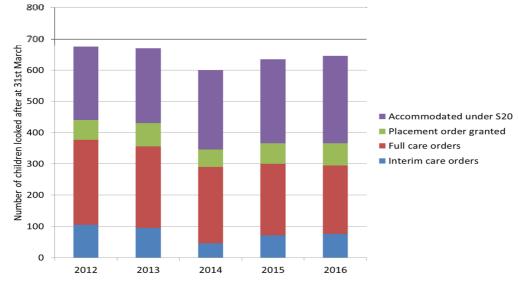


Figure 10: Number of children looked after at 31<sup>st</sup> March by legal status, 2012 to 2016, West Sussex

Source: DfE National Statistics, Children looked after in England including adoption

England has not demonstrated this change in the legal status profile of looked after children. Nationally the proportion of children looked after under a care order has remained at around 60% whereas those accommodated under section 20 is less than 30% of the total (figure 11). Compared with England, proportionately fewer children in West Sussex are looked after under a care order and more are accommodated under section 20.

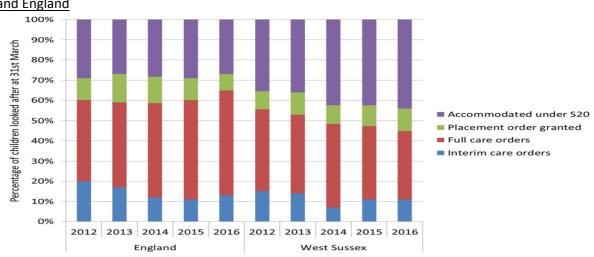


Figure 11: Proportion of children looked after at 31<sup>st</sup> March by legal status, 2012-2016, West Sussex and England

Source: DfE National Statistics, Children looked after in England including adoption

The age profile and legal status of children who were looked after as at 31<sup>st</sup> March 2016 is shown in figure 12. The largest age group of looked after children is 11-15 years, and the majority of these were looked after under a care order, with the remainder looked after under section 20. Among those aged 16+ years, most are looked after under section 20. With the younger age groups more are looked after under a care order, and a number are placed for adoption.

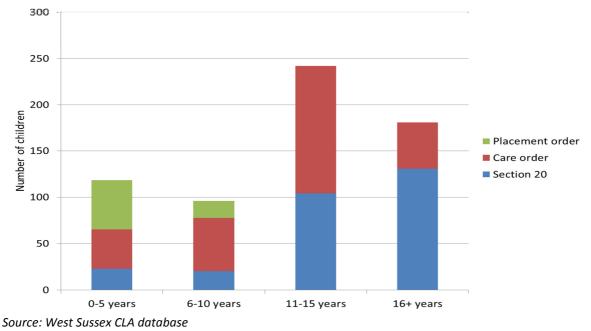
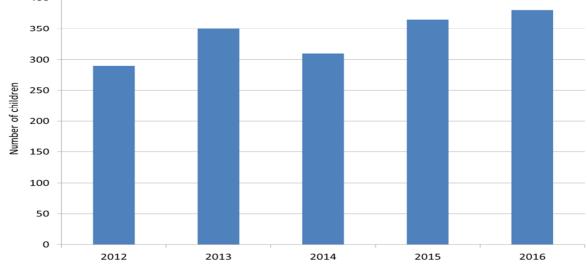


Figure 12: Legal status of children looked after at 31<sup>st</sup> March 2016, by age, West Sussex

#### Children who start to be looked after

The number of children who start to be looked after in West Sussex, over the period 2012 to 2016, is shown in figure 13. There has been an overall rise in the number, from 290 in 2012 to 380 in 2016.

Figure 13: Number of children who start to be looked after in the year ending 31<sup>st</sup> March, 2012 to 2016, West Sussex 400



Source: DfE National Statistics, Children looked after in England including adoption

Figure 14 shows the age breakdown of the children who started to be looked after in West Sussex. Those aged 10 to 15 years comprise the largest group, and there has been a steady rise in those aged 16 years and over. The age profile of those who started to be looked after in West Sussex has grown steadily older; 45% of children who started to be looked after were aged 10 years and over in 2012, this proportion had grown to 55% by 2016. With some fluctuation, the age profile of looked after children nationally had remained more constant (figure 15).

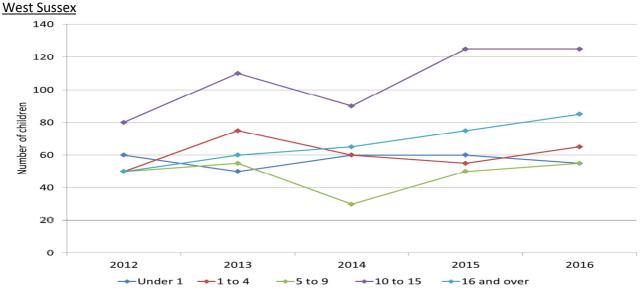


Figure 14: Age of children who started to be looked after in the year to 31<sup>st</sup> March, 2012 to 2016,

Source: DfE National Statistics, Children looked after in England including adoption



Figure 15: Age profile of children who started to be looked after in year to 31<sup>st</sup> March, 2012 to 2016, West Sussex and England

Source: DfE National Statistics, Children looked after in England including adoption

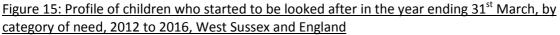
The category of need by which a child becomes looked after is shown in table 1 (number) and figure 15 (proportion). The main reason, both nationally and in West Sussex, is due to abuse or neglect. The proportion attributed to this reason has declined in West Sussex over the period 2012 to 2016, as the proportion due to absent parenting has increased. Part of this increase may be due to the larger than national increase in UASC looked after by West Sussex over this time. The proportion of

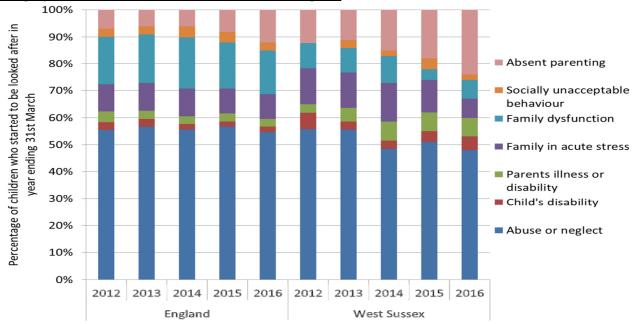
children who became looked after due to parent's and child's illness or disability is larger in the West Sussex population than in the national population, 12% compared with 5% nationally.

		Year ending 31st March				
	2012	2013	2014	2015	2016	
Abuse or neglect	155	195	150	185	180	
Child's disability	15	10	10	15	20	
Parents illness or disability	10	15	20	25	25	
Family in acute stress	35	45	45	40	25	
Family dysfunction	25	30	30	15	25	
Socially unacceptable behaviour	<5	10	5	15	5	
Low income	<5	0	0	0	0	
Absent parenting	35	40	45	65	90	

Table 1: Number of children who started to be looked after in the year ending 31<sup>st</sup> March, by category of need, 2012 to 2016, West Sussex

Source: DfE National Statistics, Children looked after in England including adoption





Source: DfE National Statistics, Children looked after in England including adoption

Figure 16 shows the category of need of children who started to be looked after by West Sussex in 2015/16, broken down by age. At the younger age groups, abuse or neglect is the dominant reason; for those aged 16+ it is absent parenting. Parental illness or disability is the second most common reason in those aged up to 5 years, and in those aged 6 to 10 years. Socially unacceptable behaviour appears as a reason for need in the 11-15 years age group, with a small number of those aged 16+ years starting to be looked after due to this reason.

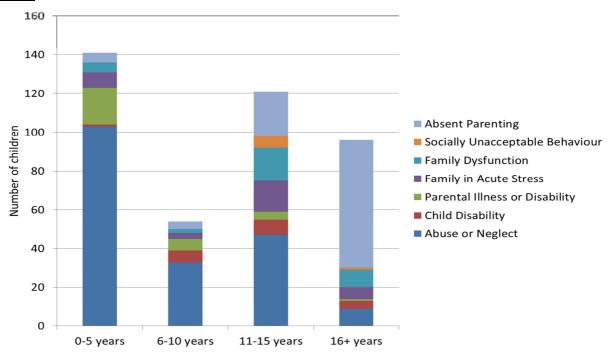


Figure 16: Category of need of children who started to be looked after in 2015/16, by age, West Sussex

Figure 17 shows the legal status on starting of children who started to be looked after during the year ending 31<sup>st</sup> March, for West Sussex and England; table 2 shows the numbers for West Sussex. For both areas the majority of children were started to be looked after under section 20. Nationally the proportions of children looked after under section 20 and care orders, fluctuating around 60% and 23% respectively, have remained fairly constant over the period 2012 to 2016. In contrast, the proportion of children who started to be looked after under section 20 in West Sussex has increased over this time, from 57% in 2012 to 71% in 2016, whereas the proportion of children who started to be looked after under a care order has decreased, from 22% in 2012 to 10% in 2016.

2012 to 2016, West Sussex							
	2012	2013	2014	2015	2016		
Care order	65	45	30	45	40		
Accommodated under s20	165	240	220	255	270		
Other	60	70	55	65	70		
TOTAL	290	355	305	365	380		

Table 2: Number of children who started to be looked after in the year to 31<sup>st</sup> March by legal status, 2012 to 2016. West Sussex

Source: DfE National Statistics, Children looked after in England including adoption

Source: West Sussex CLA database

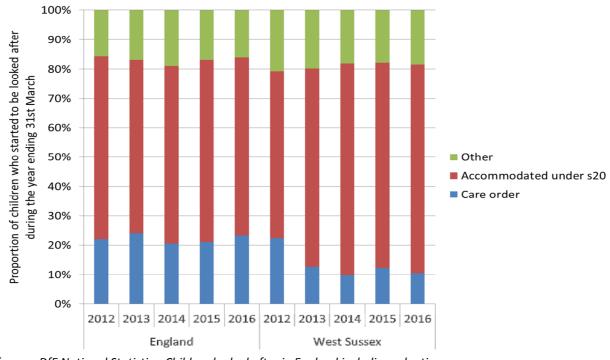


Figure 17 Children who started to be looked after during the year ending 31 March by legal status on starting, 2012 to 2016, West Sussex and England

Source: DfE National Statistics, Children looked after in England including adoption

The age breakdown of children who started to be looked after under section 20 and under a care order are shown in figures 18 and 19 respectively, for the years 2013/14 to 2015/16. There was an increase in the number of children who started to be looked after under section 20 between 2013/14 and 2015/16, but the proportion of each age group remained fairly constant. A higher proportion of children who started to be looked after under section 20 were aged 16+ in 2015/16 than in the two previous years; this presumably is due, in part, to the increased number of UASC entering care in West Sussex in this year.

The number of children starting to be looked after under a care order increased from 2013/14. The numbers of those aged 0-5 with this legal status were similar for the three years shown, but the number of children aged 6 to 15 years increased markedly between 2013/14 and 2014/15, albeit with a slight decrease in 2015/16.

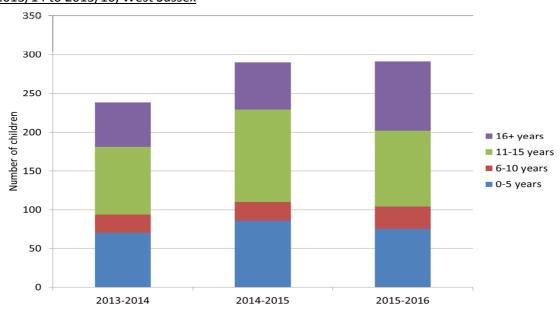


Figure 18: Children who started to be looked after during the year under section 20, by age group, 2013/14 to 2015/16, West Sussex

Source: West Sussex CLA database

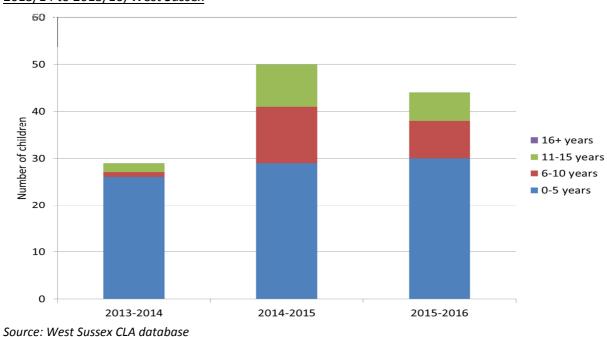


Figure 19: Children who started to be looked after during the year under a care order, by age group, 2013/14 to 2015/16, West Sussex

#### Children who ceased to be looked after

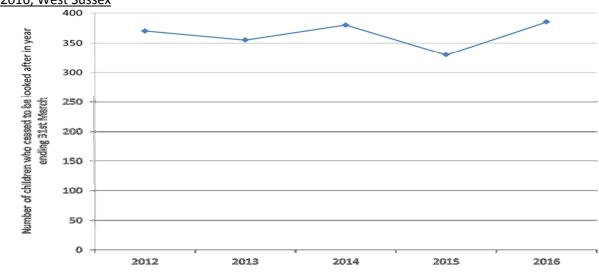


Figure 20: Number of children who ceased to be looked after in year ending 31<sup>st</sup> March, 2012 to 2016, West Sussex

Source: DfE National Statistics, Children looked after in England including adoption

The number of children who ceased to be looked after in West Sussex is shown in figure 20, for the period 2012 to 2016. There has been some fluctuation but the number is generally between 350 and 400. The age breakdown of these children is shown in figure 21. The largest age group of those who cease to be looked after is those aged 16 years and over, with the next largest age group being those aged 1 to 4 years.

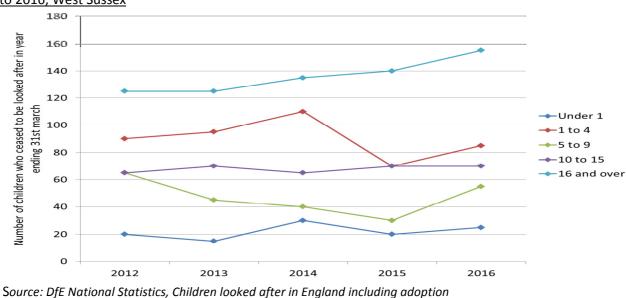
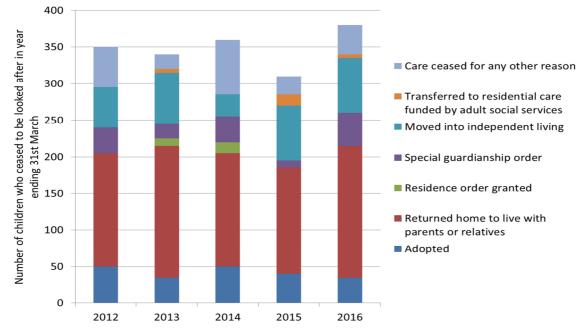


Figure 21: Number of children who ceased to be looked after in year ending 31<sup>st</sup> March by age, 2012 to 2016, West Sussex

The main reason for children leaving care is to return home to live with parent or relatives (figure 22); this is a major reason for leaving care in all age groups (figure 23). In most of the years shown,

moving into independent living is the next most common reason. About 10 to 15% of looked after children are adopted each year, all adoptions in 2015/16 were for children aged 0-10 years.



