Reform of Children's Residential Care

Report of the Expert Group on the Quality of children's homes, presented to DfE Ministers – December 2012

19 December 2012



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1. Introduction



The Group's remit

3 July Ministerial commitment

- An expert working group with a broad remit to review the quality of provision being delivered within children's homes, including the qualifications of the workforce. It will:
 - review questions relating to the location of homes and models of ownership and commissioning practice;
 - consider how homes can offer a more therapeutic environment to help children overcome their difficulties and what staff development is needed to manage children's behaviour, including when it is appropriate to use restraint;
 - consider the effectiveness of current arrangements to drive improvement across the sector.
- "The result will be a clear action plan to drive up quality with recommendations on how to improve significantly the qualifications and skills of those working in children's homes. The group will have a remit to complete its work in December." (Letters from Tim Loughton to Ann Coffey and Sue Berelowitz, 3 July 2012)
- This was alongside three other commitments: improving data on children who go missing from care; amending regulations to allow Ofsted to share the locations of children's homes with the police; and making proposals on out of area placements.



Context for reform (1)

- The Expert Group on Quality was established in July following the conclusion of the high profile Rochdale child sexual exploitation trial and reports from the Office of the Children's Commissioner (OCC) and the Joint All Party Parliamentary Group (APPG) Inquiry on, respectively, child sexual exploitation in gangs and groups and children who go missing from care.
- Flashpoints in the media were:
 - children being sent 'out of sight out of mind' (out of area placements)
 - the cost of placements in children's homes
 - the role of the private sector and venture capitalists
 - the failure to protect the most vulnerable children from harm e.g. sexual exploitation.
- In September 2010, Tim Loughton had launched DfE's support and improvement programme for children's homes. Key products from this were:
 - a Children's Homes Data Pack
 - revised regulations, guidance and National Minimum Standards (NMS) for children's homes, which came into force in April 2011
 - a newsletter for the sector
 - research commissioned on living in children's homes
 - learning sets for residential managers piloted



'Far from Home Initiative', a series of seminars to drive improvements in the commissioning of children's homes placements particularly between those Authorities who were placing large numbers of children outside their local authority area and those Authorities who were receiving large numbers of children placed from other areas. for Education

Context for reform (2)

- Other recent elements of the wider policy context are:
 - the Care Inquiry, due to report by spring 2013 a collaboration of specialist charities representing all care options for children, aiming to collect and explore the evidence on what actually works for children in care, in order to make recommendations to central and local government about how to succeed in helping them achieve long-term stability and security;
 - What is Care for? an inquiry launched by ADCS in October 2012 which will consider how to serve better the needs of young people in the care system, how to improve placement stability, and how to secure more permanent placements for children who are not adopted;
 - the recent report of the Education Select Committee Inquiry on Child Protection which drew attention to the needs of older children.
- If it is to be meaningful, the reform of children's residential care needs to take account of:
 - the wider context of children's care and in particular the foster care market;
 - the need to provide, for each individual child, <u>a continuum of care and support</u>. Put simply, this means tackling needs at the earliest possible stage (early intervention), ensuring that a child has the placement that is right for them at a particular point in time (and that may change), and looking at the entire 'journey' for the child (not only their outcomes while in care, but also their outcomes when leaving care).
- Therefore, the Quality Group has focused on children's residential care. It has explored children's
 residential care within the wider context of the care system as a whole, the rising pressures on
 children's social care, current financial constraints and the complex needs of older looked after
 children.
- This is a complex picture. To make a difference to children now and in the future, we need roposals which will have an impact in the short-medium term as well as in the longer term, and which continue to take account of the wider care system.

How the Quality Group worked

- The Group was DfE-chaired and had wide-ranging membership (see Annex 1);
- Seven Group meetings were held between 25 July and 13 December 2012;
- The Group worked alongside two other expert groups (*): one looking at data on children who go missing from care and a second looking at out of area placements (see Annex 2).
- The Group considered papers prepared by DfE officials with expert input together with:
 - evidence from 9 focus groups involving 145 individuals representing registered managers, care homes staff, social workers, Independent Reviewing Officers, commissioners, multi-agency staff, and children and young people currently in residential care;
 - input from visits to children's homes;
 - bilateral meetings with relevant organisations;
 - a commissioned updated economic analysis of the children's homes market completed in two stages: a literature review and telephone interviews followed by in-depth visits to 20 local authorities; and
 - other evidence and research provided by individual Group members.
- The Group's recommendations are therefore informed by research and evidence, including an understanding of current experience and practice.

(*) The findings and recommendations of the work on out of area placements have been incorporated within this report. Proposals on data



The big challenges

- There are very significant gaps in our knowledge and understanding of the children's residential care market, how it works, and why?
- The children's residential care system is highly fragmented;
- The system is expensive but do we know whether, where and how local authorities are getting value for money?
- There are insufficient levels of skill and qualification in the workforce;
- The complexity and severity of children's problems is, arguably, increasing;
- We don't know whether children are being placed in the placements that are right for them. Is residential care the 'end of the road' for too many children?
- We need a sharper focus on quality and driving improvement, supported by an inspection and regulation regime and effective sharing of good practice;
- Some important improvements and changes have been made but we need a greater scale of ambition, a stronger sense of urgency and pace and system-wide thinking (which may need to be radical longer term).



What we want to achieve

An improved system in which:

- children are safer and better cared for in residential care not disproportionately at risk of (e.g.) sexual exploitation;
- staff are more skilled and confident in caring for children, providing safe and nurturing environments, and managing challenging behaviour;
- placements are better planned, managed and monitored, match and meet children's needs better, are stable, and are close to home unless it is in the best interests of the child to be placed out of area;
- commissioning local authorities maintain effective relationships with authorities and homes in which they place children and remain genuinely accountable for care;
- the system functions more efficiently and secures better value for money;
- the system has a stronger focus on improvement and learning;
- the public has confidence.



2. The role of children's homes



The purpose and origins of children's homes

- When parents do not, or are unable to, look after their children properly the state has a duty to act in a child's best interests. It does this by:
 - finding family or friends who will take responsibility for the child;
 - making arrangements for the child to be fostered or adopted;
 - placing the child in a children's home.
- Children's homes in England have their origins in the Victorian era of philanthropy. Since then, there have been huge changes in the size, structure and purpose of children's homes, influenced by a range of factors, including:
 - antipathy to institutionalisation;
 - concerns about the stigma attached to children's homes;
 - child abuse scandals resulting in the closure of children's homes;
 - the largest charities withdrawing from direct care of children;
 - children's homes on prime sites for housing being sold off;
 - a growing independent (private and voluntary) children's homes sector;
 - local authorities reducing, or withdrawing from, direct provision.
- Children's homes fulfil a number of different purposes.

"There is no such thing as a typical children's home." (Outstanding Children's Homes, Ofsted, March 2011)



Definition of a children's home

- The legal definition of a children's home is an establishment which "provides care and accommodation wholly or mainly for children" (Section 1, Care Standards Act 2000).
- This is an extremely broad definition and will include a wide range of accommodation options, from residential special schools that are also registered as children's homes to single-placement children's homes.
- All children's homes must:
 - be registered by Ofsted before they are legally allowed to operate;
 - comply with the Children's Homes Regulations 2001 (amended in 2011), underpinned by National Minimum Standards;
 - have a Statement of Purpose which includes the aims and objectives of the home and the services that the home will provide to achieve these.



Comparison with provision in other countries

- In England and other English-speaking countries (USA, Australia, Canada) the child welfare system tends to focus more on child protection and minimising and responding to child abuse and neglect. There is a focus on ensuring that children experience stability in their lives, whether at home with relatives and friends, through adoption or through long-term foster care.
- In European countries such as Denmark, Germany and France, there tends to be a much stronger focus on prevention and family support. This is characterised by the care system operating more flexibly around the family, and much more work with the birth family, both before a child comes into care and during their time in care. In most Western European countries, there is considerably less emphasis on adoption.
- The European model gives a greater importance to the continuing roles and rights of birth parents and the decision to place children within a residential setting will more often be a shared decision with the family. Residential care is likely to be local, allowing the parents to visit which provides an opportunity for constructive work with the parents.
- Research which looked at the approaches of countries in Northern Europe found that there was a greater focus on social pedagogy as the underpinning system for training all staff. "The UK is unusual compared with continental Europe in not using social pedagogy as a framework for social policy for children living in residential care". (Berridge et al, 2011).
- In Scotland, a significant programme of children's residential care reform was launched in 2008. The Scottish government set up the National Residential Child Care Initiative to undertake a strategic review of residential child care services. This resulted in the requirement for all residential care staff to be registered with the Scottish Social Services Council, and the introduction of new minimum qualification requirements for children's home staff and managers.



Sources: University of Sussex (forthcoming 2013); Thomas Coram Research Unit, 2006, 2008, 2009; Centre for Excellence for Looked after Children in Scotland (CELCIS)



What do we know about children in children's homes?

- 4,890 looked after children were in children's homes at 31 March 2012.
- The duration of stay varies; the average length of stay is around six months.
- The profile of children living in children's homes (*) demonstrates the complexity of their needs:
 - they tend to have had more placements than children in foster care;
 - they tend to have significant emotional, social and behavioural difficulties;
 - more than a third are assessed as having special educational needs;
 - they are six times as likely to have mental health problems compared to other looked after children;
 - three quarters are reported to have been violent or aggressive in the past six months, with the same proportion reported to have put themselves at risk;
 - nearly half have suffered abuse or neglect and there is evidence that some young people may have experienced abuse or neglect which was unidentified prior to admission;
 - they are more likely to have low levels of educational attainment compared to their peers;
 - the vast majority are aged over 12 and around two-thirds are boys;
 - the average age of a child in a children's home is around 15.
- Some children prefer to live in a home because they actively reject foster care, for example out of loyalty to their own parents; other children will have had previous negative experiences of being fostered.



(*) Children's Homes in England Data Pack, DfE (March 2012); and D Berridge, N Biehal, L Henry (March 2012)



How do children's homes meet children's needs?

