



Rotherham
Looked After Children
and Care Leavers

SUFFICIENCY STRATEGY

2017-2021

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Authorisation

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Foreword

In Rotherham, we will strive for the children we look after to have the same things that every good parent would want; that they are healthy and happy, that they feel valued for who they are, and when they grow up they achieve their potential.

This document sets out how Rotherham Children’s Services will fulfil its role as a Corporate Parent and meet its statutory sufficiency duty by providing good quality care, effective parenting and support to children and young people in and leaving our care. It describes our ‘one market’ approach to the commissioning and provision of secure, safe and appropriate accommodation and support to children in care and care leavers over the next four years.

We identify the key challenges that we face in achieving sufficiency and our strategic approach to overcoming them. Our commissioning approach will rethink services and the way we work with families. We will invest in the right support at the right time, enhancing early help and prevention so that fewer children come into care in the first place. We will encourage participation by engaging customers throughout the commissioning process to ensure that children, young people and their families help us to design services and influence the way in which they are delivered. This is at the heart of Rotherham’s Children’s Transformation Programme and Children’s Financial Sustainability Plan 2016-2021.

This Strategy also describes the on-going needs of children for whom we need to develop additional provision with key providers to ensure a range of specialist support and choice. It will focus on ensuring that the local market is developed over time so children and young people who remain in our care are able to continue to live in a family setting with the right support within or close to the Borough.

Achieving this requires the collective engagement of the local authority and its partners working together, involving children and young people in the decisions affecting their lives. As Corporate Parents we will provide scrutiny and seek assurance that the Strategy and the actions are owned and implemented by all professionals and partner organisations working with children, young people, their parents and carers to secure the best outcomes for our children.

Signed:

Signed

Councillor Gordon Watson
**Lead Member,
Children and Young People Services**

Councillor
**Chair,
Corporate Parenting Panel**

1. Introduction and Rotherham's Context

Overview

- 1.1 The duty to provide or procure placements for Children Looked After (CLA) by the local authority is explicit in the Children Act 1989. This has since been strengthened by the introduction of Sufficiency Statutory Guidance (2010) and the Care Planning, Placement and Case Review Regulations (implementation April 2011). There is a duty of 'sufficiency' that requires Local Authorities and Children's Trust partners to ensure that there is a range of sufficient placements which meet the needs of children and young people in care, and to take steps to develop and shape service provision to meet the needs of all children and young people in care at a local level, as far as is reasonably possible.
- 1.2 This Sufficiency Strategy analyses the needs of children and young people in care that are not currently being met within Rotherham. It also considers the likely changes in the overall care population between now and 2020, taking into account the ambition to improve preventative services, increase the number of children for whom permanency is secured and ensuring children are matched to the right placement to meet their needs.
- 1.3 Some of our Looked After children will have special educational needs and disabilities. We recognise for this cohort of children that their placement will be driven by their special educational need and is considered in a separate Sufficiency Strategy for SEND. This strategy gives consideration to the cohort of children that display a high level of Social, Educational and Mental Health (SEMH) issues only some of whom will have SEN statements or Education, Health and Care Plans (EHCPs).
- 1.4 Young people leaving care are some of the most vulnerable young people in our society. Leaving care is a key moment in these young people's lives, and events at this stage in their life will have a lasting impact. Care leavers generally face having to be independent much younger than their peers. Care leavers need support at events in their lives such as moving into their first home, perhaps getting a job at a far earlier age than their peers and all of this without the support network and safety net of a family. The sufficiency of the support and accommodation provided for them will be considered.

Strategic Outcomes

- 1.5 Rotherham Children & Families Strategic Partnership have agreed three underpinning outcomes which inform the Commissioning Strategy:
 - Children and young people are healthy and safe from harm.
 - Children and young people start school ready to learn for life.
 - Children, young people and their families are ready for the world of work.
- 1.6 Alongside these outcomes, the Looked After Children Service has developed 5 strategic objectives. They drive the key achievements and service improvements that will need to be made over the course of the next four years in order to improve the outcomes for looked after children and inform the strategic intentions in this Sufficiency Strategy:
 - To improve the degree and timeliness of placement stability and permanence and ensure that children are able to enjoy a continuity of relationships.
 - To improve the emotional wellbeing and physical health of looked after children (which will also support care and school placement stability).

- To improve the educational progress and attainment and narrow the gap between attainment of LAC and their peers.
- To improve the support and opportunities for care leavers and to increase the number and proportion of them who are in Education Employment or Training (EET).
- To listen to children and young people so as to ensure that they can influence their own plans as well as wider service delivery and development.

Supporting Strategies

- 1.7 This document and the Strategy are separate to but linked to and informed by the following:
- The Rotherham Joint Strategic Needs Assessment (JSNA)
 - The Rotherham Children & Young Peoples Plan
 - The Looked After Children's Strategy 2016-2019
 - The Corporate Parenting Strategy.
 - The Corporate Parenting Promise to Looked After Children.
 - The Pledge to Looked After Children.
 - The Rotherham Offer to Care Leavers.
 - CYPS Sustainability Plan 2016-2021
 - The Early Help Strategy 2016-2019
 - CAMHS Transformation Plan

Rotherham Local Context

- 1.8 Rotherham is a diverse borough with a mixture of people, cultures and communities. There are densely populated multi-ethnic inner urban areas, large council built housing estates, leafy private housing suburbs, industrial areas and rural villages.
- 1.9 Rotherham is currently home to 260,000 residents with approximately:
- 56,356 (21.6%) children and young people aged 0 to 17 years
 - Of which, 16,004 (28.6%) are aged 0-4
- 1.10 There are significantly more people aged over 60 than children under 18. The child population has not changed significantly in total since 2011, although those aged under 5 years have increased in recent years. However, the number of children aged 0-4 is projected to stabilise before falling slightly to 15,800 by 2019. The largest reduction will be in young people aged 16-19, whose numbers are projected to reduce by 9% from 12,200 in 2015 to 11,100 to 2025.
- 1.11 Our Black and Minority Ethnic (BME) population is less than half the national average, but this has more than doubled between 2001 and 2011 from 10,080 to 20,842 (8.1%) and becoming increasingly diverse. The largest of over 75 different BME groups is Pakistani and Kashmiri who numbered 7,912 in 2011 (or 3.1% of the population). There were 3,418 (1.4%) 'other White' residents mainly Slovak, Czech and Romanian Roma.
- 1.12 Whilst the child population has not changed much in total since 2011, ethnic composition has changed rather more. The child BME percentage is estimated to have increased from 12.7% in 2011 to 17.9% in 2016. Of this Pakistani and Kashmiri is the largest group (6.7%) The 'other White' child population has seen the most increase, now estimated to represent 4.5%.
- 1.13 Rotherham has an increasingly high number of children in its care. There has been a consistent upward trend year on year in the numbers of children and young people looked after by the Local Authority. The number has increased from 424 as of

January 2016 to 488 as of December 2016 (15% increase in a 12 month period) and is expected to increase.

- 1.14 Black and Minority Ethnic children now represent 19.4% (95) of the Looked After Children population. As a proportion, this is broadly in line with the child population as a whole (17.9%).

2. Our Challenges

- 2.1 The data identified below is crucial to understanding the makeup of Rotherham's LAC population and being able to forecast future trends and to identify the right placement, in the right place at the right time.

THE NUMBERS OF LOOKED AFTER CHILDREN RISING AND LEGACY OF NEED

Table 1 - Numbers of Looked After Children per 10,000 under 18 population as at period end

	31 st March 2014	31 st March 2015	31 st March 2016	31 st Dec 2016
Rotherham	69.9	72.2	76.6	86.5
Stat Neighbour Average	73.3	73.2	75.8	-
England Average	60.0	60.0	60.0	-

- 2.2 The number of Looked After Children in Rotherham is high when compared to Statistical Neighbours and England averages. However, the Authority acknowledges historically poorly performing services have left a legacy of need as well as a legacy of numbers.