<u>Figure 22: Number of children who ceased to be looked after in the year ending 31<sup>st</sup> March by</u> reasons for ceasing, 2012 to 2016, West Sussex

Source: DfE National Statistics, Children looked after in England including adoption

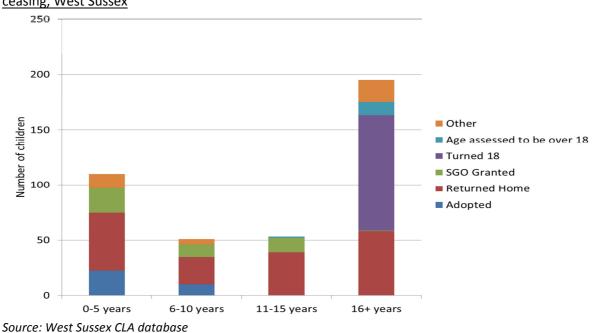


Figure 23: Number of children who ceased to be looked after in 2015/16, by age and reason for ceasing, West Sussex

**Recommendation** Further analyse local and national data to understand the differences between the West Sussex cohort of looked after children and the national cohort (e.g. age structure, legal basis etc.)

## Projections

The Insight team at West Sussex County Council has undertaken demand projections for Children's Social Care, to 2019/20; this includes projections of the number of children who will be looked after. The summary projections are shown in table 3, the number of CLA is projected to increase by 16% between 2015/16 and 2019/20.

		Early	Help	Children In	Child	Children	Permanence -
			Targeted	Need (CFA	Protection	Looked	Children Placed
Year	Referrals	EH Plans	Universal	Plans)	Plans	After	for Adoption
2014/15	6,785	n/a	n/a	1,305	510	645	108
2015/16	8,042	4,650	7,875	1,536	444	646	155
2016/17	8,910	5,065	7,925	1,521	496	685	162
2017/18	9,289	5,520	7,990	1,711	523	731	168
2018/19	9,667	6,015	8,060	1,902	551	746	174
2019/20	10,045	6,555	8,140	2,092	578	751	180
					1		
% increase							
2015/16 to	25%	41%	3%	36%	30%	16%	16%
2019/20							

<b>T</b>			<u> </u>			2040/20
Table 3: Summary	/ of Childrer	i's Social	Care demand	pro	jections to	2019/20

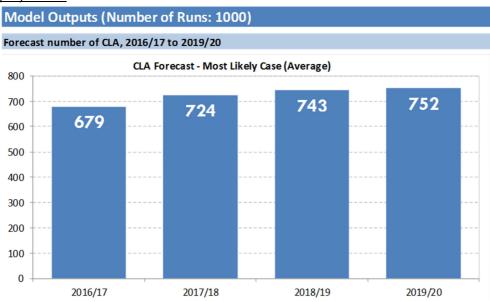
More details of the method used in the projection of CLA numbers are shown below.

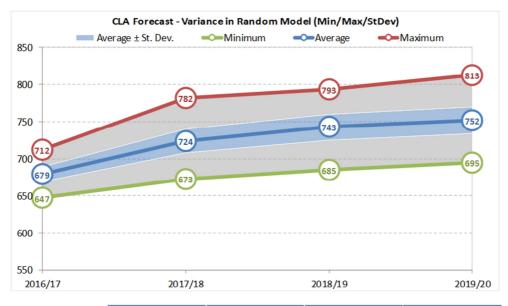
Projection	What is being projected?	How was it projected?
Children looked after	The number of children looked after at the end of the year	Insight CLA predictive model, using 2016/17 Q2 and Q2 trends to select the most likely scenario

A four year forecast model was developed in early 2016 to project numbers of CLA up to 2019/20 and their associated costs. The model has been updated with the CLA list as of  $21^{st}$  March 2016 and re-run – a summary of the outputs is shown in figure 24

As of October 2016, the 'Most Likely Case (Average)' scenario has already been exceeded; there were 689 CLA at the end of October. This figure still sits within the range of figures projected, and is equal to the 'Average + Standard Deviation' year-end projection, which is the scenario used as a basis for the overall projections.

# Figure 24: Output of the Insight CLA predictive model, showing the likely and range of possible projections





	2016/17	2017/18	2018/19	2019/20
Minimum	647	673	685	695
Average - St. Dev.	669	708	725	734
Average	679	724	743	752
Average + St. Dev.	689	740	760	770
Maximum	712	782	793	813

## **Placement characteristics**

The majority of children who are looked after by West Sussex are in foster placement (table 4), this is the case for all years shown. The proportion of looked after children who had been placed with foster carers had been around 70%, reaching 73% in 2015. However, in 2016 this had dropped to 66% and there had been a rise in those in secure units, children's homes and semi-independent living accommodation, from 16% in 2012 to 2015 to 23% in 2016. There had also been a decline in the proportion of children placed with parents, from 4% in 2012 to 1% in 2016, and a rise in the proportion of children placed for adoption, from 4% in 2012 to 7% in 2016.

Table 4: Number of children looked after at 31<sup>st</sup> March by type of placement, 2012 to 2016, West Sussex

	2012	2013	2014	2015	2016
Foster placements	465	475	425	465	420
Placed for adoption	25	35	25	30	45
Placement with parents	25	20	10	10	5
Other placement in the community	30	30	15	20	15
Secure units, children's homes and semi-independent living accommodation	110	100	105	105	150
Other residential settings	x	x	x	x	x
Residential schools	x	15	15	x	x

x - fewer than 5 children

Source: DfE National Statistics, Children looked after in England including adoption

Trend data on the proportion of children looked after by placement type for England and West Sussex is shown in figure 25.



<u>Figure 25: Proportion of children looked after at 31<sup>st</sup> March by type of placement, 2012 to 2016,</u> West Sussex and England

Source: DfE National Statistics, Children looked after in England including adoption

The proportion of West Sussex looked after children who are in foster placements has been consistently lower than that of England over the period 2012 to 2016; it stood at 65% in 2016 compared with 74% at this time for England. In contrast the proportion of children looked after in secure units, children's homes and semi-independent living accommodation is higher in West Sussex than nationally; 23% in 2016 compared with 11% for England. There are also proportionately fewer children placed with parents in West Sussex (1% compared with 5% nationally in 2016), and more placed for adoption (7% in West Sussex compared with 4% in England).

Figure 26 shows the number of children looked after by West Sussex as of 31<sup>st</sup> March for the years 2012 to 2016, by placement provider. For all years the majority of children were looked after by West Sussex in-house provision, with a smaller proportion looked after by private providers. Voluntary /third sectors providers accounted for 3% to 5% of provision in the years 2012, 2015 and 2016, and a smaller proportion in 2013 and 2014.

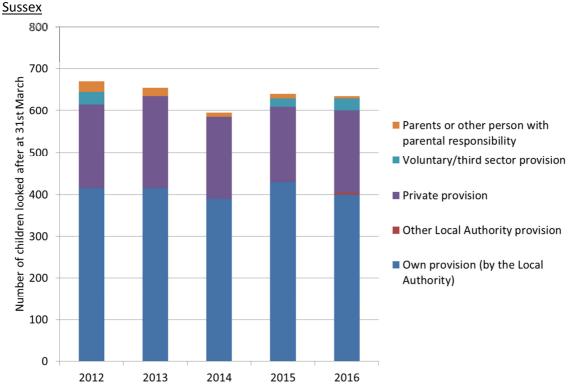


Figure 26: Number of children looked after at 31<sup>st</sup> March by placement provider, 2012 to 2016, West

Source: DfE National Statistics, Children looked after in England including adoption

Placement provision is further broken down in figure 27, which shows placement type by provider by age of the child. For the age groups 0-5 and 6-10 years, in house foster placement, along with a smaller proportion of external foster provision, account for the majority of children looked after. However, a sizeable proportion (23%) of 0-5 year olds are placed for adoption; this proportion is less than 10% in those aged 6-10 years and no children were placed for adoption in the older age groups. A small proportion (9%) of children aged 6-10 are looked after in residential homes, this is higher at 23% for those aged 11-15 years , and is around 15% for 16+. At 16+ independent living and hostels etc., both in-house and external, account for a third of placements.

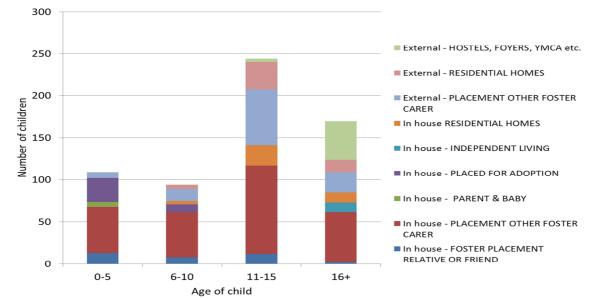


Figure 27 Placement type by age of child, West Sussex

Source: West Sussex Day in Question 28/03/2016

#### **Emergency placement**

Children should enter care in a planned way, unless in an emergency situation. Table 5 shows the number of placements open at  $31^{st}$  March 2016 which were undertaken either same day or out of hours. A total of 64 placements, 10% of the total CLA population, were same day or emergency placements. Of these, 15 were same day placement moves; the remainder were placements for children new into care.

	New i	into care	Placem	Total	
	number	% of total CLA	number	% of total CLA	Total
Same Day	34	5.3%	15	2.4%	49
Out of hours	15	2.4%	0	0.0%	15
Total	49	7.7%	15	2.4%	64

Table 5 : Open placements as of 31<sup>st</sup> March 2016 which were same day or out of hours.

Source: CLA database

#### Placement inside/outside county boundary

As of 31<sup>st</sup> March 2016 78% of children looked after by West Sussex were placed within the county boundary; this is higher than the national percentage of children placed within their home authority, which was 60%. The percentage of children placed within 20 miles of home, regardless of in/out of county, was 62%. This is lower than the figure reported for England, which was 74%, but West Sussex had a larger percentage of children where the distance was not known or recorded (20% compared with 7% for England)(figure 28).

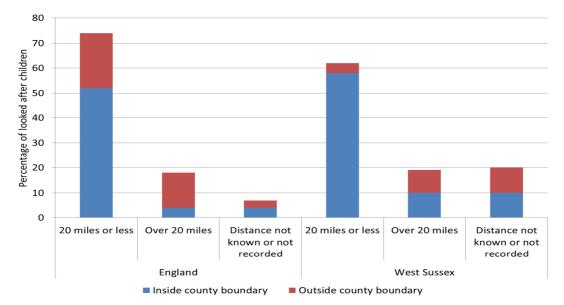


Figure 28: Percentage of children looked after at 31<sup>st</sup> March 2016, by distance from home postcode and inside/outside council boundary, England and West Sussex

Source: DfE National Statistics, Children looked after in England including adoption

The host local authorities of children placed out of county by West Sussex are shown in figure 29. On 31<sup>st</sup> March 2016 there were 86 children placed out of county. This figure does not include those who were placed for adoption and out of county, but does include those placed with relatives outside the county. Of the 86 children, 19 were placed with Surrey, 14 were placed with East Sussex and 12 were placed with Brighton & Hove. Kent and some London boroughs accounted for a further 13 placements, and 20 other local authorities hosted a total of 28 children.

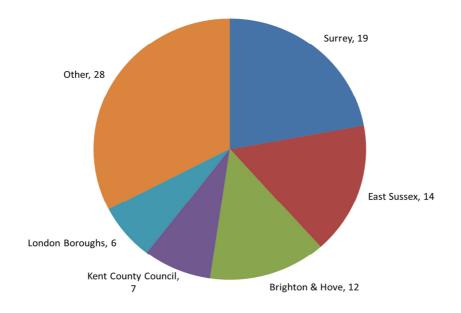


Figure 29: Host local authorities of children placed out of county, 31<sup>st</sup> March 2016

Source: CLA database Does not include children who are placed for adoption

Further analysis of the characteristics of placement in and out of county is shown below. Compared with children placed in county, of children placed out of county there are proportionately more children aged 6 to 15 years (figure 30), proportionately more children in residential care settings and placed for adoption (figure 31), and proportionately more children who have entered care due to child disability and socially unacceptable behaviour (figure 32).

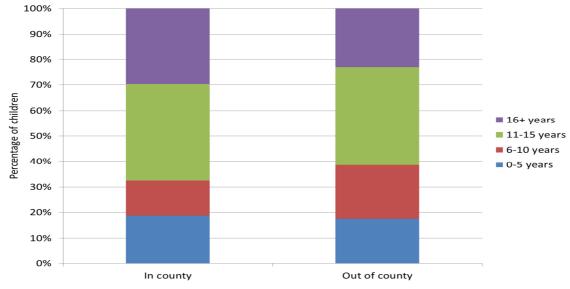


Figure 30: Age profile of children placed in county and out of county, as at 31<sup>st</sup> March 2016

Source: West Sussex CLA database

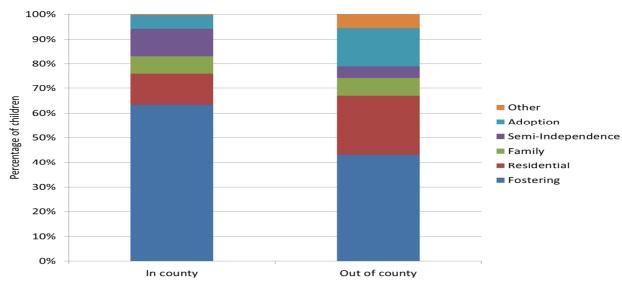


Figure 31: Placement type of children placed in county and out of county, as at 31<sup>st</sup> March 2016

Source: West Sussex CLA database

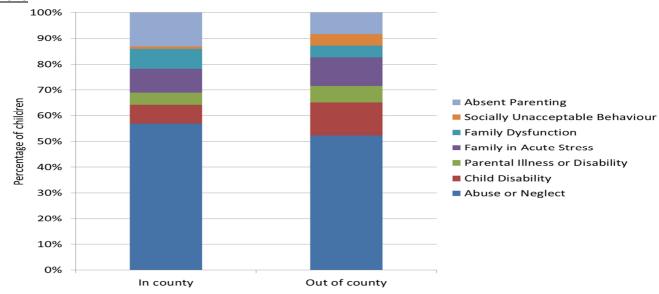


Figure 32: West Sussex looked after children placed in county and out of county, as at 31<sup>st</sup> March 2016

Source: West Sussex CLA database

Looked after children are also placed within the West Sussex county boundary by other local authorities; these children remain the responsibility of the placing authority. Table 6 shows the number of children placed within West Sussex, by those that are placed by West Sussex County Council (internally placed) and those placed by another local authority (external).

Table6: Number of children looked after at 31<sup>st</sup> March within West Sussex boundary, children placed internally and external children, 2015 to 2016

	All children placed within West Sussex boundary	Children placed internally within West Sussex boundary	External children placed within West Sussex boundary	Net gain of children by West Sussex
2015	955	540	415	315
2016	890	490	400	255

Source: DfE National Statistics, Children looked after in England including adoption

# **Placement stability**

At 31<sup>st</sup> March 2016 63% of children currently looked after had been looked after for 1 year or longer. Of these, 53% were looked after under a care order, 32% were looked after under section 20, and 14% were placed for adoption. 145 children had been looked after for more than 5 years; this equates to 23% of those children looked after on this date. The majority of these (87%) were looked after under a care order, 10% were looked after under section 20, and the remainder were looked after under an adoption order. The length of time in care by legal status is shown in figure 33.