- Children's homes differ considerably in their focus, expertise, number of places, management and ownership (see also slide 21).
- The role of children's homes will vary depending on the provision the home offers and the needs of the individual children. Aspects that will be common to all homes include:
 - providing a safe and nurturing environment for children in their care;
 - managing relationships with and between children in the home;
 - ensuring that social care, education and health services provide the right support to enable each child to make progress;
 - providing each child with an appropriate level of emotional and behavioural support;
 - supporting each child's learning and building their confidence and aspirations to ensure a smooth transition to the next stage of their life.
- Decisions about care placements for children should be determined by each child's individual needs, so that the placement matches the needs of the child as well as possible.

Note: On 14 December 2012 the Policy Exchange published a report "A Better Start in Life: Long-term approaches for the most vulnerable children" which considered the residential care system, in particular the potential role of boarding schools, the typology of children's homes and placement stability for children.





Different homes for different needs

- There may not always be a perfect match between a child's needs and what a home offers. In each case the home will need to adapt to the individual child.
- Research (*) has identified the following <u>broad types</u> of residential care provision (**):
 - Short-break children's home provides respite care for children with a disability to allow carers and families to 'take a break';
 - Short-term children's home provides time-limited care for a few days or weeks. A child may be placed because of unforeseen difficulties or a crisis, because they are waiting for a longer-term placement to become available, or because they are waiting for an assessment;
 - Long-term children's home provides care for a child for a substantial period of time, possibly until the child reaches adulthood;
 - Children's home for children with disabilities provides specialised longterm care that can offer care, education and health needs, often in one place;
 - Residential special school for children with SEN, providing education and addressing children's disabilities and/or social, emotional, psychological and behavioural needs;
 - Therapeutic Community for children and young people provides a participative, group-based approach to treat issues such as mental illness, attachment disorder and drug addiction;
 - A secure children's home a specialist residential resource offering care, education, assessment and therapeutic work. These are the only children's homes allowed to lock doors to prevent children leaving or absconding.



(*) National Children's Bureau, 2006; J Stanley, A Rome 2012 (unpublished) Department (**) Not all children in some types of provision, e.g. residential special schools, will be looked after). for Education

What do the best homes do? (1)

- A 2011 report by Ofsted(*) identified the key characteristics which set apart consistently outstanding(**) children's homes, namely:
 - leaders who are hands-on, who unite their staff behind a shared purpose, and who are transparent and open in their expectations and pursuit of excellence;
 - clarity of vision, which is absolutely focused on the experience of children and young people and uncompromising in its ambition;
 - a commitment to continual improvement, always being willing to learn and ask 'what could we do better?'
 - the passion and energy of staff who are deeply committed to their work, and the recruitment, training and management systems which identify these staff and support them to grow and develop;
 - understanding which young people will benefit from living in the home and creating the conditions, from their first contact with the young person, which are most likely to make the placement a success;
 - meticulous planning that engages young people and responds in detail to their individual needs so that their experience of care is highly personalised, combined with a commitment to never 'give up' on a child or young person and to do everything possible to maintain the placement.

(*) Outstanding Children's Homes, Ofsted March 2011 (**) those assessed as outstanding at each of their last six inspections over three consecutive years



What do the best homes do? (2)

- time spent with the children and young people individually and in groups so that they are able to develop meaningful secure relationships with the adults in the home and with each other;
- absolute consistency in the management of behaviour so that young people understand and respect the boundaries that are set and respond positively to encouragement, rewards and meaningful sanctions;
- an unwavering commitment to support children and young people to succeed, and a belief in their ability to do so, translated into active support for their education both in the home and in their partnerships with schools and other professionals;
- working with each child or young person to build their emotional resilience and self-confidence, to prepare them for independence and enable them to withstand difficulties and set-backs in the future.
- Even in outstanding homes, however, Ofsted found that "more could be done to track the achievements of young people in education and employment over time, and use this information to critically assess their own performance as a children's home."
- The learning from good homes generally remained within the home and did not have wider impact. Ofsted also identified a need to capture and share good practice and share the skills of staff in these outstanding homes for the benefit of the whole care system.



3. The children's homes market



3.1. Children's homes: facts and figures



Facts and figures (1)

How many children's homes are there in England?

- On 30 September 2012 there were 1,976 children's homes registered with Ofsted. Of these:
 - 533 (26%) were local authority run; and
 - 1,443 (74%) were in the independent, overwhelmingly private, sector.

• The number of children's homes increased from 1,810 in September 2011 (an increase of 9.2%).

• The number of places increased from 8,333 (September 2011) to 9,238 (September 2012).

• These figures do not include either residential special schools that are 'dual registered' as children's homes, or secure children's homes: if they are also included, 2,082 children's homes were registered with Ofsted at 30 September 2012. This represents a decrease from 2,091 in September 2011.

Where are they?

•On 30 September 2012, more than 50% of homes were concentrated in three regions of the country (North West, West Midlands and South East), with 25% of all children's homes in the North West. Some towns have dense concentrations of children's homes (e.g. Margate, Stockport, Stoke). This trend has been consistent over recent years.

How big are they?

Children's homes are no longer large institutions. Homes today typically have 4-6 places. Over 100 are single-placement with accommodation for just one child.



Facts and figures (2)

Secure children's homes

There are 16 secure children's homes in England(*). 15 are LA-owned and managed; one is run by a voluntary organisation. They range in size from 5 to 38 places.

 These homes meet the needs of the small group of extremely vulnerable children and young people whose liberty is removed either because they have been sentenced or for welfare reasons.

 Secure children's homes have a mix of 'welfare' (LA-purchased) placements and placements commissioned by the Youth Justice Board (YJB). 11 are contracted to the YJB to provide youth justice placements; 5 provide welfare placements only.

(*) There is also one secure children's home in Wales which has both 'welfare' placements and placements commissioned by the YJB.



3.2. The children's homes market: economic analysis



Economic analysis: introduction

Purpose

- The market analysis work was commissioned in order to inform the wider work of the Expert Group on Quality. The most recent analysis of the national market had been completed in 2006 (*).
- The following slides set out the findings on the way the children's residential market operates. It focuses on:
 - what the 'market failures' are;
 - how outcomes and efficiency might be improved for looked-after children in residential care (recognising that market-focused approaches are one dimension of a wider set of solutions).

Approach

- Findings are based on two pieces of work:
 - a review of existing data and literature on the market for children's homes carried out in August 2012;
 - fieldwork in 20 local authorities (LAs) completed between 2 October and 5 November 2012. The fieldwork included interviews with commissioners from each LA and in many cases Directors of Children's Services. We also held workshops with a representative sample of providers within each LA visited.

A list of the LAs visited is on the next slide.

(*) DfES Children's Services: Children's Homes and Fostering, PricewaterhouseCoopers (2006)





Local authorities visited as part of the fieldwork

North East

Darlington New castle

North West

Lancashire Stockport

Yorkshire and Humber Bradford

Kirklees Leeds

East Midlands and East of England

Derby Essex Norfolk

London Enfield Haringey Lambeth Lewisham

South East Hampshire Kent West Sussex

South West and West Midlands Devon Gloucestershire Staffordshire



Department for Education We also spoke to approximately 130 providers across the 20 LAs and to 5 commissioning groups

What characterises an efficient market for children's homes?

A well-functioning, efficient market has the following properties:

Demand side

- Meeting needs LAs attempt to maximise the welfare of their looked after children by choosing those care options (fostering/residential care) which best meet their needs;
- Assessing options LAs have the right information about costs, quality and capacity to make informed choices about which provider and package of care to purchase for the children they wish to place in homes;
- Commissioning LAs commission and contract with children's home providers in a way that minimises costs and maximises outputs;
- Quality LAs are able to monitor outputs and carry out effective contract performance management. LAs are able to enforce compliance (e.g. by financial penalties or ending the contract).

Supply side

- Diversity of providers LAs have multiple high quality providers to choose from within a reasonable distance;
- Supply side flexibility the supply side responds to incentives and there is competition between providers that creates better choice and quality. New providers can open, good ones can expand and poor ones face the threat of closure or takeover;
- Children's home providers are incentivised to provide high quality places.



Summary of findings: Demand

The demand side of the market for children's homes is inefficient. Several challenges must be overcome to make it efficient.

• The structure of demand is changing - Many of the LAs we spoke to are facing significant budget cuts and looking to save money by reducing the number of children going into residential care through greater use of early intervention and fostering. There is limited evidence on what works and excess demand for foster carers for children with complex needs.

• Information - There is very limited information on costs, quality and capacity for LAs to make informed choices about placements. Nor is existing information shared well across LAs and providers. This creates significant search costs and can result in poor quality matches that do not fully meet the needs of the child and are expensive.

• **Commissioning** - Many of the LAs we spoke to are joining commissioning consortia to increase bargaining power, better share cost information and develop markets. However, consortia are at different stages of development and LAs are using a variety of commissioning approaches. In some cases LAs are working with health bodies as part of joint commissioning consortia; in other cases links are yet to be formed. LAs need to retain commissioning expertise as it will be essential for continuing to frame and define future LA needs, whether met individually or within consortia.

• **Procurement** - Procurement techniques are developing rapidly e.g. dynamic purchasing. Different procurement techniques are appropriate to different market conditions. Framework contracts can restrict supply and are not good for encouraging new providers into the market where there is undersupply. Some LAs are still developing their procurement capacity and need support in choosing the best approaches.

• **Quality** - There are significant shortcomings in the monitoring of the quality of care that looked after children receive. Social workers are often overburdened, which can reduce the time they have to visit children's homes and fulfil statutory duties; time is particularly important for out of area placements. According to some providers, Ofsted assessments are variable across homes and do not spend enough time focusing on how far the child has progressed from when they entered the home. Providers complained that different LAs had different monitoring frameworks, increasing bureaucracy.



Summary of findings: Supply

The supply side of the market for children's homes is also inefficient. Several challenges must be overcome to make it efficient.

• The pattern of supply is uneven across England. The North West, West Midlands and the South East have an oversupply, whilst other regions have an undersupply of homes. This leads to prices being forced up for LAs in areas where there is an undersupply. It also leads to an unnecessary use of out of area placements.