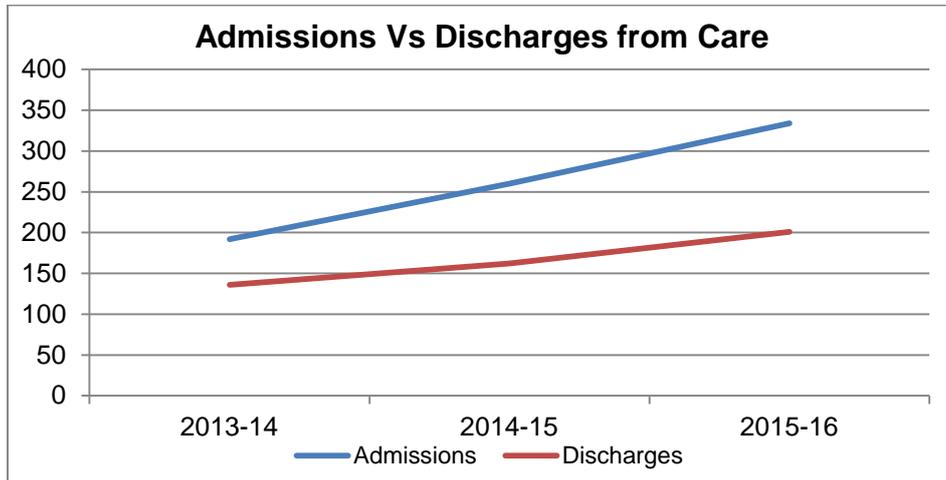
Table 2 - Numbers of Looked After Children by Age Group as at period end

Age Group	31 st March 2014	31 st March 2015	31 st March 2016	31 st Dec 2016
Under 1	23	18	29	39
1 to 4	59	60	52	62
5 to 9	80	80	87	102
10 to 15	160	162	174	186
16 & Over	72	87	89	99
Total	394	407	431	488

- 2.3 Rotherham has a disproportionate number of older children with nearly two thirds of the children looked after aged 10 and over. The net numbers of children looked after aged between 10 and 15 admitted to care remaining constant (Table 3 and 4). At December 2016, of the children and young people looked after for more than 2 years, (41%) were aged 10 and over.
- 2.4 The likelihood of these young people returning to their birth families or achieving permanency through adoption or special guardianship orders diminishes the older they become and they are more likely to remain looked after. Often (but not always) the older children have a greater complexity of need which impacts on education and stability of school placements

Admissions and Discharges Activity In Year

- 2.5 Table 3 and 4 below show both admissions and discharges have risen significantly over the last 3 years. With an increasing number of children coming in to care than those being discharged, the gap is widening and the net LAC population is growing.



2.6 There are an increasing proportion of babies and young children becoming looked after between birth and 4 years of age which has risen from 37% in 2013/2014 to 45% in December 2016. Following the establishment of a new LAC Court and Permanence Team in November 2015 and as a result of a review of Public Law Outline (PLO) practice completed in April 2016 the service has refocused its efforts on early permanence planning to intervene and secure permanent alternative care for babies and young children within a legal framework.

Table 3 - Admissions to Care by Age Group

Age Group	2013-2014	2014-2015	2015-2016	Apr-Dec 2016
Under 1	39/20%	48/18%	57/17%	47/23%
1 to 4	33/17%	70/27%	81/24%	45/22%
5 to 9	39/20%	47/18%	90/27%	38/19%
10 to 15	53/28%	66/25%	67/20%	56/28%
16 & Over	28/15%	29/11%	39/12%	15/7%
Total	192	260	334	201

Table 4 - Discharges from Care by Age

Age Group on Leaving Care	2013-2014	2014-2015	2015-2016	Apr-Dec 2016
Under 1	14/10%	17/10%	23/11%	22/15%
1 to 4	45/33%	52/32%	61/30%	35/24%
5 to 9	17/13%	20/12%	27/13%	18/13%
10 to 15	19/14%	21/13%	34/17%	22/15%
16 & Over	41/30%	52/32%	56/28%	46/32%
Total	136	162	201	143

Table 5 - Discharges from Care by End Reason

Reason Care Ceased	2013-2014	2014-2015	2015-2016	Apr-Dec 2016
Returned Home to live with birth parent or person with parental responsibility	44/ 32%	52/ 32%	56/29%	43/30%
To live with parents, relatives, or other person with no parental responsibility	-	-	-	20/13%
Adopted (permanence)	36/ 27%	44/ 27%	43/ 21%	19/13%
Alternative permanent care with 'connected people' (SGO)	19/ 14%	18/ 11%	33/ 16%	16/11%
Transition to Adult Services - disability and learning difficulties	2/ 1%	4/ 2%	1/ 1%	4/3%
Becoming an 18 year old Adult (move to independent living)	23/ 17%	14/ 9%	9/ 4%	13/10%
All Other	12/ 9%	30/ 19%	59/ 29%	28/20%
Total	136	162	201	143

2.7 Returning children to their birth or extended families where it is safe to do so shows a marked increase on 2015/16 to 45% by December 2016 Year to Date figures. Discharges of 37% in 2015/16 were to permanency arrangements through adoption or special guardianship orders.

HOW WE CURRENTLY CARE FOR OUR LOOKED AFTER CHILDREN

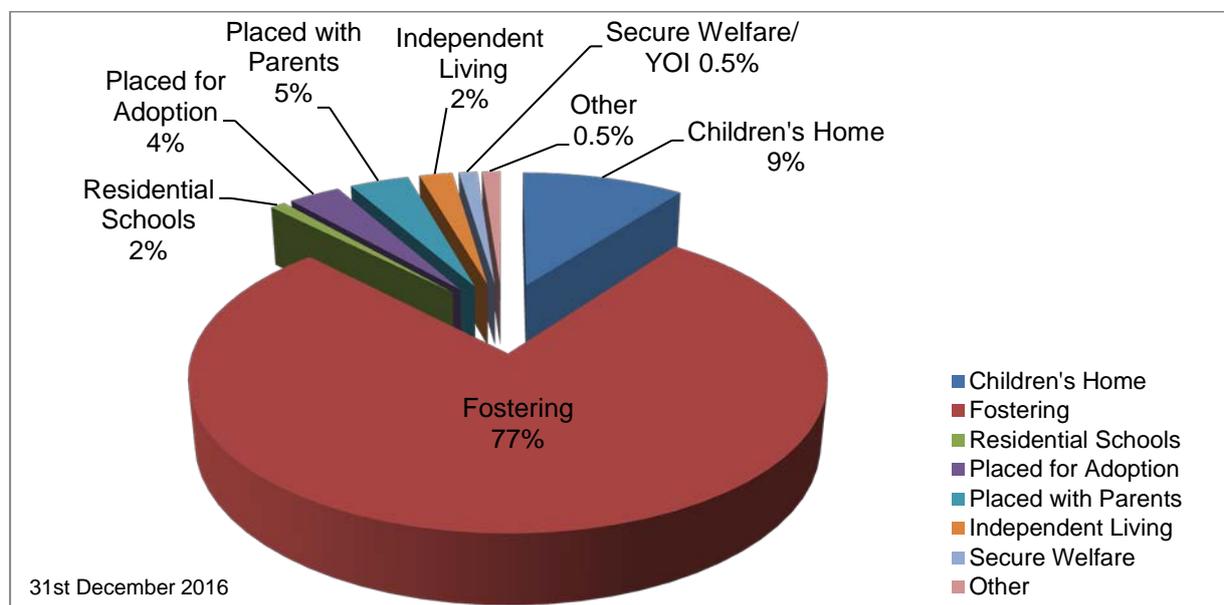
Table 6 - Numbers of Looked After Children by Legal Status as at period end

Legal Status	31 st March 2014	31 st March 2015	31 st March 2016	31 st Dec 2016
Interim Care Order	51/13%	61/15%	78/18%	138/28%
Full Care Order	239/60%	237/58%	251/58%	241/49%
Section 20	40/10%	59/15%	58/13%	59/12%
Placement Order	62/16%	50/12%	41/10%	46/9%
On remand, committed for trial, or detained	2/1%	-	2/0.5%	3/0.5%
Emergency orders or police protection	-	-	1/0.5%	1/0.5%
Total	394	407	431	488

2.8 There is a sustained proportionate increase in the numbers of children subject to ongoing care proceedings (interim care order) which would suggest that a permanent legal resolution is being sought for more children more of the time.

Table 7 - Numbers of Looked After Children by Placement Type as at Period End

Placement Type	31 st March 2014	31 st March 2015	31 st March 2016	31 st Dec 2016
Children's Home in-house provision	19/ 5%	16/ 4%	3/ 1%	0
Children's Home provision by others	22/ 6%	30/ 7%	41/ 10%	45/ 9%
Fostering in-house provision	155/ 39%	167/ 41%	178/ 41%	179/ 36%
Fostering with 'connected people' (relatives or friends)	10/ 3%	16/ 4%	20/ 5%	20/ 5%
Fostering provision by others (IFAs & other LAs)	102/ 26%	110/ 27%	136/ 32%	176/ 36%
Residential Schools	3/ 1%	3/ 1%	4/ 1%	9/ 2%
Placed for Adoption (with prospective adoptive parents)	37/ 9%	24/ 6%	14/ 3%	21/ 4%
Placed with Parents (and subject to a FCO or other Order of the court)	18/ 5%	14/ 3%	16/ 4%	23/ 5%
Independent Living	10/ 3%	11/ 3%	9/2%	11/ 2%
Secure Accommodation (Welfare grounds)	4/ 1%	2/ 0%	5/ 1%	1/ 0%
Young Offender Institute or Prison	3/ 1%	1/ 0%	0%	1/ 0%
Other	11/ 3%	13/ 3%	5/ 1%	2/ 0.5%
Total	394	407	431	488



2.9 The breakdown of placements by type indicate that the vast majority of LAC are placed in foster care (77%) which is consistent with the department's commitment to place children in family based arrangements. Of the 77%, 41% are in-house placement (including connected people, relatives or friends) and 36% with Independent Fostering Agencies.