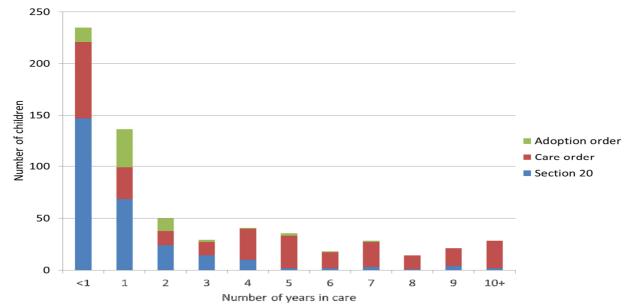


Figure 33: Length of time in care by legal status, as of 31<sup>st</sup> March 2016, West Sussex

Source: West Sussex CLA database

Nationally, where a looked after child who has been looked after continuously for at least two and a half years and has been living in the same placement for at least two years or has been placed for adoption is an indicator of long-term stability. In 2014/15 185 children placed by West Sussex had been looked after continuously for at least two and a half years, of these 135 (73%) were considered to be in a long term stable placement. This was higher than for statistical neighbours and England (table 7) and was the highest value since 2009/10 (though as noted figures for 2014/15 are not directly comparable to previous years).

Table 7: Percentage of children looked after for more than 2.5yrs who have been in the same
placement for at least 2yrs or placed for adoption, as at 31 <sup>st</sup> March

	Year					
	2009/10	2010/11	2011/12	2012/13	2013/14	2014/15*
West Sussex	66.0	67.0	66.0	70.0	69.0	73.0
Statistical Neighbours	68.7	66.5	67.6	67.5	66.7	70.0
England	67.0	68.0	68.0	67.0	67.0	68.0

*Source: DfE Local Authority Interactive Tool (LAIT)* 

The number of placements a child has in a year is another measure of stability. The proportion of looked after children who had three or more placements in a year is shown in table 8. For West

Sussex, this has been consistently around 11%; in 2014/15 this was similar to statistical neighbours and slightly higher than England.

Table 8: Percentage of children at 31 March with three or more placements duri	ing the year, as at
<u>31<sup>st</sup> March</u>	

	Year					
2009/10 2010/11 2011/12 2012/13 2013/14 201						2014/15*
West Sussex	12.0	13.0	12.0	11.0	11.0	11.0
Statistical Neighbours	11.2	11.0	10.9	11.7	12.7	11.0
England	11.0	11.0	11.0	11.0	11.0	10.0

\* Note - previously looked after children who go missing from their placement for a period of 24 hours or more had their missing period included as a placement. From 2015 missing periods are no longer counted as a placement. Due to this methodology change, figures for earlier years are not directly comparable Source: DfE Local Authority Interactive Tool (LAIT)

The reasons for placements ending over the year 2015/16 are shown below. Figure 34 shows reasons for placement end by age of child; reasons for placement end by placement type are shown in figure 35.

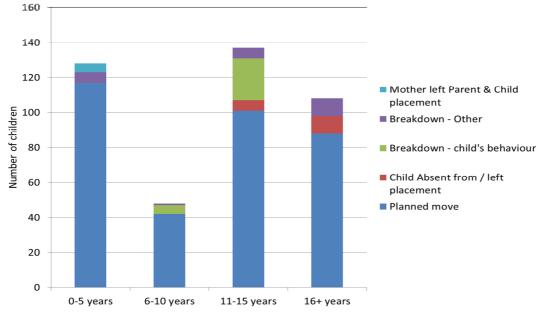


Figure 34: Reasons for placement end by age of child, 2015/16, West Sussex

The main reason for placement end for all ages of child is planned move. Breakdown due to child's behaviour occurs in some placements for the age group 6-10 years and 11-15 years, and the child being absent from placement occurs in a small proportion of those in the 11-15 years and the 16+ years age groups.

Source: West Sussex CLA database

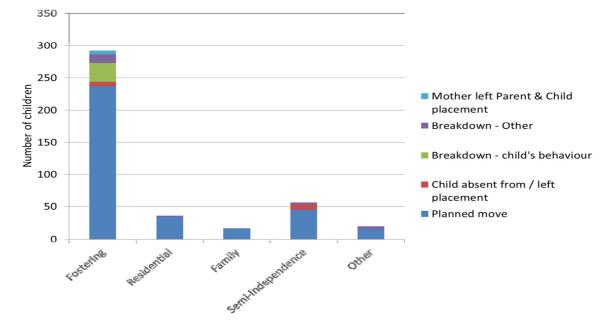


Figure 35: Reasons for placement end by placement type, 2015/16, West Sussex

Source: West Sussex CLA database

Again, planned move is the majority reason for placement end for all types of placement, with the exception of placed for adoption where the sole reason was child's behaviour; fewer than 5 of this type of placement broke down in the year 2015/16 and so are included in the "other" category. Of foster placements that ended in 2015/16, 10% of these were due to child's behaviour.

## Permanence

Permanence is the long-term plan for the child's upbringing and provides an underpinning framework for all social work with children and families from family support through to adoption. The objective of planning for permanence is therefore to ensure that children have a secure, stable and loving family to support them through childhood and beyond and to give them a sense of security, continuity, commitment, identity and belonging.<sup>2</sup>

Permanence options can include returning home to birth family, family and friends care, other nonfamily and friends care, adoption, and long-term foster care. A legal definition for long-term foster care, along with regulations and statutory guidance, came into force in 2015 and strengthened it as a permanence option.

#### **Returning home**

The main reason for children leaving care is to return home to live with parents or relatives. In West Sussex over recent years this has accounted for 40-50% of children who leave care. This figure has been consistently higher in West Sussex than for England, South East and statistical neighbours;

<sup>&</sup>lt;sup>2</sup> The Children Act 1989 guidance and regulations Volume 2: care planning, placement and case review June 2015

since 2012/13 the percentage of children who left care to return home has consistently been 30-40% for these areas (figure 36)

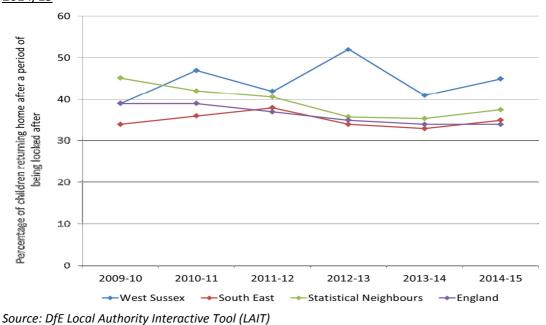


Figure 36: Percentage of children returning home after a period of being looked after, 2009/10 to 2014/15

Figure 37 shows the age breakdown of children who returned home during the year 2015-16. At 58 the largest number of children who returned home from care was those aged 16+, but this accounted for only 30% of those who left care in this age group. 74% of 11-15 year olds who left care returned home.

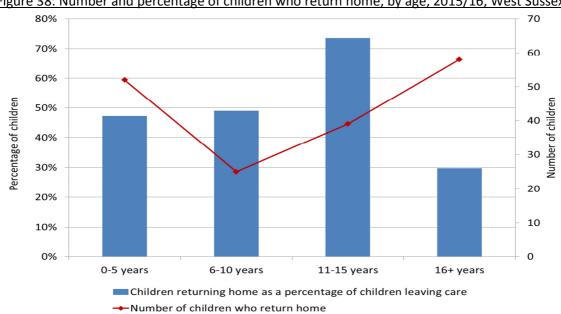


Figure 38: Number and percentage of children who return home, by age, 2015/16, West Sussex

Source: West Sussex CLA database

National data suggest that approximately 30% of children who are returned home from care reenter the care system within 5 years<sup>3</sup>. Children were more likely to return to care if they had been looked after under section 20 and if they had been looked after for less than 6 months.

The NSPCC briefing <sup>4</sup> summarises risk factors for children returning to care, and identifies a number of ways to improve practice.

**Risk factors** 

- Delay or lack of assessment before deciding to return a child home
- Lack of understanding about a parent's capacity to change
- Acting on children's expressed wishes without considering the potential risks involved
- Lack of use or understanding of legal powers
- Professional optimism
- Lack of information sharing
- Lack of observation/monitoring
- Lack of planning support during and after the process of returning a child home

Learning for improved practice

- Thorough assessments
- Clear conditions for return of child
- Preparation for and staged return of the child
- Sharing information and working with professionals in other agencies
- Good monitoring of the child before, during, and after the return

#### Multiple periods of care

Of the children who were looked after on 31<sup>st</sup> March 2016, 47 had had more than one period of care in the preceding 5 years (7.4% of the total looked after population). Over 90% of these had one or two periods in care, with a small number experiencing up to six. Similar numbers (10 to 15 children) were observed for each of the age groups 0-5, 6-10, 11-15 and 16+. Generally the reason for entering subsequent periods of care was similar to that for the initial period; the majority (25) were for abuse or neglect. Other reasons included parental illness (8 children), child behaviour (8 children); small numbers of children re-entered care due to disability, socially unacceptable behaviour, and family in acute stress.

> How are those children who return home monitored? Is there an organisational framework for return home work?

<sup>&</sup>lt;sup>3</sup> Department for Education Data Pack Improving permanence for looked after children 2013

<sup>&</sup>lt;sup>4</sup> NSPCC Returning children home from care: learning from case reviews <u>https://www.nspcc.org.uk/preventing-abuse/child-protection-system/case-reviews/learning/returning-children-home-from-care/</u>

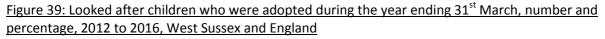
## Adoption

The effect of the adoption order is that the birth parents no longer have any parental rights and responsibilities for their child; those rights and responsibilities are given to the adoptive parents. Only a court can make an adoption order, once the court has made an adoption order the child becomes a full member of the adoptive family. Before making an adoption order the court has to be satisfied that

- the child was under the age of 18 when the adoption application was made
- the child is not or has never been married or in a civil partnership
- both birth parents have given their consent to the adoption

It may not be necessary to gain consent from the birth parent or guardian if the birth parent or guardian cannot be found or is incapable of giving consent, or if the child's welfare would be at risk if the adoption order was delayed.

The percentage of children who leave care due to adoption for England and West Sussex is shown in figure 39, along with the number of children who are adopted in West Sussex.





Source: DfE National Statistics, Children looked after in England including adoption

The number of children who ceased to be looked after by West Sussex due to adoption has fluctuated between 50 and 35 over the years 2012 to 2016; the percentage of children who leave care in West Sussex due to adoption has been lower than that of England since 2013; in 2016 the West Sussex percentage was 9% compared with 15% nationally.

The average time between the local authority receiving court authority to place a child and deciding on a match is lower in West Sussex than England, the South East, and statistical neighbours (figure 40). In West Sussex the average length of time for the period 2012 to 2015 was 167 days; this compares with 207 days for statistical neighbours, 219 days in the South East, and 223 in England.

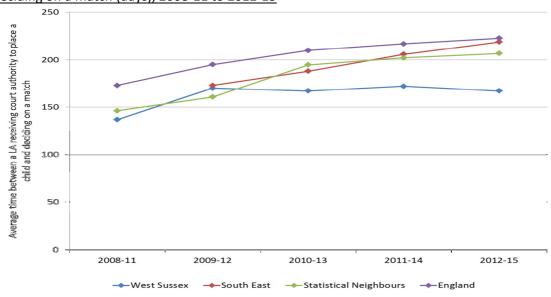


Figure 40: Average time between local authority receiving court authority to place a child and deciding on a match (days), 2008-11 to 2012-15

Source: DfE Local Authority Interactive Tool (LAIT)

The average time between a child entering care and moving in with its adoptive family is also lower in West Sussex; the time taken has steadily decreased and was 509 days for the period 2012-2015, compared with 578 days for statistical neighbours, 591 days in the South East, and 593 days in England (figure 41).

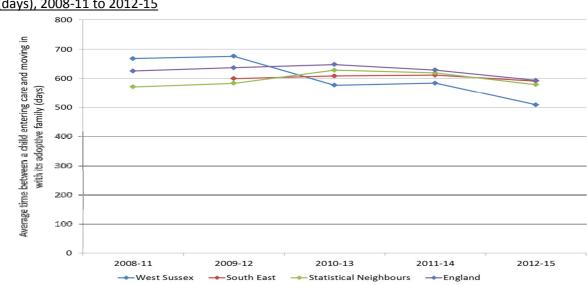


Figure 41: Average time between a child entering care and moving in with their adoptive family (days), 2008-11 to 2012-15

Source: DfE Local Authority Interactive Tool (LAIT)

# Special guardianship

A special guardianship order is an order appointing one or more individuals to be a child's 'special guardian'. It is a private law order made under the Children Act 1989 and is intended for those children who cannot live with their birth parents and who would benefit from a legally secure placement.

It is a more secure order than a residence order because a parent cannot apply to discharge it unless they have the permission of the court to do so, however it is less secure than an adoption order because it does not end the legal relationship between the child and his/her birth parents. The Adoption and Children Act 2002 introduced special guardianship and special guardianship orders<sup>5</sup>.

Updated statutory guidance has recently been issued by the Department for Education <sup>6</sup>. This

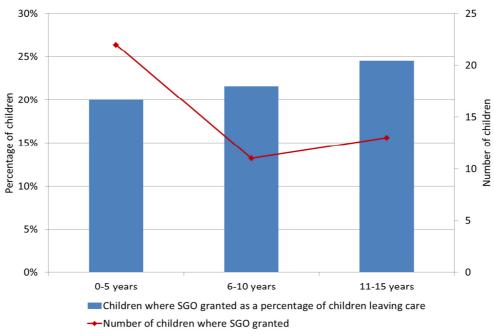
- Gives the carer clear responsibility for all aspects of caring for the child and for taking decisions to do with their upbringing; the special guardian will have parental responsibility for the child. The child is no longer looked after by the local authority.
- Provides a firm foundation on which to build a lifelong permanent relationship between the child and the carer.
- Is legally secure.
- Preserves the basic link between the child and their birth family; they remain legally the child's parents though their ability to exercise their parental responsibility is limited.
- Is accompanied by access to a full range of support services including, where appropriate, financial support.

The number of children granted a special guardianship order by age for West Sussex in the year 2015/16 is shown in figure 42.

<sup>&</sup>lt;sup>5</sup> http://www.familylives.org.uk/advice/your-family/fostering-adoption-kinshipcare/special-guardianship-orders/

<sup>&</sup>lt;sup>6</sup> Special guardianship guidance Statutory guidance for local authorities on the Special Guardianship Regulations 2005 (as amended by the Special Guardianship (Amendment) Regulations 2016), January 2017

# Figure 42: Number and percentage of children granted a special guardianship order (SGO), by age, West Sussex, 2015/16



Source: West Sussex CLA database

While more children aged 0-5 years leave care with an SGO than the 6-10 and 11-15 years age groups, the percentage of children who leave care with an SGO is similar for these age groups.