• Most of the LAs that we talked to indicated that the needs of children in residential care are generally recognised as becoming more complex, whether through changing circumstances or as a result of better assessment. This is driving an increase in demand for more specialist places in many LAs.

•Many small providers in the market are being taken over by larger providers. Given that the level of demand does not vary much with price because of the need to place, this might lead to significant increases in price (and for cash constrained LAs, reductions in the quality of the package of support purchased).

• Incentives are not fully aligned with quality. Most LAs we talked to preferred to place in good or outstanding homes but said they may not move children placed in homes downgraded to adequate because of the negative impact on a child's stability. LAs generally do not place financial penalties or awards on homes when their quality assessment changes.



Demand

LAs are trying a mix of early intervention and fostering to reduce the demand for children's home places

Early Intervention and alternative provision

- Most LAs are looking at the use of early intervention approaches for children on the edge of care to reduce the number of looked after children. Where children become looked after they are seeking to use more fostering placements to reduce demand for children's homes places.
- LAs are actively reviewing their existing placements to move children from residential to fostering
 placements. They are also reviewing the package of care they have in place to take out elements
 they do not think are needed e.g. provision of additional therapeutic support for a child with lower
 level needs.
- The majority of LAs we talked to are looking to increase their supply of foster carers. Most are also looking to wrap support services around foster carers so they are able to support children with the most complex needs.

Example of one large LA's approach in a Northern Region

- Looking to increase early intervention and prevention services for vulnerable families e.g. through improving the response to domestic violence referrals and more investment in family conferencing;
- Prioritising access to services for children on the edge of care e.g. additional money for multisystemic therapy, developing better assessment for children just entering care and prioritised exit plans for children entering care;
- Increasing the recruitment of in-house foster carers (an extra 40 foster carers by March 2013 compared to 2011) so there is an alternative to residential care;
- Implementing an emergency crisis support service to deal with emergency placements;
- Improving monitoring and forecasting of need across LA area.

As a result the LA is hoping to reduce the number of children's home placements (both out of area and within LA) between January 2009 and March 2014 by 45%.



LAs are facing significant budgetary pressures. A placement for a child with lower level needs in a residential home could cost somewhere between £1800 and £3600 per week depending on which LA is doing the purchasing. For a child with complex needs costs of over £5,000 per week are not uncommon.

But LAs face significant challenges in trying to reduce their demand for children's home places:

- The number of looked after children is increasing across most LAs. Most LAs are saying that more younger children are becoming looked after following 'Baby P', better identification of need and the implications of the Southwark judgment is continuing to result in increasing numbers of adolescents becoming looked after.
- Many LAs and all providers interviewed said the children entering residential homes are getting older. 14-15 is now the typical age. One reason put forward by some LAs for the increased age of children in homes is a limited supply of foster carers. With more young children entering care, foster carers are choosing younger children leaving more older children to go into children's homes (South Eastern LA).
- Most LAs interviewed said there has been a growth in complex needs (partly because of the older age of children). The types of complex problem include: attachment issues following multiple breakdowns of previous placements, mental health/behaviour problems, children with a history of aggression or assault or who are victims or perpetrators of child sexual exploitation (CSE). Many of these children require specialist support. There is a recognition across LAs of the need for more specialist homes.
- Some children who are nearing 16 do not want to live in foster care and prefer living in a children's home. Despite this, LAs believe that many children in residential homes can be successfully fostered either after a period receiving intensive support in a home or as a direct alternative.

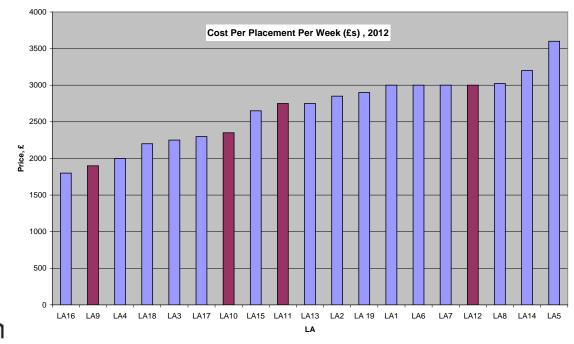


Our conversations with LAs indicated that there is limited information on prices; however we know they vary significantly across LAs

There is no direct national information on the prices that LAs pay for a place (S251data reports spend on residential homes, but the category description is very wide and imprecise). The chart below shows the average price paid by the LAs we interviewed. The fees are for children with **less complex** needs. The highest costs paid by an LA per week per place (£3600) are twice the lowest (£1800). The average is £2660. However, there is no clear information on what the fees bought.

Several factors will influence the price LAs have to pay, including the support package the child receives (including staff to child ratio), variations in wage and property costs across regions and the commissioning strategy of the LA – block purchase of places, framework agreement, spot purchase, etc (discussed later).

The LA that pays the most is a spot purchaser in the South. The cheapest costs are for a Northern LA. London LAs (coloured purple) have a range of costs. The chart does not account for placement quality.





Overall LAs are reducing the price they are paying for placements

Most of the LAs we talked to are holding stable the fees they pay or are cutting fees e.g.

- One consortium has reduced average residential fees by £800 per week by moving from a spot purchase to framework contract and reviewing services.
- Prices in London are falling on an annual basis.
- One LA has reduced placement costs for individual children by 25% over the last two years using aggressive negotiation.

The information providers give on their service they offer is often poor e.g. 'therapeutic care' can mean many different things. This makes it hard for an LA to understand what they are getting for their money and what the minimum cost is for a specific service for a child. Value for money is hard to achieve – particularly for out of area placements where the home is often not known to the LA.

There is a clear need for additional information on the costs of different services if LAs are to negotiate optimal fee reductions.

The implications of falling fees for providers

• Most children's home providers work on relatively small margins. Rome (2010) found that for 2009 the operating profit of the top 5 children's home providers was 1.9% of turnover.

• For given levels of business, reductions in fees must mean reductions in profits and providers going out of business.

• However, the story is much more complicated than this. The main costs for homes are for staff and buildings. These are semi-fixed or fixed. This means that occupancy is a major driver of profitability. Most homes are not full; there are considerably more places than there are children in homes. Consequently reductions in fees can be offset by increases in occupancy rates up to a point.

More LAs are looking to come together in consortia to increase bargaining power but more needs to be done

Many LAs are joining regional commissioning frameworks to share information on the costs and quality of providers, to increase bargaining power and reduce costs.

Different approaches are being used to manage the market including

- preferred provider lists (e.g. NE6);
- framework contracts (e.g. West Midlands, White Rose)..

Consortia are trying to choose approaches which suit the local market although the knowledge base is still being built up.

However, many LAs are still to join consortia and those consortia that do exist are at different stages of development.

• Many LAs are reducing spot purchase of placements because this can be expensive.

• Block contracts have been used by a number of LAs. These offer bulk discounts, which can often be substantial, but LAs pay for unfilled places. To be used effectively LAs need to make sure they can fill places. This means they have to have accurate estimates of demand. For specialist places block contracts are not suitable because demand is generally low volume.

Providers are often selected on both price and quality but the mix varies from area to area. As budgets tighten, price may come to dominate.

The correct choice of contract is essential. Framework contracts restrict supply because additional providers cannot be added onto the existing framework – a new exercise has to be carried out. This is more likely to send providers out of business than preferred lists where providers can be added to the contract. It may also worsen supply side problems in areas with limited supply and restrict competition.

Providers and LAs are committed to raising quality but our fieldwork indicates there are significant problems to be overcome

Inconsistency of Information

The biggest barrier to effective monitoring of children's outcomes is the inconsistency of information being shared. All involved (LAs and providers) generally felt that they had good mechanisms in place for monitoring and information sharing, but that the information being shared varied from provider to provider. Similarly providers felt different LAs had very different expectations of them. There were concerns about lack of standardisation.

Workforce

The children's home workforce, though dedicated to the children they work with, was generally thought to be too low qualified (although it is recognised that good carers need a range of attributes aside from qualifications) and of too poor a quality considering they are expected to work with highly vulnerable children with specialist needs. Leadership of the home was commonly cited as the biggest factor affecting the overall quality of the home.

Concerns were raised about the caseloads and staff turnover among social workers, and the impact. This had three main effects: care plans were not always up-to-date; in some cases lack of planning led to an increase in emergency placements – itself a source of costs for LAs; high burdens meant that sometimes children in homes, particularly out of area, were not visited as often as they should be.

Ofsted

Ofsted was criticised by providers for inconsistency of children's home inspections, largely due to inconsistent approaches of inspectors. This was clearly an important issue for private providers, especially the smaller ones, as an unfavourable Ofsted judgment can have serious impact on their business.

Supply

There is undersupply of children's home places in many regions

DfE statistics show that in September 2012 the majority of children's homes were in the North West (25%), West Midlands (16%) and South East (13%). By contrast, London has only 6% of children's homes.

Similarly– North West (22%), West Midlands (14%) and South East (15%) have the majority of children's home places. London has only 8%.

In the North West, West Midlands and the rest of the South East there is an oversupply of places, whist in other regions there is an undersupply. This has two potential consequences:

- In areas where there is undersupply prices are likely to be pushed up above competitive levels raising costs for LAs that use local homes; and
- Some LAs will be forced to place out of region when they would have wanted to place in region.

LAs are looking to reduce the number of external care placements they make

Many LAs in regions with undersupply are looking to increase the number of children's homes – e.g. one LA we talked to in the East of England had attracted 46 private sector places in the last 2 years through marketing its needs to existing providers. Similarly LAs in the South West and North East are looking to increase supply.

Factors affecting providers decisions to set up in an area

Our conversations with providers indicated that the most important factor influencing whether a provider locates in an area is demand for services – providers have to run at 75%-80% occupancy to make a profit. They also have significant upfront costs from setting up.

Although reductions in fees will discourage new (and existing) supply, if occupancy rates can be increased this could offset and encourage additional supply. Having a strong LA/regional sufficiency plan with future estimates of demand is key. Access to affordable buildings, good communication links and a good quality workforce are all important.