WHERE WE CURRENTLY CARE FOR OUR LOOKED AFTER CHILDREN

2.10 When compared with statistical neighbours and the rest of the country, too many LAC are placed out of borough – more than 20 miles away from their home. This has implications for the child and family in terms of maintaining contact and for social work practice and oversight.

Table 8 – % of children placed more than 20 miles from their home, outside LA Boundary

% of children placed more than 20 miles from their home, outside LA Boundary	31 st March 2014	31 st March 2015	31 st March 2016
Rotherham	20	19	n/a
Stat Neighbour	15.25	12.70	n/a
England	13	14	n/a

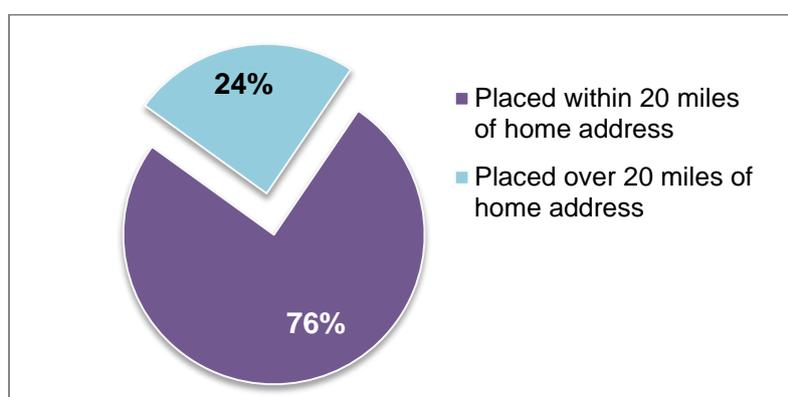


Table 9 – LAC placement driving distance from home by placement type as at July 2016

Driving distance from Home Address	Internal Fostering	Independent Fostering Agency	Internal Residential	Independent Residential	Other provision	Grand Total
July 2016						No/ %
Within Rotherham	178/ 96.2%	93/ 62.4%	1/ 50%	17/ 32.7%	43/ 78.2%	332/ 75.1%
20 to 49	6/ 3.3%	33/ 2.1%	1/ 50%	13/ 25%	6/ 10.9%	59/ 13.4%
50 to 99	-	22/ 14.8%	-	17/ 32.7%	4/ 7.3%	42/ 9.5%
100+	1/ 0.5%	1/ 0.7%	-	5/ 9.6%	2/ 3.6%	9/ 2%
Total LAC	185	149	2	52	55	442

DEMAND FOR SOCIAL, EMOTIONAL AND MENTAL HEALTH SUPPORT

2.11 An increasing number of Looked After Children are presenting with emotional wellbeing and mental health need. There has been a 39% increase in 2015/16 in the number of Looked After Children accessing emotional wellbeing and mental health support from the Looked After and Adopted Children's Therapeutic Team (LAACTT).

Table 10 - Looked After Children Accessing LAC Therapeutic Team

	31st March 2015	31st March 2016
	No.	No.
Active cases	150	208

2.12 There has been a 41% decrease in the number of Looked After Children accessing Rotherham Doncaster and South Humber NHS Foundation Trust CAMHS for mental health treatment in 2015/16 from the previous year's figure. This decrease may in part be due to RDASH CAMHS working more closely with the Therapeutic Team and preventing an escalation of need.

Table 11 - LAC and Care Leavers accessing the RDASH CAMHS treatment service

	31st March 2015	31st March 2016
	No.	No.
Numbers accessing the CAMHS treatment service:		
Numbers of LAC and Care Leavers accessing	131	77

2.13 There is evidence of good joint working between RDASH CAMHS and the Therapeutic Team and that each respective service is working with the appropriate cohort of children and young people.

2.14 At the time of writing, children accessing CAMHS are on average 13½ years old. Most of those not being referred as part of the specialist Learning Disability pathway have either experienced, or are at high risk of Child Sexual Exploitation or were referred for a neuro-developmental assessment (ASD or ADHD). Of the current cohort 92% were deemed to be 'routine' referrals

SUPPORTING OUR YOUNG PEOPLE LEAVING CARE

Table 12 - Percentage of Care Leavers in Suitable Accommodation

Suitable Accommodation	31st March 2014	31st March 2015	31st March 2016	31st Dec 2016
Rotherham	82.80%	94.00%	96.5%	97.3%
Stat Neighbours	74.24%	85.10%	-	-
England	77.88%	81.00%	-	-

Table 13 - Percentage of Care Leavers Not in Education, Employment or Training (NEET)

NEET	31st March 2014	31st March 2015	31st March 2016	31st Dec 2016
Rotherham	38.00%	34.00%	32.00%	28.6%
Stat Neighbours	37.40%	39.60%	-	-
England	38.00%	39.00%	-	-

2.15 The vast majority of young people leaving care (97%) are in suitable accommodation which is well above the national average (81%). There are no young people placed in bed and breakfast accommodation.

INDICATOR OUTCOMES

2.16 The performance against the following indicators is directly related to the evaluation of placement sufficiency and accommodation.

	Roth 2013/14	Roth 2014/15	Roth 2015/16	Roth Apr-Dec 2016	England 2015/16
Number of Looked After Children per 10,000 under 18 population	69.9	72.2	76.6	86.5	60
Achieving permanence					
Number of adoptions	-	-	43	19	-
% adoptions completed within 12 months of SHOBPA	55.6%	84.6%	53.5%	52.6%	-
Number of Special Guardianship Orders	5	1	16	16	
Stability of Placements					
No. of long term LAC placements stable for at least 2 years	108/157	110/153	109/150	102/148	-
% long term LAC placements stable for at least 2 years (NI063)	68.8%	71.9%	72.7%	68.9%	67%
No. of LAC who have had 3 or more placements - rolling 12 months (NI062)	44/393	49/409	56/431	62/454 At Sep	-
% LAC who have had 3 or more placements - rolling 12 months	11.2%	12.0%	13.0%	13.7% At Sep	11.0%
Continuity of Relationships (data in development)					
No of changes in social worker per placement (build data)	-	-	-	-	-
Emotional Wellbeing (data in development)					
Average result from Strength and Difficulties Questionnaire (SDQs)	-	-	-	-	-
Personal Education Plan					
% LAC with a Personal Education Plan	65.7%	68.7%	97.8%	91.2% At Sep	-
% LAC with up to date Personal Education Plan	73.3%	76.0%	95.0%	85.0% At Sep	-
Health					
Health of Looked After Children – up to date Health Assessments	82.7%	81.4%	92.8%	89.2%	-
Health of Looked After Children – up to date Dental Assessments	42.5%	58.8%	95.0%	65.5%	-

Placement Stability and Disruption

- 2.17 Placement stability continues to be a factor in offering an effective Fostering Service and crucial to ensuring that the Council delivers good outcomes to each looked after child. Stability is measured by 2 national indicators, NI062 relating to children who experience 3 placement moves within 12 months and NI063 which relates to children looked after for 2.5 years who have been in the same placement for 2 years.
- 2.18 There has been steady improvement over the last 3 years in the placement stability NI063 placement stability figure which was 72.7% at March 2015. There has been a small decline in year at December 2016 to 68.9%. However the longer term trend is upwards and remains higher than statistical neighbours (67%).
- 2.19 Foster placement disruptions happen when the placement has had an unplanned ending outside of the child's care planning arrangements. In 2015/16 within RMBC in-house fostering service there were 15 foster placement disruptions involving 17 children in care. This compares with 40 placement disruptions that took place, during the same timeframe from within independent fostering agencies.
- 2.20 The national indicator NI062 shows steady increase to 13% in 2015/16 in placement breakdowns. This trend has continued into 2016 and is higher than statistical neighbours and higher than Rotherham's target of 10%.

Adoption and Early Permanence planning

- 2.21 Analysis indicates an increase in the number of Looked After Children aged 0 to 4 whose permanence plan is adoption and reflects the trend of an increase in the number of children aged 0 to 4 entering care. In 2015/16, 19 children under the age of 1 year, had a SHOBPA (Should be placed for Adoption Decision). Eighteen children aged between 1 and 4 years had a SHOBPA decision.
- 2.22 From 1st April 2016 to 1st December, 17 children under the age of 1 year old, had a SHOBPA decision and 10 children aged between 1 and 4. It is likely that the number of children 4 and under whose plan is adoption will exceed the 2015/16 total. This reflects the trend in the growing numbers of children aged 4 or under entering care.
- 2.23 Early Permanence Planning (EPP) has enabled identification of unborn children who are likely to come in to care, develop a permanence plan for adoption and place them with adopters who are temporarily approved as foster carers. In 2015/16, 16 unborns were considered for EPP. Of these, 8 children (50%) were placed in Early Permanence Placements. In 2016/17 year to date, 14 children have been considered for EPP with 3 children placed.
- 2.24 During 2015/16 the average time between becoming a looked after child and placed for adoption (A1) was 296 days. This is within the government target of 426 days demonstrating that permanence is achieved in a timely manner and permanence plans are not allowed to drift.
- 2.25 The average time between the child being the subject of a placement order and being matched with adopters was 136 days during 2015/16 (A2). Although this missed the government target of 121 days, the underlying performance does represent an improvement on the previous year with 72% of children adopted with the target of 121 days compared to 37% in 2014/15.