# Long term fostering

Although many children live with their foster carers for many years, long-term fostering had no legal status until 2015. The Care Planning and Fostering amendments, which came into force on 1<sup>st</sup> April 2015<sup>7</sup>, created a statutory concept of "long term fostering" and set out the conditions which must be complied with before a child can be placed in a long term fostering placement. These conditions are:

- Foster care is the child's plan for permanence, as recorded in their care plan.
- The foster carer has agreed to be the child's foster carer until they cease to be looked after.
- The child's responsible authority has confirmed the arrangement to the foster carer, the child and their birth parents.

Is there any local data where long term fostering is the permanence option, and how is this monitored?

# Placements from out of area

Local authorities have a statutory duty to notify other local authorities if they place a child in care within their area; this duty also extends to children's homes when a child is placed with them by

<sup>&</sup>lt;sup>7</sup> Care Planning and Fostering (Miscellaneous Amendments) (England) Regulations 2015

another local authority<sup>8</sup>. The notification should take place before the placement is made or, in the event of an emergency placement, within 5 working days. In West Sussex this notification is usually via a secure generic e-mail address; a centralised list of all such e-mail addresses is held by the Association of Directors of Children's Services<sup>9</sup>. Fostering agencies occasionally also use this facility to inform West Sussex of a placement.

West Sussex has a proforma to capture the information on a looked after child. If the initial contact does not include this then the e-mail is responded to with the proforma attached and the information requested. Once the information has been received the child's details are added to the out of area spreadsheet, and relevant departments within West Sussex County Council are notified. A record is created for the child on Frameworki, the notification is attached to this.

Is there any information on how many looked after children placed by other local authorities are known due to police/health/education involvement?

Placing local authorities do not always inform West Sussex that a child has been placed within the county, the fact of their placement may come to light as a result of an event e.g. the child goes missing and the police are informed, or there is a request for a school place. Similarly, West Sussex is not always informed when a placement ends and the child is removed from the county. This issue has been highlighted in a national Ofsted report<sup>10</sup>, which also discusses the impact inadequate information sharing has on the availability of health and educational services, assessment of potential risk and, at a strategic level, inadequate needs assessment of the receiving local authority if they are not fully aware of the numbers and needs of children living in their area. West Sussex is proactive in trying to maintain up-to-date records; every two weeks it sends out another proforma to providers and placing local authorities, asking for updates on the number of out of area children under their care. However, responses are not always received and information on the proforma may be incomplete.

As of 31<sup>st</sup> January 2017 there were 378 children living in West Sussex known to have been placed by other local authorities. Over 40% of these were aged 11 to 15 years, and a further 26% were aged 16 to 18 (figure 43).

Figure 44 shows the number of out of area children by originating local authority. The majority of them, over 62%, were placed by local authorities which border West Sussex; the majority of these are place by Brighton & Hove. Placements from London boroughs accounted for a further 17% of children placed in West Sussex from out of area.

<sup>&</sup>lt;sup>8</sup> The Children's Homes and Looked after Children(Miscellaneous Amendments) (England) Regulations 2013 accessed at <u>http://www.legislation.gov.uk/uksi/2013/3239/made</u>

<sup>&</sup>lt;sup>9</sup> http://adcs.org.uk/contacts/out-of-area-looked-after-children-notifications-england#view23

<sup>&</sup>lt;sup>10</sup> From a distance: Looked after children living away from their home area. OFSTED 2014

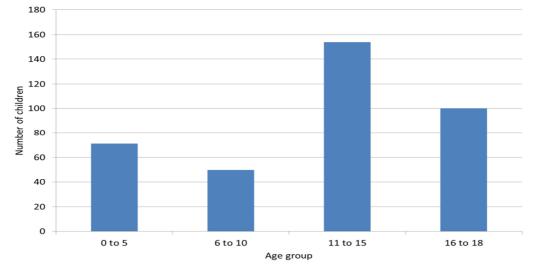
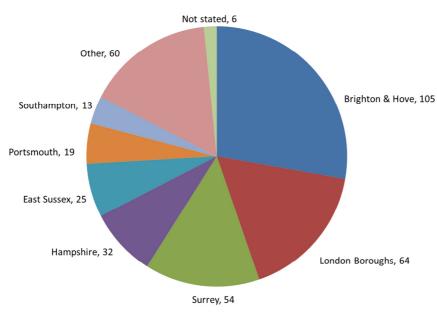


Figure 43: Age profile of children placed in West Sussex from out of area, as of 31<sup>st</sup> January 2017

Source: West Sussex CLA database

Highlighted in the national 2014 Ofsted report, as an example of best practice, is the joint framework agreement between West Sussex and Brighton & Hove. This establishes placements with independent sector fostering and residential providers, and the placement decision is based on the ability of the provider to meet the needs and identified outcomes of the child.

# Figure 44: Children placed in West Sussex from out of area, by originating local authority, as of 31<sup>st</sup> January 2017



Source: West Sussex CLA database

As show in figure 45, the legal status of a large proportion (38%) of children placed from out of area is not known. Of those that are known, the majority are looked after under a care order, with those looked after under section 20 constituting the second largest group.

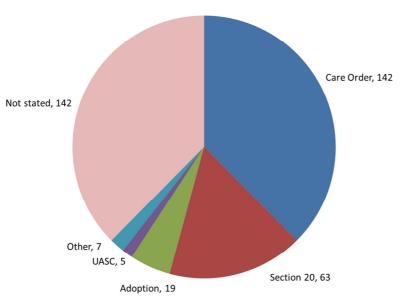


Figure 45: Children placed in West Sussex from out of area, by legal status, as of 31<sup>st</sup> January 2017

The report following the Ofsted inspection of services for children in need of help and protection, children looked after and care leavers (published January 2016) highlighted that West Sussex undertakes some proactive work to meet the needs of children who are looked after by other local authorities but living within West Sussex, including those who go missing or are in need of health support.

#### Recommendation

The looked after children health teams receive notifications when children are placed in the area by other local authorities. Liaison with the health teams could provide a more accurate understanding of children placed from outside of area.

Source: West Sussex CLA database

# Edge of care

In West Sussex the majority reason for children to be taken into care, for those aged under 16 years, is abuse or neglect. Disability (child or parent) and family in acute stress are also reasons. It is recognised that early identification of, and intervention with, children at risk could reduce the disadvantages and increase resilience of the families involved, resulting in fewer children being taken into care.

A systematic review of research into the risk factors associated with children being taken into care has identified a number of factors<sup>11</sup>; protective factors have also been identified<sup>12</sup>. These are summarised below.

Risk factors of the mother,

- maternal history of low socio-economic status
- benefit receipt,
- single parenthood,
- younger and older age at first pregnancy,
- disability,
- smoking in pregnancy,
- mental illness,
- alcohol misuse
- learning difficulties
- social isolation and lack of social support

Risk factors of the child

- low birthweight and prematurity
- disability
- injuries
- attendance at Accident and Emergency departments

These risk factors are not specific for children entering care, and each in isolation may not demonstrate an impact on children. However, these factors have been identified as elements which, in combination, have been shown to increase the likelihood of harm and could be incorporated into a cumulative risk model.

Protective factors

- strong social and family support systems
- absence of financial worries
- evidence of parents' capacity to change
- individual children's coping skills

<sup>&</sup>lt;sup>11</sup> Simkiss DE, Stallard N, Thorogood M.(2012). A systematic literature review of the risk factors associated with children entering public care. Child: care, health and development, 39, 5, 628–642

<sup>&</sup>lt;sup>12</sup> Davies, C. and Ward, H. (2012) Safeguarding Children Across Services: Messages from Research. London: Jessica Kingsley Publishers

The Integrated Prevention and Earliest Help (IPEH) Service was effective in West Sussex from 1<sup>st</sup> April 2017. This operating model brings together separate services currently provided through the Early Childhood Service, including Children and Family Centres, Think Family and Early Help and Youth Services, Young Carers, Worth Services (Domestic Violence) and the Healthy Child Programme (currently health visiting and school nursing services). It aims to move from a reactive to a preventative service, addressing the causes of family breakdown before serious harm occurs. The IPEH workforce will be responsible for early identification of need through regular discussions with universal providers (schools, early years settings, GPs) and will provide support to families throughout tiers 1 to 4<sup>13</sup>. Children on the edge (or cusp) of care are those at risk of escalating from tier 3 to tier 4.

The introduction of the Integrated Prevention and Earliest Help programme affords the opportunity to analyse the caseload and identify local risk factors

The single point of contact for all safeguarding concerns regarding children and young people in West Sussex is the Multi-Agency Safeguarding Hub (MASH). This brings together professionals from services that have contact with children, young people and families, such as children's social care, police, and health. As it is the single point of access it will identify low–level repeat referrals, which individually may not be a cause for concern but would be when looked at in total, and will help ensure children are identified as being at risk.

Recommendation

Monitor and analyse IPEH data, to identify trends and patterns in the characteristics and journeys of young people in touch with Children's Social Care

<sup>&</sup>lt;sup>13</sup> Tier 1: Universal services open to everyone, such as a GP.

Tier 2: 'Universal plus' – families and children with additional needs.

Tier 3: Families and children with multiple, complex problems

Tier 4: Acute and serious problems requiring social care involvement, and possible statutory child protection measures.

# **Engagement and voice**

The State of the Nation Report "Children in Care and Care Leavers Survey 2015"<sup>14</sup> is the 2015 version of the 'Care Monitor' survey of children in care and care leavers which was originally run annually by the Children's Rights Director. With the reformation of the Children's Commissioner's remit under the Children and Families Act 2014, the commissioner took over the survey. Over the next 5 years the Children's Commissioner will publish regular State of Nation reports into aspects of children's lives. This first report, published in 2015, focuses on the experiences of children in care and care leavers

Themes explored in the survey included coming into care, living in the right place, moving, feeling safe, using advocacy, the future, and leaving care.

Nationally, over half the children who said what they felt on entering care said they were scared (54%) and 42% felt sad. Just over a half (51%) said that they did not understand why they were coming into care at the time, and some still did not. The vast majority of children thought someone should have provided them with an explanation. Those children who became looked after as a result of a voluntary agreement were less likely to report they were too young to understand and more likely to report that they understood why they came into care.

The majority (81%) of children who responded to the question "Do you think the place where you are living now is right for you?" thought they were living in the right place for them. Feeling that they were part of a family was an important reason for thinking they were in the right place. This held true for children living in children's homes as well as those in foster care. 10% of children did not think where they lived was right for them, the main reasons for this were; did not feel they were listened to; were not helped; lack freedom; lack trust; do not get on with carers; feel they do not belong; are not living with their birth family; lack of contact with birth family; are located too far away from family, friends, school or college; or live in an isolating environment.

Of the children who moved, over half reported that they were happy to move (58%) and the majority (84%) reported they were able to take things of importance with them when they moved. However children wanted a chance to visit; to know more about the placement beforehand; to have more choice; to be told of the move beforehand and for their views to be listened to. Many did not feel they had enough time to say goodbye, and important relationships were disrupted.

The majority of children and young people answering 'How safe do you feel in the place where you live' stated that they felt very safe (77%) or fairly safe (19%). Only a small minority felt unsafe (3%) or very unsafe (1%). Most children (71%) said 'yes' to the question 'Do those who look after you know when you are worried, or feel unsafe?' However, 17% stated that weren't sure and 12% said those who looked after them did not know when they were worried or felt unsafe. Of the children answering 'Yes' to the question, the majority were children living in foster care. Fewer children living in residential homes or care leavers answered, perhaps suggesting that children living in foster care can feel more confident that they are 'known' by their carers.

<sup>&</sup>lt;sup>14</sup>Children in Care and Care Leavers Survey 2015 accessed at <u>https://www.childrenscommissioner.gov.uk/sites/default/files/publications/Care%20monitor%20v12.pdf</u>

Over half (54%) of care leavers stated that they left care at the right time, just under a third (30%) said they had not left care at the right time for them and a further 16% reported being unsure. The reasons were mainly feeling settled in their placement and being forced to leave it before they were ready. Those getting ready to leave care suggested the importance of being listened to, taken seriously and having an influence over their futures, along with the role of professionals, foster carers and support workers in their lives. Young people expressed appreciation of the opportunity to remain in foster care or semi-independent accommodation as they reached adulthood.

When children were asked the question "What has worked best" there was a wide range of answers, but common themes were: being listened to; having choices; feeling a member of a foster family; being treated as an ordinary child or young person; having contact with birth families; having positive relationships with foster carers and/or social workers; making new friends or having good ones; receiving needed support; things going well at school; having their own space; enjoying leisure activities; and a general sense of life going well. When asked what would make life better, common comments made by all groups of children were about the need to be listened to, understood and supported in a stable placement with carers who care.

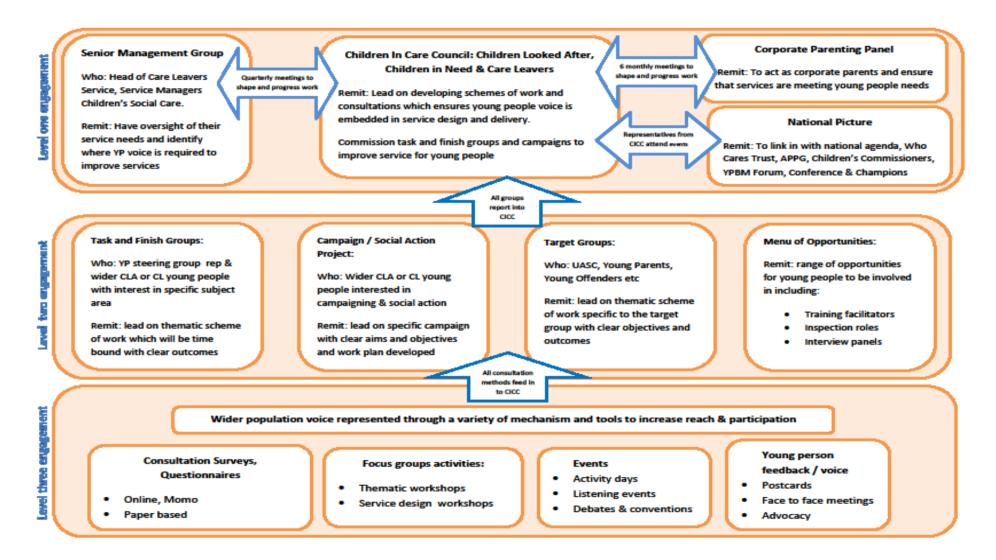
The findings expressed in the survey led the Children's Commissioner to argue that:

- 1. It is essential that children's views are sought and influence all decisions that are made about them and that all decisions are fully explained to them.
- 2. Support for all care leavers is extended up to 25 years of age.
- 3. Every child in care should have at least one continuing and consistent relationship with someone who is there for them through their time in care and into adulthood.
- 4. Services should enable children to keep their social worker for longer through their time in care.
- 5. Every child in care should have access to high quality therapeutic care that will enable them to recover from past harm and build resilience and emotional wellbeing.

West Sussex has not conducted similar exercises with a focus on general wellbeing. However, during their inspection in 2015 Ofsted inspectors spoke to a number of children; their views were similar to those reflected in the national survey. Several children explained how they needed more help to understand what had happened to them and why they were in care, and some had limited awareness of their entitlements or how to complain. Children felt safe and nearly all felt settled where they were living, one group stated that being in care had made a positive difference to their lives, enabling them to be more confident and settled and to progress in school and college.