There has been a concerted effort to reduce the number of children being placed out of area by some LAs

Exporting LAs

Some LAs are reviewing their out of area placements and are bringing children back to the LA where possible. Increasing the local supply of places coupled with reduced demand for places will reduce the importance of out of area placements.

However, some out of area placements will continue because:

- children have been in the placement for a period of time, and are settled, and LAs are therefore not keen to move them
- some vulnerable children and children with complex needs need to be placed out of area for legitimate and well planned reasons.

Problems faced by importing LAs

LAs that import large numbers of children from other LAs for example some LAs in the South East (slide 38 discusses the South East market) experience two problems:

- there are large numbers of providers in their LA areas over whom they have very little control. There are considerable concerns about the quality of care of these providers; and
- high concentrations of vulnerable children impose costs on the local community both in service use e.g. education and health and increase the risk of attracting potentially predatory adults into the





Small providers face a number of challenges going forward

There is significant turbulence in the children's homes market. LA demand is changing and moving towards children with more complex needs. In the future there will be more demand for smaller specialised homes. Many of the providers we talked to said they were already noticing this.

The reduction in fees is likely to impact significantly on profit levels. The attempt by LAs to increase supply in regions where there is an undersupply of homes is likely to reduce demand in the North West, West Midlands and the rest of the South East. Consequently the number of providers is likely to fall in these areas.

In areas where there is an undersupply of places it is possible that LAs will be able to grow supply even though fees are generally falling if they can guarantee higher occupancy levels (from substituting out of area placements for local placements). This seemed to be the case in the LAs to which we talked.



Changes in demand levels, increased competitiveness and reduced fees are likely to impact most on smaller providers (which have less developed bidding machines, less flexibility, and less scope to achieve economies of scale). This could result in the level of market concentration increasing.

Separately, a number of larger private equity firms are entering the market e.g. GI partners, Bowmark Capital and Baird Capital. GI partners, for example, owns Advanced Childcare which has around 155 children's homes. It also owns related businesses e.g. Cambian Group.

Several LAs and providers expressed concerns to us about the significant entry of large scale private equity finance.



The residential market in the South East

London dominates the South East children's home market.

Overall London is a large net exporter of children, mainly to the rest of the South East (ROSE) (see next slide) although some London LAs export to other regions.

LAs in London have closed their own provision because of low occupancy and high unit costs.

The growing complexity of London looked after children, e.g. increased gang culture (drugs/guns), challenging behaviour and CSE. This means existing general provision in London often does not meet their needs.

As in other parts of England, budget pressures and the need for LAs to drive down costs is increasing pressure to reduce the number of children in residential care through early intervention and foster care as an alternative.

Pan-London consortia arrangements across London have helped encourage greater collaboration across boroughs. Shared databases of information on providers and costs have enabled those in consortia to negotiate better costs for packages of care and to drive down costs. Work is currently underway in London to develop a search engine which better calculates the cost of care, appropriate providers and location as an alternative to the *care funding calculator*'.

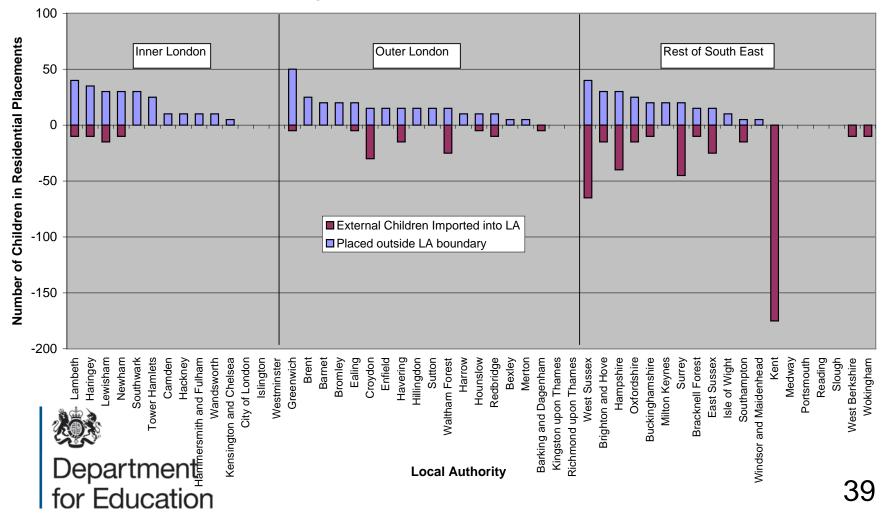
The creation of consortia allows the future direction of the market to be defined better through co-planning of future needs. This should be rigorously pursued by the Pan-London consortia.

London faces a number of potential problems in growing the market. The most important of these are: the cost of buying homes in the first place and the higher cost of labour in London compared to the rest of England.



There is a serious imbalance in supply and demand for places in children's homes between London and the rest of the South East (ROSE). London was a net exporter of 340 children at 31 March 2011. The ROSE was a net importer of 190 children. Most children were placed in Kent or West Sussex

The Pattern of Children's Home Placement for London and the South East (March 31st 2011) Note Figures Are Rounded to the Nearest 5 Children



Market analysis: recommendations

The findings of the updated market analysis lead to recommendations in the following areas:

Improving information

- 1. Improving information on the costs and quality of placements. Information sharing between LAs and providers on the costs of places in different types of provision (residential, registered schools, secure units) needs to be improved so that LAs can make more informed choices on where to purchase places. Better information sharing needs to cover placement costs for children with different needs as well as the quality of homes. Information on available placements also needs to be shared more effectively between LAs, to enable more effective commissioning.
- 2. Improving information on the structure of the market. National and regional level information on the structure of the children's residential care market needs to be improved. For each company this might cover information on number of homes/places (including the increasing use of single-placement homes for children with particularly complex needs), types of specialism and basic financial accounting information. This should be used to determine a medium-term market strategy at regional and national levels.

Commissioning and procurement

3. LA commissioning, procurement and placement quality monitoring need to be significantly improved. See detailed recommendations in Section 4.



Market analysis: recommendations

Improving fostering provision

4. Improving the quality of fostering provision. Further consideration should be given to expanding the number of foster carers who are able to care for children with complex needs. LAs need to work together in regional consortia to better understand the flows of children requiring intensive support and the needs for specific programmes within each LA and across neighbouring authorities and to develop intensive evidence based programmes, such as multi-dimensional treatment foster care or KEEP as part of a wider commissioning strategy for looked after children and children on the edge of care or offending.

Reducing undersupply

5. Reducing barriers (while not compromising quality) to setting up for new or established providers in areas where there is undersupply of provision. There are significant barriers to setting up new children's home businesses;

• **Property costs:** These are key in determining provider location. Where supply is low and property prices are high e.g. London, **consideration should be given to purchase and rental of property for providers at subsidised rates**. This facility might be targeted at small scale providers setting up in the area (or expanding);

• Establishing reputation: It takes significant time to establish a new provider's reputation and to build up placements. This reduces initial revenue and increases business risk. Further thought needs to be given to how LAs can work with new providers to quality assure them more quickly so they experience more initial demand;

• Increasing LA provision: LAs (perhaps as part of consortia) should consider whether they should **supply** more of their own provision where there is undersupply or a risk of private sector consolidation.



There is also an important issue of oversupply in some areas which needs to be addressed, e.g. by tightening conditions for establishment – **see Section 6**.

4. The right placement at the right time for every child



Placements for children in care: facts and figures

- Around 9% of looked after children are in children's homes and hostels or secure accommodation: 5,930 at 31 March 2012, of whom 4,890 were in children's homes.
- In 2011-12, 1,970 children started to be looked after in children's homes.
- More than half the children in children's homes leave care before they turn 18, compared with around a third of children in foster care.
- The duration of placements in children's homes is quite similar to foster placements though fewer last longer than a year – 18% compared with 30%.
- Based on 2011 data, 31% of children in foster placements were on their first placement, compared to 24% of children in children's homes. 29% of children in children's homes had had at least 5 previous placements.
- As at 31 March 2011, 13% of looked after children had lived in a children's home at some point.

Sources: Children Looked After by Local Authorities in England, Department for Education



Placements for children in care: facts and figures

- In 2010-11, LAs across England spent £3,036 billion in total on looked after children, of which £1,028 billion was spent specifically on children in residential care – approximately one third of the spend.
- Yet only around 9% of looked after children are in children's homes.

Source: S251 – Outturn statements on the expenditure of local authority education and children's social care functions, as required under Section 251 of the Apprenticeships, Skills, Children and Learning Act 2009, Department for Education (January 2012)