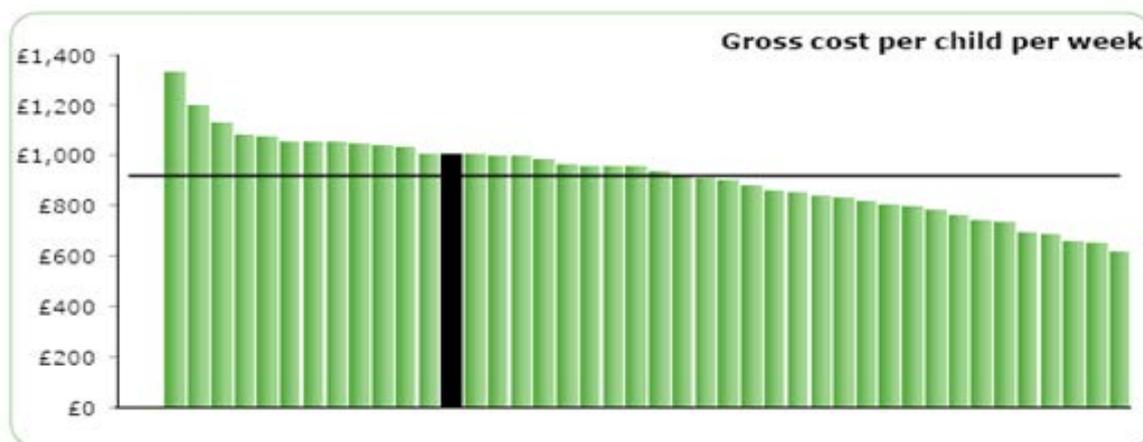
3. Our Current Approach

Current Provision Overview

- 3.1 There has been a consistent upward trend year on year in the numbers of children and young people Looked After by Rotherham. Overall the number of children in care has increased from 407 at end of 2014/15 to 433 at the end of 2015/16. The trend continues upwards, being 488 and rising at the time of writing in December 2016.
- 3.2 Whilst this upward trend is reflected across many local authorities in the Yorkshire and Humber region, at a rate of 86.5 per 10,000 children this is above the national average of 60 looked after children per 10,000 of population (as at 31st March 2016). If the current trend of increasing numbers of Looked After Children was allowed to continue unabated, by November 2019 there will be a projected 604 looked after children.
- 3.3 Rotherham has had an inadequate 'alternative offer' to support children and families at times of crisis and this has also led to more children coming into care. Once in care there has been inadequate support provision for the child and carer and this has implications for placement stability, impacts on the child's education and potentially poorer outcomes.
- 3.4 In conjunction with this, the recruitment and retention of in-house foster carers has been insufficient to meet demand and the children's residential care homes have been of such poor or inconsistent quality that they have been deemed unviable. In turn this has led to an over-reliance on Independent Fostering Agencies (IFA) and private providers of children's residential care homes
- 3.5 In addition the lack of in-house provision too many young people have been placed some distance away from the Rotherham boundary. More than 24% (110 children) are placed more than 20 miles from their home address. (Section 2, Table 9).
- 3.6 These distances can make social worker and commissioning oversight of the placements difficult in terms of ensuring that the young person is receiving the services that have actually been commissioned such as therapeutic interventions, enhanced staff support packages, respite care etc. Furthermore, these placements bring with them a dependency on other agencies to provide for many of the other needs of the looked after young person including their education, non-teaching support, CAMHS intervention and health and dental treatment.
- 3.7 The Virtual School supports education wherever the child is placed and it is more difficult to support/challenge schools that are out of borough. We also experience a lack of prioritisation of Rotherham Looked After Children in other authorities. In addition some local authorities do not have a sufficiency of therapeutic support, Education Psychology input, post-16 support to be able to support our Looked After Children. Addressing the number of children looked after 'out of borough' is a key consideration in respect of their educational outcomes.
- 3.8 Where larger sibling groups have to come into care seeking to accommodate these larger groups (3+) in the same setting is difficult irrespective of the placement type. The resulting break up of sibling groups adds to the trauma which the young people experience at point of placement. Larger sibling groups are common amongst Rotherham's BME population.

- 3.9 The most recent **INITIAL** (2016) Chartered Institute of Public Finance and Accountancy (CIPFA) LAC Benchmarking Club shows Rotherham's weekly gross cost at £1,006. The overall trend is down on the previous year and is moving towards the benchmarking average of £918. The Benchmarking data show that there is scope to manage the sufficiency in the market as a whole for family based support within the Rotherham Borough.

Table 14 - Gross cost per child per week by LA (Rotherham shown in black)



Unit Costs Gross (£ per child per week)		
	Roth	Avg.
LA Homes	0	£3,049
Other Homes	£3,712	£3,571
In-House Foster Care	£525	£477
Other Foster Care	£901	£879
Overall	£1,019	£925

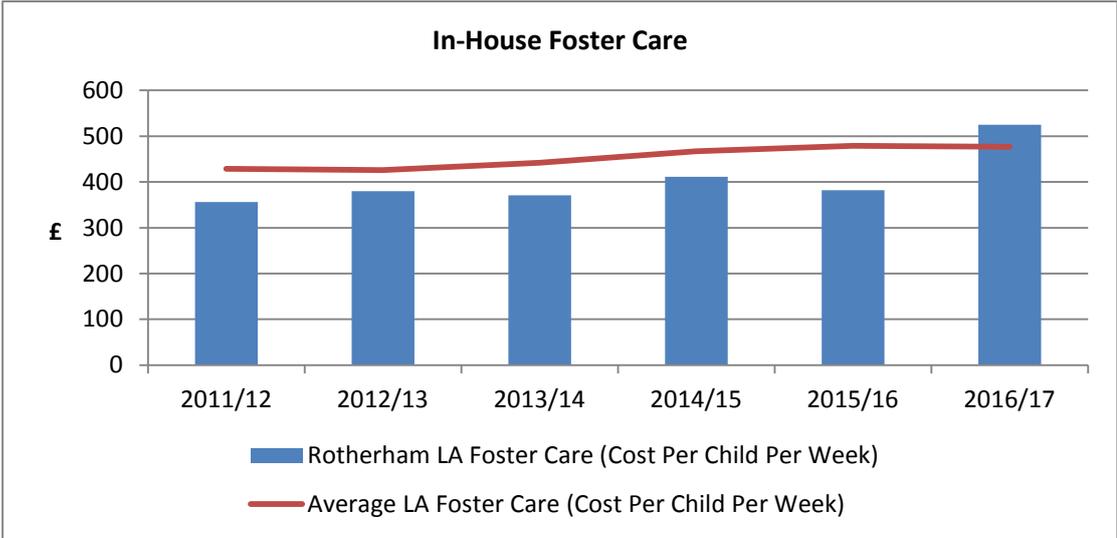
Composition Placements			
	No.	%	Avg
LA Homes	0	na	3%
Other Homes	42	10%	9%
In-House Foster Care	196	47%	56%
Other Foster Care	155	38%	27%
	347		

IN-HOUSE PROVISION

In-house Foster Care

- 3.10 During the course of 2015/16, despite recruitment, there was a net loss of 3 carers but this did not translate into a loss of placements as those who deregistered were not actively taking child placements. Placements increased from 167 to 178. In December 2016 the proportion of placements with local authority fostering accounted for 36% of the placement market (178 placements), a proportion that has remained consistent over the past 3 years but needs to increase. The target increase for 2016/17 is a net increase of 15 placements of in-house foster carers.
- 3.11 The In-House Fostering Service experienced an increase in the number of placement disruptions in 2015/16 which is indicative of a lack of placement choice to match against the child's needs. The Council will not meet its sufficiency of placement provision for 'Looked After Children' without attracting additional carers to foster for Rotherham and ensuring existing Foster Carers are retained and developed.

- 3.12 In response to the current sufficiency position work has begun to transform the local authority’s in-house fostering agency ‘offer’ including a revised scheme of payments and support provision.
- 3.13 Rotherham, in common with local authorities across the Yorkshire and Humber region, has a shortage of all foster care placements, in particular in relation to placement sufficiency for:
 - Older children - adolescents aged 12+
 - Larger sibling groups
 - Children and young people described as having ‘challenging behaviour’
- 3.14 It is anticipated that some existing Rotherham foster households will be able to increase the number of children they care for and provide an opportunity to increase placements.
- 3.15 Rotherham Fostering Service have 7 Foster Plus carers who provide support to children and young people described as having ‘challenging behaviour’. Three of the Foster Plus carers provide emergency placements for those children placed out of hours. Rotherham also has 4 foster carers who specialise in caring for children at risk of or subject to child sexual exploitation.
- 3.16 In previous benchmarking reports Rotherham has been consistently below the average weekly cost per child for in-house foster care. From 2016-17 this position changes following an improved payment scheme introduced in October 2016.