There is a newly recruited group of CLA young people to form the Children in Care Council (CICC); they are currently being trained in their role and will be developing their work plan over the next few months for the year. This will provide a calendar of events / consultation for gathering CLA voice and inform services. A Care Leavers Forum (CLF) is being developed; to inform this care leavers are being surveyed to gather their views on how they want to engage and their key issues. A young parents CLA group is also being developed.

#### Figure 46: West Sussex draft engagement model



West Sussex is in the process of implementing an updated model of engagement with Children Looked After and Care Leavers, with three levels of engagement. This enables the Voice & Engagement team to be flexible and adaptable depending on need, and builds in flexibility for individual young people who may not be able to sustain a long term involvement but can potentially dip in and out depending on personal circumstances. The draft proposed model for engagement is shown in figure 46, and summarised below

#### Level One Engagement:

Senior management will bring their service needs and work together with the CICC to facilitate shared decision making. Young people are supported to lead and initiate their own action plans based on identified priorities.

#### Level Two Engagement:

This level will appeal to young people who have a specific interest or have limited time. Projects will be either task /or group specific or time bound. It could be a specific task and finish group on a subject that requires further exploration (e.g. accommodation needs for care Leavers) or a campaign group which is led and initiated by young people. This approach enables young people to be flexible in their engagement and means that if they don't want to join a regular group, but would like to contribute to a specific outcome they can. These groups would be flexible both in where and when they met and use a range of engagement tools to promote remote working.

#### Level Three Engagement:

Supports a wider range of young peoples' voice to be heard by using a variety of tools and mechanisms designed to engage and capture their views. This approach enables young people to participate in a variety of ways. It is the mechanism through which the CICC and young people working at level 2 can engage with their wider CLA community.

West Sussex is also exploring mechanisms by which the CICC and the CLF can work with the Corporate Parenting Panel, to improve communication between these groups. A working group involving service managers is being set up to provide support to the CICC and identify priorities. Termly joint meetings are proposed, these will provide the opportunity for CLA to discuss key priorities, and for senior management to present service design and delivery and evidence how the voice and engagement of young people is incorporated in service development.

Some recent examples of engagement with looked after children and care leavers are listed below.

- ePEP system- June 2016
  - Presentation to a group of looked after children and care leavers by suppliers of electronic personal education plan systems (ePEP). The purpose of the consultation was for young people to be consulted on their views and opinions on a potential new ePEP system for all CLA in West Sussex.
- Practice guidance for social workers- cultural diversity- May 2015

- Consultation through a pre-arranged CICC meeting. The focus of the practice guidance centres on cultural diversity, ensuring young people and families from different ethnic cultures are respected, valued and understood. Young people were asked to give their views on each guidance points, if they agreed or disagreed and their reasons/understanding behind this. Young people have input into helping shape practice guidance which help social workers treat young people and families with an increased understanding and knowledge of cultural diversity.
- "Restructure of social care"- potential candidates for social work practitioners- March 2015
  - Pre-arranged group discussion with the CICC. The aim of this consultation was to ascertain the views and opinions of the children in care council, young people in care and care leavers about what they felt were important questions to ask potential candidates for social care practitioners' and social care managers' roles in West Sussex County Council.
- CLA nurse interviews impact (care leaver) Nov 2016
  - A care leaver was a member of an interview panel to appoint a nurse specialist for Looked After Children
- Young asylum seeker consultation on top tips for professionals- 2016
  - Consultation took place through pre-arranged discussion with one young asylum seeker. The purpose of the consultation was to inform professional services of the issues that young asylum seekers face, to increase awareness of these issues, and to improve ways professionals work with young asylum seekers.

#### Recommendation

There is a lack of evidence of large-scale engagement with looked after children, care leavers, and unaccompanied asylum seeking children; it is therefore not possible to determine whether the experience of West Sussex CLA reflects the national picture. West Sussex County Council should commission a survey of looked after children and care leavers in order to collect evidence of their experiences.

# **Child sexual exploitation**

The working definition of child sexual exploitation has recently been updated<sup>15</sup>, and is given below:

"Child sexual exploitation is a form of child sexual abuse. It occurs where an individual or group takes advantage of an imbalance of power to coerce, manipulate or deceive a child or young person under the age of 18 into sexual activity (a) in exchange for something the victim needs or wants, and/or (b) for the financial advantage or increased status of the perpetrator or facilitator. The victim may have been sexually exploited even if the sexual activity appears consensual. Child sexual exploitation does not always involve physical contact; it can also occur through the use of technology."

West Sussex County Council has produced an addendum<sup>16</sup> to the Children Looked After and Care Leavers Strategy (2014-2017), to provide strategic overview of how Children's Services and partners can

- Do everything possible to prevent child sexual exploitation where children are looked after and care leavers
- Protect and support victims that who have been sexually exploited

The addendum addresses the commitment for the following groups of young people:-

- All Children Looked After and Care leavers for whom West Sussex has a corporate responsibility within the county or placed outside the county. For the majority of these young people this will be until they are 21 years of age For young people who attend further education or training this support will extend until they are 25 years of age
- All Children Looked After who are placed by other local authorities within West Sussex County

West Sussex Children's Service and its partners have adopted a sexual exploitation risk assessment framework (SERAF) - which was developed by Barnardos. This evidence based tool supports the identification of risk factors and ensures that there are plans to intervene and safeguard children at risk or abused through CSE.

There is a strong link between children in care who go missing and those being groomed or sexually exploited. A study by the University of Bedfordshire into child sexual exploitation showed that over half of all young people using child sexual exploitation services on one day in 2011 were known to have gone missing (a quarter over 10 times), and 22% were in care<sup>17</sup>.

The Parliamentary inquiry into children who go missing from care<sup>18</sup> presented evidence that a significant minority of young people coming into the care system are targeted for sexual exploitation; children's homes are particularly a target specifically because of the high vulnerability

<sup>&</sup>lt;sup>15</sup> Department for Education Definition and a guide for practitioners, local leaders and decision makers working to protect children from child sexual exploitation February 2017

<sup>&</sup>lt;sup>16</sup> West Sussex Children's Service Child Sexual Exploitation Addendum for Children Looked After and Care Leavers (July, 2015 to 2017)

<sup>&</sup>lt;sup>17</sup> Jago, S et al (2011) What's going on to safeguard children and young people from sexual exploitation? How local partnerships respond to child sexual exploitation, University of Bedfordshire

<sup>&</sup>lt;sup>18</sup> The APPG for Runaway and Missing Children and Adults and the APPG for Looked After Children and Care Leavers REPORT FROM THE JOINT INQUIRY INTO CHILDREN WHO GO MISSING FROM CARE June 2012

of the children in them and how easily perpetrators can make contact with the children. Other submitted evidence suggests that being placed a long way from family and friends is often a factor in causing young people to run away and cross-boundary placements often have a detrimental impact on the young person. This has implications for children looked after by West Sussex who are placed out of county, and also for the high numbers of children placed in West Sussex by other local authorities.

Children missing from care are particularly vulnerable to CSE. Data are collected on those children who went missing i.e. a looked after child who is not at their placement or a place they are expected to be (e.g. school) and their whereabouts is not known, and also on those away from placement without authorisation i.e. a looked after child whose whereabouts is known but who is not at their placement or place they are expected to be and the carer has concerns or the incident has been notified to the local authority or the police. Table 9 shows the number and percentage of missing incidents and children away from placement for the year 2015/16. *Please note: these are experimental statistic; this is the second year these statistics have been collected in this way, and local authorities have reported some significant improvements in recording.* 

	Missing	Away from placement without authorisation
No. children with missing incident/away from placement	85	35
Children looked after during year	1005	1005
% who had missing incident/away from placement	8	4
Total missing incidents/away from placement	490	70
Average number of missing incidence/away from placement	5.8	1.8
Children who went missing/away from placement more than once	60	15

<u>Table 9: Children looked after who were missing or away from placement without authorisation,</u> West Sussex, 2015/216

Source: DfE National Statistics, Children looked after in England including adoption

The report following the OFSTED Inspection of services for children in need of help and protection, children looked after and care leavers (published January 2016) highlighted that return interviews for children who have been missing are not always carried out, and are not always of good quality, with one of its recommendations being "Ensure that return interviews are consistently undertaken for children who go missing, that they are timely and of good quality, and that the information obtained from these interviews is used to inform planning and risk management, for individuals and strategically."

Have any processes yet been put in place to address this concern? Does West Sussex County Council know the prevalence of CSE incidents? How many looked after children are identified as being at risk of CSE? What services / support are available to young people at risk of CSE?

# Health

The statutory guidance for Promoting the Health of Looked After Children, (DfE / DoH 2015) details the extent and nature of health problems among children in the care system. Children and young people who are looked after have the same core health needs as other young people, but their backgrounds and experiences are likely to make them particularly vulnerable to poorer health outcomes.

It is the responsibility of the local authority to ensure health assessments are carried out and that every child has a health plan. Under Section 10 of the Children Act 2004, CCGs and NHS England have a duty to comply with requests from a local authority to help them provide support and services to looked after children.

The statutory guidance states that -

- Local Authorities, CCGs, NHS England and Public Health England must cooperate to commission health services for all children in their area.
- CCGs and NHS England have a duty to cooperate with requests from local authorities to undertake health assessments and help them ensure support and services to looked after children are provided without undue delay.

In April 2013 NICE Guidance QS31 published a set of quality standards that define best practice for the health and wellbeing of looked after children and young people from birth to 18 years, and care leavers (including young people planning to leave care or under leaving care provisions). This guidance applies to all settings and services working with and caring for looked after children and young people, and care leavers, including where they live. There is an expectation that looked after children and young people should have the same opportunities as other children and young people, including being healthy and safe. They should be provided with the opportunities needed to help them move successfully to adulthood.

The NICE guidance QS31 recognises that needs of children looked after vary, but are often complex, and can be met only by a range of services operating collaboratively across different settings. The following statements underpin the NICE Guidance QS31 framework:-

- **Statement 1.** Looked-after children and young people experience warm, nurturing care.
- **Statement 2**. Looked-after children and young people receive care from services and professionals that work collaboratively.
- **Statement 3**. Looked-after children and young people live in stable placements that take account of their needs and preferences.
- **Statement 4.** Looked-after children and young people have ongoing opportunities to explore and make sense of their identity and relationships.
- **Statement 5**. Looked-after children and young people receive specialist and dedicated services within agreed timescales.
- **Statement 6.** Looked-after children and young people who move across local authority or health boundaries continue to receive the services they need.
- **Statement 7.** Looked-after children and young people are supported to fulfil their potential.
- **Statement 8.** Care leavers move to independence at their own pace.

#### **Health Assessments**

The statutory guidance states that the initial health assessment (IHA) should result in a health plan, which is available in time for the statutory review by the independent reviewing officer (IRO) of the child's care plan. That case review must happen within 20 working days from when the child started to be looked after. To ensure the child's health plan is of high quality, the health assessment should use relevant information drawn together beforehand and fast-tracked by all involved to the health professional undertaking the assessment. In West Sussex the timeliness of initial health assessment has been undertaken by a paediatrician. There are delays with obtaining the correct paperwork and consent from the local authority which impact on the ability of the LAC health team to conduct the initial health assessment. There are additional delays in the return of the completed initial health assessment and health care plan following the actual initial health assessment being conducted. The timeliness of initial health assessments has been highlighted in both Ofsted and CQC inspections and in reviews over the period 2010 to 2015.

For West Sussex CLA placed out of county there may be difficulties in securing an IHA as other areas often lack capacity to complete the IHA. For out of county CLA placed in West Sussex, there is a statutory duty on the CCGs to undertake their IHAs. However, there is currently no commissioned service to fulfil this statutory duty within West Sussex.

The statutory process for conducting an IHA for unaccompanied asylum seeking children is the same with the same timeframe as for all children looked after. However, there is a current backlog of UASC who require an IHA and current service provision is unable to meet this need; an interpreter will also need to be present for the assessment. Ideally the UASC Mental Health Worker will conduct an emotional health and wellbeing assessment at the time of the IHA.

It is the responsibility of the local authority to ensure health assessments are carried out and that every child has a health plan. Health organisations have a duty to comply with requests by the local authority and also to ensure that health plans are effective.

Data for review health assessments is collected by the Department for Education annually for all children looked after for a year or more on the 31st March. These figures do not reflect the actual workload as all children taken into care require an initial health assessment within 20 working days of entering care, and there are children entering and leaving care throughout the year who spend less than 12 months within the care system and who are not included in the national data set. Table 10 shows the health care and review health assessments of children who have been looked after for a continuous period of 12 months or more, as at 31<sup>st</sup> March 2015 and 2016.

Table 10: Health care and review health assessment of children who have been looked after for a
continuous period of 12 months or more as at 31 <sup>st</sup> March, 2015 and 2016

	looked a March who looked af	of children fter at 31 5 had been fter for at months	Number & % of children whose immunisations were up to date		Number & % of children who had their teeth checked by a dentist		Number & % of children who had their annual health assessment	
	2015	2016	2015	2016	2015	2016	2015	2016
England	48.000	48.400	42,240	42,280	41,250	40,770	43,140	43,630
England	48,090	48,490	88%	87%	86%	84%	90%	90%
West Sussex	400	400	380	380	370	375	365	335
west Sussex	400	400	95%	95%	93%	94%	91%	84%

Source: DfE National Statistics, Children looked after in England including adoption

In the year ending 31<sup>st</sup> March 2016, 84% of children in West Sussex had had a review health assessment; this is lower than the figure for 2015 (91%) and lower than the percentage of looked after children in England who had received a review health assessment (90%). This may, in part, be because West Sussex has an older profile of looked after children than England; older children are more likely to refuse review health assessments.

# **Health Outcomes**

Table 10 also shows the percentage of looked after children who are up-to-date with their immunisations, and the percentage who have had their teeth checked by a dentist.

## **Dental Health**

Oral Health is integral to overall health and essential for wellbeing. As corporate parents, it is the local authority's responsibility to ensure that CLA have regular dental checks so that if a child develops tooth decay, appropriate treatment can be undertaken. Data for dental checks are collected by the DfE annually for all CLA who have been in care for a year or more. The percentage of looked after children in West Sussex who have had their teeth checked by a dentist was 94% in 2016, higher than the percentage of looked after children nationally (84%).

## Immunisation

95% of West Sussex looked after children were reported to have up to date immunisations in 2015 and 2016; this is higher than 87%, the reported value for England looked after children in 2016. The West Sussex LAC health team does not have confidence that the recorded value for immunisation uptake is correct as it is not they who record this information, though there is confidence in the dental data.

# **Developmental Checks / Health Surveillance Checks**

Table 11 shows the development assessment of looked after children aged 5 years and under who had been looked after for a continuous period of 12 months or more. 100% of those children who had been looked after for at least 12 months on 31<sup>st</sup> March 2015 and 2016 had up to date development assessments, the equivalent value for England was 83% in 2016.