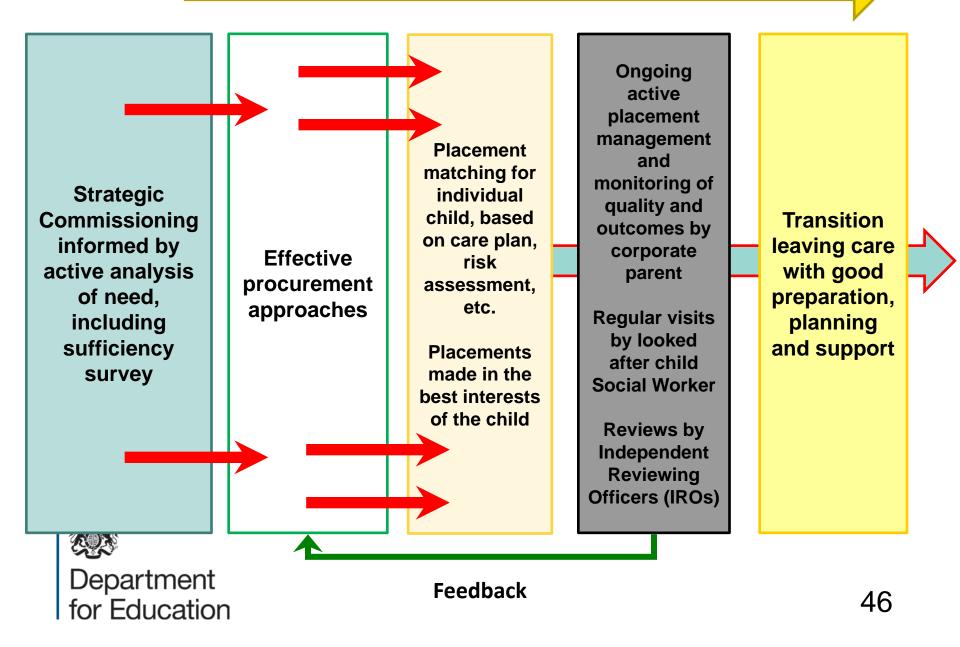


The right placement at the right time

- Children taken into care may need different types of care placement at different points in their lives. For example, some may need a brief spell in fostering during a particular time of difficulty or crisis before returning to their families. For others, long-term fostering or adoption may be the right option.
- Residential care is often perceived as a placement of last resort, when all other options have failed.
 For many children, it will be the placement that is right for them, either as a long term option or as a transition into foster care or adoption.
- What is critically important is that for every child, the right decision is made at the right time and that any decision is supported by a thorough assessment of the child's needs and effective care planning so that for each placement there is a clear understanding of why the child is being placed there, what the desired outcomes are for them, and how any risks will be managed.
- For the child, it is important that as much stability and security as possible is provided so that there
 is a clear continuum of care and support as they make their way through childhood, adolescence
 and onto adulthood.
- Where this continuum breaks down, there are likely to be significant consequences for the child's progress. It is therefore important to minimise discontinuities and ensure smooth transition points.



Continuum of care and support for a looked after child



Commissioning

- To be effective, LA commissioning of care placements, including residential care, should:
 - be informed by a thorough analysis of children's needs, at both strategic and individual child level;
 - maximise links across services;
 - secure best value for money, including through regional approaches;
 - be informed by an analysis of need, including a robust sufficiency survey.

In January 2013, the Local Government Association (LGA) will launch an action research project to support councils' strategic commissioning and market shaping role in relation to children's homes. The project will work with a small number of councils to help them develop more effective ways of commissioning, in order to improve the system for children and young people. The learning will also be widely shared across the sector. DfE has been invited to participate in the advisory group for the project, which will run until June 2013.

Recommendations

- 6. Commissioning consortia. The creation of effective commissioning consortia should be encouraged so that LAs can develop joint commissioning strategies that maximise economies of scale across regional areas. These commissioning strategies should also take account of local health structures, to ensure strategic planning of all health and care services across the local area.
- 7. Clear commissioning strategies. LA commissioners need to be clear with providers about their future demand for places as this is key to encouraging entrants into the children's home market. LAs need to work together to market their strategies to encourage entry into markets where there is undersupply. LAs should engage with providers and other local commissioners when working out their needs to identify what can be supplied by the market currently and where future action is needed. The approach should be informed by and aligned with Joint Strategic Needs Assessments (JSNAs) and Joint Health and Wellbeing Strategies. They should also set out the future predicted placements at regional and LA level, the mix of needs and joint commissioning priorities across the local care and health system. This must be informed by a meaningful sufficiency survey.



Procurement

 Commissioning strategies need to be supported by effective procurement. This requires different skills. The optimal procurement approach varies with market conditions e.g. excess supply or demand, volume of transactions made, degree of risk and the way the market is changing. Many LAs are not fully up to speed on all procurement approaches or their respective pros and cons. Procurement processes can be very bureaucratic and resource-intensive.

Recommendations

8. Rapid development of procurement approaches. Guidance and support needs to be offered nationally to LAs and consortia on what approach to pursue under different market conditions and a central team composed of experts from the sector set up to support procurement. This might sit with LGA or one or the more advanced regional consortia.

In addition, tendering approaches need to be simplified to reduce burdens on providers e.g. through use of standard (short) forms where possible and substitution of electronic information – which can be used many times – for paper information.



Placement matching and monitoring

The matching of placements to the needs of a LA's looked after children, at strategic and individual level, must be informed by high quality care planning and assessment and a clear understanding of the desired outcomes from a placement for an individual child.

Placements must be continuously monitored by the LA corporate parent to ensure that children are being effectively supported to have stability and security and make the desired progress, and that risks are being effectively managed. Looked after children social workers and IROs have a crucial role to play. Quality monitoring should also be used to create effective feedback loops to inform ongoing strategic commissioning.

Recommendations

9. Quality Monitoring. Better monitoring and management of places needs to be implemented in all LAs. Children's outcomes should be recorded in such a way that they can be shared easily but securely. Further consideration should be given to developing an appropriate mechanism. The strengthened, more child-focused Ofsted inspection framework needs to be consistently and robustly applied.



Leaving a care placement

While the Group has not discussed specifically the challenges facing children when they leave care, this is a critical part of the overall 'continuum' for looked after children.

The Government already issued strengthened regulations and statutory guidance on care leavers that came into force in 2011. This placed a range of duties on local authorities, in their role as corporate parents. The Minister also recently wrote to Directors of Children's Services asking them to take action in a number of areas including: improving outcomes for care leavers; signing the Charter for Care Leavers; paying a suitable Setting Up Home Allowance which covers local costs (minimum of £2,000); and the importance of ensuring care leavers are always living in safe, secure accommodation that they happy with.

Some children's homes maintain relationships with children after they have left their care.

The recently published Charter for Care Leavers sets out clear expectations for care leavers. There may also be scope to consider whether similar expectations might be drawn for changes of placements as well as for the final transition into independence and adulthood.



Out of area placements: facts and figures

How many looked after children are in children's homes outside their own local authority?

• 44% of children and young people in residential care were placed 'out of area', i.e. outside the local authority which is responsible for them (at 31 March 2012).

How far away are they?

• 28% of children and young people in residential care were placed out of area <u>and</u> more than 20 miles from their local community (at 31 March 2012).

 Children in children's homes are more likely to be placed at a distance than other looked after children. For looked after children as a whole, only 12% were placed out of area <u>and</u> more than 20 miles from their local community (at 31 March 2012).

However:

• Looked after children placed within their own local authority may still be some considerable distance from home: in a large county (e.g. Kent, Hampshire) a child could be 30 miles or more from home, even when still within the authority's boundary.

• 5% of children in residential care were within their LA boundaries but still more than 20 miles from home (at 31 March 2012).

• If a looked after child is placed within their responsible authority's boundary but in a home run by a private or voluntary provider, good systems are still necessary to ensure sound communication and monitoring.





Out of area placements: what we know about key drivers

Key drivers for placing children out of area are complex:

- Lack of, or failure to use, local provision is a factor some LAs do not have sufficient children's home places in their area to meet their needs; some have no registered children's homes in their areas
- But it's not that simple some LAs have spare capacity in the children's homes they provide, yet still place children outside the LA area. Others with private/voluntary run children's homes in their area make all their placements in children's homes outside the LA boundary
- The need to access specialist provision is a factor some children's needs are so complex they can only be met in a limited number of placements
- The safety and welfare of children is a factor Children may need to be removed from an unsafe local environment and/or may benefit from proximity to extended family in an out of area authority
- The quality of strategic planning and commissioning matters This is affected by a number of factors including the availability of consistent, accurate information on provision, the quality of assessments of children's needs, the skills and skills mix of commissioning teams, the effectiveness of decision-making processes, etc
- Once a child is placed out of area and settled in to a placement, it may not be in their best interests to bring them back in area
- Sometimes, there is no other choice the 'Friday afternoon emergency placement syndrome'. There are questions about how many of these are unforeseeable crises rather than poor practice, but there will always be genuine emergencies.



What are the implications for children?

- We know that sometimes children are placed out of area for their own welfare or safety. However, we don't know how often this is genuinely the case.
- When we spoke to a focus group of children and young people, some of the children had been placed out of area. A number of these children felt that they were better off – for example away from gangs who had been a bad influence on them or who might harm them.
- The young people did highlight some of the challenging implications of being placed out of area, including:
 - social workers and IROs not being able to visit them as often
 - general uncertainty about who was now responsible and accountable for them.
 - reduced access to health and CAMHS services locally, and even education, because their placement LA was prioritising 'in area' children
 - sometimes this even meant travelling back to their home LA to access basic services
 - concern about what would happen to them when the placement ended perhaps being forced to move back to their home LA – to an area they no longer



regarded as 'home', and back to negative influences they had previously escaped.

Out of area placements: recommendations

- **10.** Reduce the number of out of area placements. Government should set a very clear expectation that out of area placements, particularly those which result in children being placed at very long distances, should be <u>exceptional</u> and always <u>justified explicitly</u> in terms of the best interests of the child.
- 11. Improve understanding (including the public's) of out of area placements and the implications for children and young people. The Out of Area Task and Finish Group agreed:
 - the importance of clarifying what is meant by 'out of area' placement and offering a more sophisticated explanation of the issues relating to distance vs. out of authority; and
 - that what matters for children and young people is that:
 - they have a <u>continuum of care and support</u> with well managed transitions, from the very first placement to leaving care; and
 - wherever they are placed at any given point, they receive the care, support and protection they need and feel 'connected' to both the community they live in and the one they come from.



Out of area placements: Recommendations

12. Improve the availability of accurate, consistent information on children's

homes. The Task and Finish Group agreed that improving the availability of reliable, accessible information was an important priority for action – to create a 'level playing field' and help improve the quality of commissioning and placement matching. Commissioners need to be able to access information about:

- what the home has to offer;
- whether the home has evidence of its impact / outcomes; and
- what risks there might be in the local area, and what is being done to mitigate these.

One practical way of giving effect to this would be through homes providing fuller, more explicit Statements of Purpose. These are frequently criticised as being too generic.



Out of area placements: Recommendations

13. Improve the quality and timeliness of commissioning and placement decisionmaking. Timely, well informed decisions are important for all placements. This is part of a broader set of issues discussed earlier on concerning commissioning, the quality of care planning and assessment, and every LA's fulfilment of the 'sufficiency duty'. This must be supported by meaningful sufficiency surveys.