- 3.17 Recruitment of in-house foster carers will be a key element of the Sufficiency Strategy and the Directorate financial sustainability plans. Whilst an improved offer has increased costs increasing the numbers of in-house foster carers will help to reduce the reliance on more expensive independent fostering placements. The current gross unit cost for in-house provision is £525 per child per week.
- 3.18 The provision of high-quality training of foster carers is a key issue to support them to care for Rotherham children to upskill carers to improve the prospect of placement stability. This includes intensive and ongoing work on attachment, trauma, resilience, behaviour management as well as education.

In-house Residential Care

- 3.19 In-house support at Liberty House provides planned short break overnight respite care seven days a week for up to eight children, aged between 8 to 18 years, of either

gender who have physical or sensory disabilities, complex health needs and challenging behaviour as a result of their disability. The provision was rated outstanding by Ofsted in November 2016.

INDEPENDENT SECTOR PROVISION

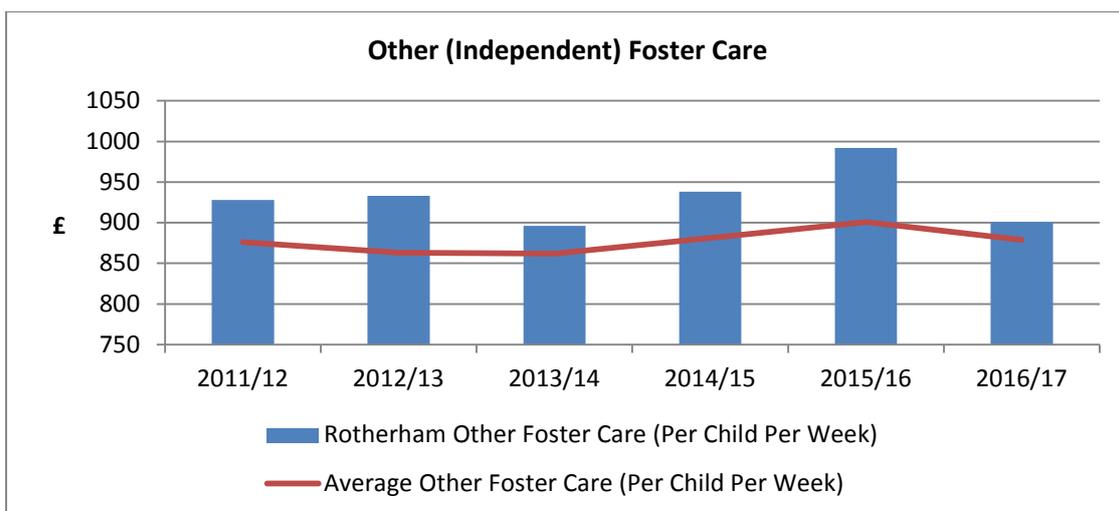
Independent Fostering Agencies

- 3.20 Rotherham has commissioned framework arrangements for standard independent fostering provision from April 2016 until March 2019 with an option to extend for a further year. The framework consists of 19 providers and according to data submitted within their tender submissions these agencies had 391 fostering households within South Yorkshire, of which 62 were within Rotherham.
- 3.21 The establishment of the Rotherham Fostering Framework in April 2016 forms part of the sufficiency offer and a recent early evaluation of the impact of the Framework has deemed that it has provided additional and responsive capacity.
- 3.22 The number of IFA placements the council has used has increased over the last 3 years and with it the use of those outside of Rotherham's boundaries (table 9 refers):

Table 15 – Numbers of IFA Placements by type

Placement Type	2013/14		2014/15		2015/16	
	Admission	Discharge	Admission	Discharge	Admission	Discharge
Standard	18	89	17	90	26	118
Enhanced / Complex	8	38	7	53	9	54
Solo / Specialist	0	14	0	18	1	25
Parent & Child	1	4	0	1	1	4

- 3.23 IFA's will continue to be an important element in providing the right placement sufficiency. However, the average cost of an IFA placement is higher than in-house provision. The average current gross unit cost for independent foster care provision is £901 per child per week. This varies based on the needs of the child between £600 per week for a standard placement for a child under 5 to £1500 per week for a parent and child placement. The total annual budget for 2016/17 is £5.07m per annum.



- 3.24 Recent benchmarking reports have shown Rotherham to have a higher than average cost per child for independent foster placements. Although Rotherham has a

downward trend in IFA costs in line with other authorities our average cost per child is slightly higher than the average.

- 3.25 IFA's can provide stable long term placements for some young people in care. At December 2016, 33.5% of Rotherham children (59 of 176) have been in the same IFA placement for longer than 2 years.
- 3.26 Placement stability is key to good outcomes being achieved with every change of placement and school having the potential to impact on grades. However, between February and July 2016 four in-house placements came to an unplanned end where 18 IFA placements were similarly disrupted. It could be argued that this is a result of the fact that our older and more challenging looked after young people are more likely to be placed within the IFAs.

Independent Residential

- 3.27 There has been an increase in the use of independent residential provision over the last 3 years. In respect of Out of Authority residential placements the financial impact is significant with placements costing an average of £3,712 per week. The budget for residential placements in 2016/17 is £6.958m.
- 3.28 Rotherham is a member of the White Rose Residential Framework; a collaborative framework set up by the nine South and West Yorkshire Authorities and since joined by York, Hull and North East Lincolnshire. The framework aims to secure high quality independent residential care for young people and to meet local demand for LAC. The framework was developed to ensure capacity to cope with fluctuations in demand across participating councils and has created a tier system of tried and tested providers.
- 3.29 The framework supports regional contract management and quality assurance which minimises costs to the participating member authorities and provides an effective interface with all independent providers. The current framework agreement originally ran to July 2015 and the option to extend until July 2017 has been taken up with a replacement framework currently in development.
- 3.30 The White Rose Residential Framework has provided stable placement costs (no price increases were approved across the framework until the introduction of the Living Wage), which were less than the Authority were paying prior to joining. It gives access to provision from 42 different providers all being consistently quality assured to the same standards with that QA work shared across participating authorities.

CARE LEAVERS ACCOMMODATION AND SUPPORT

- 3.31 At the end of December 2016 the leaving care service was being accessed by 223 young people. During September 140 (63%) of young people accessing the service were receiving a range of support in their accommodation from daily to weekly contact. Of these 90 (40%) were under 18 years and 60% over. The gender split for Care Leavers is 49% female and 51% male.
- 3.32 Care leavers are actively encouraged to remain looked after until they are 18 where this is appropriate, and supported to remain in their placement post 18 under the 'Staying Put' initiative. 11% of care Leavers aged 18+ are in Staying Put Arrangements. The 'Staying Put' Policy is being embedded but requires further promotion with foster carers, young people and social care staff.
- 3.33 Within the annual return to the DFE (903 data) 97% of our care leavers are in suitable accommodation (unsuitable accommodation is defined as custody; homelessness

(including sofa surfing); bed and breakfast). However, the quality of that accommodation varies and we believe that too many young people are living beyond the borough's boundaries in relatively expensive supported accommodation provided by the private sector.

- 3.34 Planning is underway to review the quality and cost of our spot purchased supported accommodation with a view to re-directing resources to enable young people to live within the borough, particularly for those who will take longer to be equipped to manage the responsibilities of a tenancy in their own right. In addition, the children's commissioning team will be taking responsibility for identifying these placements from early 2017 which will bring increased rigour when purchasing these services.
- 3.35 The leaving care service (in-house) operates from a dedicated support hub in Rotherham town centre which was developed in response to young people's wishes. Personal advisors and other team members are available at the hub during the week and offer a duty service, drop-in facility and 1:1 appointments.
- 3.36 The service also has an in-house supported living facility (Hollowgate) in the town centre providing nine flats for semi-independent living plus a resource for staff to meet with young people. The provision helps them make a positive transition into adulthood. Young people housed at Hollowgate report that the service they are receiving is improved, supportive and appropriate. A further facility providing seven bedsits near the town centre was decommissioned earlier in 2016.
- 3.37 Hollowgate provides 10 young people with floating support living in dispersed properties provided by the Council's Housing Service (request data of numbers from Mick). In addition they offer continued support to young people who have moved on from Hollowgate through access to 3 properties shared by 6 young people. In addition to this and in response to identified need 2 newly built 2 bedroom properties will be allocated to care leavers as preparation for applying for a social housing tenancy, this is expected to be available from late 2017.
- 3.38 Work is needed to ensure that referrals for accommodation and support for young people is co-ordinated and that accommodation identified for young people is quality assured and consistent and able to appropriately meet the needs of young people referred to them and provide good outcomes for care leavers.
- 3.39 Relationships with the Council's Housing Service are positive. Young people are supported in their own tenancies/dispersed tenancies and supported accommodation to appropriately manage their homes and finances and how to keep themselves safe within their home.
- 3.40 During 2016 a Transitions Project has focused on effective transitioning young people into their adulthood including care leavers. A collaboration across Directorates and with partners (Transitions Project) is working with children from a younger age to prepare them for adulthood and is establishing better links with Adult Services to create pathways to identify any ongoing needs and support as they leave care.