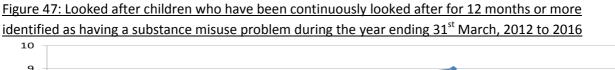
	Number of childre	n who had been	Number and % of these children				
	looked after for at	least 12 months,	whose dev	velopment			
	and aged 5 or your	iger at 31 March	assessments w	vere up to date			
	2015 2016		2015	2016			
England	ad 7,400	F 120	6,690	4,260			
England	7,480	5,120	89%	83%			
West Sussey	25	45	35				
West Sussex	45	35	100%	100%			

<u>Table 11: Development assessment of looked after children aged 5 years and under who have been</u> looked after for a continuous period of 12 months or more as at 31<sup>st</sup> March, 2015 and 2016

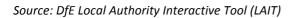
Source: DfE National Statistics, Children looked after in England including adoption

## **Substance Misuse**

The proportion of looked after children identified as having a substance misuse problem is shown in figure 47. The figure for West Sussex has fluctuated between 6% and 9% over the period 2012 to 2016, and has been higher than statistical neighbours and England at all time points. Again, there is not complete confidence in this data by the LAC health team.







The statutory timeframe for review health assessments is annually for 5 – 18 year olds (bi annual for children aged under 5 years). For those children unable to consent to their health assessment i.e. under 5s, 5-13 years, and those who have complex needs and lack capacity, there can be a significant delay in obtaining the appropriate consent and paperwork from social workers. There can also be a considerable delay in obtaining the appropriate British Association for Adoption and Fostering (BAAF) paperwork for all age groups of children who become looked after

#### Performance data and measuring health outcomes

The SDDA903 DfE national returns only include children who have been looked after for at least 12 months. Until recently local data has not been available; an audit tool based on the health assessment was introduced in August 2015 as part of the electronic health record. The dental health data is now supplied by the local authority rather than the LAC health team.

What local data is now available, to better inform the assessment of the health of looked after children in West Sussex?

Is there any local data on the health needs of children placed in West Sussex from out of county?

Data on Frameworki not accurate

# Emotional health and wellbeing

## Strengths and difficulties questionnaire

West Sussex County Council has not been consistently administering the Strengths and difficulties questionnaire (SDQ) in recent years. The looked after children health team has been using other emotional wellbeing tools, such as the Adolescent Mood Scale. As such the carer component of the SDQ, which is submitted and reported as part of the SS903 return, has been returning zero values on the national datasets for West Sussex. Recently an administration post has been funded in order to support the administration of the SDQ, of the carer, teacher, and self-report components, and there will be a submission of the carer component by West Sussex to the national dataset. However, no pathway is in place for children scoring highly on the SDQ.

#### **CAMHS LAAC and Therapeutic Access Point**

The CAMHS Looked After and Adopted Children (CAMHS LAAC) service was seconded into West Sussex Social Care in September 2016, and moved into the Therapeutic Interventions Group within the Adoption, Fostering and Intervention Service. It has expanded its remit from looked after and adopted children to include children under a special guardianship order. The team consists of 7.11 whole time equivalent (WTE) clinicians including psychologists, a psychotherapist, a family therapist, an art therapist and a mental health nurse, but there is no psychiatrist on the team. The team offers a wide range of direct work to support children and parents/carers, as well as network meetings to discuss individual referred children, with their carers, social workers and other professional who work with them. It offers one day per week therapeutic input into each of WSSC residential placements; support is offered to children placed in residential care as well as the staff team that work with them. CAMHS LAAC also offers therapeutic parenting groups for foster carers; these groups enable carers to have an increased awareness of the therapeutic needs of the children.

The Therapeutic Access Point (TAP) was developed in March 2016 to provide a central point to develop therapeutic care plans and for referrals into CAMHS LAAC as well as other services. TAP is a

multidisciplinary meeting that includes the CAMHS LAAC lead psychologist, representatives from the virtual school and LAC nursing, educational psychology, the adoption and fostering youth worker, a meeting coordinator and is chaired by the group manager of the Therapeutic Intervention Group; this allows holistic consideration of children's need in one place. Initially TAP was set up to address the needs of adopted, fostered and children on special guardianship orders, but the numbers of children being referred into TAP was high. The Adoption Support Fund (ASF) is a government fund which pays for therapy for adopted children and those placed for adoption, and for those who exited the care system through special guardianship order. TAP Light, a weekly meeting for children who could access the ASF was introduced; this enables this group of children to have their needs met while freeing TAP for CLA and children looked after under special guardianship orders that did not exit care through the order. Unaccompanied asylum seeking children have their own mental health service, and children placed in West Sussex from out of county will access mental health services though CAMHS.

TAP light has had over 300 referrals which have led to 319 referrals to the ASF and in turn the fund has provided over £1.2 million for therapy for West Sussex children in the year 2016-2017.

The Therapeutic Access Point has had 124 referrals between March 2016 and 21 Feb 2017. 15% of the children referred were 5 years old or under, 30% were 6-10, 40% 11-15 and 14% over 16. The majority of TAP referrals are for children in foster care at 71%, 8% are in residential care, 1% in a special guardianship placement and 19% in adoptive placements. It is anticipated that in future children in adoptive placements will be seen in TAP Light.

There are numerous outcomes which can occur as a result of a referral to TAP. These include:-

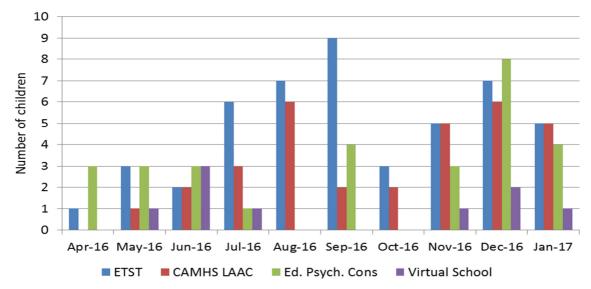
•Referral to health services to obtain support through LAC nurses

•Referral to the educational psychology service or the virtual school for support with educational issues.

•Referral to the Early Therapeutic Support Team (ETS) where children, their carers and social workers can receive support with helping understand their history and reasons for coming into care, and preparation for adoption. The team also offers limited direct work with children, as well a signposting and support service to help young people access the universal youth services.

•Referral to the CAMHS LAAC team

The outcomes of referral to West Sussex TAP for the period April 2016 to January 2017 is shown in figure 48. Due to the children's complex needs it is not unusual for a referral to more than one service to be made.





The CAMHS LAAC caseload has stayed fairly stable at around 100 children for the past several months, there have been 34 children referred from TAP; 2 of these children were 0-5 years of age, 13 were 6-10, 13 were 11-15 and 5 were 16 or above. Of these referred children 20 (59%) were female while 14 (41%) were male. Once a child is referred from TAP into CAMHS LAAC they are offered a consultation within a month to develop a care plan.

OFSTED and CQC both inspected West Sussex children's services in 2015, and access to mental health services by looked after children was identified as an issue by both bodies, including issues of timely access to CAMHS for all looked after children, and with access to CAMHS for young people who are not deemed to be in a stable placement.

# **Issues with LAC Health**

- No lead commissioner for LAC health services.
- No commissioned service for initial assessment for UASC.
- No confidence in immunisation data on Frameworki, limited confidence in substance misuse data.
- CAHMS LAAC do not share information with the LAC health team; addressing this was a recommendation within the CQC 2015 Inspection Report.
- West Sussex CCGs are not meeting their statutory requirements in a number of areas. They have a delegated responsibility under section 10 of the Children Act but do not always act to discharge this, and do not understand their role as part of the Corporate Parent Agenda as the health parent for looked after children.
- The Corporate Parenting Panel does not have regular health representation, the last time health attended was 2014, the next time will be October 2017.

#### Recommendation

Improve liaison between Children's Social Care and the looked after children's health team

# Education

## **Educational outcomes**

It is recognised that children in care have lower educational attainment than children in the general school population. The Social Exclusion Unit<sup>19</sup> identified five key reasons why children in care underachieve in education:

- Too many young people's lives are characterised by instability
- Young people in care spend too much time out of school or other place of learning
- Children do not have sufficient help with their education if they get behind
- Carers are not expected, or equipped, to provide sufficient support and encouragement at home for learning and development
- Children in care need more help with their emotional, mental or physical health and wellbeing.

There is often an assumption that being in care leads to poor outcomes, which may result in educational targets being set too low and not being sufficiently challenging. This is discussed in the joint policy paper<sup>20</sup> by the Association of Directors of Children's Services, the National Consortium for Examination Results, and the National Association of Virtual School Heads. It cites research undertaken by the Rees Centre whereby educational and care data were linked in order to ascertain key factors contributing to the low educational outcomes of children in care in secondary schools<sup>21</sup>, and children in need as well as children who were not looked after were used as comparison groups. Being in care was associated with improved educational outcomes when compared with children in need, with a strong association between the length of time in care and positive educational outcomes; childhood trauma and neglect can cause both permanent and temporary effects and attachment difficulties arising from childhood trauma can affect learning.

The educational attainment of looked after children is shown below, for West Sussex, statistical neighbours, South East and England. The outcome data is presented for children who have been looked after continuously for at least 12 months (at 31<sup>st</sup> March) and includes all children looked after by the authority regardless of the authority where they were placed. The population of looked after children is relatively small and heterogeneous, with characteristics such as special educational needs (SEN) varying between areas and between cohorts within the same area. Comparisons over time and between geographical areas therefore have no statistical validity. In their joint policy paper the Association of Directors of Children's Services (ADCS) and partners have argued that the DfE focus on outcomes for children in care, being focused on the end of Early Years Foundations Stage Profile and key stages 1 to 4, does not allow for proper assessment of the educational progress of children in care. They recommend that a more comprehensive set of metrics should be developed to enable a

<sup>20</sup>Joint Policy Paper: The Educational Achievement of Children in Care (2015), The Association of Directors of Children's Services, National Consortium for Examination Results, The National Association of Virtual School Heads

<sup>&</sup>lt;sup>19</sup> A better education for children in care, Social Exclusion Unit, 2003

<sup>&</sup>lt;sup>21</sup> The Educational Progress of Looked After Children in England: Linking Care and Educational Data, Rees Centre, 2015

better assessment of local authority and school performance, including longer-term outcomes at post-16, post-18 and post-25. The above caveats should be considered when interpreting the outcomes.

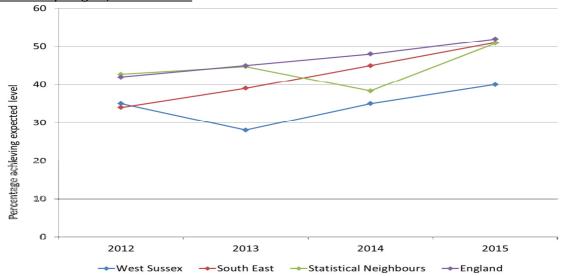


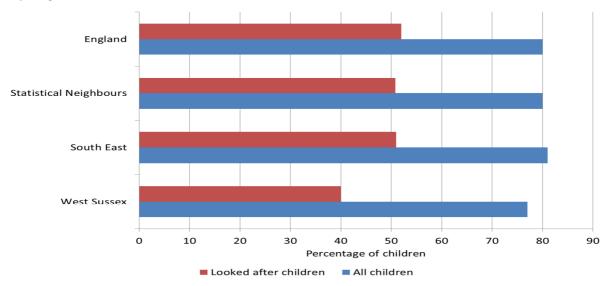
Figure 50: Percentage of looked after children reaching level 4 in reading, writing and maths at the end of Key Stage 2, 2012 to 2015

Source: DfE Local Authority Interactive Tool (LAIT)

The proportion of looked after children which reached level 4 in reading, writing and maths at the end of key stage 2 has increased for West Sussex, the South East, statistical neighbours and England over the period 2012 to 2015 (figure 50). However, the attainment by children looked after by West Sussex is lower than that of all comparison areas shown; for the South East, statistical neighbours and England approximately 51% of looked after children attained level 4, in West Sussex this figure was 40%.

The attainment gap between looked after children and all children in 2015 is shown in figure 51. The percentage of all children attaining level 4 in in reading, writing and maths at the end of key stage 2 is lower for West Sussex (77%) than for comparison areas (80-81%). At 37 percentage points the attainment gap between looked after children and all children at the end of key stage 2 is greater for West Sussex than for its statistical neighbours (29 percentage points) and England (28 percentage points).

Figure 51: Attainment gap of children reaching level 4 in reading, writing and maths at the end of Key Stage 2, 2015



Source: DfE Local Authority Interactive Tool (LAIT)

Figure 52 shows the percentage of looked after children who achieved 5 GCSEs at grades A\* to C, including maths and English, for the years 2014 and 2015. Changes to the method used to calculate key stage 4 performance measures in 2014 means that data previous to this date are not directly comparable. Data for West Sussex for 2014 is not available; in 2015 24% of looked after children in West Sussex achieved 5 A\* to C GCSEs including Maths & English. This is higher than comparison areas, where 13-14% of looked after children achieved this benchmark.

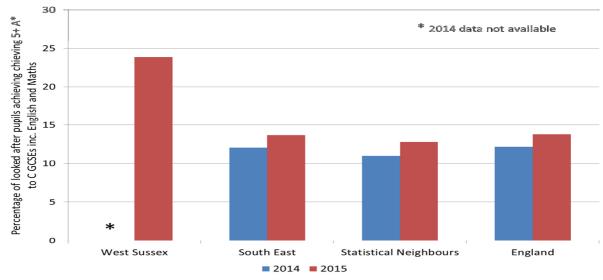


Figure 52: Percentage of looked after pupils achieving 5 A\* to C GCSEs including Maths & English, 2014 to 2015

Source: DfE Local Authority Interactive Tool (LAIT)

Figure 53 shows the attainment gap for looked after children and all children achieving 5 A\* to C GCSEs including maths & English, for West Sussex and comparator areas. The attainment of all children in West Sussex (60%) is higher than that for all children in England (53%), and similar to the

South East and statistical neighbours. However, as discussed above, the attainment of this benchmark by West Sussex looked after children in higher than comparator areas and so the gap for West Sussex, at 36 percentage points, is lower than for the South East and statistical neighbours (46 percentage points for both), and for England (39 percentage points).

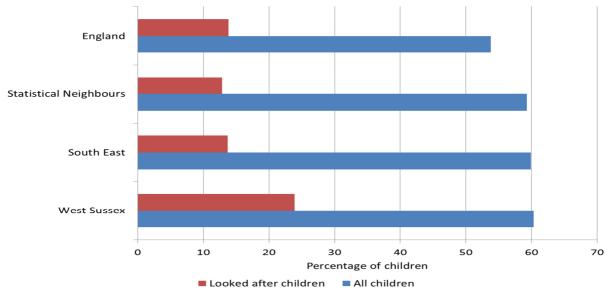


Figure 53: Attainment gap of pupils achieving 5 A\* to C GCSEs including Maths & English, 2015

# Special educational need

The educational outcomes of children in care are usually compared with those of the population overall, and generally have worse outcomes. However, the proportion of children who are looked after and who have a special educational need (SEN), either with or without statement or education, health and care plan (EHC), is far higher than the general population. The proportion of looked after children with SEN is shown below, in figures 54 and 55.