14. Strengthen contact and monitoring between placing and host local authorities. There needs to be much clearer responsibilities and accountabilities between placing (corporate parent) and host LAs, including matters relating to any work being undertaken with the child by youth offending services.(*)

Responsibilities on local authorities in respect of notifications (i.e. when a child moves in or out of an authority) should be strengthened and their fulfilment more closely monitored and more transparent. LAs should collaborate to develop arrangements to ensure better notification of inter-authority placements.

The placing and host local authorities need to agree their responsibilities with regards to, and share consistent information, on:

- relevant risk factors present where the child is being placed;
- where risks are identified, what is being done to keep the child safe; and
- the child's progress and outcomes over time.



(*) HMI Probation, Ofsted and Estyn recently published a joint report on the inspection of the work of Youth Offending Teams with children and young people who are looked after and placed away from home. While this highlighted some examples of good practice, the inspection found that care practice with this group of young people was extremely poor. The report particularly highlighted the issue of looked after children experiencing frequent placement moves and placed at long distances from home.

Out of area placements: Recommendations

15. Ensure consistency of support and services for the child, and effective

protection. The Task and Finish Group agreed the need for more rigour in ensuring that a child has equal access to the support and services they need, regardless of where they are placed (including health, education and CAMHS support, but also ensuring the child has regular contact with their social worker and IRO).

- The placing authority should:
 - make sure in commissioning the placement that it is made in accordance with care plans and that arrangements are in place in respect of immediate access to health and education provision that meets the child's needs;
 - monitor to ensure that the child is receiving these services as agreed.
- The host authority should:
 - ensure that a child placed in their area by another local authority has equal access to services as a child for whom the host authority is responsible.

See also recommendations in Section 6 on safe locations.



5. A skilled, confident workforce



Workforce: facts and figures

- By the 'children's homes workforce' we refer to those staff that work directly in children's homes (sometimes called 'care workers'), caring for and building relationships with the children who live there. This includes the registered manager of the home.
- There were 41,693 people (National Minimum Data Set, 2009) working in children's homes in England in 2009 the last time this data was gathered. In 2010, it was estimated that this had risen to 52,800.
- Whilst the numbers of people working in children's homes has increased overall, the increase has been within the private and voluntary sector. The number working in local authority children's homes is decreasing.
- The National Minimum Standards (NMS) set out expectations for workforce qualifications. These are:
 - Staff in the home must have attained a minimum level 3 qualification (since April 2011, new staff must specifically attain the level 3 Diploma in Children and Young People's Workforce) or be working towards it within 6 months of starting employment.
 - Registered managers are expected to have a social work or other qualification relevant to working with children of at least level 4. They must also have a qualification in management of at least level 4. Those starting after January 2011 are expected to attain the level 5 Diploma in Leadership for Health and Social Care and Children and Young People's Services).
- No large-scale, regular data gathering has been performed for this workforce in recent years, but a small-scale, unpublished survey by the Children's Workforce Development Council (CWDC) in October 2011 suggested:
 - 72% of full-time staff had completed their required level 3 qualification, or a higher one (75% for part-time staff);
 - 27% of registered managers had completed their requirement of a level 4 qualification or higher.



The children's homes workforce: issues

- There are insufficient levels of qualification and specialist knowledge and skills in a workforce that supports highly vulnerable children with increasingly challenging needs:
 - The children's home workforce has highly demanding roles and responsibilities, requiring experience, a good understanding of child development and other specific knowledge, and sound professional judgment. Yet the workforce is typically regarded as low skilled.
 - As well as being knowledgeable and professional, children's home staff also need 'softer'
 personal skills in order to build relationships and trust with children and young people, many of
 whom will have experienced trauma, and may have highly challenging needs.
- Children's home staff need to work effectively with many other professionals, including social workers and IROs, commissioners, CAMHS, looked after children nurses, education professionals, youth offending teams, police, voluntary sector workers etc. This wider, multi-agency working can have a significant impact on children's lives and wider cross-agency understanding of the role of residential care is important.
- There are inadequate career pathways and progression routes. Once an 'entry level' level 3 qualification (equivalent to A-levels) has been attained, there are few consistent opportunities to progress, aside from eventually becoming a registered manager of a home. There is debate around whether there should be specialist roles or not. There are also few consistent offers of Continuing Professional Development (CPD).
- The workforce is highly fragmented with no strong identity or shared core professional standards, and no strong 'voice'. There is a lack of any organisation, or influential champion, representing the needs of the whole sector, or driving improvement in the workforce though there is debate as to how far the workforce needs to be further 'professionalised'.



What are we trying to achieve? A vision for the children's home workforce

- Children's homes need a skilled, confident workforce that:
 - includes enough qualified and capable individuals to staff the full range of children's homes in the market, and to provide stability and continuity of care to children in those homes;
 - has the necessary knowledge and skills to meet the needs of all children and young people in children's homes;
 - has the right qualities and understanding to build strong, trusting relationships with, and respect for, children and young people in children's homes;
 - is able, and supported, to make professional judgments and decisions that keep children safe;
 - undertakes CPD that keeps staff informed of new policies, research and developments, in order to improve continuously their practice, reinforce and extend their core skills and keep up-to-date;
 - includes managers that are strong, capable leaders, and who are able to run their home and manage their staff teams effectively;
 - is understood and respected by the range of other professionals who interact with looked after children;
 - is understood and respected by the wider public;
 - attracts high calibre individuals because the profession is seen as a positive career choice.





Improved understanding of the workforce

Current issues

•There has been no systematic data gathering about this workforce in recent years, so our understanding of its characteristics and recent trends is poor.

•The workforce generally feel undervalued and not well understood by wider society, linked to poor public understanding and perceptions of children's homes as a whole. This is having a negative impact on recruitment and retention, and also makes it difficult for staff in homes to be strong advocates, on behalf of children, in multi-agency conversations.

Recommendations

16. There should be more systematic data collection and analysis about the children's homes workforce (skills and qualifications, turnover, motivations, age, ethnicity etc.) to inform future policy. Data gathering approaches should be consistent across LA and private/voluntary homes, to allow comparison, and should look to use existing data sources and minimise additional burdens as far as possible.

17. There is a need to improve the public understanding of children's residential care as a whole, and in particular the role and impact of its workforce (and residential care as a career).



Qualification requirements

Current issues

•The workforce in children's homes is generally qualified at a low level, the core requirement for workers being at level 3 (equivalent to A-levels). This is in stark contrast to other Western European nations where equivalent workers are 'social pedagogues', trained at a graduate level.

•Staff work intensively with highly vulnerable children and young people who often have complex needs. While personality and 'softer' skills in forming relationships with children are considered extremely important, it is often argued that staff also need to be knowledgeable and skilled in child development and attachment, so they know how to meet specialist needs.

•Existing qualification requirements in the NMS require staff only to be 'working towards' qualifications, so there are concerns that workers could continue to be employed without ever completing these – this may be particularly true in homes where turnover is high.

•There have been reports of homes with very high staff turnover, or that are dependent on agency workers, so strengthened qualification requirements should ensure staff who move between homes frequently do not 'slip through'.

Recommendations

18. Achieving a relevant level 3 qualification should be regarded as the minimum expectation of children's home staff and the aspiration in the medium-long term should be set higher. As such:

- The children's home regulations should be changed to require staff to complete a relevant level 3 qualification within two years of beginning employment in residential care.
- The Government should further amend the regulations to make a level 3 qualification an <u>entry</u> requirement to employment in children's homes, and should set a timescale for doing this, taking account of the need to maintain a supply of incoming staff.
- The Government should also give further consideration to raising the level of qualification required by the regulations, phasing this over time as appropriate.

Any changes to qualifications requirements should take account of shift working and of agency workers.



Content and range of qualifications available

Current issues

•Someone starting in the workforce today would be expected to gain the level 3 Diploma in Children and Young People's Workforce, designed by CWDC, which is common to a number of childcare and children's social care workforces (e.g. early years workers). It has been suggested that a qualification specific to children's residential care would be more appropriate.

•There is a growing interest in foundation degrees being a way of raising the skills and qualification level of this workforce. However, few relevant courses are currently available, the content of these is not standardised, and there is no requirement for staff to work towards them.

Recommendations

19. Further consideration should be given to whether a new level 3 qualification specific to this workforce might be needed, or whether existing level 3 qualifications could be strengthened with respect to the knowledge and skills needed to work in children's homes – notably around child development and trauma and attachment theory.

20. There should be further exploration of how foundation degrees specific to this workforce could be developed and encouraged.



Induction and support

Current issues

• All new staff working in a children's home (and other workforces including foster care) are required to complete an induction process, based on 7 induction standards specified by CWDC. These are supported by 35 'knowledge areas' and 108 'learning outcomes' presented in a 163 page workbook written by CWDC.

• This requirement is still in place, despite CWDC having been dissolved, and some of the content being outof-date e.g. references to Every Child Matters outcomes - though it is likely that many providers will have adapted and updated the materials for their own use.

 Induction is important in making sure new staff understand their role and expectations of them e.g. safeguarding requirements. It may also 'fill a gap' when new staff have not already gained relevant qualifications, or are working as volunteers or for short-term periods.

• While there are no set requirements or consistent expectations, it is very important for staff to be properly supervised, and to have time to discuss and reflect on their work with their manager. It has been suggested that 'employers' standards', as have been developed in social work, could improve consistency. These could also specify expectations for providing CPD.

Recommendations

21. The CWDC induction standards, and their supporting materials, should be reviewed, with a view to ensuring they are up-to-date with current policy, concise, and specific to the children's homes workforce. The NMS should be amended to reflect the changes, as necessary. The review process should include consideration of other workforces e.g. foster carers that use the same induction standards.

22. There should be more specific requirements of what children's home staff should expect in the way of professional supervision and support from their managers and employers. This should include requirements on CPD for staff.



Career progression

Current issues

While there are some opportunities for children's homes staff to progress, for example into registered manager or 'deputy manager' roles (recognising staff who have additional qualifications and experience), these tend not to be consistent across the workforce.
It has been suggested that progression beyond becoming a registered manager is

uncommon, especially in small, independent homes.