ADDITIONAL SUPPORT SERVICES FOR LOOKED AFTER CHILDREN

Social, Emotional and Mental Health Support

- 3.41 The main increase in presenting need for young people requiring an Education, Health and Care (EHC) Assessment and Plan is Social Emotional and Mental Health needs (SEMH) only some of whom are not Looked After. This will be described in

more detail in the SEND sufficiency strategy but an outline of provision is described here particularly as it links to the support around foster care placements.

- 3.42 The current support for SEMH in Rotherham is provided in-house by The Looked After and Adopted Children's Therapeutic Team (LAACTT) and Rotherham Doncaster and South Humber NHS Foundation Trust – CAMHS.

Rotherham's Therapeutic Team (LAACTT)

- 3.43 The Looked After and Adopted Children's Therapeutic Team offer advice, training and intervention to parents or carers and professionals working with looked after and adopted children to support the emotional wellbeing of the children and young people in their care. Demand for services has been high and there are capacity issues.

Rotherham Doncaster and South Humber NHS Foundation Trust (RDASH) - CAMHS

- 3.44 RDASH CAMHS is the mental health treatment service in Rotherham. They offer a variety of therapeutic interventions, such as family systemic therapy, art psychotherapy, cognitive behavioural therapy, psychoanalytical therapy, and solution focused therapy, play work and many other short and long term therapies.
- 3.45 Some of the issues that they help children/young people manage include anxiety disorders, severe behavioural issues, chronic fatigue/somatisation disorder, conduct disorder, eating disorders, gender identity disorder, mood disorder or depression, obsessive compulsive disorder, post-traumatic stress disorder, psychosis or suspected psychosis, self-harming behaviours, suspected attention deficit hyperactive disorder (ADHD), and suspected autism spectrum conditions (ASC).
- 3.46 RDASH CAMHS have, from 1st November 2016, implemented a process for the prioritisation of Looked After Children and Care Leavers for mental health treatment, which is as follows:
- 3.47 Following a referral for a looked after child, the assessment will be undertaken within the same timescales as an urgent referral i.e. within 24 hours. The outcome of the assessment and risks will determine the appropriate course of action which range from advice to children and carers for further managing the presenting situation, to intensive support to the young person and carer within 7 days of the initial assessment, to specialist therapeutic intervention for identified mental health problems prioritised for LAC.
- 3.48 In response to Rotherham's sufficiency challenge and the CAMHS Transformation Plan, there has been an increasing focus on promoting resilience, prevention and early intervention in this area. This has included:
- Initial work with schools in Rotherham on Social, Emotional and Mental Health (SEMH) approaches, which is specifically targeting the most vulnerable children in schools
 - Five secondary schools and one special school participating in the 'whole school approach to Emotional Wellbeing and Mental Health' pilot project.
 - A whole-service reconfiguration of the RDASH CAMHS service has been undertaken and as part of this reconfiguration, a locality service has been established, whereby locality workers interface and provide support and advice to locality Social Care teams, GP Practice localities and locality Early Help teams. In addition, the locality workers are also working closely with schools and providing support and advice to staff and direct contact with pupils as necessary.

- Rotherham's My Mind Matters website: www.mymindmatters.org.uk website for all children, young people, parents, carers and practitioners provides information on how to get help, what help there is and how to look after mental health and emotional wellbeing.

SUMMARY

3.49 The key challenges that we face in achieving sufficiency are as follows:

- There are too many looked after children in the care of Rotherham MBC. Historically poorly performing services have left a legacy of more complex need as well as a legacy of rising numbers.
- There is a need to ensure that the Local Authority has provision which enables it to manage demand and that preventative provision and early help is in place to minimise the number of children coming into care. For some children, for whom the right decision has been to become looked after, there is insufficient timely access to appropriate specialist support.
- The number of those children in care placed out of borough is too high, closing gaps in the provision of sufficient local placement accommodation, preferably in a family setting, is required so children and young people in care and care leavers are able to continue to live within or close to the Borough.
- There is a need to work with key providers of specialist provision to help us to meet a range of needs and sufficiency of placement provision. More needs to be done to ensure the efficient and effective operation of our local market. Delivering much better value in terms of quality, price, unit costs and outcomes is essential across all provision.

4. Our Intended Response

- 4.1 In response to the challenges we face, we are committed to four clear intentions which inform our commissioning:
- a. For those children and young people on the edge of care, we will ensure that they are supported to stay with their parents or extended family and only come into care where it is absolutely necessary and justified in the best interests of the child or young person, and that all support options and strategies have been exhausted.
 - b. For young children who come into care we will work to return to their birth or extended families, as a best outcome for them, when it is safe to do so. Where it is not, we will seek permanency for them through adoption or special guardianship orders wherever possible.
 - c. For children who remain in our care we will ensure that we have good quality placement in a family setting or suitable residential provision in or close to Rotherham.
 - d. For young people leaving care we will actively encourage them to remain looked after until they are 18 where this is appropriate. We will help them to 'stay put' in their placement after they are 18. Where this is not possible or appropriate we will ensure that we have sufficient accommodation locally to meet their needs including support to enable smooth transition to independent living.
- 4.2 We intend to facilitate a reduction in the number of children and young people looked after in Rotherham by investing in the right support at the right time for children and families across early help and on the edge of care; children's social care and education settings to develop better, more affordable placement choices. It is our intention to develop a range of preventative and support services/ interventions. There are five strands contained within the LAC strategy 2016-2019, which are as follows:
- Supporting children and young people on the 'edge of care' to stay at home
 - Supporting permanency through Adoption and special guardianship
 - Placement commissioning and development
 - Support around the placement for child/young person and carer (including SEMH needs)
 - Returning children to their birth/extended families when safe to do so

Supporting children and young people on the 'edge of care'

- 4.4 We will develop enhanced 'Edge of Care' interventions within Early Help Services to support children and families where there is an immediate risk of family breakdown or to respond to families in crisis. This will ensure that the opportunity to intervene earlier when problems begin to emerge is enhanced by a robust continuum of evidence based practice across the children's workforce.
- a. Establishing an '**Edge of Care**' Team – by investing in the recruitment and development of a dedicated team of practitioners offering a range of services to support children to remain living safely with their immediate or extended families they will be given the best chance to thrive without long-term reliance on services.

- b. Continue **Multi-Systemic Therapy (MST)** – an intensive programme that works within the whole ecology of a young person including parents, family, the community and school at the same time in a solution-focused, strengths-based approach to empower the family to take responsibility for solving problems. In the longer term this strategy will also push demand for placements down from costly high tier services to less expensive early interventions.
- c. Establish **Family Group Conferencing (FGC)** – FGC is an effective tool for identifying and engaging with wider family members and friends at an early stage of concern regarding a child. It is a child-centred, family-led decision making and planning process which develops existing strengths to build safety for children. Targeting services at children and young people at an earlier stage of their journey is likely to reduce the number of children subject to a child protection plan and consequently reduce the numbers that escalate to PLO care proceedings and ultimately entering care.
- d. Implement the **Pause Project** – It has been determined that over a 7 year period 29% of care applications in the UK involved women who had previously had a child removed from their care and this often related to trans-generational patterns of neglect and/or abuse. Repeat removal of a child or children is a particular issue in Rotherham. The Pause Project aims to engage with mothers on a one to one basis to provide intensive therapeutic activities and practical support to encourage them to think of themselves as individuals, often for the first time in their lives. The programme gives women the chance to ‘pause’ and take control of their lives, breaking the destructive cycle that causes them and their children deep trauma. To support this process they are encouraged to take Long Acting Reversible Contraception (LARC) during the intervention to create the space to reflect, learn and aspire.

Returning children to their birth/extended families

- 4.5 We will continue the work to consider and formally assess young people in terms of the viability of them returning to the care of their birth/extended families. This is a partnership arrangement with the NSPCC (**Taking Care Project**) through which young people will be considered and formally assessed in respect of the viability of them returning to the care of their birth/extended families over a two year period.
- 4.6 This programme is evidence based and not only strengthens the assessment and decision making process when deciding whether a child should return home but also informs how best to support children and families throughout the reunification process and after they have returned home. The LAC social workers have been fully trained in the process so that the intervention should become embedded practice and self-supporting. This in turn should reduce the drift that is a factor within the current care planning processes in the LAC service.

Supporting permanency through Adoption and special guardianship.

- 4.7 Rotherham has a commitment to offer the best opportunity for permanence for Looked After Children by ensuring that they are looked after by family, friends or established foster care placements, wherever possible and appropriate for the child.
- 4.8 Our intention, in line with DfE direction to **regionalise adoption services**, is to enter a joint venture along with Barnsley, Sheffield, Doncaster MBC and Doncaster Children’s Services Trust by a planned implementation date of June 2017. This creation of a South Yorkshire Adoption Agency will enable the pooling of resources in respect of assessments and availability of adoptive placements.