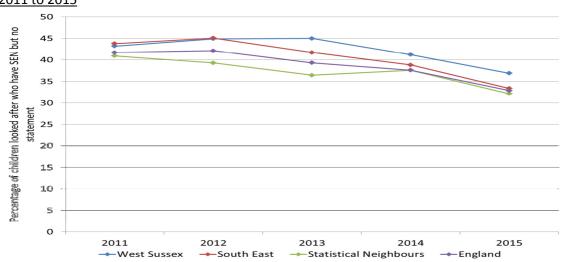


Figure 54 Percentage of looked after children who have SEN but no statement, as of 31<sup>st</sup> March, 2011 to 2015

Source: DfE Local Authority Interactive Tool (LAIT)

Source: DfE Local Authority Interactive Tool (LAIT)

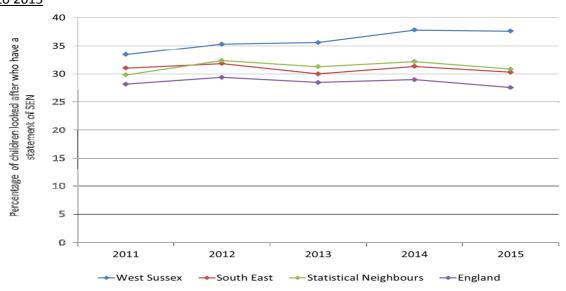


Figure 55: Percentage of looked after children who have a statement of SEN, as of 31<sup>st</sup> March, 2011 to 2015

Source: DfE Local Authority Interactive Tool (LAIT)

The proportion of looked after children with SEN is higher in West Sussex than in England, South East, and statistical neighbours; this is the case for whether the child has a statement or EHC plan or not. The proportion of looked after children who have SEN without statement has fallen nationally and for West Sussex over the period 2013 to 2015; the proportion of children who have SEN with statement has risen in West Sussex over this period whereas it has remained fairly constant nationally.

Table 12 shows the proportion of children with SEN, with and without a statement or EHC plan, among looked after children and all children, as at 31<sup>st</sup> March 2015. In West Sussex the proportion of looked after children with SEN (with or without statement or EHC) was 74.5%; among looked after children in England this was 60.5%. Among the general population 17.1% of children in West Sussex had SEN, this compares with 15.4% in the population of children in England.

<u>2010) ((201</u>				
2015		Looked after	All children	
2013		children	All children	
SEN without statement		36.9	14.2	
West Sussex	SEN with statement or EHC plan	37.6	2.9	
England	SEN without statement	32.9	12.6	
England	SEN with statement or EHC plan	27.6	2.8	

Table 12: Percentage of looked after children with SEN, compared with all children, as of 31<sup>st</sup> March 2015. West Sussex and England

Source: DfE Local Authority Interactive Tool (LAIT)

In the DfE statistical release<sup>22</sup>, summarised in table 13, national outcomes for looked after and nonlooked after children were compared, before and after stratification by SEN. At key stage 2, for

<sup>&</sup>lt;sup>22</sup> Department for Education, Outcomes for children looked after by local authorities in England, 31 March 2015

those without SEN, there was a small difference in the percentage of children achieving level 4 or above in reading, writing and mathematics between those who were looked after (82%) and those who were not (90%). This difference is much smaller than the headline figure of 80% for those not looked after and 52% for those looked after, regardless of SEN status. Among those who had SEN, the percentage who attained the required level at the end of key stage 2 was the same for looked after and non-looked after children. 16% of those with SEN statement or EHC plan achieved level 4 or above in reading, writing and mathematics and 43% of those with SEN but without statement or EHC plan achieved this level, whether they were looked after or not.

At the end of key stage 4 the benchmark for achievement is 5 GCSEs at A\* to C, including maths and English. Although the gap is closer between looked after and non-looked after children when those of similar SEN status is compared, the gap is larger than that observed among the key stage 2 groups. Among those where no SEN has been identified the proportion of non-looked after children achieving the benchmark (64%) is twice that of similar looked after children (32%). A difference is also observed among non-looked after children and looked after children who have SEN with statement or EHC plan (9% cf. 3%) and those without statement or EHC plan (22% cf. 13%) (table 13).

Table 13: Percentage of children achieving	the benchmark at	end of key stage	e 2 and key stage 4, by
special educational need, England, 2015			

	Key st	age 2	Key stage 4		
	Non-looked Looked		Non-looked	Looked	
	after	after	after	after	
All children	80%	52%	53%	14%	
No SEN identified	90%	82%	64%	32%	
SEN statement or EHC plan	16%	16%	9%	3%	
SEN without statement or EHC plan	43%	43%	22%	13%	

Source: DfE, Outcomes for children looked after by local authorities in England, 31 March 2015

## Personal education plan

National guidance<sup>23</sup> states that:

Wherever the child is placed their social worker, supported by the authority's virtual school head (VSH), should take the lead to:

- Initiate a personal education plan (PEP) even where a looked-after child is without a school place. This includes meeting with appropriate education providers and the carer;
- Ensure that where a child is placed in an emergency the PEP is initiated within 10 working days of their becoming looked after, wherever they are placed;
- Ensure, with the support of others, including the VSH, that the PEP contains a summary of the child's current attainment and progress;
- Ensure the PEP is effective and is available for the first statutory review meeting of the care plan; and,

<sup>&</sup>lt;sup>23</sup> Department for Education Promoting the education of looked after children Statutory guidance for local authorities 2014

• Ensure the PEP gives details of who will take the plan forward and specifies timescales for action and review.

The first PEP should be undertaken within 2 weeks of coming into care, with a new PEP every term and, in addition, if child moves school. In September 2016 an electronic PEP system, supplied by eGOV, was introduced in West Sussex. It is now possible to identify the number of PEPs completed each term as required by statutory guidance and also within the care plan review process. As of 31<sup>st</sup> January 2017 108 out of 594 (18%) looked after children in West Sussex had an up-to-date PEP, though this is not reflected on Frameworki. The introduction of the ePEP has highlighted many inconsistencies in practice and has provided the evidence to address these. The recent interim VSH was putting in place new arrangements with social care teams, supported by embedded coordinators, to ensure that Frameworki information on PEP completion reflects the actual completion as recorded on the ePEP system.

The PEP can provide the framework, Pupil Premium Plus should be targeted to provide appropriate support for individual children.

The virtual school maintains its own data, and this is checked for accuracy on a daily basis by the research officer. This is not reflected in the data held on Frameworki.

#### Attendance

In West Sussex the attendance of all looked after children, placed in or out of the county, is monitored by Welfare Call, a commercial company who will telephone on a daily basis to check attendance of all looked after children. Those attending years 12+ are monitored weekly rather than daily. If the absence is due to illness or other health reasons, the looked after children health team will receive notification. The aggregate amount of school absence for any reason is one of the factors associated with the educational achievement of children in care<sup>24</sup> and the ADCS and partners have proposed the metric 'total time away from learning for any cause'.

The percentage of children in West Sussex classified as persistent absentees (pupils who have missed 15% or more of school session through authorised or unauthorised absence), for all children and looked after children, is shown in figure 56. In West Sussex, over the period 2011 to 2015, the percentage of those classes as persistent absentees fell in for both all children and the looked after children population. More fluctuation was seen with looked after children, possibly due to small numbers, and the percentage of persistent absentees remained higher among the population of looked after children than all children.

<sup>&</sup>lt;sup>24</sup> Joint Policy Paper: The Educational Achievement of Children in Care (2015), The Association of Directors of Children's Services, National Consortium for Examination Results, The National Association of Virtual School Heads

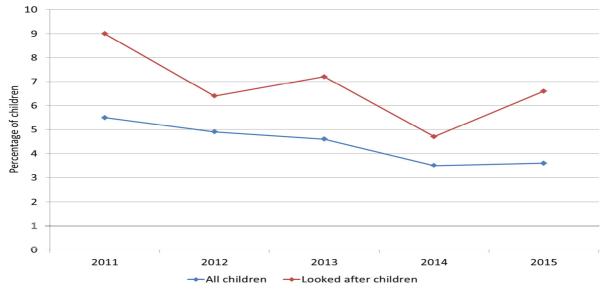


Figure 56: Percentage of children classified as persistent absentees, 2011 to 2015, West Sussex

Source: DfE Local Authority Interactive Tool (LAIT)

Table 14 shows the percentage of children classified as persistent absentees in 2015, for West Sussex, the South East, statistical neighbours and England. Among all children the percentage of children who were persistent absentees, 3.6 - 3.8%, was similar for all areas. There was some difference in the percentage among looked after children; at 6.6% West Sussex had the highest proportion of looked after children classified as persistent absentees, England had the lowest percentage at 4.9%.

 Table 14: Percentage of children classified as persistent absentees, West Sussex and comparators,

 2015

 2015

	2015				
	All Children (%)	Looked After Children (%)			
West Sussex	3.6	6.6			
South East	3.8	5.9			
Statistical Neighbours	3.6	6.0			
England	3.7	4.9			

Source: DfE Local Authority Interactive Tool (LAIT)

A fixed period exclusion refers to a pupil who is excluded from a school but remains on the register of that school because they are expected to return when the exclusion period is completed. Figure 57 shows fixed term exclusion for West Sussex children who have been looked after continuously for 12 months and for the general school population of West Sussex. The rate of exclusion of looked after children is higher than that of all children and, whereas the percentage of all children with at least one fixed term exclusion had declined steadily between 2010 and 2014, that of looked after children has fluctuated with no equivalent trend.

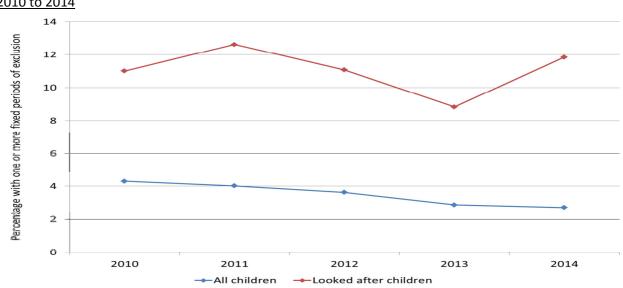


Figure 57: Percentage of children with at least one fixed term exclusion from school, West Sussex, 2010 to 2014

Source: DfE Local Authority Interactive Tool (LAIT)

The percentage of children with at least one fixed term exclusion in 2014 is shown in table 15, for West Sussex and its comparators. For all areas the percentage of children with at least one fixed term exclusion is higher among looked after children.

Table 15: Percentage of children with at least one fixed term exclusion from school, West Sussex and comparators, 2014

	2014		
	All children (%)	Looked after children (%)	
West Sussex	2.7	11.8	
South East	3.7	11.2	
Statistical Neighbours	3.4	11.6	
England	3.5	10.3	

Source: DfE Local Authority Interactive Tool (LAIT)

### **Issues with Education**

- The placement profile of looked after children is not well understood.
- The impact of placement changes on educational stability is not linked.
- Placement stability and its effect on educational outcomes is not being monitored.
- West Sussex County Council does not proactively avoid disrupting education when it becomes necessary for a child to move placement.
- The virtual school is not routinely consulted when a placement is being arranged for a child.
- The placement of children within West Sussex by other local authorities places demands on the Alternative Provision College.
- When young people are placed by West Sussex in out of county placements the issues relating to care planning and education provision become more acute because the network of school s and other education providers is not immediately accessible.
- Data on Frameworki is not accurate.

#### Recommendations

- Implement new model Children Looked After Monitoring (CLAM) to improve input from the virtual school in placing children, proactively avoid disrupting education when moving placement, and to improve the educational stability of looked after children.
- Monitor impact of placement change on educational stability of looked after children.
- Develop partnership between virtual school and Children's Social Care to ensure educational support for children who enter care, especially at transition points.

# **Care leavers**

There are different categories of care leavers depending on age and length of time in care:

Eligible children - Young people, aged 16 or 17, who have been looked after for at least 13 weeks since the age of 14, and who are currently looked after.

Relevant children: young people aged 16 or 17 who are now no longer looked after, who were looked after for a total period of 13 weeks after reaching the age of 14, including at least one day while they were 16 or 17. (That is, they were previously eligible children. This category also includes: young people detained in a remand centre, or other custodial institution or in a hospital; young parents; disabled children).

Additional Relevant Children: children aged 16-17 who immediately before being detained or admitted to hospital were accommodated by a local authority for a period of at least 13 weeks after reaching the age of 14. They will no longer be looked after, and may or may not still be detained or in hospital.

Former relevant children: young people aged 18-21 who have been either eligible children or relevant children. A young person over 21 who is still receiving support from a local authority with education or training will be in this category until the end of his/her studies. The local authority will continue to owe these duties until the young person turns 21, or 25 if the young person is in further or higher education.

Local authority duties under the Children (Leaving Care) Act 2000 are as follows:

- To make sure that a pathway plan is in place by the young person's 16th birthday.
- Complete an 'Assessment of Need' for the care leaver prior to their 16th birthday.
- To provide financial support.
- To provide the care leaver with a Personal Adviser, whose role it is to advise and support the young person, liaise with other relevant agencies, and implement and monitor the pathway plan.
- To ensure accommodation is provided .

Children's services will be responsible for care leavers until they turn 18. At 18, a personal adviser should be appointed to support them until they turn 21, or 25 if they are still in education or training.

## **Pathway plans**

Pathway plans for care leavers should consider the young person's need for support and assistance (which have already been identified in the previous assessment) and how best to meet these needs until the age of 21 (or longer if the young person is in education or training). Areas covered should include:

- accommodation
- practical life skills including money management
- education and training

- employment
- financial support
- specific support needs
- contingency plans for support if independent living breaks down

Together these elements are intended to provide a full package of support to the young person to enable them to make the transition from care to living independently.

Other acts of parliament which introduced further responsibilities for local authorities include the Children and Young Persons Act 2008, where support from local authorities by personal advisors was extended to 21 for all care leavers, and to 25 for those care leavers remaining in education, and the Children and Families Act 2014, where 'Staying Put' (to help care leavers stay in foster homes longer) was introduced

West Sussex Care Leavers service – Care leavers are not referred to this service until their 18th birthday. No pathway planning is done prior to this. As part of the Integrated Prevention and Earliest Help programme it is planned that care leavers will receive this support from the age of 17, and ultimately from the age of 16. Additional personal advisors are being recruited in order to meet the increased demand due to this change.

In July 2016 the government published a strategy on supporting care leavers. 'Keep on caring' sets out the following guidance:

Objective 1 - all young people leaving care should be better prepared and supported to live independently.

- Setting out in law for the first time what it means for a local authority to be a good corporate parent.
- Creating a new care leaver covenant.
- Introducing a new legal duty on local authorities to consult on, and publish information about, services for care leavers.
- Extending existing entitlements so that all care leavers will be able to access support from a local authority Personal Adviser to age 25.

Objective 2 – improved access to education, employment and training.

- Promote the take up of supported internships, including through the provision of targeted information to Personal Advisers.
- Meet the training costs for care leavers undertaking apprenticeships up to age 25.
- Support care leavers' access to, and achievement in, further and higher education, employment and apprenticeships.

- Guarantee a place on the National Citizen Service to every child in care or care leaver aged 16 or 17.
- Consider how best to improve access for care leavers to employment opportunities in government departments and their agencies.

Objective 3 - care leavers should experience stability in their lives, and feel safe and secure.