•Historically, qualified, registered social workers may have been employed in children's homes, but this now seems to be rare. We heard current examples where individuals had done a social work degree and then been pressured to leave and work in LA/statutory roles instead.

Recommendations

23. A strengthened, clarified career pathway for the children's homes workforce should be developed. This should include:

- consistent roles specified between level 3 qualified staff and registered managers, recognising those staff that have additional qualifications or experience;
- progression opportunities for registered managers;
- > options for specialisation;
- > more opportunities to be trained and employed at a graduate level;
- > more roles within residential care for qualified social workers.



Registered managers

Current issues

•Every home must have a single individual who is named (i.e. 'registered') with Ofsted as being responsible for managing the home.

•We heard, repeatedly, that the registered manager can 'make or break' a home – their personality, knowledge and skills can have a huge impact on the quality of provision, and also on recruitment and retention of other staff.

•The NMS specifies they must have at qualifications at (formerly) level 4 or (currently) level 5 in both social work/social care and in management (*), but previous surveys suggest many registered managers still do not meet these requirements.

Recommendations

24. The children's home regulations should be changed to require that registered managers must have obtained their required qualifications (as in footnote below*) <u>before commencing</u> the role. Any registered manager who is already in post, but who does not already hold these qualifications, must obtain them within two years.

25. The Government should look to raise the qualification level required to work in a registered manager role, most appropriately to degree level, and should set a timescale for doing this.

(*) A recognised social work qualification or a professional qualification relevant to working with children at least at level 4; and in addition a qualification in management at least at level 4. For persons undertaking a qualification after January 2011, the relevant qualification will be the level 5 Diploma in Leadership for Health and Social Care and Children and Young People's Services. Managers who already hold a level 4 Leadership and Management for Care Service and Health and Social Care will not need to undertake this qualification at level 5.



The professional status of the workforce

Current issues

•We heard that while children's home workers are passionate about their work and the impact they have on young people's lives, and regard themselves as skilled professionals with expertise, they feel this is rarely recognised by other agencies and by the public. This is demoralising for the current workforce and does not help position children's residential care as a positive career choice.

•They are also not a well-unified workforce with a clear identity. They are a disparate group, and there is no professional body or organisation advocating for the workforce, giving them a 'voice'.

There is no system of professional registration, in contrast to e.g. social work.

Recommendations

26. The Government should introduce new requirements for children's home staff to be professionally registered with an appropriate independent body.

This will likely require phasing in, in which case professional registration of registered managers should be prioritised.

Registration would be underpinned by a new code of conduct / set of professional standards for children's home staff, and requirements for CPD.



Social work

Current issues

•We have heard many vocal concerns about the quality and effectiveness of social workers, and the impact they have on children and young people who live in children's homes.

•Historically, the social work and residential care workforces were more closely aligned, and it would have been more common for, for example, a social work student to do a placement in a children's home.

•Many children's home staff felt they would benefit from joint training opportunities and more crossover, though it is not clear whether social workers – who are more highly trained, have a protected title and a much clearer professional identity – would agree.

Recommendations

- 27. The social work reform programme should give consideration to the following:
 - whether social work training sufficiently prepares social workers to work effectively with looked after children and their carers, including children's homes, the staff who work in them and the children who live in them, and how this could be improved;
 - whether there would be benefits in encouraging more social workers to undertake children's residential care roles (e.g. practice placements during training, or as registered managers of children's homes), and how this could be done;
 - whether there may be opportunities for social work and children's residential care to be more closely aligned e.g. joint training and shared CPD offerings, shared career pathways.



6. High quality care and protection



High quality care and protection

• Improving the skills of the workforce, better care planning and commissioning, improved access to services will all contribute to the provision of better quality care in children's homes

• There are, however, some important aspects of protection which the Group has also considered. These are:

- how to provide a safe environment within a children's home;
- how to ensure a children's home is itself located in a safe environment and that risks to children's safety are managed effectively.



Providing a safe environment within the home: managing behaviour

Why does behaviour management matter?

The children's home environment needs to provide a sense of security, stability and constructive support to children living in the home. The ethos of the home and its staff need to be able to respond to the full range of children's needs, including behavioural needs. Promoting positive behaviour and managing challenging behaviour sensitively and effectively will help to keep children safe, be that from themselves, other residents in the home, from exploiters outside the home and from running away.

Many children living in children's homes enter care as teenagers and have had previous experience of abuse, neglect and domestic violence. Children's emotional and challenging behaviour can very often be a result of their previous experiences, merely simple 'acting out'. Group living in children's homes can be very difficult and a wide range of challenges under one roof can also drive children's behaviour.

What does challenging behaviour in a children's home look like?

Children's behaviour can range from defiant, non-compliant behaviour e.g. school refusal, not completing homework, smoking in the building, through to aggression with verbal and physical violence. It can result in children putting themselves and others at risk. Particularly risky behaviours could include absconding, going missing, alcohol or drug use and self-harming.



Providing a safe environment within the home: managing behaviour

The regulatory behaviour management framework is as follows:

- Children's Homes Regulations 2001 (amended 2011)
- Children Act 1989 Guidance and Regulations Volume 5: Children's Homes (2011)
- Children's Homes: National Minimum Standards (2011)

The framework says that:

- homes should have an environment and culture to support positive behaviour that all staff understand and implement;
- homes should meet children's emotional behavioural needs as set out in their care plan;
- no measure of control or discipline which is excessive or unreasonable should be used;
- all staff should have access to supervision, support and training to develop the skills and competences necessary to understand children's behaviour and intervene constructively;
- homes' approach to care should minimise the need for police involvement to deal with challenging behaviour and avoid criminalising children unnecessarily;
- restraint may only be used if no alternative methods are available to prevent injury to any person, prevent serious damage to the property of any person or prevent a child from absconding in a secure children's home.



Providing a safe environment within the home: managing behaviour

Whilst the overall framework is sufficient to enable staff to manage behaviour effectively so that children's, staff's and the wider community's welfare is protected, some changes could improve current practice.

Staff: Part of the role of a 'parent' is to set and manage behavioural boundaries. Children want and need behavioural boundaries. Both staff and children in homes need to have a good, shared understanding of what is expected of them, and what they can expect in return, in terms of behaviour management. Staff, as corporate parents, are the most important factor in managing children's behaviour and for this reason it was felt that behaviour was strongly linked to wider workforce issues. Staff's skill and ability to build positive relationships with children based on trust and respect has the greatest impact on behaviour and so it is necessary for staff to have an understanding of what drives children's behaviour i.e. an understanding of child development, the impact of abuse/neglect and 'triggers' for challenging behaviour.

Children's views: Children's views need to be taken into consideration and reflected in practice as they can be practical and mature in their views on behaviour management.



Managing behaviour in children's homes: recommendations

Staff skills

28. Current qualifications should have specified prescribed content on child development, the impact of abuse/neglect and the management of particularly risky behaviours.

Children's views

29. In addition to the reports on children's views on restraint, it would be helpful for the Children's Rights Director to survey children's views and understanding of their experience of "behaviour management" in homes.

30. At the outset of every residential placement a strategy should be agreed between children, staff and the placing authority about how behaviour should be managed in certain situations to ensure a needs led approach.

The Group felt that the current arrangements and guidance on <u>restraint</u> are sufficient, and that no further changes are needed on this, though it is important the guidance is well understood. The implications of the report from the Independent Restraint Advisory Panel, expected December 2013, will need to be considered in due course.



Current issues

- All children, whether they are looked after by the state or their parents, need to feel safe in the area surrounding their home. Just as any parent would want to their child to live in a safe area so too will a corporate parent who places children in a children's home.
- Public and media attention has focused on the physical environs of children's homes. However, it is
 not always straightforward to define a 'safe' area. Whether a location is safe can change rapidly, and
 may depend on the vulnerabilities of particular children. Indeed some individual children may
 themselves heighten risks in an area if they have particularly risky behaviours.
- A home may be located in an area with some local risks, and still be 'safe', if these are managed well, arrangements are made to keep children safe, and placement decisions take account of these risks. Consideration of risks in a local area, and what steps should be taken to mitigate these, should be part of the care planning and placement decision process. Placing social workers should be responsible for assessing local risks and making judgments about safe locations before placing the child. The availability of support and services in the local area (e.g. education, health, CAMHS), as well as risk factors, should be considered before the placement is made.
- There is a lack of clarity about who must take responsibility for ensuring children's homes are located safely – including the roles of placing LAs, host LAs, LSCBs and providers themselves.
- Prospective entrants to the children's homes market can find it difficult to evaluate the local area (e.g. find out whether there are already other homes nearby), as this information is not generally available.



Role of the provider

- Better equipping children's home staff to make judgments about local risks, manage challenging behaviour, and keep children safe is an important element. Workforce training and support is therefore critical.
- The children's home regulations do not currently place specific duties on providers to ensure that the location of a children's home is adequate.
- 31. The children's home regulations should be changed to put new duties on providers to:
 - carry out a risk assessment of the area before the opening of the home and then, at regular intervals;
 - where risks had been identified before the home opened (or where new risks appear over time), to put in place appropriate safeguards;
 - collaborate with the police and the LSCB at all stages of this process, not just in putting the safeguards in place but also in trying to identify the risks in the first place.

All three requirements above may be prescribed in the Children's Homes Regulations 2001, using the power at s22 of the Care Standards Act 2000.



Role of Ofsted

- Currently, if Ofsted considers that an application to register a children's home demonstrates that the provider is unable to comply with their duties adequately, Ofsted can refuse registration or place a condition on the home's registration requiring additional safeguards to be put in place. Where services are already registered and concerns emerge, Ofsted also has the power to prevent any further children from being placed in the home and, where required, can cancel a home's registration. Thus, while Ofsted does not have powers to suspend a home's registration, it does have power to restrict the admission of further children.
- 32. The Registration Regulations should require the risk assessments and the list of safeguards to be forwarded to Ofsted. It would be for Ofsted to consider whether the home had carried out an appropriate risk assessment in relation to the home's location and had put in place adequate safeguards against those risks.