- 4.9 Special Guardianship Orders (SGO) offer the opportunity for family, friends or existing foster carers to give a permanent home to the child without the financial loss normally associated with adoption but without Social Care or Independent Reviewing Officer input associated with foster care offer permanency within a family setting therefore improving the opportunities for the best outcomes for the child. Special Guardianship Orders (SGO) Special Guardianship offers financial packages in line with the specific needs of the child and continued support through therapeutic services. The intention is to increase the number of SGO's from 2017/18.

Placement commissioning and development

- 4.10 LAC are a particularly vulnerable group and are at high risk of social exclusion, health inequalities, inequalities in educational attainment and wider negative outcomes. We acknowledge that it is critical to ensure we place LAC in the most appropriate placement available and that we have a market available to meet those needs. Ensuring sufficiency of all placement types in and close to Rotherham is important across foster care and residential provision.
- 4.12 It is our intention that wherever possible, children and young people should be looked after in Rotherham in a family setting, placed with foster carers and in-house foster carers where these are available. In-house foster carers are able to offer placements at a lower cost than Independent Foster Agency placements. Reducing the overall costs of providing service to children and young people in care enables us to invest more in services to children and young people who are on the edge of care, and in preventative services.
- 4.13 The intention is to increase the number of Foster Carers in the local authority, but importantly, increasing this supply of capacity sufficiently to ensure more placement choice when matching children with fostering families. The initial aim is to increase the proportion of placements with local authority fostering from around 36% as of December 2016 to a forecast 67% in March 2021; an additional net 15 placements per year.
- 4.14 A revised **Foster Carer Payment Scheme along with appropriate support and development** was approved for implementation by the Children's Commissioner. The scheme was co-produced in partnership with the local foster carer consultation group. By investing in a well-trained and supported in-house foster care provision, the aim is to attract additional foster carers to Rotherham, especially for adolescents and large sibling groups, and to improve the retention and development of existing experienced carers. In addition, Rotherham will adopt one of the key practice principles set out in 'Putting Children First' so that foster carers will be actively involved in decisions about the children they are looking after. A target of 15 or more placements being secured per annum between 2016-19.
- 4.15 Independent Foster Agencies will continue to be an important provider in ensuring the sufficiency of accommodation for looked after children. Whilst in overall terms our intention is to reduce our current reliance on them, there will be a focus on working with them develop a sufficient local provision and to secure better value in terms of quality, price and outcomes. IFA's will continue to provide the Council with an important viable alternative to out of authority residential provision.
- 4.16 For some children and young people a residential placement will be the right option. We will continue to ensure sufficiency of residential placement whilst looking to reduce out of borough residential placements gradually over time so as not to remove a child from settled and successful placement.

Support around the child and carer

- 4.17 We are developing a cohesive interagency LAC provision between RDaSH CAMHS and RMBC Looked After and Adopted Children's Therapeutic Team. The two services continue to work closely together to develop collaborative approaches to best support the needs of this client group. The longer term approach is described at 5.17.
- 4.18 There has been a pathway and a clear threshold criterion established to identify when children and young people require support from LACCST or CAMHS. The emphasis of this provision focuses on keeping continuity of care of the child or young person with familiar clinician, with the aim of avoiding or minimising unnecessary transitions between the services.
- 4.19 As part of this overall offer the intention is to expand the **Rotherham Therapeutic Team (RTT)** commissioning clinicians to provide access to good quality and responsive wrap around therapeutic support to address the child's specific emotional and mental well-being needs. Targeted at in-house foster care and SGO's, the support to the child and carer will reduce the likelihood of a placement breakdown which often results in the use of more expensive placement provision and will lead to healthier emotional wellbeing and better outcomes. Pathways to CAMHS will be clear as will consideration of clinical risk and governance.
- 4.20 This support will be based on the 'team around the child' model where the carer and professionals will be supported to develop their skills, resilience and knowledge to respond in a confident, competent and consistent way to emerging issues by preventing escalation and disruption. It is forecast that the team could support up to 30 looked after children and their carers per year and contribute to reducing the number of placement disruptions. This stability in turn should support LAC to achieve better outcomes including in respect of their educational attainment.

SOCIAL, EMOTIONAL AND MENTAL HEALTH

CAMHS Transformation

- 4.21 The Future in Mind Report (FiM) was published in May 2015 and sets out a clear national ambition to transform the design and delivery of a local offer of services for children and young people with mental health needs.
- 4.22 Future in Mind describes an integrated whole system approach to driving further improvements in children and young people's mental health outcomes and is structured around 5 key themes:-
- Promoting resilience, prevention and early intervention.
 - Improving access to effective support – a system without tiers.
 - Care for the most vulnerable.
 - Accountability and transparency.
 - Developing the workforce.
- 4.23 In response to Future in Mind, Rotherham Clinical Commissioning Group jointly produced with Rotherham MBC and partners, the CAMHS Transformation Plan 2015 to 2019, which was a requirement for the release of the extra funding from NHS England.

Promoting resilience, prevention and early intervention.

- 4.24 There will be a continued strong focus on promoting resilience, prevention and early intervention within the CAMHS Transformation Plan. This work will impact positively on Looked After Children, as it will enhance information, self-help approaches and

provide support that will prevent escalation into mental health treatment services. The key developments are as follows:

- Rotherham's primary and secondary schools have established SEMH partnerships. Schools will work together collaboratively and in partnership with each other, Early Help and CAMHS to achieve maximum impact and better outcomes for this vulnerable group.
- Following the implementation of the locality service the RDaSH CAMHS locality workers interface and provide support and advice to locality Social Care teams, GP Practice localities and locality Early Help teams, and work closely with schools.
- Rotherham MBC Public Health is leading on the development of a Rotherham Public Mental Health Strategy, which will include early intervention and prevention approaches for children and young people.

4.25 Over time it is intended that the local authority will incrementally decommission one of its pupil referral units and increasingly enable partnerships of schools to develop and commission more local, alternative solutions. Early indications are that this is beginning to reduce the number of fixed and permanent exclusions from secondary schools.

Improving access to effective support – a system without tiers

4.26 When children and young people do need support, we are focussing on an alternative to the 'Tiered' system and a 'one stop shop' model of provision. There are two local priority schemes which relate to this area and are as follows:

- We are developing a Single Point of Access (SPA) for CAMHS services. The SPA is currently operational within the CAMHS structure, but we are combining this with the RMBC Early Help Triage service. The CAMHS SPA will co-locate with the Early Help Triage service by mid-January 2017 and referrals will be directed to the most appropriate service as early as possible in the process.
- The Single Point of Access for mental health and early help referrals will ensure improved and targeted access to appropriate services. The main KPI associated with this scheme will be that 95% of referrals received by RDaSH CAMHS will either be accepted by the service or signposted to an appropriate service.

CARE LEAVERS ACCOMMODATION AND SUPPORT

4.27 We intend to reduce the number of young people placed within other local authorities. Permanent social housing tenancies are rarely available in other authorities so wherever possible and where it meets the longer term interests of our young people, we want them to be prepared for living independently within the community they are from and will inevitably return to.

4.28 Currently, Supporting People (SP) provides significant funding to our in-house provision (Hollowgate) and to 2 main voluntary sector providers of supported accommodation to 16-25 year olds. Hollowgate's funding will reduce by almost 50% over the next 2 years, potentially reducing capacity by the same proportion. The other 2 main providers of supported accommodation to 16-25 year olds will see a reduction of funded places from 68 beds to 28. Emergency and short term beds (12 in total) are not affected. A tender for the new funding will be released in 2017 which will accommodate the general population of 16-25 year olds including care leavers.

- 4.29 This presents a significant challenge. Over the past year, approximately 39 16/17 year olds were provided with accommodation through SP, mainly with 2 providers: Action and Rush House. This data needs refining to determine how many of these young people became or should have become looked after as a consequence of their homelessness. We will be clearer about how many young people will require accommodation provided by children's services if places through SP are no longer available. It will also determine whether a leaving care service should be provided at age 18, including the need for children's and young people's services to ensure that they continue to live in suitable accommodation after they have left the SP funded accommodation.
- 4.30 Given that the unit cost for support is c. £170 (rent is covered by HB), a place with an SP funded provider within the borough is generally preferable to a spot purchased private sector provider at a unit cost of £400 - £1,200+. Initial discussions with the 2 main providers (Action and Rush House) confirm that they would be open to being commissioned by Children and Young People's Services at the same rate and unit cost as current SP funding.
- 4.31 As corporate parents we understand that our aspirations for the future of young people leaving our care continues well into their adulthood. Transition pathways will offer continuity of support up to the age of 25, but we appreciate that we need to base our services on a whole life approach supporting them to stay healthy and independent at home and to deliver person centred care and support. We will be looking to build on strengths whilst they are in our care to develop their resilience, understanding that some vulnerabilities may be carried into adult life and as good parents we need to anticipate potential needs.