- Committing to introduce 'Staying Close' provision for young people leaving residential care.
- Continuing to fund local authorities to support Staying Put arrangements.
- Providing support for the implementation of the Supported Accommodation Framework.
- Raising awareness of care leavers' unique status and their entitlements among prison and probation staff through the provision of additional training.
- Increasing the funding local authorities will receive for supporting former unaccompanied asylum seeking children.

Objective 4 - improved access to health support.

- Through a new Expert Group, produce care pathways, quality standards and models of care for looked after children and care leavers with mental health problems.
- Use the new Mental Health Services Data Set to inform the future delivery of services to care leavers.
- Improve accountability regarding the local provision of health services, for example through Care Quality Commission and Joint Targeted Area inspections.

Objective 5 - care leavers should achieve financial stability.

- Exempting care leavers from changes to eligibility for housing support for 18-21 year-olds in Universal Credit.
- Reviewing the case to extend the exemption to the Shared Accommodation Rate of housing support within Universal Credit, for care leavers to age 25.
- Ensuring, through review of the Personal Adviser role, that care leavers are able to access advice and support to help them manage their money.

## **Care leaver outcomes**

Outcomes are improved where children in care are given longer to become independent <sup>25</sup>. The Children (Leaving Care) Act (2000) set out the key duties of local authorities for their care leavers; it made it clear that the government expected most children to remain in care until the age of 18. The proportion of care leavers who remained looked after until their 18<sup>th</sup> birthday has increased for West Sussex between 2009 and 2012 (figure 58), and has since remained stable at over 70%. Since

<sup>&</sup>lt;sup>25</sup> National Audit Office Care leavers' transition to adulthood 2015

2011 this proportion has been consistently higher than that for the statistical neighbours of West Sussex, the South East, and for England.

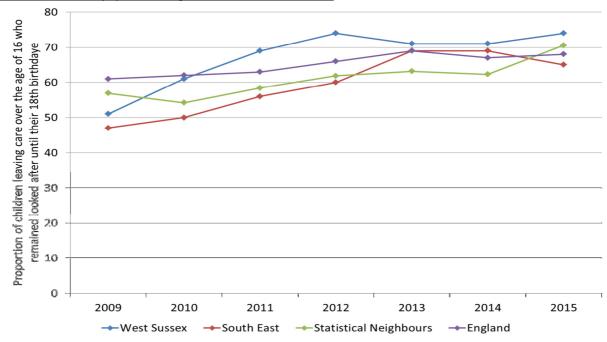


Figure 58: Proportion of care leavers leaving care over the age of 16 who remained looked after until their 18<sup>th</sup> birthday, year ending 31<sup>st</sup> March 2009 to 2015

Source: DfE Local Authority Interactive Tool (LAIT)

In order to support care leavers in receiving support until they are independent, the Staying Put policy was introduced in 2014 to help care leavers stay in foster homes longer. There is a duty on local authorities to facilitate, monitor and support staying put arrangements for fostered young people until they reach the age of 21, where this is what they and their foster carers want. The percentage of care leavers who were living with their former foster carers is shown in figure 59.

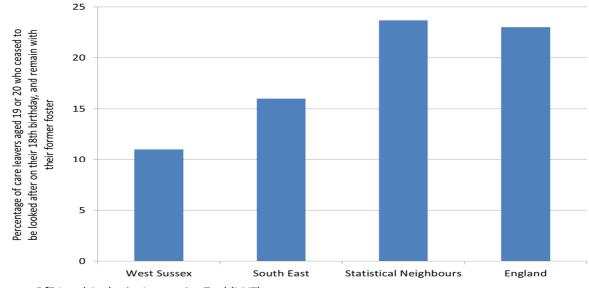


Figure 59: Care leavers - aged 19 or 20 who ceased to be looked after on their 18th birthday, and remain with their former foster, year ending 31<sup>st</sup> March 2016

Source: DfE Local Authority Interactive Tool (LAIT)

In 2016 the proportion of West Sussex care leavers who ceased to be looked after on their 18<sup>th</sup> birthday and who remained with their former foster carers was 11%; this proportion is less than half that reported for statistical neighbours and for England (figure 59).

The following indicators refer to all former relevant young people whose 19th, 20th or 21st birthday falls between 1 April and 31 March (each given year) who were previously looked after for at least 13 weeks after their 14th birthday, including some time after their 16th birthday. There were 340 care leavers in West Sussex fulfilling this definition in 2014, 320 in 2015 and 305 in 2016.

Figures prior to 2014 are not comparable due to methodology change. Previous to 2014 the Department for Education collected activity and accommodation on a group of 19 year olds who were looked after when they were aged 16. The care leaver group changed in 2014 and information was collected on all 19, 20, or 21 year olds who were looked after.

### In touch

At 8% the proportion of care leavers not in touch with the local authority is lower for West Sussex than for the South East and statistical neighbours, and similar to that of England (figure 60). In the year ending 31<sup>st</sup> March 2016, out of 305 care leavers, none had refused contact, a small number no longer required services, and 25 were not in touch.

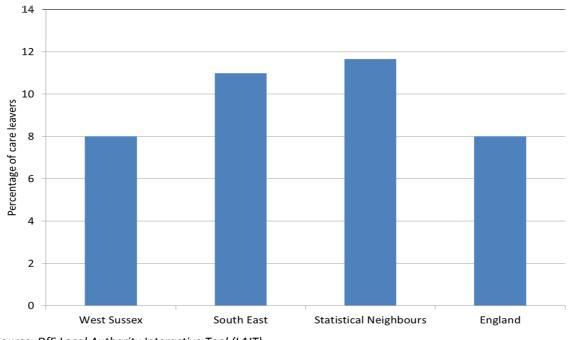


Figure 60: The proportion of care leavers aged 19, 201 or 21 not in touch with the local authority, year ending 31<sup>st</sup> March 2016

Source: DfE Local Authority Interactive Tool (LAIT)

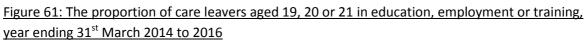
## Employment, education and training

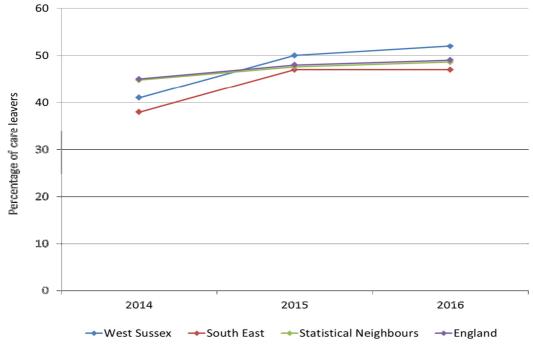
The activity of care leavers in West Sussex, for the year ending 31<sup>st</sup> March 2016, is shown in table 16. The local authority does not have information on 7% of young people but, of the rest, over half are in education, employment or training. The proportion of care leavers in employment, education or training has increased in West Sussex between 2014 and 2016, and for the past two years has been above that of the South East, statistical neighbours and England (figure 61).

Table 16: Care leavers aged 19, 20 or 21 by activity, West Sussex and England, year ending 31<sup>st</sup> March 2016

	West Sussex		England	
Number of care leavers	305		26,340	
	Number	Percentage	Number	Percentage
In Education, Employment or Training				
In higher education i.e. studies beyond A level	15	5%	1,760	7%
In education other than higher education	60	20%	4,790	18%
In training or employment	85	28%	6,420	24%
Total in EET	160	52%	12,980	49%
Not in Education, Employment or Training				
illness/ disability	45	15%	2,600	10%
other reasons	60	20%	6,080	23%
pregnancy or parenting	20	7%	1,780	7%
Total NEET	125	41%	10,460	40%
Local Authority does not have information	20	7%	2,900	11%

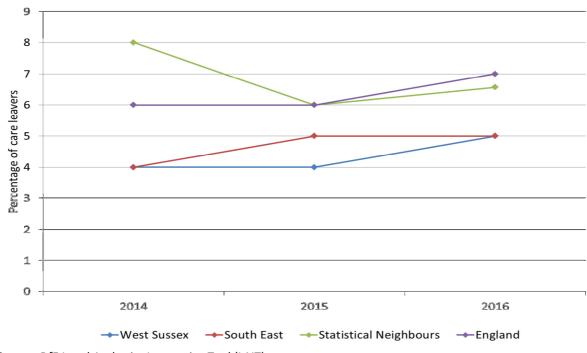
Source: DfE National Statistics, Children looked after in England including adoption





Source: DfE Local Authority Interactive Tool (LAIT)

Although the proportion of West Sussex care leavers in higher education has increased between 2015 and 2016 it was only 5% in 2016; similar to the England value and lower than those of the South East and statistical neighbours (figure 62).



<u>Figure 62: The proportion of care leavers aged 19, 20 or 21 in higher education, year ending 31<sup>st</sup></u> <u>March 2014 to 2016</u>

Source: DfE Local Authority Interactive Tool (LAIT)

## Accommodation

The duty of local authorities to support care leavers with accommodation is set out in the Children (Leaving Care) Act 2000. Accommodation is regarded as suitable if it provides safe, secure and affordable provision for young people. It may include short- term accommodation designed to move young people on to stable long- term accommodation, but would exclude emergency accommodation used in a crisis. The suitability of accommodation will depend on the young person's individual circumstances.

The percentage of care leavers in suitable accommodation in West Sussex has risen since 2014, and in 2016 was 89%, higher than England (83%), statistical neighbours (83%) and the South East (77%) (figure 63).

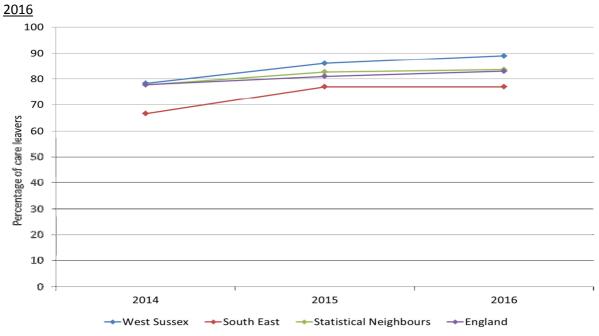


Figure 63: Care leavers aged 19, 20 or 21 in suitable accommodation, year ending 31<sup>st</sup> March 2014 to

The type of accommodation for care leavers aged 19, 20 or 21, for the year ending 31<sup>st</sup> March 2016, is shown in figure 64. Compared with England, West Sussex has proportionately more care leavers living with parents or relatives, in community homes or in supported lodgings; it has proportionately fewer care leavers in semi-independent or independent living. There are also proportionately fewer care leavers where West Sussex has no information compared with England.

Source: DfE Local Authority Interactive Tool (LAIT)

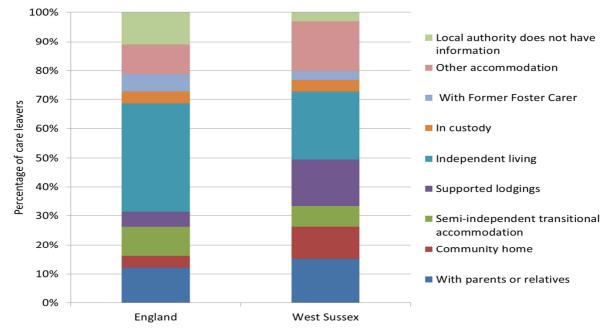


Figure 64: Type of accommodation, care leavers aged 19, 20 or 21, West Sussex and England, year ending 31<sup>st</sup> March 2016

An example of best practice is the provision of training flats, which enable young people to receive support in identifying strategies to manage the practical and emotional demands of living more independently, without compromising their future housing options<sup>26</sup>. There is no training flat provision by West Sussex County Council.

### Recommendations

West Sussex County Council should consider the introduction of training flats to help prepare care leavers to live independently

Source: DfE National Statistics, Children looked after in England including adoption

<sup>&</sup>lt;sup>26</sup> Journeys to Home: Care leavers' successful transition to independent accommodation: National Care Advisory Service.

http://www.nhas.org.uk/docs/journeys to home care leavers successful transition to independent acco mmodation.pdf

# Conclusion

This needs assessment for children who are looked after provides a comprehensive assessment of the health and wellbeing needs and services currently in West Sussex. It will be used to help to design, commission and provider services for children who are looked after and their carers.

Used effectively, this needs assessment will enable us to improve the life chances and health and wellbeing outcomes for children who are looked after, while developing services which meet their needs in a timely and cost effective manner.

The population of children who are looked after is a transient population and as such this is not a one off stand-alone piece of work, but will be refreshed regularly and additional in depth analysis's undertaken to further explore and understand specific issues arising from this report, supporting better service delivery and reducing the health and wellbeing inequalities often experienced by children who are looked after.

# Recommendations

- Further analyse local and national data to understand the differences between the West Sussex cohort of looked after children and the national cohort (e.g. age structure, legal basis etc.).
- A common theme throughout services for looked after children is that data on Frameworki is not reliable, and local datasets are maintained which are checked to ensure accuracy and reliability. A data audit should be conducted, to ensure transparency and quality, and to inform performance reports and dashboards.
- The looked after children health teams receive notifications when children are placed in the area by other local authorities. Liaison with the health teams could provide a more accurate understanding of children placed from outside of area.
- Monitor and analyse IPEH data, to identify trends and patterns in the characteristics and journeys of young people in touch with Children's Social Care.
- There is a lack of evidence of large-scale engagement with looked after children, care leavers, and unaccompanied asylum seeking children; it is therefore not possible to determine whether the experience of West Sussex CLA reflects the national picture. West Sussex County Council should commission a survey of looked after children and care leavers in order to collect evidence of their experiences.
- Improve liaison between Children's Social Care and the LAC health team, to improve timeliness and quality of health reviews.
- Implement new model Children Looked After Monitoring (CLAM) to improve input from the virtual school in placing children, proactively avoid disrupting education when moving placement, and to improve the educational stability of looked after children.
- Monitor impact of placement change on educational stability of looked after children.
- Develop partnership between virtual school and Children's Social Care to ensure educational support for children who enter care, especially at transition points.
- Implement changes to ensure looked after children receive pathway planning from the age of 16.
- West Sussex County Council should consider the introduction of training flats to help prepare care leavers to live independently.

# Abbreviations

Association of Directors of Children's Services
Adoption Support Fund
British Association for Adoption and Fostering
Child and Adolescent Mental Health Services
Looked After and Adopted Children
Clinical Commissioning Group
Children in Care Council
The Chartered Institute of Public Finance and Accountancy
Children Looked After
Children Looked After Monitoring
Care Leavers Forum
Care Quality Commission
Child Sexual Exploitation
Department for Education
Department of Health
Education, Health and Care plan
Electronic Personal Education Plan
Early Therapeutic Support
Initial Health Assessment
Integrated Prevention and Earliest Help
Independent Reviewing Officer
Looked After Children
Local Authority Interactive Tool
Multi-Agency Safeguarding Hub
Not in Education, Employment or Training
The National Institute for Health and Care Excellence
Personal Education Plan
Strengths and Difficulties Questionnaire
Special Educational Need
Sexual Exploitation Risk Assessment Framework
Special Guardianship Order
Therapeutic Access Point
Unaccompanied Asylum Seeking Children
Virtual School Head