Role of the Area ('host') Authority

33. The area ('host') authority should require children's homes to carry out risk assessments of their areas and to update these at regular intervals. This could mean that the LSCB (and Area Authority as part of this) needs to engage with the children's homes in their areas carrying out such assessments. LSCBs should also have the power to make representations to Ofsted on registration decisions for children's homes in their area.

The risk 'mapping' approach as developed in Kent has received high profile attention. The Group notes the limitations of mapping in capturing a dynamic picture but considers that such mapping could play a useful part in wider assessments of risk.



Role of the Placing ('home') Authority

- The OCC accelerated report (July) recommended that all children who are at risk of child sexual exploitation, should have a 'safety plan' developed as part of the child's overall care or placement plan. The Group agrees the thrust of this recommendation and the importance of risk assessments being carried out as an integral part of care and placement planning.
- The broader recommendations on placement planning generally in this report (Section 4) are also relevant to ensuring children's safety.
- The placing authority currently has a duty under the Care Planning Regulations (regulation 11) to notify the area authority before the child is placed in that area, but it has been suggested that not all LAs are carrying this out consistently. Nor are host authorities being notified consistently when a looked after child leaves their area.
- 34. The duties on placing authorities should be strengthened so that the placing authority is required to liaise with the children's home and with the area authority (and/or the LSCB) in order to find out more about safeguarding risks in that area. All LAs should be held more closely to account, including through inspection, for fulfilling their notification requirements, as specified in Care Planning Regulations. (See also Recommendation 14.)

Planning and licensing approaches

There are mixed views in the Group about the feasibility of using either planning regulations or local licensing to support the safe location of children's homes.

35. The Group therefore recommends that both possibilities are explored further.



7. Driving improvement



Levers for improvement

- Better commissioning, procurement and placement quality monitoring should act as levers for improvement as will greater transparency in the system overall.
- Measures to improve the quality of the workforce will also play a key part.
- Inspection and regulation will continue to be a critical lever. The Group has therefore considered:
 - how the inspection regime could be improved further to have stronger impact
 - what further scope there is for strengthening independent quality assurance of residential care provision.



The current inspection regime (1)

The Legal Framework:

- Care Standards Act 2000
 - Established National Care Standards Commission (NCSC), an independent, non-governmental public body, to regulate all care homes, domiciliary care agencies and nurses' agencies in England
 - LA children's homes regulated and required to meet same care standards as independent sector providers. Responsibility for regulating children's services was transferred to Ofsted in April 2007
 - Required children's homes to be inspected against National Minimum Standards and Children's Homes Regulations 2001 (amended in 2011).
- Children and Young Persons Act 2008
 - New powers to increase Ofsted's range of enforcement options:
 - Power to issue a compliance notice to homes not meeting their requirements and to restrict new admissions to children's homes where the home is judged to be inadequate
 - Ofsted given a further duty to notify all local authorities where they have taken the decision to cancel the registration of the home or where admissions to the home have been restricted
 - These measures came into force in April 2011 but have not been used extensively by Ofsted inspectors.
- What does this mean in practice?
 - Ofsted inspects all children's homes twice per year
 - All inspections are unannounced
 - One is a 'full' inspection
 - The other is a briefer 'interim' one which looks at progress since the last inspection, whether standards have been improved, maintained or declined including the action taken in response to requirements and recommendations set at previous Inspection.



The current inspection regime (2)

- Ofsted's inspection framework for children's homes was revised in April 2011 with more focus on children's views and outcomes. Inspection is now less "tick box "– e.g. checking menus/health and safety etc. Inspectors spend more time seeking children's views.
- Further revisions were made in April 2012. Main changes:
 - dropping the judgment of 'satisfactory' in favour of 'adequate'
 - move to greater emphasis on leadership and management and ability to improve
 - stronger emphasis on improving outcomes and minimising risks for children and young people.
- Ofsted has been explicit that it is 'raising the bar' in respect of their inspection judgments for children's homes from 1 April 2012:
 - it will take a tougher line in its use of enforcement powers in respect of individual children's homes
 - it will always consider whether statutory action is required in respect of an individual children's homes following an inadequate judgment
 - unless there is good reason not to, inspectors will be expected to move to at least a first stage 'statutory compliance notice'
 - Ofsted will also notify local authorities who had placed children in the home in question of an 'inadequate' judgment.



What has been the impact of the revised framework?

- 2011 Inspection findings:
 - 21% of homes outstanding, 56% good, 21% satisfactory and 2% inadequate.
- First inspection judgments from revised framework available for period 1 April to 30 September 2012 - of the 1,268 homes that received full inspections:
 - 166 (13%) outstanding for their *overall effectiveness*
 - 694 (55%) good
 - 330 (26%) adequate
 - 78 (6%) inadequate.
- The percentage of homes receiving an outstanding overall effectiveness grade has decreased from 23% in the equivalent period last year. The percentage of homes receiving an inadequate overall effectiveness grade has increased from 3% in the equivalent period last year. This does not of course mean the quality of homes is decreasing, given the framework has changed.
- What has been the impact of this on children's homes?
 - It is still early days but anecdotal evidence suggests that increasing number of LAs are not
 placing children in inadequate homes, resulting in homes closure
 - However, recent Ofsted provider data does not show significant numbers of homes closing (net increase in number of private homes)



From providers' perspective, sense that revised framework resulting in their businesses being 'at risk' as a result of inadequate judgments and 6 monthly period between inadequate judgment and interim inspection.

Inspection and quality assurance

- Consistency of Ofsted judgments: There is a provider perception that the quality of inspectors is mixed and inspection judgments can be inconsistent. However, there is a lack of systematic evidence regarding perceived lack of consistency. If such evidence can be collated, e.g. through provider surveys, Ofsted will address any issues with their inspectors. Ofsted is also engaging with larger provider organisations and through its National Consultative Forum to explore these perceptions and the supporting evidence. Ofsted has said that it will issue revised inspection guidance and additional training if either or both are required following the discussions with providers.
- Ofsted Looked After Children inspections are at an early stage and multi-agency inspections will not come on stream until June 2013. It may be appropriate to consider whether stronger links could be made between these inspections and inspections of individual children's homes.
- Ofsted has an important role in identifying and disseminating good practice. Consideration could be given to regular 'thematic' reports on aspects of children's homes provision.
- The strengthened, more child-focused Ofsted inspection framework needs to be consistently and robustly applied (see also Recommendation 9).

Regulation 33 visits

Regulation 33 visits are made monthly by registered providers and were designed as a self-assurance mechanism. The registered provider has to supply a copy of the report to Ofsted, the registered manager of the home and to those responsible for the management of the provider organisation. The OCC 'accelerated' report in July recommended that these visits should be conducted by a person independent of the organisation running the home.

36. Regulation 33 visits should always be carried out by persons independent of the home or the organisation running the home. Consideration should be given to these visits being conducted by locally convened panels, including members of the public. Reports should be shared with both placing and host LAs.



8. Conclusions and action planning



Conclusions and action planning

- The Group has focused on <u>what</u> should be done rather than <u>how</u>. In line with
 public commitments made in July, these recommendations need to be
 converted into an **action plan**, with clear lead responsibilities, and timescales.
 This should be done as soon as possible in the new year.
- It will be critically important that the focus on children's residential care is maintained and that real momentum is put behind implementing reforms. To that end, the Group recommends the establishment of an implementation steering group to drive this forward.
- The Group also considers that the vacuum in strong sector leadership must be filled. This could be achieved either through the appointment of a children's residential care 'champion' and/or by linking into the Chief Social Worker when he/she is appointed.



Annex 1: Membership of the Expert Group on Quality

Group Chair; Director, Reform of Children's Residential Care, Department for Education Jeanette Pugh **Professor Sue Bailev** President, Royal College of Psychiatrists Professor David Berridge Professor of Child and Family Welfare, Bristol University Skills for Care and Development Janis Blackburn Chief Executive, London Borough of Newham Kim Bromley-Derry Alex Burghart Director of Policy, Centre for Social Justice Jenny Clifton Office of the Children's Commissioner Ann Coffey MP Joint Inquiry Chair, All Party Parliamentary Group John Coughlan Director of Children's Services, Hampshire County Council Kurt Denby Owner/Chief Executive Officer, Northern Care John Drew Chief Executive, Youth Justice Board Natasha Finlayson Chief Executive, The Who Cares? Trust Fran Fonseca Adviser, formerly Oxfordshire County Council Andrew Fraser Director of Children's Services, London Borough of Enfield Department of Health Chris Humphrey **Debbie Jones** Director of Children's Services Lambeth; and President, Association of Directors of Children's Services Lynne Jones Chair, Rochdale Local Safeguarding Children Board Mike McGrath Department for Communities and Local Government **Hilary Richards** Divisional Director Care Services, Break Children's Services – Norfolk **Cllr David Simmonds** Chair, Children and Young People's Board, Local Government Association Jonathan Stanley Chief Executive, Independent Children's Homes Association Robert Tapsfield Chief Executive, Fostering Network Jacky Tiotto Divisional Manager, Social Care Inspection, Ofsted



Annex 2:

Membership of the Out of Area Placements Task and Finish Group

Jeanette Pugh Angela Colyer John Drew Matt Dunkley Natasha Finlayson Janet Grauberg Chris Humphrey Carolann James Mairead MacNeil Mark Nottage David Simmonds Jonathan Stanley Yvette Stanley Jacky Tiotto Andrew Webb Group Chair; Director, Reform of Children's Residential Care, Department for Education National Offender Management Service Chief Executive, Youth Justice Board Director of Children's Services, East Sussex County Council Chief Executive, The Who Cares? Trust Director of Strategy, Barnardo's Department of Health Independent Reviewing Officers Group Director of Specialist Children's Services, Kent County Council Chief Superintendent, Kent Police Local Government Association Chief Executive, Independent Children's Homes Association Director of Children's Services, London Borough of Merton Divisional Manager, Social Care Inspection, Ofsted Director of Children's Services, Stockport; and Vice President, Association of Directors of Children's Services



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