5. Management of the Market

Commissioning Approach

- 5.1 Our aims over the period of this Strategy to address our key sufficiency challenges are underpinned by the following commitments:
- To invest in the right support at the right time for families
 - To enhance early help and preventative action
 - To support children and families so that fewer children come into care in the first place
 - To develop partnership working based on an asset based life journey approach
 - To further develop the in-house foster care service
 - To close the gaps in the provision of sufficient local placement accommodation so children and young people in care and care leavers are able to continue to live within or close to the Borough
 - To close gaps in support to children and young people once they are in care
 - To continuously improve the quality of care and support by robust market management and a 'one market' approach
- 5.2 The management of the market is fundamental in relation to how we will deal with and exceed our sufficiency challenge in Rotherham. A 'one market' approach will be our driver to ensure that children and young people are empowered to improve their life chances and are recognised for the skills and talents they have rather than the needs they present.
- 5.3 This asset based approach to commissioning will embrace both the in-house services and the external market to ensure we can offer choice, quality and value for money services in Rotherham, recognising that all top quality services have their place within one market. The benefits to the pooling and rationalisation of services in this way bring greater economies of scale, greater transparency and accountability and the ability to respond rapidly to provider failure.
- 5.4 Diversity brings choice, competition and innovation, and particularly by working with the voluntary and community sector, local knowledge and connections, trust and a relationship based approach. Relationships are at the heart of high quality commissioning and will be a key priority as the 'one market' in Rotherham is shaped and embedded.
- 5.5 The collection and effective use of accurate data as part of our commissioning process will ensure the 'one market' approach is informed, robust and responsive to changing market forces, cost and need. We will base our commissioning intentions and decisions on three data sources:
- Population Data- We will build our population data to support the fulfilment of our Sufficiency Duty and will allow us to predict the characteristics of the population, the duration of each individual child's case, the rate of the referrals, the size of the population and the level and cost of services required for each child. We will as a result develop a more person-centric approach to the utilisation of data
 - Costs Data - We will develop robust cost data across internal and external services based on a child's journey to ensure we are clear about the costs of commissioned services and to inform our developing approach to personal budgets.
 - Outcomes Data - We will collate and analyse data about the outcomes achieved by children and young people in order to measure and monitor

performance of commissioned services. This move to outcome based commissioning will mean we pay providers based on social outcomes rather than broader output measures. This will involve a shift of control to providers to undertake support and activities which they think will promote positive outcomes. This shift will foster innovation as providers find new ways of delivering high quality services for children and young people in Rotherham.

- 5.6 The commissioning of services based on a 'one market' approach subsequently will be underpinned by robust local data. In addition to effective use of data commissioning will further embed the Quality Benchmarking Assessment Framework which is used as a tool to improve the monitoring of the quality of the services provided. This tool has also been designed to help us to work together to improve the services for Children and Young People in Rotherham and to build good working relationships with providers which in turn will provide a robust line of sight across the child's journey through transition to adulthood. This benchmarking tool will enable self-assessment and support improvement.
- 5.7 The Quality Assessment Framework informs whole market areas for improvement which are in turn collaboratively addressed by Service Improvement Partnerships with providers with a particular focus on Fostering and Residential Care. The Service Improvement Partnerships are excellent examples of a collaborative approach to the improvement of services based on evidenced monitoring and review, enabling the sharing of good practice, workspace and learning and development opportunities.

INDEPENDENT RESIDENTIAL PROVISION

Collaborative Regional Working

- 5.8 Rotherham Council are members of the White Rose consortium, a collaborative framework which now involves all authorities across Yorkshire and Lincolnshire (with the exception of North Yorkshire). Rotherham participates in their frameworks for the provision of independent residential placements, Post 16 placements and SEN placements. There is an intention to continue this regional collaboration to strengthen market options and choice.

Strategic Partnerships

- 5.9 Residential placement numbers are expected to be small and needs diverse so subsequently the intention is not to provide in-house residential care. A Strategic commissioning review determined this position which was further compounded by concerns in relation to quality and the ability to sustain improvement to the standards we now expect. We will develop strategic partnerships with independent providers to ensure that Looked After Children can be cared for in Rotherham to mitigate against high risk of social exclusion, health inequalities, inequalities in educational attainment and wider negative outcomes.

6. Voice of the Child

- 6.1 The views, opinions and feedback of looked after children are sought regularly across services. Children and young people are given the opportunity to provide their views before their annual reviews are held LAC Reviews; Independent Visitors and Advocates are available to help with concerns of Looked After Children and care leavers ensuring that their views and feelings are heard. Views are also captured through lifestyle surveys and learning is taken from complaints and compliments.
- 6.2 The Council places young people at the heart of inspecting services delivered to children and young people through our highly commended 'Young Inspectors' scheme which was established to make sure services are meeting quality standards and that the voices of children and young people are listened to and acted upon. Young people who are in care or leaving care (11 to 18 years old) also hold regular meetings of the LAC Council to have their say about the things that affect them and to work together to influence positive decisions to improve the lives of young people living in care in Rotherham.
- 6.3 The balance of the listening and action is on an individual child level. Our next phase is to ensure that views, opinions and feedback are more systematically collected, that we capture intelligence that can be used to influence the commissioning of services, and that we encourage participation of children and young people in their design and continuous improvement.
- 6.4 The intention is that we redistribute power within our social care system by connecting life experiences to strategy. We will co-produce and co-design strategy and services with children and young people. We will work to gain the children and young people's trust and take the time to create safe and stimulating spaces to enable their voices to be heard.
- 6.5 The approach we will take to co-producing with our stakeholders is two-fold:
- Participation in service design/ redesign and
 - Hearing their voice in the everyday experience of the service
- 6.6 For all future commissioning it is imperative to work with all stakeholders throughout the design process in order to develop the right services in the right way.
- 6.7 What we will do throughout the life of the service is gather qualitative and quantitative data around our stakeholders experiences using this as a tool for continuous improvement. We will use this data to clearly define any problems or issues that emerge and will seek solutions. The intelligence we gather will be systematically used to inform future commissioning.
- 6.8 Effective commissioning is critical to successful delivery of the sufficiency strategy and as part of that the participation and engagement of children and young people in co-production, design and the continuous improvement of value for money services

7. Impact of this Strategy

- 7.1 This document has looked at Rotherham and the challenges faced in meeting our sufficiency duty. Strategic priorities have been identified and actions and interventions proposed, that when implemented will mean we are better placed to meet our Sufficiency Challenge and deliver a financially sustainable Children's Services. The outcome of the strategy will be to safely and appropriately reduce the number of young people requiring care by the local authority.
- 7.2 Our intention is to develop a range of preventative and support services/interventions, some of which have required investment to facilitate the reduction in numbers and deliver the necessary cost reductions and improved outcomes.
- Supporting children and young people on the 'edge of care' to stay at home
 - Returning children to their birth/extended families when safe to do so
 - Supporting permanency through Adoption and special guardianship
 - Placement commissioning and development
 - Support around the placement to meet the individual needs of the child/young person and carer (including SEMH needs)
- 7.3 By 2021 we expect that the interventions will safely reducing the number of LAC to around 399 (closer to the statistical neighbour average of 64 per 10,000 population i.e. 360). The planned reduction in the number of looked after children is expected to result in a net reduction of 61 placements; 4 in 2017/18; 13 in 2018/19; 22 in 2019/20; and 22 in 2020/21.
- 7.4 We will track the effectiveness of the interventions and investments in contributing to safely and appropriately reducing the number of children and young people requiring care by 61 placements and the cost reductions. We will establish a number of key measures which will help us to understand whether we are making a difference amongst which will be:
- The Number and rate of LAC
 - Comparison with statistical neighbours and England average (rate per 10,000)
 - Reduction in overall placements costs
 - Reduction of placement disruption to at or below national average.
 - Increase in placement stability and decrease placement disruption
 - Increased permanency – adoption and special guardianship
 - A changed composition of placements over time to increase the share of in-house foster care provision, have sufficient numbers of independent foster agencies and residential placement provision in the local area.
- 7.5 Throughout the life of this document we will continue to work with our children in care, care leavers and key partners to develop our plans and priorities. We believe it is important that this Strategy remains a 'live' document. The strategy itself will be updated annually but will have a key mid-term review in 2018 to ensure that the Strategy remains as relevant in 2020 as it is now.
- 7.6 This strategy will be supported by a transformational commissioning action plan. There will be quarterly reviews and oversight from our Corporate Parenting Panel. It will be owned and implemented by all professionals and partner organisations working with children, young people, their parents and carers.

7.7 Regular reports and monitoring of progress will be made to the CYPs Directorate Leadership Team, the Children's Improvement Board, the RCSB and to our Elected Members and Commissioners to ensure the following:

- A Quarterly Report on the progress of our performance measures and analysis of our progress
- Implementation of Sufficiency Strategy Action Plan
- A robust Sufficiency Performance Dashboard and quality assurance system reporting on how much we do, how well we do it and what difference it makes in terms of whether anyone is better off.
- An Annual Report which reflects evidenced outcomes
- An annual consultation with Children in Care to review progress and discuss key issues and aspirations for improvement